

FEC FORM 1

STATEMENT OF ORGANIZATION

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FEC Office Use Only FEDERAL CENTER

1. NAME OF COMMITTEE (in full) (Check if name is changed) Example: If typing, type over the lines.

12FE4M5

Dr. Shelley Shoemaker for US Congress

ADDRESS (number and street)

1108 Highway 535 Back

(Check if address is changed)

Seminary

CITY

MS

STATE

39479-0000

ZIP CODE

COMMITTEE'S E-MAIL ADDRESS

(Check if address is changed)

b.oinck@aol.com

Optional Second E-Mail Address

bimamom32@gmail.com

COMMITTEE'S WEB PAGE ADDRESS (URL)

(Check if address is changed)

Sites.google.com/site/drshelleyshoemakerforuscongress

2. DATE

06 20 2014

3. FEC IDENTIFICATION NUMBER

C

4. IS THIS STATEMENT NEW (N) OR AMENDED (A)



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

Dr. Shelley Shoemaker

Signature of Treasurer

[Handwritten Signature]

Date

06 20 2014

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 Only

For further information contact: Federal Election Commission Toll Free 800-424-9530 Local 202-694-1100

FEC FORM 1 (Revised 06/2012)

14031251169

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 Dr. Shelley Shoemaker

Candidate Party Affiliation REF Office Sought: House Senate President State MS District 02

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

Name of Candidate Dr. Shelley Shoemaker

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.)

Joint Fundraising Representative:

- (g) 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.
- (h) 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.	<input type="checkbox"/>	FEC ID number	<input type="checkbox"/> C <input type="checkbox"/>
2.	<input type="checkbox"/>	FEC ID number	<input type="checkbox"/> C <input type="checkbox"/>
3.	<input type="checkbox"/>	FEC ID number	<input type="checkbox"/> C <input type="checkbox"/>
4.	<input type="checkbox"/>	FEC ID number	<input type="checkbox"/> C <input type="checkbox"/>

14031251170

Write or Type Committee Name

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

[Empty grid lines for organization name]

Mailing Address

[Empty grid lines for mailing address]

CITY

STATE

ZIP CODE

Relationship: Connected Organization Affiliated Committee Joint Fundraising Representative Leadership PAC Sponsor

14031251171

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

Dr. Shelley Marie Shoemaker

Mailing Address

P.O. Box 171

108 Hwy 535 Back

Seminary

MS

39479-0273

Title or Position

CITY

STATE

ZIP CODE

Congress Candidate

Telephone number

(601)-722-0025

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

Dr. Shelley Marie Shoemaker

Mailing Address

P.O. Box 171

108 Hwy 535 Back

Seminary

MS

39479-0273

Title or Position

CITY

STATE

ZIP CODE

Congress Candidate

Telephone number

(601)-722-0025

14031251172

Full Name of Designated Agent

Dr. Shelley Marie Shoemaker

Mailing Address

PO Box 171

108 Hwy 535 Back

Seminary

CITY

MS STATE

39479-0273 ZIP CODE

Title or Position

Congress Candidate

Telephone number

601-722-0025

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.

Priority One Bank

Mailing Address

217 West Main Street

PO Box 97

Seminary

CITY

MS STATE

39479-0000 ZIP CODE

Name of Bank, Depository, etc.

Mailing Address

CITY

STATE

ZIP CODE

14031251173

Seminary Chiropractic
Shelley Shoemaker D.C.
P O Box 273
108 Highway 535 (back)
Seminary, MS 39479




Public Records Office
Federal Election Commission
999 E Street, N.W.
Washington, D.C. 20463

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<input checked="" type="checkbox"/> Postmark Illegible	
<input type="checkbox"/> No Postmark	
<input type="checkbox"/> Overnight Delivery Service (Specify): Next Business Day Delivery <input type="checkbox"/>	Shipping Date
<input type="checkbox"/> Received from House Records & Registration Office	Date of Receipt
<input type="checkbox"/> Received from Senate Public Records Office	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
(8/2013)

6/26/14
DATE PREPARED

14031251174