

**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

Amanda Adkins for Congress

ADDRESS (number and street)

PO Box 24085

☐ (Check if address is changed)

Overland Park

CITY ▲

KS

STATE ▲

66283

ZIP CODE ▲

COMMITTEE'S E-MAIL ADDRESS

☐ (Check if address is changed)

ghusted@henryalan.com

Optional Second E-Mail Address

rp3@henryalan.com

COMMITTEE'S WEB PAGE ADDRESS (URL)

☐ (Check if address is changed)

amandaadkins.com

2. DATE

06 / 15 / 2021

3. FEC IDENTIFICATION NUMBER ►

C C00717876

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 Husted, George, , CPA

Signature of Treasurer Husted, George, , CPA

[Electronically Filed]

Date

06 / 15 / 2021

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
Use
OnlyFor further information contact:
Federal Election Commission
Toll Free 800-424-9530
Local 202-694-1100**FEC FORM 1**
(Revised 06/2012)

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

Adkins, Amanda, , ,

Candidate
Party Affiliation

REP

Office
Sought:☒

House

☐

Senate

☐

President

State

KS

District

03

- (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.)

Joint Fundraising Representative:

- (g) ☐ 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.
- (h) ☐ 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. | <input type="text"/> | FEC ID number | C <input type="text"/> |
| 2. | <input type="text"/> | FEC ID number | C <input type="text"/> |
| 3. | <input type="text"/> | FEC ID number | C <input type="text"/> |
| 4. | <input type="text"/> | FEC ID number | C <input type="text"/> |

Write or Type Committee Name

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

Cruz 20 for 20 Victory Fund

Mailing Address

PO Box 341027

Austin

CITY

TX

STATE

78734

ZIP CODE

Relationship: ☐ Connected Organization ☐ Affiliated Committee ☒ 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

Husted, George, , , CPA

Mailing Address

PO Box 24085

Overland Park

CITY

KS

STATE

66283

ZIP CODE

Treasurer

Telephone number

202

866

8229

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

Husted, George, , , CPA

Mailing Address

PO Box 24085

Overland Park

CITY

KS

STATE

66283

ZIP CODE

Title or Position
Treasurer

Telephone number

202

866

8229

Full Name of
Designated
Agent

Phillips, Robert, , , III

Mailing Address

PO Box 24085

Overland Park

CITY

KS

STATE

66283

ZIP CODE

Title or Position

Deputy Treasurer

Telephone number

202

866

8229

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.

CrossFirst Bank

Mailing Address

4707 W 135th St

Leawood

CITY

KS

STATE

66224

ZIP CODE

Name of Bank, Depository, etc.

Truist (Formerly BB&T)

Mailing Address

2200 Wilson Blvd

Ste. 100

Arlington

CITY

VA

STATE

22201

ZIP CODE