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STATEMENT	OF
ORGANIZATI	ON

FEC FORM 1	STATEMENT ORGANIZATI	-	c	PAGE 1 / 4
1. NAME OF COMMITTEE (in full)		ample:If typing, type or the lines.	12FE4M5	
Mangeris4ThePeo	ple			
ADDRESS (number and street)	1180 E. 3rd st.			
(Check if address is changed)	E 3rd St.			
	Loveland └ │ │ │ │ │ │ │ │ │ │ │ │ │ │ │ CITY ▲		CO STATE ▲	537
COMMITTEE'S E-MAIL ADDRE	ESS			
(Check if address is changed)	Mangeris4thepeople@icloud.com			
	Optional Second E-Mail Address			
COMMITTEE'S WEB PAGE AD (Check if address is changed)	DRESS (URL)			
2. DATE 12 / 0	4 / Y Y Y Y 2023			
3. FEC IDENTIFICATION N	UMBER ► C C008589	77		
4. IS THIS STATEMENT	NEW (N) OR	AMENDED (A)		
I certify that I have examined t	his Statement and to the best of my	knowledge and belief it i	s true, correct and	d complete.
Type or Print Name of Treasure	er <u>Korman, Lori, , ,</u>			
Signature of Treasurer Korr	nan, Lori, , ,		Date 12	04 / Y Y Y Y 2023
NOTE: Submission of false, error	eous, or incomplete information may su ANY CHANGE IN INFORMATION S			penalties of 52 U.S.C. §30109
Office Use Only		For further information co Federal Election Commission Toll Free 800-424-9530 Local 202-694-1100		FEC FORM 1 (Revised 06/2012)

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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 tinformation below.)	the candidate
Name of Mangeris, Douglas, , , Candidate	
Candidate Party Affiliation LIB Office Sought: X House Senate President	State CO District 04
(c) This committee supports/opposes only one candidate, and is NOT an authorized committee.	District
Name of Candidate Image: Complete complet	
(d) This committee is a (Democra	tic, n, etc.) Party
Political Action Committee (PAC):	
(e) This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connect	ted 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 segregat 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	а	Lobbyist/Registrant	PAC.
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(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 or more political committees/organizations, at least one of which is an authorized committee of a federal candidate.
(j) This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or more political committees/organizations, none of which is an authorized committee of a federal candidate.
Committees Participating in Joint Fundraiser
1.
2.

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Write or Type Committee Name	

Mangeris4ThePeople

6.	Name of Any Connected Or	rganization, Affiliated	Committee, Joint Fundra	aising Representative, or	Leadership PAC Sponsor
	Mailing Address				
			CITY ▲	STATE A	ZIP CODE
	Relationship: Connected	Organization Affilia	ted Organization	t Fundraising Representative	e Leadership PAC Sponsor

7. **Custodian of Records:** Identify by name, address (phone number -- optional) and position of the person in possession of committee books and records.

	Korman, Lo	ori, , ,																												
Full Name																														
Mailing Address		755 s	scotch	elm	dr.																									
		Love	land														C	0			8	053	88] -				
							CI	TΥ								S	TA	ΤE						ZI	PC	OD	E 🔺			
Title or Position	•																													
											Т	ele	pho	ne	nu	mbe	ər			97()] –	L	699)] - [(0178 	3	

8. **Treasurer:** List the name and address (phone number -- optional) of the treasurer of the committee; and the name and address of any designated agent (e.g., assistant treasurer).

Full Name of Treasurer	Korman, Lori, , ,
Mailing Address	755 scotch elm dr.
	Loveland CO 80538
	CITY ▲ STATE ▲ ZIP CODE ▲
Title or Position	7
Treasurer	Image:

Full Name of Designated Agent	Luo, Jing, , ,		
Mailing Address	1225 W Prospect Rd		
	Fort collins	CO 80526	
	CITY 🔺	STATE 🔺	ZIP CODE
Title or Position	7		
Campaign manag	ger	number	562 - 8931

9. Banks or Other Depositories: List all banks or other depositories in which the committee deposits funds, holds accounts, rents safety deposit boxes or maintains funds.

Name of Bank, Depository, etc.

	Foothills credit union		
Mailing Address	3875 mountain lion dr.		
	Loveland	CO8053	7
	CITY A	STATE A	ZIP CODE
Name of Bank, D	epository, etc.		
Mailing Address			
	CITY 🔺	STATE ▲	ZIP CODE