**FEC** 

## STATEMENT OF

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**ORGANIZATION** FORM 1 Office Use Only NAME OF Example: If typing, type (Check if name 12FE4M5 COMMITTEE (in full) is changed) over the lines. William Campbell for Congress 420 East South Temple ADDRESS (number and street) Ste 390 (Check if address is changed) Salt Lake City 84111 UT CITY A STATE A ZIP CODE A COMMITTEE'S E-MAIL ADDRESS mike@mccauleyassociatespc.com (Check if address is changed) Optional Second E-Mail Address steve@mccauleyassociatespc.com COMMITTEE'S WEB PAGE ADDRESS (URL) (Check if address is changed) DATE 03 2022 C00803999 FEC IDENTIFICATION NUMBER 3. 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. McCauley, Mike, , , Type or Print Name of Treasurer McCauley, Mike, , , [Electronically Filed] 02 2022 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

F	FEC Fo	rm 1 (Revised 02/2009)	Page <b>2</b>
		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. (Compinformation below.)	plete the candidate
Name Cand		Campbell, William, , ,	
	lidate Affiliati	on REP Office Sought: X House Senate President	State UT District 01
(c)		This committee supports/opposes only one candidate, and is NOT an authorized committee.	
Name Cand			
Part	ty Con	nmittee:  (National, State	(Democratic,
(d)			Republican, etc.) Party.
Poli	tical A	ction Committee (PAC):	
(e)		This committee is a separate segregated fund. (Identify connected organization on line 6.) Its con-	nected 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 se committee. (i.e., nonconnected committee)	gregated fund or party
		In addition, this committee is a Lobbyist/Registrant PAC.	
		In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)	
Join	t Func	draising Representative:	
(g)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for tw committees/organizations, at least one of which is an authorized committee of a federal candidate.	o or more political
(h)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for two committees/organizations, none of which is an authorized committee of a federal candidate.	o or more political
	Com	mittees Participating in Joint Fundraiser	
	1.	FEC ID number	
	2.	FEC ID number	
	3.		
	1		

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Write or Type Committee	Name	
William Cam	npbell for Congress	
	cted Organization, Affiliated Committee, Joint Fundraising Representative, o	r Leadership PAC Sponsor
NONE		
Mailing Address		
-		
	CITY STATE	ZIP CODE
	nnected Organization Affiliated Committee Joint Fundraising Representatives: Identify by name, address (phone number optional) and position of the personal	
books and records.		
McC Full Name	Cauley, Mike, , ,	
Mailing Address	420 East South Temple	
-	Ste 390	
	SALT LAKE CITY UT	84111
Title or Position	CITY STATE	ZIP CODE
Treasurer	38: Telephone number	5 202 7284
	me and address (phone number optional) of the treasurer of the committee; a (e.g., assistant treasurer).	nd the name and address of
Full Name McC of Treasurer	Cauley, Mike, , ,	
Mailing Address	420 East South Temple	
	Ste 390	
	SALT LAKE CITY UT	84111 -   -
Title or Position Treasurer	CITY STATE  388  1   1   1   1   1   1   1   1   1   1	ZIP CODE 7284

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Full Name of Designated M Agent	/IcCauley, Mike, , ,	
Mailing Address	420 East South Temple	
	Ste 390	
	SALT LAKE CITY UT 84111 CITY STATE	1 ZIP CODE
Title or Position CPA		202 - 7284
safety deposit boxes Name of Bank, Dep	epositories: List all banks or other depositories in which the committee deposits funds, he sor maintains funds.  pository, etc.  Capital Bank	iolds accounts, rents
	2275 Research Blvd.	
Mailing Address		
	Rockville MD 2085	50
	Rockville  CITY  STATE	ZIP CODE
Name of Bank, Dep	CITY STATE	
Name of Bank, Dep	CITY STATE	
Name of Bank, Dep	CITY STATE	
L	CITY STATE	
L	CITY STATE	