STATEMENT OF FORMATION

Political Action Committee W.S. 22-25-101(b)

1. Who must submit this form?

Two or more persons organized and associated for the purpose of raising, collecting or spending money to influence the election or defeat of county/local candidates, to support candidate's committees, political parties, for support or opposition to any local initiative or referendum petition drive or for the adoption or defeat of any local ballot proposition.

New Committee Name: Invest In Sheridan County PAC		Date Committee Formed: 10/23/24	
Mailing Address: PO Box 6698		Phone Number: 307.737.2679	
	(Street Address) Sheridan, WY 82801	Website:	
_	(City, State, Zip)		s:_investinsheridancounty@gmail.co
Name of Chairman:		Name of Treasurer:	
Chairman Address:	2760 Coffeen Ave	Treasurer Address:_	
	(Street Address) Sheridan, WY, 82801	_	(Street Address) Sheridan, WY, 82801
-	(City, State, Zip)		(City, State, Zip)
	(*Note: The chairman and treas	surer must he senarate ind	tividuals.)
After an election X For the adoption	idates who support the following to defray campaign expenses fo or defeat of the following ballot of, or opposition to, the following	r the following candidat proposition: Ballot Prop	osition No. 1 - Cap Tax n petition drive:
true, correct, an	ave examined this statement a	nd, to the best of my k	nowledge and belief, it is October 23, 2024
Agnature o	Chairman or Treasurer		Date
5. Filing Office File: Office of y O Plea		tions/Docs/WYCounty	Clerks.pdf for office
		EU EB	
		Sheridan County Elec	tions Revised 4/2021

EDA SCHUNK THOMPSON, CLERK