

**FEC
FORM 1****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

Mighty Conservatives for America

ADDRESS (number and street)

PO Box 970961

☐ (Check if address is changed)

Orem

CITY ▲

UT

STATE ▲

84097

ZIP CODE ▲

COMMITTEE'S E-MAIL ADDRESS

☐ (Check if address is changed)

shane.m.gunnerson@gmail.com

Optional Second E-Mail Address

shaneg7991@gmail.com

COMMITTEE'S WEB PAGE ADDRESS (URL)

☐ (Check if address is changed)

www.mcapac.org

2. DATE

MM / DD / YYYY
09 / 21 / 2020

3. FEC IDENTIFICATION NUMBER ►

C C00759001

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 Gunnerson, Shane, Michael, Mr.,

Signature of Treasurer Gunnerson, Shane, Michael, Mr.,

[Electronically Filed]









Date

MM / DD / YYYY
02 / 18 / 2021

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
Use
OnlyFor further information contact:
Federal Election Commission
Toll Free 800-424-9530
Local 202-694-1100**FEC FORM 1**
(Revised 06/2012)

1.  FEC ID number **C** 
2.  FEC ID number **C** 
3.  FEC ID number **C** 
4.  FEC ID number **C** 

Write or Type Committee Name

Mighty Conservatives for America

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

NONE

Mailing Address

CITY

STATE

ZIP CODE

Relationship: ☐ Connected Organization ☐ Affiliated Committee ☐ 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

Gunnerson, Shane, Michael, Mr.,

Mailing Address

PO Box 970961

Orem

UT

84097

Title or Position

CITY

STATE

ZIP CODE

Telephone number

832

612

0206

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

Gunnerson, Shane, Michael, Mr.,

Mailing Address

PO Box 970961

Orem

UT

84097

Title or Position
Partner

CITY

STATE

ZIP CODE

Telephone number

832

612

0206

Full Name of
Designated
Agent

Purinton, Katie, , ,

Mailing Address

PO Box 970961

Orem

CITY

UT

STATE

84097

ZIP CODE

Title or Position

Partner

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.

America First Credit Union

Mailing Address

P.O. Box 9199

Ogden

CITY

UT

STATE

84409

ZIP CODE

Name of Bank, Depository, etc.

Mailing Address

CITY

STATE

ZIP CODE

: 97 `A=G79 @G B9CI G`H9LH`F9 @5 H98 `HC`5 `F9DCFHŽG7 <98I @`CF`+H9A=N5HCB
.

Form/Schedule: F1A
Transaction ID :

Fixing treasurer tile

Form/Schedule:
Transaction ID:

5(g) or (h). **Joint Fundraising Participant:**

1.

2.

3.

4.

FEC ID number

FEC ID number

FEC ID number

FEC ID number

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)

Gunnerson, Shane, Michael, ,

Full Name

Mailing Address

PO Box 970961

Orem UT 84097 -

TITLE OR POSITION ▼

CITY ▲

STATE ▲

ZIP CODE ▲

Partner

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 ▲