

FEC FORM 1

STATEMENT OF ORGANIZATION

RECEIVED
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Office Use Only

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

12FE4M5

Bob Stump for Congress

ADDRESS (number and street) 370 East South Temple, STE 580

(Check if address is changed)

Salt Lake City CITY ▲ UT STATE ▲ 84111 ZIP CODE ▲

COMMITTEE'S E-MAIL ADDRESS

(Check if address is changed)

mike@mccauleyassociatespc.com

Optional Second E-Mail Address
steve@mccauleyassociatespc.com

COMMITTEE'S WEB PAGE ADDRESS (URL)

(Check if address is changed)

bobstump.vote

2. DATE 12 / 11 / 2017

3. FEC IDENTIFICATION NUMBER C

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 McCauley, Mike, ..

Signature of Treasurer McCauley, Mike, ..

Date 12 / 14 / 2017

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.

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For further information contact:
Federal Election Commission
Toll Free 800-424-9530
Local 202-694-1100

FEC FORM 1
(Revised 06/2012)

NON-FUNCTIONAL INFORMATION

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 Stump, Bob, , ,

Candidate Party Affiliation REP House Senate President State AZ District 08

- (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.	_____	FEC ID number	<input type="checkbox"/> C _____
2.	_____	FEC ID number	<input type="checkbox"/> C _____
3.	_____	FEC ID number	<input type="checkbox"/> C _____
4.	_____	FEC ID number	<input type="checkbox"/> C _____

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Write or Type Committee Name

Bob Stump for Congress

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

NONE

Mailing Address

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

McCauley, Mike, . .

Mailing Address

370 East South Temple, STE 580

Title or Position

CPA

Salt Lake City

UT

84111

Telephone number

385

202

7284

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

McCauley, Mike, . .

Mailing Address

370 East South Temple, STE 580

Title or Position Treasurer

Salt Lake City

UT

84111

Telephone number

385

202

7284

2009-11-11 11:00:00 AM

Full Name of Designated Agent McCauley, Mike, . . .

Mailing Address 370 East South Temple, STE 580

Salt Lake City CITY UT STATE 84111 ZIP CODE

Title or Position CPA Telephone number 385 - 202 - 7284

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.

Wells Fargo Bank

Mailing Address 299 South Main St

Salt Lake City CITY UT STATE 84101 ZIP CODE

Name of Bank, Depository, etc.

Mailing Address

CITY STATE ZIP CODE

NON-FINANCIAL DISCLOSURE

Insert shipping ▶

Page 1 of 1

ORIGIN ID: NPHA (385)
MIKE MCCAULEY
370 EAST SOUTH TEMPL
SUITE 580
SALT LAKE CITY, UT 84111
UNITED STATES US

RT 695
3
15:00
ET 3920
5863
12.15

TO

FEDERAL ELECTION COMMISSION
999 E STREET NW

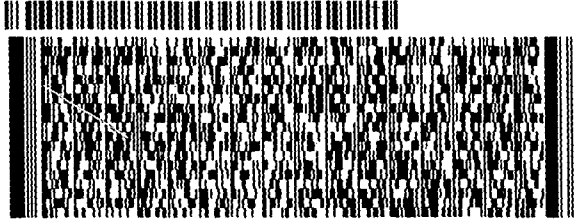
WASHINGTON DC 20463

(800) 424-9530
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FRI - 15 DEC 3:00P

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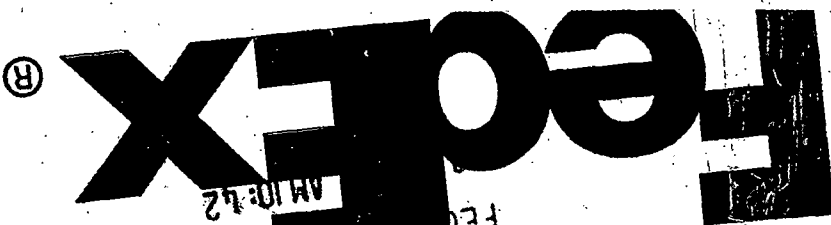
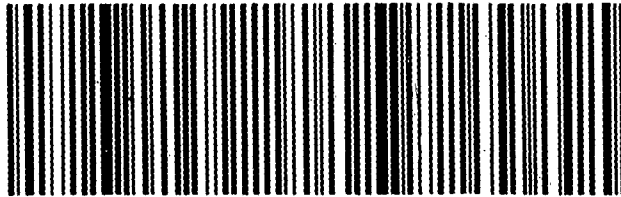
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<input type="checkbox"/> Postmark Illegible	
<input type="checkbox"/> No Postmark	
<input checked="" type="checkbox"/> Overnight Delivery Service (Specify): <i>FedEx</i>	Shipping Date <i>12/14/2017</i>
	Next Business Day Delivery <input checked="" type="checkbox"/>
<input type="checkbox"/> Received from House Records & Registration Office	Date of Receipt
<input type="checkbox"/> Received from Senate Public Records Office	Date of Receipt
<input type="checkbox"/> Received from Electronic Filing Office	Date of Receipt
<input type="checkbox"/> Other (Specify):	Date of Receipt or Postmarked
PREPARER <i>MP</i>	<i>12/15/2017</i> DATE PREPARED

(3/2015)

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