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STATEMENT OF **FEC ORGANIZATION** FORM 1 Office Use Only NAME OF (Check if name Example: If typing, type 12FE4M5 COMMITTEE (in full) is changed) over the lines. Congress For Idaho Law Protected ADDRESS (number and street) 141 N 6th (Check if address is changed) Pocatello 82301 ID CITY A STATE A ZIP CODE A COMMITTEE'S E-MAIL ADDRESS Idaho.Law@yahoo.com (Check if address is changed) Optional Second E-Mail Address COMMITTEE'S WEB PAGE ADDRESS (URL) (Check if address is changed) DATE 2020 C00739623 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. Law, Idaho, , , Type or Print Name of Treasurer Law, Idaho,,, [Electronically Filed] 02 2020 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

FEG	C <b>Fo</b>	rm 1 (Revised 02/2009)	Page 2				
		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. (Compinformation below.)	lete the candidate				
Name o		Law, Idaho, , ,					
Candida Party At		on Ecl Office Sought: X House Senate President	State ID District 02				
(c)		This committee supports/opposes only one candidate, and is NOT an authorized committee.					
Name o							
Party	Com	nmittee:  (National, State	Democratic,				
(d)		· · · · · · · · · · · · · · · · · · ·	epublican, etc.) Party.				
Politic	al A	ction 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.)					
Joint F	und	raising Representative:					
(g)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for two committees/organizations, at least one of which is an authorized committee of a federal candidate.	o or more political				
(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.	or more political				
(	Comi	mittees Participating in Joint Fundraiser					
-	1.	FEC ID number C					
2	2.	FEC ID number					
(	3.	FEC ID number					
	1						

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Write or Type Committee N		
Congress For	r Idaho Law	
	ed Organization, Affiliated Committee, Joint Fundraising Representative,	or Leadership PAC Sponsor
NONE		
Mailing Address		
	CITY STATE	ZIP CODE
Relationship: Conne	ected Organization Affiliated Committee Joint Fundraising Representa	tive Leadership PAC Sponsor
Custodian of Records: books and records.	Identify by name, address (phone number optional) and position of the pe	erson in possession of committee
Law, I Full Name	daho, , ,	
	Protected	
Mailing Address	141 N. 6th	
	Pocatello	83201
Title or Position	CITY STATE	ZIP CODE
Treasure		208 909 - 9690
. <b>Treasurer:</b> List the name any designated agent (e.	e and address (phone number optional) of the treasurer of the committee; g., assistant treasurer).	and the name and address of
Full Name Law, Io	daho, , ,	
Mailing Address	Protected	
	141 N. 6th	
	Pocatello	83201
Title or Position Treasure	CITY STATE	ZIP CODE
	Telephone number	

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	(		, age i
Full Name of Designated Agent			
Mailing Address			
	CITY	STATE	ZIP CODE
Title or Position		Telephone number	
safety deposit bo	<b>Depositories:</b> List all banks or other deposito xes or maintains funds.  Depository, etc.	ries in which the committee deposits f	urius, noias accounts, rents
	NA , , , , , , , , , , , , , , , , , , ,		
Mailing Address			
Mailing Address		ID	83201
Mailing Address	NA	ID STATE	
Mailing Address  Name of Bank, I	Pocatello		83201
	Pocatello	STATE	83201
	Pocatello CITY Depository, etc.	STATE	83201
Name of Bank, I	Pocatello CITY Depository, etc.	STATE	83201
Name of Bank, I	Pocatello CITY Depository, etc.	STATE	83201

## : 97 'A = G7 9 @ G B9 CI G'H9 LH'F9 @ 5 H98 'HC'5 'F9 DCF HZ G7 < 98 I @ 'CF' + H9 A = N5 H= CB

Form/Schedule: F1N Transaction ID:

When and if we receive or spend money we will amend said documents

Form/Schedule: Transaction ID: