Only

## STATEMENT OF

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**FEC ORGANIZATION** FORM 1 Office Use Only NAME OF (Check if name Example: If typing, type 12FE4M5 COMMITTEE (in full) is changed) over the lines. Swisher for Idaho 3506 W. Taft St. ADDRESS (number and street) (Check if address is changed) Boise 83703 ID CITY A STATE A ZIP CODE A COMMITTEE'S E-MAIL ADDRESS SWISHERFORIDAHO@GMAIL.COM (Check if address is changed) Optional Second E-Mail Address SSEAST1@GMAIL.COM COMMITTEE'S WEB PAGE ADDRESS (URL) swisherforidaho.com (Check if address is changed) DATE 2018 C00663542 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. Stallings, Richard, Howard, , Type or Print Name of Treasurer Stallings, Richard, Howard,, [Electronically Filed] 02 13 2020 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

Local 202-694-1100

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TYPE OF COMMITTEE				
Candidate Committee:				
(a) This committee is a principal campaign committee. (Complete the candidate in	nformation below.)			
(b) This committee is an authorized committee, and is NOT a principal campaign information below.)	committee. (Complete the candidate			
Name of Candidate Swisher, Carlton, Aaron, ,				
Candidate Party Affiliation  DEM  Office Sought:   House  Senate	State ID President 02			
(c) This committee supports/opposes only one candidate, and is NOT an authorize	District			
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	n on line 6.) Its connected organization is a:			
Corporation Corporation w/o Capital St	ock 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.)				
Joint Fundraising Representative:				
(g) This committee collects contributions, pays fundraising expenses and disburses committees/organizations, at least one of which is an authorized committee of a	·			
(h) This committee collects contributions, pays fundraising expenses and disburses r committees/organizations, none of which is an authorized committee of a federal				
Committees Participating in Joint Fundraiser				
1.	umber C			
2.	ımber C			
3.	umber C			
4.                                   FEC ID nu	mber C			

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Write or Type Committee I	Name	
Swisher for lo	daho	
	ted Organization, Affiliated Committee, Joint Fundraising Representative, or Lea	adership PAC Sponsor
NONE		
Mailing Address		
	CITY STATE	ZIP CODE
Relationship: Conn	nected Organization Affiliated Committee Joint Fundraising Representative	Leadership PAC Sponsor
Custodian of Records: books and records.	: Identify by name, address (phone number optional) and position of the person	n possession of committee
	ake, Susan, S, ,	
Full Name	333 E Brookhollow Dr	
Mailing Address		
	Boise ID 83	706
Title or Position	CITY STATE	ZIP CODE
Assistant Treasurer		- 859 - 6663
. <b>Treasurer:</b> List the nam any designated agent (e	ne and address (phone number optional) of the treasurer of the committee; and the e.g., assistant treasurer).	ne name and address of
Full Name Stalling of Treasurer	ngs, Richard, Howard, ,	
Mailing Address	575E 2100 N	
	Ogden UT 844	114
Title or Position	CITY STATE	ZIP CODE 6049
	Telephone number	- [

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Full Name of Designated Agent	Eastlake, Susan, S, ,			
Mailing Address	333 E Brookhollow Dr			
	Boise ID 83706  CITY STATE ZI	P CODE		
Title or Position Assistant Treasu				
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.				
	D L Evans Bank			
Mailing Address	890 W Main St			
	Boise ID 83702			
	CITY STATE ZI	IP CODE		
Name of Bank, Depository, etc.				
Mailing Address				
	CITY STATE ZI	IP CODE		