

**FEC  
FORM 1****STATEMENT OF  
ORGANIZATION**

(See instructions)

Office use only

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

12FE4M5

**Committee to Elect Bridgewater**

ADDRESS (number and street)

**175 South West Temple, Suite 650** (Check if address  
is changed)**Salt Lake City****UT****84101**CITY STATE ZIP CODE 

COMMITTEE'S E-MAIL ADDRESS

**campaigns@cbiz.com**

COMMITTEE'S WEB PAGE ADDRESS (URL)

COMMITTEE'S FAX NUMBER

**801-364-9301**2. DATE 

M	M
0	2

 / 

D	D
2	1

 / 

Y	Y	Y	Y
2	0	0	7

3. FEC IDENTIFICATION NUMBER

**C C00389726**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

**Stanley R. de Waal**

Signature of Treasurer

Electronically Filed by **Stanley R. de Waal**

Date

M	M
0	2

 / 

D	D
2	1

 / 

Y	Y	Y	Y
2	0	0	7

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to the penalties of 2 U.S.C. S437g.

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 02/2003)

## 5. TYPE OF COMMITTEE (Check One)

(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

**Timothy Allen Bridgewater**

Candidate Party Affiliation

**REP**

Office Sought:

House

Senate

President

State

**UT**  
**02**

District

(c)  This committee supports/opposes only one candidate, and is NOT an authorized committee.

Name of Candidate

(d)  This committee is a  (National, State (or subordinate) committee of the  (Democratic, Republican,etc.) Party.

(e)  This committee is a separate segregated fund

(f)  This committee supports/opposes more than one Federal candidate, and is NOT a separate segregated fund or party committee.

## 6. Name of Any Connected Organization or Affiliated Committee

Mailing Address

**CITY**▲**STATE**▲**ZIP CODE**▲

Relationship

Type of Connected Organization:

Corporation  Corporation w/o Capital Stock  Labor Organization

Membership Organization  Trade Association  Cooperative

Write or Type Committee Name

**Committee to Elect Bridgewater**

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

Stanley R. de Waal

Mailing Address

175 South West Temple, Suite 650Salt Lake CityUT84101

Title or Position ▼

CITY ▲

STATE▲

ZIP CODE ▲

TreasurerTelephone number 801 - 364 - 9300

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 TreasurerStanley R. de Waal

Mailing Address

175 South West Temple, Suite 650Salt Lake CityUT84101

Title or Position ▼

CITY ▲

STATE▲

ZIP CODE ▲

TreasurerTelephone number 801 - 364 - 9300Full Name of  
Designated  
AgentCorie Chan

Mailing Address

175 South West Temple, Suite 650Salt Lake CityUT84101

Title or Position ▼

CITY ▲

STATE▲

ZIP CODE ▲

Assistant TreasurerTelephone number 801 - 364 - 9300

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

**79 South Main Street**

**Salt Lake City**

**UT**

**84111**

**CITY** 

**STATE** 

**ZIP CODE** 