Only

STATEMENT OF

PAGE 1 / 4 =

FEC FORM 1		0	RGAN	IZATIO	ON				Office	e Use C	Only			
1. NAME OF		(Check if nam	e Exa	mple:If typing	g, type	12F1	E4M5		e Ose C	Jilly			_
COMMITTEE (in	full)	is	s changed)		the lines.		IZFI	CMF	-					
January for	Utah													
ADDRESS (number a	nd street)	420 E S	Temple St											
(Check if a		Ste 390			1 1 1 1	1 1 1 1	1 1	1 1	1 1		í I	1 1	l I	
is changed	1)	Salt Lake	e City				UT		84111			DDE A		
COMMITTEE'S E-MA	AIL ADDRE	SS												
(Check if a			mccauleyas	ssociatespo	c.com									ı
is changed	d)													ı
		steve	Second E-Ma mccaule	all Address yassociate	espc.com		1 1		1 1		i I	1 1	l l	
COMMITTEE'S WEB	PAGE ADI	DRESS (HE	SI /											
(Check if a		,	າ∟) rutah.com											ı
is changed	d)													ı
2. DATE 03	M / D 3	D / Y	Y Y Y Y 2022											
3. FEC IDENTIFIC	CATION NU	JMBER ▶		C0080937	6									
4. IS THIS STATEM	MENT X	NEW	(N) O	R	AMENE	DED (A)								
I certify that I have e	examined th	is Stateme	nt and to the	best of my	knowledge ar	nd belief it	is true,	correct	and c	omplet	ie.			
Type or Print Name	of Treasure	McCaule	ey, Mike, , ,											_
Signature of Treasure	er <i>McCa</i>	uley, Mike, ,			[Electronicall	y Filed]	Date	03		16] ′ [202	2 P	
NOTE: Submission of			omplete inform							enalties	of 2	J.S.C.	§437g.	
Office Use					For further in Federal Election Toll Free 800-	on Commissio				EC I				_ [

Local 202-694-1100

FEC Form 1 (Revised 02/2009)	Page 2
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 information below.)	ne candidate
Name of Candidate Walker, January, , ,	
11110	ate
Party Affiliation UUP Sought: X House Senate President Dis	strict 04
(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 Republic	cratic, can, 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	r Organization
Membership Organization Trade Association Coop	erative
In addition, this committee is a Lobbyist/Registrant PAC.	
(f) This committee supports/opposes more than one Federal candidate, and is NOT a separate segregate committee. (i.e., nonconnected committee)	ed 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.)	
Joint Fundraising Representative:	
(g) This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or more committees/organizations, at least one of which is an authorized committee of a federal candidate.	ore political
(h) This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or mocommittees/organizations, none of which is an authorized committee of a federal candidate.	ore political
Committees Participating in Joint Fundraiser	
. C	
2. FEC ID number C	
3.	
4.	

FEC Form 1 (Revise	d 02/2009)	Page 3
Write or Type Committee Na		
January for Ut	ah	
	d Organization, Affiliated Committee, Joint Fundraising Representative, or Lead	ership PAC Sponsor
NONE		
Mailing Address		
	CITY STATE	ZIP CODE
Relationship: Connec	ted Organization Affiliated Committee Joint Fundraising Representative	Leadership PAC Sponsor
. Custodian of Records: lo books and records.	dentify by name, address (phone number optional) and position of the person in	possession of committee
	ey, Mike, , ,	
Full Name	420 EAST SOUTH TEMPLE	
Mailing Address	SUITE 390	
	SALT LAKE CITY UT 8411	1
Title or Position	CITY STATE	ZIP CODE
Treasurer		202 7284
Treasurer: List the name any designated agent (e.g.	and address (phone number optional) of the treasurer of the committee; and the ., assistant treasurer).	name and address of
Full Name McCaule of Treasurer	ey, Mike, , ,	
Mailing Address	420 EAST SOUTH TEMPLE	
	SUITE 390	
	SALT LAKE CITY CITY STATE	ZIP CODE
Title or Position Treasurer		202 7284

FEC Form 1 ((Revised 02/2009)	Page 4
Full Name of Designated Mc Agent	Cauley, Mike, , ,	
Mailing Address	420 EAST SOUTH TEMPLE	
	SUITE 390	
	SALT LAKE CITY CITY STATE	ZIP CODE
Title or Position CPA		202 7284
	anaitaning. Liet all house on other demonstration in tubials the committee demonstration has	lds accounts, rents
safety deposit boxes Name of Bank, Depo	ository, etc.	
safety deposit boxes Name of Bank, Depo	or maintains funds.	
safety deposit boxes Name of Bank, Depo	or maintains funds. sitory, etc. apital Bank	
safety deposit boxes Name of Bank, Depo	or maintains funds. sitory, etc. apital Bank	
safety deposit boxes Name of Bank, Depo	or maintains funds. psitory, etc. apital Bank 2275 Research Blvd	
safety deposit boxes Name of Bank, Depo	or maintains funds. psitory, etc. apital Bank 2275 Research Blvd Rockville CITY STATE	
safety deposit boxes Name of Bank, Depo Ca Mailing Address	or maintains funds. psitory, etc. apital Bank 2275 Research Blvd Rockville CITY STATE	
safety deposit boxes Name of Bank, Depo Ca Mailing Address	or maintains funds. pository, etc. apital Bank 2275 Research Blvd Rockville CITY STATE Disitory, etc.	
safety deposit boxes Name of Bank, Depo Ca Mailing Address Name of Bank, Depo	or maintains funds. pository, etc. apital Bank 2275 Research Blvd Rockville CITY STATE Disitory, etc.	
safety deposit boxes Name of Bank, Depo Ca Mailing Address Name of Bank, Depo	or maintains funds. pository, etc. apital Bank 2275 Research Blvd Rockville CITY STATE Disitory, etc.	