

# FEC FORM 1

# STATEMENT OF ORGANIZATION

Office Use Only

1. NAME OF COMMITTEE (in full)  (Check if name is changed) Example: If typing, type over the lines. 12FE4M5

Unaffiliated And Independent Candidate Bryan Lamont Arrington For Congress & President Of The United States

ADDRESS (number and street) 81a 1st street  
 (Check if address is changed) B13  
Wendover UT 84083  
CITY ▲ STATE ▲ ZIP CODE ▲

COMMITTEE'S E-MAIL ADDRESS  
 (Check if address is changed) bla0929@gmail.com  
Optional Second E-Mail Address  
alisparksbusiness@gmail.com

COMMITTEE'S WEB PAGE ADDRESS (URL)  
 (Check if address is changed) https://www.change.org/BRYANARRINGTON2028

2. DATE 04 / 29 / 2026

3. FEC IDENTIFICATION NUMBER C C00846295

4. IS THIS STATEMENT  NEW (N) OR  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 Arrington, Bryan, Lamont, SGT.,

Signature of Treasurer Arrington, Bryan, Lamont, SGT., Date 06 / 09 / 2026

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.

5. TYPE OF COMMITTEE:

**Candidate Committee:**

- (a)  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 Arrington, Bryan, Lamont, SGT.,

Candidate Party Affiliation UN Office Sought:  House  Senate  President State UT District 02

- (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 \_\_\_\_\_ (Democratic, Republican, 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  Cooperative

In addition, this committee is a Lobbyist/Registrant PAC.

- (f)  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.

- (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. \_\_\_\_\_

C \_\_\_\_\_  
C \_\_\_\_\_

Write or Type Committee Name

Unaffiliated And Independent Candidate Bryan Lamont Arrington For Congress & President Of The United States

6. Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC Sponsor

BRYAN LAMONT ARRINGTON FOR PRESIDENT OF THE UNITED STATES

Mailing Address

81A 1ST STREET

WENDOVER

UT

84083

CITY ▲

STATE ▲

ZIP CODE ▲

Relationship:  Connected Organization  Affiliated Organization  Joint Fundraising Representative  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.

Full Name Arrington, Bryan, Lamont, ,

Mailing Address 81 s 1st street

B13

wendover

UT

89830

CITY ▲

STATE ▲

ZIP CODE ▲

Title or Position ▼

Candidate

Telephone number 813 - 434 - 3161

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 Arrington, Bryan, Lamont, SGT.,

Mailing Address 8a 1st street

b13

Wendover

UT

84083

CITY ▲

STATE ▲

ZIP CODE ▲

Title or Position ▼

Registered Candidate

Telephone number 813 - 434 - 3161

Full Name of Designated Agent

Owda, Bisan, , ,

Mailing Address

Al Jazeera Business Center Al Waab

Doha

DC

20515

CITY ▲

STATE ▲

ZIP CODE ▲

Title or Position ▼

Peace Reporter

Telephone number

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.

Current

Mailing Address

4501 23rd Ave S

Fargo

UT

84083

CITY ▲

STATE ▲

ZIP CODE ▲

Name of Bank, Depository, etc.

Chime

Mailing Address

101 California Street

San Francisco

CA

94104

CITY ▲

STATE ▲

ZIP CODE ▲

: 97 `A-G79 @G B9CI G`H9LH`F9 @G H98 `HC`5 `F9DCFHŽG7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: F1A

Transaction ID :

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Form/Schedule: F1A

Transaction ID:

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5(g) or (h). **Joint Fundraising Participant:**

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2. \_\_\_\_\_

3. \_\_\_\_\_

4. \_\_\_\_\_

FEC ID number **C** \_\_\_\_\_

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FEC ID number **C** \_\_\_\_\_

FEC ID number **C** \_\_\_\_\_

6. **Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC Sponsor**

\_\_\_\_\_

\_\_\_\_\_

Mailing Address \_\_\_\_\_

\_\_\_\_\_

Relationship: \_\_\_\_\_ CITY ▲ STATE ▲ ZIP CODE ▲

Connected Organization  Affiliated Committee  Joint Fundraising Representative  Leadership PAC Sponsor

8. **Designated Agent:** Identify by name, address (phone number – optional)

Full Name Williams, Crystal, , , \_\_\_\_\_

Mailing Address 255 High Street \_\_\_\_\_

\_\_\_\_\_

Atlanta GA 30346 \_\_\_\_\_

TITLE OR POSITION ▼ CITY ▲ STATE ▲ ZIP CODE ▲

Aunt Telephone Number 404 - 337 - 9169

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. Money Lion \_\_\_\_\_

Mailing Address 30 West 21st Street, 9th Floor \_\_\_\_\_

Rockerfeller Plaza \_\_\_\_\_

New York NY 10112 \_\_\_\_\_

CITY ▲ STATE ▲ ZIP CODE ▲

5(g) or (h). **Joint Fundraising Participant:**

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\_\_\_\_\_

Relationship: \_\_\_\_\_ CITY ▲ STATE ▲ ZIP CODE ▲

Connected Organization  Affiliated Committee  Joint Fundraising Representative  Leadership PAC Sponsor

8. **Designated Agent:** Identify by name, address (phone number – optional)

Full Name Montalvo, Bacilio, , , \_\_\_\_\_

Mailing Address 145 Gardenia way \_\_\_\_\_

\_\_\_\_\_

wendover UT 84083 \_\_\_\_\_

TITLE OR POSITION ▼ \_\_\_\_\_ CITY ▲ STATE ▲ ZIP CODE ▲

Spanish Translator Telephone Number \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

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. Cash App \_\_\_\_\_

Mailing Address 1955 Broadway, Suite 600 \_\_\_\_\_

\_\_\_\_\_

Oakland CA 94612 \_\_\_\_\_

CITY ▲ STATE ▲ ZIP CODE ▲

5(g) or (h). **Joint Fundraising Participant:**

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4.	<input type="text"/>	FEC ID number	<input type="text" value="C"/>

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CITY ▲  STATE ▲  ZIP CODE ▲

Connected Organization  Affiliated Committee  Joint Fundraising Representative  Leadership PAC Sponsor

8. **Designated Agent:** Identify by name, address (phone number – optional)

Full Name

Mailing Address

CITY ▲  STATE ▲  ZIP CODE ▲

TITLE OR POSITION ▼  Telephone Number  -  -

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Name of Bank, Depository, etc.

Mailing Address

CITY ▲  STATE ▲  ZIP CODE ▲

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Connected Organization  Affiliated Committee  Joint Fundraising Representative  Leadership PAC Sponsor

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Full Name

Mailing Address

CITY ▲  STATE ▲  ZIP CODE ▲

TITLE OR POSITION ▼  Telephone Number  -  -

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\_\_\_\_\_

\_\_\_\_\_

Mailing Address \_\_\_\_\_

\_\_\_\_\_

Relationship: \_\_\_\_\_ CITY ▲ STATE ▲ ZIP CODE ▲

Connected Organization  Affiliated Committee  Joint Fundraising Representative  Leadership PAC Sponsor

8. Designated Agent: Identify by name, address (phone number – optional)

Full Name Lahren, Tomi, , , \_\_\_\_\_

Mailing Address 8305 Sunset Blvd, Suite 5 \_\_\_\_\_

Los Angeles CA 90069 \_\_\_\_\_

TITLE OR POSITION ▼ CITY ▲ STATE ▲ ZIP CODE ▲

Politica Journalist Telephone Number \_\_\_\_\_

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. \_\_\_\_\_

Mailing Address \_\_\_\_\_

\_\_\_\_\_

CITY ▲ STATE ▲ ZIP CODE ▲

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Mailing Address

Relationship:  CITY ▲  STATE ▲  ZIP CODE ▲

Connected Organization  Affiliated Committee  Joint Fundraising Representative  Leadership PAC Sponsor

8. **Designated Agent:** Identify by name, address (phone number – optional)

Full Name

Mailing Address

TITLE OR POSITION ▼  CITY ▲  STATE ▲  ZIP CODE ▲  
 Telephone Number  -  -

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Name of Bank, Depository, etc.

Mailing Address

CITY ▲ STATE ▲ ZIP CODE ▲

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Mailing Address

TITLE OR POSITION

Telephone Number  -  -

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CITY STATE ZIP CODE

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Mailing Address \_\_\_\_\_

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Relationship: \_\_\_\_\_ CITY ▲ STATE ▲ ZIP CODE ▲

Connected Organization  Affiliated Committee  Joint Fundraising Representative  Leadership PAC Sponsor

8. **Designated Agent:** Identify by name, address (phone number – optional)

Full Name Ocasio-Cortez, Alexandria, , , \_\_\_\_\_

Mailing Address 30-83 31st Street \_\_\_\_\_

Queens NY 11102 \_\_\_\_\_

TITLE OR POSITION ▼ CITY ▲ STATE ▲ ZIP CODE ▲

Congresswoman Telephone Number 718 - 662 - 5970

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. \_\_\_\_\_

Mailing Address \_\_\_\_\_

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Connected Organization  Affiliated Committee  Joint Fundraising Representative  Leadership PAC Sponsor

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Mailing Address \_\_\_\_\_  
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Relationship: \_\_\_\_\_ CITY ▲ STATE ▲ ZIP CODE ▲  
 Connected Organization  Affiliated Committee  Joint Fundraising Representative  Leadership PAC Sponsor

8. **Designated Agent:** Identify by name, address (phone number – optional)

Full Name SCOTT, MELISSA, , , \_\_\_\_\_  
 Mailing Address 1615 S GLENDALE AVE \_\_\_\_\_  
 \_\_\_\_\_  
 GLENDALE CA 91205 \_\_\_\_\_  
 CITY ▲ STATE ▲ ZIP CODE ▲  
 TITLE OR POSITION ▼ PASTOR/ADVISOR \_\_\_\_\_ Telephone Number 800 - 338 - 3030

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. \_\_\_\_\_  
 Mailing Address \_\_\_\_\_  
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 CITY ▲ STATE ▲ ZIP CODE ▲

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Mailing Address

Relationship:  CITY ▲  STATE ▲  ZIP CODE ▲

Connected Organization  Affiliated Committee  Joint Fundraising Representative  Leadership PAC Sponsor

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Full Name

Mailing Address

CITY ▲  STATE ▲  ZIP CODE ▲

TITLE OR POSITION ▼

Telephone Number

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Connected Organization  Affiliated Committee  Joint Fundraising Representative  Leadership PAC Sponsor

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Full Name

Mailing Address

CITY ▲  STATE ▲  ZIP CODE ▲

TITLE OR POSITION ▼  Telephone Number  -  -

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Mailing Address \_\_\_\_\_

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Relationship: \_\_\_\_\_ CITY ▲ STATE ▲ ZIP CODE ▲

Connected Organization  Affiliated Committee  Joint Fundraising Representative  Leadership PAC Sponsor

8. **Designated Agent:** Identify by name, address (phone number – optional)

Full Name Boebert, Lauren, Opal, , \_\_\_\_\_

Mailing Address 743 Horizon Ct \_\_\_\_\_

\_\_\_\_\_

Grand Junction CO 81506 \_\_\_\_\_

TITLE OR POSITION ▼ CITY ▲ STATE ▲ ZIP CODE ▲

Congresswoman Telephone Number 970 - 208 - 0460

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. \_\_\_\_\_

Mailing Address \_\_\_\_\_

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CITY ▲ STATE ▲ ZIP CODE ▲

5(g) or (h). Joint Fundraising Participant:

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Mailing Address \_\_\_\_\_

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Relationship: \_\_\_\_\_ CITY ▲ STATE ▲ ZIP CODE ▲

Connected Organization  Affiliated Committee  Joint Fundraising Representative  Leadership PAC Sponsor

8. Designated Agent: Identify by name, address (phone number – optional)

Full Name Maloy, Celest, , , \_\_\_\_\_

Mailing Address 585 W 500 S #230 \_\_\_\_\_

Bountiful UT 84010 \_\_\_\_\_

TITLE OR POSITION ▼ CITY ▲ STATE ▲ ZIP CODE ▲

Congresswoman D2 Telephone Number 801 - 364 - 5550

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. \_\_\_\_\_

Mailing Address \_\_\_\_\_

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Telephone Number  -  -

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Connected Organization  Affiliated Committee  Joint Fundraising Representative  Leadership PAC Sponsor

8. **Designated Agent:** Identify by name, address (phone number – optional)

Full Name

Mailing Address

CITY ▲  STATE ▲  ZIP CODE ▲

TITLE OR POSITION ▼  Telephone Number  -  -

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Name of Bank, Depository, etc.

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CITY ▲  STATE ▲  ZIP CODE ▲

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3.	<input type="text"/>	FEC ID number	<input type="text" value="C"/>
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Relationship: \_\_\_\_\_ CITY ▲ STATE ▲ ZIP CODE ▲

Connected Organization  Affiliated Committee  Joint Fundraising Representative  Leadership PAC Sponsor

8. Designated Agent: Identify by name, address (phone number – optional)

Full Name Belton, Ebony, Nicole, , \_\_\_\_\_

Mailing Address 6248 cathedral ln \_\_\_\_\_

Stonecrest \_\_\_\_\_ GA 30038 \_\_\_\_\_

TITLE OR POSITION ▼ CITY ▲ STATE ▲ ZIP CODE ▲

Erotic Stripper \_\_\_\_\_ Telephone Number 404 - 625 - 9416

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