**FEC** 

Only

## STATEMENT OF

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**ORGANIZATION** FORM 1 Office Use Only NAME OF (Check if name Example: If typing, type 12FE4M5 COMMITTEE (in full) is changed) over the lines. Wayne Lambright for President 45855 kaiser rd. ADDRESS (number and street) (Check if address is changed) **Desert Center** 92239 CA CITY A STATE A ZIP CODE ▲ COMMITTEE'S E-MAIL ADDRESS (Check if address VoteLambright@gmail.com is changed) Optional Second E-Mail Address lambright@gmail.com COMMITTEE'S WEB PAGE ADDRESS (URL) https://Lambright.com (Check if address is changed) DATE 31 2024 C00884999 FEC IDENTIFICATION NUMBER 3. X OR IS THIS STATEMENT NEW (N) AMENDED (A) I certify that I have examined this Statement and to the best of my knowledge and belief it is true, correct and complete. Type or Print Name of Treasurer Lambright, Wayne, Arthur, , III Lambright, Wayne, Arthur, , III Date 07 31 2024 Signature of Treasurer NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to the penalties of 52 U.S.C. §30109. ANY CHANGE IN INFORMATION SHOULD BE REPORTED WITHIN 10 DAYS. Office For further information contact: FEC FORM 1 Federal Election Commission Use (Revised 06/2012)

Toll Free 800-424-9530

Local 202-694-1100

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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 the candidate information below.)							
Name of Candidate Lambright, Wayne, Arthur, , III							
Candidate Party Affiliation  NNE  Office Sought: House  Senate  President	State						
(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 Republica	tic, n, etc.) Party						
Political Action Committee (PAC):							
(e) This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected 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.							
This committee supports/opposes more than one Federal candidate, and is NOT a separate segregated fund or party committee. (i.e., nonconnected committee)							
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.							
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:							
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.							
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							
1C							
C							

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٧	rite or Type Committee Name Wayne Lambrigh	nt for President			
6.		rganization, Affiliated Committee, Joi	int Fundraising Represe	ntative, or Leader	ship PAC Sponsor
	NONE				
	Mailing Address				
					-
		CITY ▲	ST	ATE A	ZIP CODE ▲
	Relationship: Connected	Organization Affiliated Organization	Joint Fundraising Re	epresentative	Leadership PAC Sponso
	_	_			
7.	Custodian of Records: Identi books and records.	fy by name, address (phone number o	optional) and position of the	e person in posses	sion of committee
	Lambright,	Wayne, Arthur, , III			
	Full Name	AFOFF Indian rel			
	Mailing Address	45855 kaiser rd.			
		Desert Center		CA 92239	
		CITY ▲	ST	ATE A	ZIP CODE ▲
	Title or Position ▼				
	Treasurer		Telephone number	415 –	916 8677
8.	<b>Treasurer:</b> 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 Lambright, of Treasurer	Wayne, Arthur, , III		1 1 1 1 1 1	
		45855 kaiser rd.			
	Mailing Address				
		Depart Center		CA 2005	
		Desert Center		CA 92239	
		CITY ▲	STA	ATE A	ZIP CODE ▲
	Title or Position ▼			. 415	016 9677
	Treasurer		Telephone number	· [ 415	916   8677

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Full Name of Designated	(1011001 022000)						
Agent							
Mailing Address							
Title or Position	CITY ▲	STATE ▲	ZIP CODE ▲				
		Telephone number					
Banks or Other safety deposit bo	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, [	Name of Bank, Depository, etc.						
	Bank of America						
Mailing Address	81800 CA-111	<u> </u>					
	Indio	CA	92201				
	CITY A	STATE ▲	ZIP CODE ▲				
Name of Bank, Depository, etc.							
Mailing Address							
	CITY ▲	STATE ▲	ZIP CODE ▲				