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STATEMENT OF **FEC ORGANIZATION** FORM 1 Office Use Only NAME OF Example: If typing, type (Check if name 12FE4M5 COMMITTEE (in full) is changed) over the lines. JAMES VANDERMAAS FOR IDAHO P O BOX 447 ADDRESS (number and street) (Check if address is changed) **EAGLE** 83616 ID CITY A STATE A ZIP CODE A COMMITTEE'S E-MAIL ADDRESS JVANDERMAAS@VOTEVANDERMAAS.COM (Check if address is changed) Optional Second E-Mail Address SSEAST1@GMAIL.COM COMMITTEE'S WEB PAGE ADDRESS (URL) WWW.VOTEVANDERMAAS.COM (Check if address is changed) DATE 2017 C00659334 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. EASTLAKE, SUSAN, , , Type or Print Name of Treasurer EASTLAKE, SUSAN, , , [Electronically Filed] 10 28 2017 Signature of Treasurer Date NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to the penalties of 2 U.S.C. §437g. 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 Only

Local 202-694-1100

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		OMMITTEE • 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 candidate information below.)				
Nam Cand	e of didate	VANDERMAAS, JAMES, , ,				
	didate / Affiliati	on DEM Office Sought: House Senate President	State ID District 01			
(c)		This committee supports/opposes only one candidate, and is NOT an authorized committee.				
Nam Cand	e of didate					
Par	ty Con	nmittee:				
(d)		This committee is a (National, State or subordinate) committee of the	(Democratic, Republican, etc.) Party.			
Poli	tical A	ction Committee (PAC):				
(e)		This committee is a separate segregated fund. (Identify connected organization on line 6.) Its con-	nnected organization is a:			
		Corporation Wo 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 so committee. (i.e., nonconnected committee)	egregated 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.)				
Join	t Fund	Iraising Representative:				
(g)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for to committees/organizations, at least one of which is an authorized committee of a federal candidate.	•			
(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.	vo or more political			
	Com	mittees Participating in Joint Fundraiser				
	1.	FEC ID number				
	2.	FEC ID number				
	3.					
	4.					

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Write or Type Committee	Name	
JAMES VAN	IDERMAAS FOR IDAHO	
6. Name of Any Connec	cted Organization, Affiliated Committee, Joint Fundraising Representative	e, or Leadership PAC Sponsor
NONE		
Mailing Address		
	CITY STATE	ZIP CODE
	Affiliated Committee Joint Fundraising Represens: Identify by name, address (phone number optional) and position of the	
books and records.	3. ruenary by name, address (prione number optional) and position of the	person in possession of committee
EAS	STLAKE, SUSAN, , ,	
Mailing Address	333 E BROOKHOLLOW DR	
	BOISE	83706
Title or Position	CITY STATE	ZIP CODE
TREASURER	Telephone number	208 - 859 - 6663
	me and address (phone number optional) of the treasurer of the committee (e.g., assistant treasurer).	e; and the name and address of
Full Name EAS of Treasurer	STLAKE, SUSAN, , ,	
Mailing Address	333 E BROOKHOLLOW DR	
	BOISE	83706
Title or Position	CITY STATE	ZIP CODE 208 859 6663
	Telephone number	

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Full Name of Designated Agent	VANDERMAAS, JAMES, , ,	I
Mailing Address	4722 W SAGUARO DR	
	EAGLE ID 83616	
Title or Position	CITY STATE ZIE	P CODE
CANDIDATE		8 7691
Mailing Address	D L EVANS BANK P O BOX 1188 BURLEY ID 83318	
	CITY STATE ZI	P CODE
Name of Bank,		
	L	1
Mailing Address		
J		
	CITY STATE ZI	P CODE