FEC FORM 1

STATEMENT OF ORGANIZATION

FORM 1	0	(See instruction	Office use only											
NAME OF COMMITTEE (in	full)	(Check if name s changed)	Example: If typying, type over the lines	12FE4M5										
Merrill Cook fo	or Congress Com	nittee		1 1 1 1 1 1 1										
ADDRESS (number and	street) 631 1	6th Ave												
(Check if address is changed)		ake City		UT L	84103									
			CITY	STATE	ZIP CODE 🛦									
camscook@at					ı									
	DAGE ADDRESS (UE	N.)												
COMMITTEE'S WEB	PAGE ADDRESS (UF	iL)												
														
COMMITTEE'S FAX N	IUMBER													
		J												
2. DATE 0 3	D D / Y	^Y 2 0 0 6 ^Y												
3. FEC IDENTIFICA	TION NUMBER	(C C00315796											
4. IS THIS STATEM	IENT X NEW	(N) OR	AMENDED (A)											
I certify that I have exami	ned this Statement and t	o the best of my knov	vledge and belief it is true, correct a	nd complete	_									
Type or Print Name of	TreasurerC	amille Cook												
Signature of Treasurer	Electronically Filed	by Camille Co	ook	Date 03	28 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y									
NOTE: Submission of fal		•	subject the person signing this Sta	•	of 2 U.S.C. S437g.									
Office Use Only			For further information Federal Election Commis Toll Free 800-424-9530		FEC FORM 1 (Revised 02/2003)									

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5.	TYPE OF COMMITTEE (Check One)	
	(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 ca information below.)	ndidate
	Name of Merrill Cook Candidate	
	Candidate Party Affiliation Office Sought: X House Senate President	State UT District 3
	(c) This committee supports/opposes only one candidate, and is NOT an authorized committee.	
	Name of Candidate L	
		mocratic, publican,etc.) Party.
	(e) This committee is a separate segregated fund	
	(f) This committee supports/opposes more than one Federal candidate, and is NOT a separate segregated fun committee.	d or party
6.	Name of Any Connected Organization or Affiliated Committee	
L		
L		
	Mailing Address	
	CITY≜ STATE♠ Z	IP CODE A
	Relationship	
	Type of Connected Organization:	
	Corporation Corporation w/o Capital Stock Labor Organization	n
	Membership Organization Trade Association Cooperative	

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Write or Type Committee	e Name					
Merrill Cook for	Congress Com	mittee				
7. Custodian of Reco possession of Co		name, address, (phone num nd records.	nber optional), and po	sition of th	ne person in	
Full Name						
Mailing Address						
Title or Position ▼		CITY A	STA		ZIP CO	DE A
			Telephone number			
8. Treasurer: List the name and addres	ne name and add as of any designa	ress (phone number optio ted agent (e.g., assistant tre	nal) of the treasurer of tasurer).	he commi	ttee; and the	
Full Name of Treasurer _	Camille Cook					
Mailing Address		631 16th Ave				
		Salt Lake City		<u>T</u>	84103 _	
Title or Position ♥		CITY A	STA	ATE ▲	ZIP CO	DE A
wi	fe		Telephone number	801	323	0135
Full Name of Designated Agent						
Mailing Address						
Title or Position ♥		CITY A	STA	TE A	ZIP COI	DE A
			Telephone number		,	

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9.	Banks or Other Depositories: List all banks or other depositories in which the committee deposits funds, holds accoursafety deposit boxes or maintains funds.															วนท	ıts,	rer	nts																					
Name of Bank, Depository, etc.																																								
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	Mailing Address									L	L							1			L		L										L	L		L		L		
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