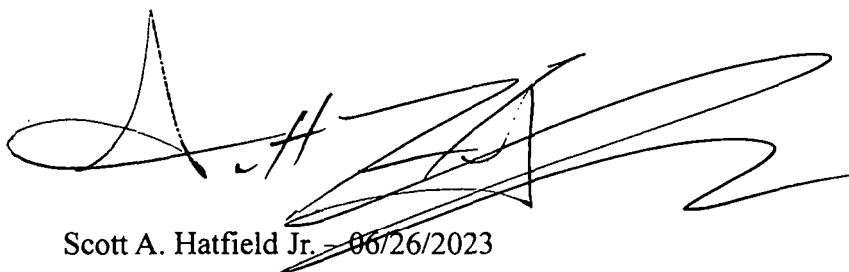


To whom it may concern,

RECEIVED
FEC MAILCENTER

Whenever I filed my FEC FORM 2020 previously and sent it of the FEC my address was input incorrectly by the individual who took my forms in. The original as I have and I believe you have states Herriman, Utah however, whenever I look myself up on the FEC website it states Herrington, Utah. Herrington is not a city in the state of Utah. I have attached an amended form to rectify this issue as I'm sure is proper protocol.

Very Respectfully,



Scott A. Hatfield Jr. - 06/26/2023

FEC
FORM 1

STATEMENT OF ORGANIZATION

RECEIVED
FEC MAILCENTER

2023 JUL -3 AM 8:45
Office Use Only

1. NAME OF
COMMITTEE (in full)

(Check if name
is changed)

Example: If typing, type
over the lines.

12FE4M5

SCOTT FOR UTAH

ADDRESS (number and street)

(Check if address
is changed)

3707 W. SOFT WHISPER WAY

HERRIMAN

CITY ▲

UT

84096-1

STATE ▲

ZIP CODE ▲

COMMITTEE'S E-MAIL ADDRESS

(Check if address
is changed)

Optional Second E-Mail Address

COMMITTEE'S WEB PAGE ADDRESS (URL)

(Check if address
is changed)

06 24 2023

2. DATE

06 24 2023

3. FEC IDENTIFICATION NUMBER ►

C00843318

4. 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.

Type or Print Name of Treasurer:

SCOTT A. HATFIELD JR

Signature of Treasurer

Date

06 24 2023

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to the penalties of 52 U.S.C. §30109.
ANY CHANGE IN INFORMATION SHOULD BE REPORTED WITHIN 10 DAYS.

Office Use Only					For further information contact: Federal Election Commission Toll Free 800-424-9530 Local 202-694-1100	FEC FORM 1 (Revised 03/2022)
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5. TYPE OF COMMITTEE:

Candidate 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.)

Name of Candidate _____

Candidate _____ Office Sought: _____ State _____
Party Affiliation _____ House _____ Senate _____ President _____
District _____

(c) This committee supports/opposes only one candidate, and is NOT an authorized committee.

Name of Candidate _____

Party Committee:

(d) This committee is a (National, State or subordinate) committee of the (Democratic, Republican, etc.) Party

Political Action Committee (PAC):

(e) This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected organization is a:

Corporation Corporation w/o 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 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).

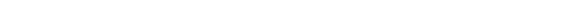
In addition, this committee is a Lobbyist/Registrant PAC.

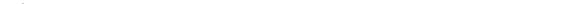
Joint Fundraising Representative:

(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. 

2. 

The diagram illustrates a double-headed screw mechanism. It features two parallel horizontal tracks, each with a series of rectangular blocks. A central vertical support structure is positioned between the two tracks. The top track has a block labeled 'C' at its left end. The bottom track also has a block labeled 'C' at its left end. The blocks are arranged in a staggered pattern along the tracks, with some blocks having small protrusions or notches.

Write or Type Committee Name

6. Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC Sponsor

[REDACTED]

[REDACTED]

Mailing Address

[REDACTED]

[REDACTED]

[REDACTED] - [REDACTED]

CITY ▲

STATE ▲

ZIP CODE ▲

Relationship: Connected Organization Affiliated Organization Joint Fundraising 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.

Full Name

[REDACTED]

Mailing Address

[REDACTED]

[REDACTED]

[REDACTED] - [REDACTED]

CITY ▲

STATE ▲

ZIP CODE ▲

Title or Position ▼

[REDACTED]

Telephone number

[REDACTED] - [REDACTED] - [REDACTED]

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

[REDACTED]

Mailing Address

[REDACTED]

[REDACTED]

[REDACTED] - [REDACTED]

CITY ▲

STATE ▲

ZIP CODE ▲

Title or Position ▼

[REDACTED]

Telephone number

[REDACTED] - [REDACTED] - [REDACTED]

Full Name of
Designated
Agent

Mailing Address

 -

CITY ▲

STATE ▲

ZIP CODE ▲

Title or Position ▼

Telephone number

 - -

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.

Mailing Address

 -

CITY ▲

STATE ▲

ZIP CODE ▲

Name of Bank, Depository, etc.

Mailing Address

 -

CITY ▲

STATE ▲

ZIP CODE ▲

5(i) or (j). Joint Fundraising Participant:

1. _____
2. _____
3. _____
4. _____

FEC ID number

C	_____

FEC ID number

C	_____
C	_____

FEC ID number

C	_____
C	_____

FEC ID number

C	_____
C	_____

6. Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC Sponsor

Mailing Address

Relationship:

CITY ▲

STATE ▲

ZIP CODE ▲

 Connected Organization Affiliated Committee Joint Fundraising Representative Leadership PAC Sponsor

8. Designated Agent: Identify by name, address (phone number – optional)

Full Name

Mailing Address

TITLE OR POSITION ▼

CITY ▲

STATE ▲

ZIP CODE ▲

Telephone Number

_____ - _____ - _____

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.

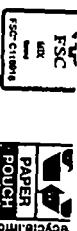
Mailing Address

CITY ▲

STATE ▲

ZIP CODE ▲

PRESS FIRMLY TO SEAL



PRESS FIRMLY TO SEAL

FLAT RATE ENVELOPE
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POSTAL SERVICE**

PRIORITY®

FROM:

Scott Matthew

3707 W. Scott Whispe Way

Herriman, UT 84096

**UNITED STATES
POSTAL SERVICE.**

Retail

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US POSTAGE PAID

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Origin: 84065
06/12/23
4974460165-03

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RDC 04

EXPECTED DELIVERY DAY: 06/29/23

TO: Federal Election Commission

**1050 First Street NE
Washington, DC 20463**



USPS TRACKING® #

9505 5152 4038 3178 9867 04



PS0000100014

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ER
OC

2023 JUL - 3 AM 9:45

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FEDERAL ELECTION COMMISSION

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Federal Election Commission

ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS

The FEC added this page to the end of this filing to indicate how it was received.

<input type="checkbox"/>	Hand Delivered	Date of Receipt
<input type="checkbox"/>	USPS First Class Mail	Date of Receipt
<input type="checkbox"/>	USPS Registered/Certified	Postmarked (R/C)
<input checked="" type="checkbox"/>	USPS Priority Mail	Postmarked 6/27/2023
<input type="checkbox"/>	USPS Priority Mail Express	Postmarked
<input type="checkbox"/>	Postmark Illegible	
<input type="checkbox"/>	No Postmark	
<input type="checkbox"/>	Overnight Delivery Service (Specify):	Shipping Date Date of Receipt Next Business Day Delivery <input type="checkbox"/>
<input type="checkbox"/>	Received via FAX	Date of Receipt
<input type="checkbox"/>	Received via Email	Date of Receipt
<input type="checkbox"/>	Received from Electronic Filing Office	Date of Receipt
<input type="checkbox"/>	Other (Specify):	Date of Receipt or Postmarked
 PREPARER		7/3/2023 DATE PREPARED

(4/2023)