STATEMENT OF

PAGE 1 / 4 =

FORM 1		OR	GAN	IZA	ΤΙΟ	N												
									_				Offi	ce Use	e Only			
 NAME OF COMMITTEE (in 	full)		eck if name hanged)	€		le:If ty le lines		ype		12	FE4	₽M5						
_ı Mark Elworth	n Jr for	Colorad	0															
ADDRESS (number a	nd street)	116 s Clifton	St															
(Check if a is changed																		
J	,	Brush				1 1	1 1			CC	2		8072	23	I	-	1 1	, I
		CITY	A							STA	TE A				ZIP	COL	DE ▲	
COMMITTEE'S E-MA	AIL ADDRES	ss																
(Check if a is changed		markelwort	hjr@aol.coi	m		1 1	1 1		ı				ı					ı I
io oriangoo	-/	Optional Se	cond E-Ma	il Addre	ss													
COMMITTEE'S WEB (Check if a is changed	address	RESS (URL)																
2. DATE 09		20	23															
3. FEC IDENTIFIC	CATION NU	MBER ▶	С	C008	351063													
4. IS THIS STATEM	MENT X	NEW (N)) OI	R		AME	NDE) (A)										
I certify that I have e	examined thi	s Statement	and to the	best of	my kno	wledge	and	belief	it is	true	e, co	rrect	and	comp	lete.			
Type or Print Name of	of Treasurer	Elworth, Ma	ırk, , ,															
Signature of Treasure	er Elwort	h, Mark, , ,								ate		M		19	D /	Y	2023	
NOTE: Submission of	false, errone	ous, or incomp						-	-					enalti	es of	52 U	J.S.C.	§30109
Office						or furthe				tact:			I	FEC	FC)RN	1 1	

Toll Free 800-424-9530 Only Local 202-694-1100

(Revised 06/2012)

EC Form 1 (Revised 03/2022)	Page 2
TYPE OF COMMITTEE:	
Candidate Committee:	
(a) X This committee is a principal campaign committee. (Complete the candidate information below.)	
(b) This committee is an authorized committee, and is NOT a principal campaign committee. (Complete information below.)	the candidate
Name of Candidate Elworth, Mark, , ,	
Candidate Party Affiliation OTH Office Sought: House Senate President	State CO District 03
(c) This committee supports/opposes only one candidate, and is NOT an authorized committee.	
Name of Candidate	
Party Committee:	
(d) This committee is a (National, State or subordinate) committee of the Republication	an, etc.) Party
Political Action Committee (PAC):	
(e) This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected organization on line 6.	cted organization is a:
Corporation Corporation w/o Capital Stock Labor	Organization
Membership Organization Trade Association Coope	erative
In addition, this committee is a Lobbyist/Registrant PAC.	
(f) This committee supports/opposes more than one Federal candidate, and is NOT a separate segrega committee. (i.e., nonconnected committee)	ted fund or party
In addition, this committee is a Lobbyist/Registrant PAC.	
In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)	
(g) This committee is an independent expenditure-only political committee (Super PAC).	
In addition, this committee is a Lobbyist/Registrant PAC.	
(h) This committee is a political committee with both contribution and non-contribution accounts (Hybrid	PAC).
In addition, this committee is a Lobbyist/Registrant PAC.	
Joint Fundraising Representative:	
(i) This committee collects contributions, pays fundraising expenses and disburses net proceeds for two committees/organizations, at least one of which is an authorized committee of a federal candidate.	or more political
(j) This committee collects contributions, pays fundraising expenses and disburses net proceeds for two committees/organizations, none of which is an authorized committee of a federal candidate.	or more political
Committees Participating in Joint Fundraiser	
1C	

	FEC Form 1 (Revised 0	2/2009)		Page 3
٧	/rite or Type Committee Name	(a.g. Oalassa Ia		
	Mark Elworth Jr			-in DAG Grander
j.	NONE	rganization, Affiliated Committee, Joint Fundraising Repr	resentative, or Leadersi	nip PAC Sponsor
	NONE			
	Mailing Address			
		CITY A	STATE ▲	ZIP CODE ▲
	Relationship: Connected	Organization Affiliated Organization Joint Fundraising	g Representative L	eadership PAC Sponso
7.	Custodian of Records: Ident books and records.	ify by name, address (phone number optional) and position	of the person in possession	on of committee
	Elworth, M	ark, , ,		
	Full Name	140 a Olifton St		
	Mailing Address	116 s Clifton St		
		Brush	CO 80723	
		CITY A	STATE ▲	ZIP CODE ▲
	Title or Position ▼			
	Dude	Telephone nur	mber 402 - 8	312 - 1600
3.	Treasurer: List the name an any designated agent (e.g., a	d address (phone number optional) of the treasurer of the assistant treasurer).	e committee; and the nar	me and address of
	Full Name Elworth, M	ark, , ,		1
		₁ 116 s Clifton St		
	Mailing Address			
		Brush	CO 80723	
		CITY A	STATE ▲	ZIP CODE ▲
	Title or Position ▼		400	040 4000
		Telephone nur	mber 402 - [812 - 1600

FEC Form 1	(Revised 02/2009)	Page 4
Full Name of Designated Agent		
Mailing Address		
Title or Position	CITY ▲ STATE ▲	ZIP CODE ▲
	Depositories: List all banks or other depositories in which the committee deposits funds, haves or maintains funds.	olds accounts, rents
Name of Bank, D	Depository, etc.	
	None	
Mailing Address		
	None , CO , 8072	3
	CITY ▲ STATE ▲	ZIP CODE ▲
Name of Bank, D	Depository, etc.	
Mailing Address		
	CITY ▲ STATE ▲	ZIP CODE ▲