FEC FORM 1

STATEMENT OF ORGANIZATION

SECRETARY OF THE SENATE PUBLIC RECORDS

(See instructions)

11 JUL 18 AM 11:52

	(See Instructions)	Office use only
NAME OF COMMITTEE (in f	ull) (Check if name Example: If typying, type over the lines	12FE4M5
FRIENDS FOR	SHURTLEFF INC.	
	<u> </u>	
ADDRESS (number and s	190 WEST 800 NORTH STE 100	
(Check if address		
is changed)	PROVO	UT 84601 - 1
	CITY▲	STATE▲ ZIP CODE ▲
COMMITTEE'S E-MAI	L ADDRESS (Please provide only one e-mail address)	
(Check if address	committee@markshurtleff.org	
is changed)		
		·
COMMITTEE'S WEB I	PAGE ADDRESS (URL)	
(Check if address is changed)	www.markshurtleff.com	
E.J. Kookangoo,		
 DATE M M M M O 7 FEC IDENTIFICA IS THIS STATEM]
		•• (
I certify that I have examin	ed this Statement and to the best of my knowledge and belief it is true, correct and contract the statement and to the best of my knowledge and belief it is true, correct and contract the statement and to the best of my knowledge and belief it is true, correct and contract the statement and to the best of my knowledge and belief it is true, correct and contract the statement and to the best of my knowledge and belief it is true, correct and contract the statement and to the best of my knowledge and belief it is true, correct and contract the statement and to the best of my knowledge and belief it is true, correct and contract the statement and to the best of my knowledge and belief it is true, correct and contract the statement and contract	complete
Signature of Treasurer	The same of the sa	Date D-1 1.4 2.011
NOTE: Submission of fals	e, erroneous, or incomplete information may subject the person signing this Stateme	
Office Use Only	For further information confidence of Federal Election Commission Toll Free 800-424-9530 Local 202-694-1100	

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5.	. TYPE OF COMMITTEE (Check One)			
	Candidate Committee:			
	(a)	X	This committee is a principal campaign committee. (Complete the candidate information below.))
	(b)	Ц	This committee is an authorized committee, and is NOT a principal campaign committee. (Cominformation below.)	plete the candidate
	Name Cand		MARK SHURTLEFF	
	Cand Party	idate Affiliati	on REP Office X Senate President	State UT District
(c) This committee supports/opposes only one candidate, and is NOT an authorized committee.				
	Name Cand	-		
	Party	Comm		
	(d)		This committee is a (National, State (or subordinate) committee of the	(Democratic, Republican,etc.) Party.
	Politi	ical Act	ion Committee (PAC):	
	(e)		This committee is a separate segregated fund. (Identify connected organization on line 6.) Its co	nnected organization is a:
			Corporation Corporation w/o Capital Stock	Labor Organization
			Membership Organization Trade Association	Cooperative
	(f)		In addition, this committee is a Lobbyist/Registrant PAC. This committee supports/opposes more than one Federal candidate, and is NOT a separate seg	regated fund or party
		<u></u> i	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.)	
	Joint Fundraising Representative:			
	(g)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for	two or more political
	(3)		committees/organizations, at least one of which is an authorized committee of a federal candidat	e.
	(h)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for committees/organizations, none of which is an authorized committee of a federal candidate.	r two or more political
		Com	mittees Participating in Joint Fundraiser	
			1. FEC ID number	
			2. 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
			3. FEC ID number	
			4. FEC ID number	

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Write or Type Committee N	ame		
FRIENDS FOR SHU	RTLEFF INC.		
i. Name of Any Connect	ed Organization, Affiliated Committee, Joint Fund	raising Representative, or Lea	dership PAC Sponsor
NONE		<u> </u>	1 1 1 1 1
1 1 1 1 1 1 1 1		<u> </u>	1 1 1 1 1 1 1 1 1 1
Mailing Address			<u> </u>
	1111111111		
	CITY▲	STATE ▲	ZIP CODE A
Relationship:	-		
X Connected Organi	zation Affiliated Committee Joint F	undraising Representative	Leadership PAC Sponsor
Mailing Address	190 WEST 800 NORTH	- W 4-4-	
	PROVO	UT	84601 _
Title or Position ♥	CITY A	STATE	ZIP CODE A
TREA	SURER	Telephone number 801	- 377 - 5300
name and address o	ame and address (phone number optional) of fany designated agent (e.g., assistant treasure		ee; and the
Full Name of Treasurer	AMES GILBERT		, .
Mailing Address	190 WEST 800 NORTH		
	PROVO	UT	84601 _
Title or Position ¥	CITY	STATE A	ZIP CODE A
TREA	SURER	Telephone number	377 5300
-			• —

CITY A

STATE **△**

ZIP CODE A

FEC Form 1 (Revised 02/2009)

KIMBERLY WILLIAMS

Full Name of Designated

Agent

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Banks or Other Depositories safety deposit boxes or mainta		ttee deposits funds	, holds accounts, rents
Name of Bank, Depository, etc			[ADDITIONAL]
Mailing Address			
	CITY 🗖	STATE	ZIP CODE 🛕
Name of Any Connected Org	anization, Affiliated Committee, Joint Fundraising Rep	resentative, or Lea	[ADDITIONAL] adership PAC Sponsor
		1 1 1 1 1 1	
Mailing Address	190 WEST 800 NORTH STE 100	1 1 1 1 1 1	
	PROVO	UT	84601
elationship:	CITY▲	STATE	ZIP CODE
Connected Organization	Affiliated Committee X Joint Fundraising Repr	esentative Le	adership PAC Sponsor
Designated Agent	1		[ADDITIONAL]
Full Name	<u> </u>		
Mailing Address			
			_
Title or Position ♥	CITY A	STATE&	ZIP CODE A
	Telephon	e number	
Joint Fundraiser Participant			[ADDITIONAL]
1	1 1 1 1 4 1 1 1 1 1 1 1 1 1 1 1 1 FEC	ID number C	



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From: (801) 377-5300 James Gilbert GILBERT & STEWART 190 W. 800 N. STE. 100

PROVO, UT 84601

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SECRETARY OF THE SENATE

232 HART SENATE OFFICE BUILDING

WASHINGTON, DC 20510

8605 07.15

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PRIORITY OVERNIGHT FRI - 15 JUL A2

20510 DC-US



DANA K. MCCALLUM SUPERINTENDENT

HART SENATE OFFICE BUILDING SUITE 232 WASHINGTON, DC 20510-7116 PHONE: (202) 224-0322

United States Senate

OFFICE OF THE SECRETARY

OFFICE OF PUBLIC RECORDS

THE PRECEDING DOCUMENT WAS	S: ·
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UPS	
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PREPARER RA	DATE PREPARED 07-18-
PREPARER	DATE LEGITION

PREPARER_



