FEC

Only

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. IDA-PAC POLITICAL ACTION COMMITTEE PO BOX 70 ADDRESS (number and street) 1220 WEST IDAHO (Check if address is changed) **BOISE** 83707 ID CITY A STATE A ZIP CODE ▲ COMMITTEE'S E-MAIL ADDRESS (Check if address sgourley@idahopower.com is changed) Optional Second E-Mail Address COMMITTEE'S WEB PAGE ADDRESS (URL) (Check if address is changed) DATE 2024 C00083832 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. Type or Print Name of Treasurer Buckham, Brian, , Mr, Buckham, Brian, , Mr, Date 01 09 2024 Signature of Treasurer NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to the penalties of 52 U.S.C. §30109. 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 information below.)					
(b) This committee is an authorized committee, and is NOT a principal campaign committee. (Complete th information below.)	e candidate				
Name of Candidate '','','','',',',',',',',',',',',',',',					
Candidate Office Party Affiliation Sought: House Senate President	State				
(c) This committee supports/opposes only one candidate, and is NOT an authorized committee.	Diotriot				
Name of Candidate					
Party Committee:					
(d) This committee is a (National, State or subordinate) committee of the Republican,	*				
Political Action Committee (PAC):					
(e) X This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected	d organization is a:				
Corporation Corporation w/o Capital Stock Labor O	rganization				
Membership Organization Trade Association Coopera	tive				
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.)					
(g) This committee is an independent expenditure-only political committee (Super PAC).					
In addition, this committee is a Lobbyist/Registrant PAC.					
(h) This committee is a political committee with both contribution and non-contribution accounts (Hybrid PA	AC).				
In addition, this committee is a Lobbyist/Registrant PAC.					
Joint Fundraising Representative:					
(i) This committee collects contributions, pays fundraising expenses and disburses net proceeds for two o committees/organizations, at least one of which is an authorized committee of a federal candidate.	r more political				
(j) This committee collects contributions, pays fundraising expenses and disburses net proceeds for two o committees/organizations, none of which is an authorized committee of a federal candidate.	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					
1C					
C					

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٧	Vrite or Type Committee Na	me	
		ITICAL ACTION COMMITTEE	
6.		ntative, or Leadership PAC Sponsor	
	NONE		
	Mailing Address		
		CITY ▲ STA	ATE ▲ ZIP CODE ▲
	Relationship: Connec	ted Organization	presentative Leadership PAC Sponso
7.	Custodian of Records: Id books and records.	lentify by name, address (phone number optional) and position of the	person in possession of committee
	Gourley	y, Sara, , Ms,	
	Full Name	4004 W.H.H 01	
	Mailing Address	1221 W Idaho St	
		Boise	D 837072
		CITY A STA	ATE ▲ ZIP CODE ▲
	Title or Position ▼		
	Sr Executive Asst	Telephone number	208 - 388 - 2530
8.	Treasurer: List the name any designated agent (e.g	and address (phone number optional) of the treasurer of the cong., assistant treasurer).	nmittee; and the name and address of
	Full Name Buckha	nm, Brian, , Mr,	
		1221 W Idaho St	
	Mailing Address		
		Boise	ID 83702 - - -
		CITY ▲ STA	ATE ▲ ZIP CODE ▲
	Title or Position ▼		
	SVP, CFO	Telephone number	208 388 - 2390

Full Name of Designated Agent Mailing Address CITY ▲ STATE ▲ ZIP CODE ▲ Title or Position ▼					
CITY ▲ STATE ▲ ZIP CODE ▲ Title or Position ▼					
Title or Position ▼					
Title or Position ▼					
Title or Position ▼					
Telephone window					
. Banks or Other Depositories: List all banks or other depositories in which the committee deposits funds, holds accounts, rent safety deposit boxes or maintains funds.	s				
Name of Bank, Depository, etc.					
Wells Fargo Bank, N.A.					
Mailing Address P O Box 6995					
Portland					
CITY ▲ STATE ▲ ZIP CODE ▲					
Name of Bank, Depository, etc.					
Mailing Address					
CITY ▲ STATE ▲ ZIP CODE ▲					