

# 48-HOUR NOTICE OF CONTRIBUTIONS/LOANS RECEIVED

(See Reverse Side for Instructions)

To be used to report all contributions (including loans) of \$1000 or more, received within 20 days of the election.

|                                                                                                                                                                                |                    |                                                                                                                                                            |                                                                                                                                                                |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>1. NAME OF COMMITTEE IN FULL</b><br>Burgess 4 Utah                                                                                                                          |                    |                                                                                                                                                            |                                                                                                                                                                |
| <b>ADDRESS</b> (number and street) 824 S Milledge Ave<br>Ste 101                                                                                                               |                    |                                                                                                                                                            |                                                                                                                                                                |
| <b>CITY</b><br>Athens                                                                                                                                                          | <b>STATE</b><br>GA | <b>ZIP CODE</b><br>30605                                                                                                                                   |                                                                                                                                                                |
| <b>2. NAME OF CANDIDATE</b><br>Owens, Burgess, , ,                                                                                                                             |                    | <b>3. OFFICE SOUGHT</b> (State and District)<br>House UT 04                                                                                                |                                                                                                                                                                |
| <b>4. FEC IDENTIFICATION NUMBER</b><br>C00725853                                                                                                                               |                    |                                                                                                                                                            |                                                                                                                                                                |
| <b>5. IS THIS AN AMENDMENT?</b> <input checked="" type="checkbox"/> NO, THIS IS A NEW FILING <input type="checkbox"/> YES, IT AMENDS THE NOTICE FILED ON _____ / _____ / _____ |                    |                                                                                                                                                            |                                                                                                                                                                |
| <b>A. FULL NAME</b><br>SEEGER, GERALD, E., MR.,<br><b>MAILING ADDRESS</b><br>4 BAHIA DR<br><b>CITY</b><br>BOYNTON BEACH                                                        |                    | <b>NAME OF EMPLOYER</b><br>NONE<br><b>Transaction ID : TX150347</b><br><b>OCCUPATION</b><br>RETIRED                                                        | <b>DATE (MONTH, DAY, YEAR)</b><br>06/13/2022<br><b>AMOUNT</b><br>1000.00                                                                                       |
| <b>B. FULL NAME</b><br>TYER, VINCENT, , ,<br><b>MAILING ADDRESS</b><br>539 GILBERT AVE<br><b>CITY</b><br>PEARL RIVER                                                           |                    | <b>NAME OF EMPLOYER</b><br>INFORMATION REQUESTED PER BEST EFFORTS<br><b>Transaction ID : TX150348</b><br><b>OCCUPATION</b><br>INFORMATION REQUESTED PER BI | <b>DATE (MONTH, DAY, YEAR)</b><br>06/13/2022<br><b>AMOUNT</b><br>1000.00                                                                                       |
| <b>C. FULL NAME</b><br><br><b>MAILING ADDRESS</b><br><br><b>CITY</b>                                                                                                           |                    | <b>NAME OF EMPLOYER</b><br><br><b>OCCUPATION</b>                                                                                                           | <b>DATE (MONTH, DAY, YEAR)</b><br><br><b>AMOUNT</b>                                                                                                            |
| <b>D. FULL NAME</b><br><br><b>MAILING ADDRESS</b><br><br><b>CITY</b>                                                                                                           |                    | <b>NAME OF EMPLOYER</b><br><br><b>OCCUPATION</b>                                                                                                           | <b>DATE (MONTH, DAY, YEAR)</b><br><br><b>AMOUNT</b>                                                                                                            |
| <b>E. FULL NAME</b><br><br><b>MAILING ADDRESS</b><br><br><b>CITY</b>                                                                                                           |                    | <b>NAME OF EMPLOYER</b><br><br><b>OCCUPATION</b>                                                                                                           | <b>DATE (MONTH, DAY, YEAR)</b><br><br><b>AMOUNT</b>                                                                                                            |
| <b>SIGNATURE (optional)</b><br>Kilgore, Paul, , ,<br><div style="text-align: right;">[Electronically Filed]</div>                                                              |                    | <b>DATE</b><br>06/13/2022                                                                                                                                  | <b>For further information contact:</b><br>Federal Election Commission<br>999 E Street, NW, Washington, DC 20463<br>Toll Free 800-424-9530, Local 202-694-1100 |

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Any information copied from reports and statements filed under the Federal Election Campaign Act may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes other than using the name and address of any political committee to solicit contributions from such committee.

**FEC FORM 6**  
(Revised 03/2016)