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## STATEMENT OF ORGANIZATION

				Office Use Only
1. NAME OF COMMITTEE (in full)	(Check if name is changed)	Example: If typing, type over the lines.	12FE4M5	
Brian Adams for Co	ongress			
	778 Parkway Dr			
ADDRESS (number and street)				
<ul> <li>(Check if address is changed)</li> </ul>				
	NSLC		UT 84	1054
	CITY <b>A</b>		STATE ▲	ZIP CODE▲
COMMITTEE'S E-MAIL ADDRE	SS			
(Check if address	l brian.adams.ba@gmail.com	ן 		
is changed)				
	Optional Second E-Mail Add			
<ul> <li>(Check if address is changed)</li> <li>2. DATE</li> <li>01</li> </ul>	D / Y Y Y Y 8 2024			
3. FEC IDENTIFICATION N	UMBER ► C co	00864892		
4. IS THIS STATEMENT	NEW (N) OR	AMENDED (A)		
I certify that I have examined the	nis Statement and to the best	of my knowledge and belief it	is true, correct ar	d complete.
Type or Print Name of Treasure	Adams, Airety, and Airety, ,			
Signature of Treasurer Adar	ns, Airety, and Airety, ,		Date 01	/ D D / Y Y Y Y Y 08 2024
NOTE: Submission of false, erron		may subject the person signing t		e penalties of 52 U.S.C. §3010
Office Use Only		For further information of Federal Election Commissio Toll Free 800-424-9530 Local 202-694-1100	ontact:	FEC FORM 1 (Revised 06/2012)

FEC Form 1 (Revised 03/2022) Page 2 TYPE OF COMMITTEE: 5. Candidate Committee: This committee is a principal campaign committee. (Complete the candidate information below.) (a) X This committee is an authorized committee, and is NOT a principal campaign committee. (Complete the candidate (b) information below.) Name of Adams, Brian, Richard, , Candidate State UT Candidate Office DEM House Senate President Party Affiliation Sought: District 02 (c) This committee supports/opposes only one candidate, and is NOT an authorized committee. Name of Candidate Party Committee: (National, State (Democratic, (d) This committee is a or subordinate) committee of the Republican, etc.) Party **Political Action Committee (PAC):** This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected organization is a: (e) Corporation w/o Capital Stock Labor Organization Corporation 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 segregated fund or party 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.)

(g) This committee is an independent expenditure-only political committee (Super PAC).

In addition, this committee is a Lobbyist/Registrant PAC.

(h) This committee is a political committee with both contribution and non-contribution accounts (Hybrid PAC).

In addition, this committee is a Lobbyist/Registrant PAC.

## Joint Fundraising Representative:

(i) This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or more political committees/organizations, at least one of which is an authorized committee of a federal candidate.
 (j) This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or more political committees/organizations, none of which is an authorized committee of a federal candidate.
 Committees Participating in Joint Fundraiser
 1.

С

2.

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Write or Type Committee Name	

## Brian Adams for Congress

6.	Name of Any Connected O	rganization,	Affiliated Cor	mmittee, Joint F	Fundraising Rep	resentative, or Lea	dership PAC Sponsor
	Mailing Address						
			С	ITY 🔺		STATE A	ZIP CODE
	Relationship: Connected	Organization	Affiliated	Organization	Joint Fundraisin	g 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.

Adams, Bri	an, Richard, ,			
Full Name				
Mailing Address	778 Parkway Dr			
	Bountiful		UT 84054	
	CITY		STATE A	ZIP CODE
Title or Position ▼				
Canidate/CEO		Telepho	one number	860 3120

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 of Treasurer	Adams, Airety, and Airety, ,			
Mailing Address	778 Parkway Dr			
	NSLC UT 84054			
	CITY ▲ STATE ▲ ZIP CODE ▲			
Title or Position ▼				
	Image: Image of the second			

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Full Name of Designated Agent	Adams, Brian, , ,	
Mailing Address	778 Parkway Dr	
	Bountiful UT 84054	
	CITY ▲ STATE ▲ ZIP CODE ▲	
Title or Position ▼		
	Telephone number       801       -       860       -       3120	

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.

Zions B	ank		
Mailing Address	870 N Hwy 89, North Salt Lake, UT		
	North Saly Lake City	UT 84054	
	CITY A	STATE A	ZIP CODE ▲
Name of Bank, Depository,	etc.		
Mailing Address			
	CITY 🔺	STATE A	ZIP CODE ▲

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