Image# 202002219187237511				PAGE 1/5
FEC FORM 1	STATEMEN ORGANIZA	-	Offic	e Use Only
1. NAME OF	(Check if name	Example: If typing, type	12FE4M5	
COMMITTEE (in full)	is changed)	over the lines.		
Idaho Law - (Self	·)			
				<u> </u>
	Protected			
ADDRESS (number and street)				
 (Check if address is changed) 	1009 S 3rd			
	Pocatello		ID 83201	
	CITY A		STATE A	ZIP CODE▲
COMMITTEE'S E-MAIL ADDRE	SS			
(Check if address	Idaho.Law@yahoo.com)		
is changed)	Optional Second E-Mail Add	Iress		
COMMITTEE'S WEB PAGE AD	DRESS (URL)			
(Check if address				
is changed)				
2. DATE 02 / 14				
3. FEC IDENTIFICATION N	UMBER ► C co	00739474		
4. IS THIS STATEMENT	NEW (N) OR	AMENDED (A)		
I certify that I have examined th	his Statement and to the best	of my knowledge and belief i	t is true, correct and c	complete.
Type or Print Name of Treasure	r Law, Idaho, L, , 			
Signature of Treasurer	Idaho, L, ,	[Electronically Filed]	Date 02	D D / Y Y Y Y 21 2020
NOTE: Submission of false, erron	eous, or incomplete information r ANY CHANGE IN INFORMATIO			enalties of 2 U.S.C. §437g.
Office Use Only		For further information of Federal Election Commiss Toll Free 800-424-9530 Local 202-694-1100	sion F	EC FORM 1 (Revised 06/2012)

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FEC	C Form 1 (Revised 02/2009)	Page 2
TYPE C	DF COMMITTEE	
Candio	date 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. (Comp information below.)	lete the candidate
Name of Candida	\perp Law, Iualio, L,	
Candida Party Af		State ID District 02
(C)	This committee supports/opposes only one candidate, and is NOT an authorized committee.	
Name of Candida		
Party (Committee:	
(d)		Democratic, Republican, etc.) Party.
Politica	al Action Committee (PAC):	
(e)	This committee is a separate segregated fund. (Identify connected organization on line 6.) Its conn	ected 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 seg committee. (i.e., nonconnected committee)	regated 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 F	undraising Representative:	
(g)	This committee collects contributions, pays fundraising expenses and disburses net proceeds for two 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.	or more political
C	Committees Participating in Joint Fundraiser	
2	2.	
3	B.	
4	I. I.<	

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Write or Type Committee Name

Idaho Law - (Self)

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

Mailing Address											
	CITY	STATE	ZIP CODE								
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.

Law, Idah	o, L, ,
Full Name	
Mailing Address	
	1009 S.3rd
	Pocatello, Idaho- aka Radioact ID 83201 ID ID
Title or Position	CITY STATE ZIP CODE
	Telephone number

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	Law, Idaho, L, ,
of Treasurer	
Mailing Address	
	1009 S.3rd
	Pocatello, Idaho- aka Radioact
	CITY STATE ZIP CODE
Title or Position	
	Telephone number

FEC Form 1 (Revised 02/2009)

Full Name of Designated Agent				1							1	I								I											
Mailing Address																															
						1													L				L								
									CI	ΓY									ST	ATE	2				ZI	P	200	DE			
Title or Position																															
														Tele	eph	ione	e n	um	ber		L										

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.

None			
Mailing Address	NA		
	NA		⁸³²⁰¹
	CITY	STATE	ZIP CODE
Name of Bank, Depositor	y, etc.		
Mailing Address			
	CITY	STATE	ZIP CODE

:97 `A=G79 @@5 B9CIG`H9LH`F9 @5 H98 `HC`5 `F9DCFHžG7<98 I@9 `CF`=H9A=N5 H=CB

Form/Schedule: F1N Transaction ID :

Protected Address: Bannock County Courthouse Elections Office: 141 N 6th

Form/Schedule: Transaction ID: