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STATEMENT OF **FEC ORGANIZATION** FORM 1 Office Use Only NAME OF Example: If typing, type (Check if name 12FE4M5 COMMITTEE (in full) is changed) over the lines. Adam Craig Baxter for President 2016 725 3rd Ave ADDRESS (number and street) #8 (Check if address is changed) Salt Lake City 84103 UT CITY A STATE A ZIP CODE A COMMITTEE'S E-MAIL ADDRESS adam.baxter1@gmail.com (Check if address is changed) Optional Second E-Mail Address COMMITTEE'S WEB PAGE ADDRESS (URL) (Check if address is changed) DATE 09 2015 C00586420 FEC IDENTIFICATION NUMBER > 3. X 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. Adam Baxter Type or Print Name of Treasurer Adam Baxter [Electronically Filed] 09 2015 Signature of Treasurer Date NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to the penalties of 2 U.S.C. §437g. 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 Only Local 202-694-1100

	FFC <b>Fo</b>	rm 1 (Revised 02/2009)	Page <b>2</b>				
		OMMITTEE	raye <b>z</b>				
		Committee:					
(a)	$\times$	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.)					
Nam Can	ne of didate	Adam Craig Baxter					
	didate y Affiliati	on NPA Office Sought: House Senate X President	State				
(c)		This committee supports/opposes only one candidate, and is NOT an authorized committee.					
Nam Cand	ne of didate						
Par	ty Con	Committee:					
(d)		This committee is a (National, State or subordinate) committee of the	(Democratic, Republican, etc.) Party.				
Poli	itical A	ction Committee (PAC):					
(e)		This committee is a separate segregated fund. (Identify connected organization on line 6.) Its co	nnected 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 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.)					
Join	nt Fund	raising Representative:					
(g)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for committees/organizations, at least one of which is an authorized committee of a federal candidate					
(h)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for t committees/organizations, none of which is an authorized committee of a federal candidate.	wo or more political				
	Com	Committees Participating in Joint Fundraiser					
	1.	FEC ID number					
	2.	FEC ID number					
	3.	FEC ID number C					
	4.						

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Write or Type Committee I	Name	
Adam Craig I	Baxter for President 2016	
6. Name of Any Connect	ed Organization, Affiliated Committee, Joint Fundraising Representat	tive, or Leadership PAC Sponsor
NONE		
Mailing Address		
	CITY STATE	E ZIP CODE
Relationship: Conn	ected Organization Affiliated Committee Joint Fundraising Repres	entative Leadership PAC Sponsor
Relationship.	Anniated Committee Joint Fundraising Repres	entative Leadership FAC Sponsor
<ol><li>Custodian of Records: books and records.</li></ol>	Identify by name, address (phone number optional) and position of the	ne person in possession of committee
Adan	n Baxter	
Full Name		
Mailing Address	725 3rd Ave	
	#8 	
	Salt Lake City UT	84103
Title or Position	CITY STATE	ZIP CODE
Lining	Telephone number	
	, isophis is name.	
8. <b>Treasurer:</b> List the nam	e and address (phone number optional) of the treasurer of the commit	ttee; and the name and address of
any designated agent (e	.g., assistant treasurer).	
Full Name Adam of Treasurer	Baxter	
	725 3rd Ave	
Mailing Address	#8	
	2 11 1 2 2	
	Salt Lake City UT	84103
Title or Position	CITY STATE	ZIP CODE
	Telephone number	

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Full Name of Designated Agent					
Mailing Address					
	CITY STATE Z	ZIP CODE			
Title or Position		. 1_1			
	Telephone number =				
safety deposit boxes or maintains funds.  Name of Bank, Depository, etc.  America First Credit Union  P.O. Box 9199  Mailing Address					
	Ogden UT 84409				
	CITY STATE 2	ZIP CODE			
Name of Bank, I	Depository, etc.				
Mailing Address					
	CITY STATE 2	ZIP CODE			