2019:09:25:0%:00295219

FEC FORM 1

STATEMENT OF ORGANIZATION

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2019SEP 25 ny AM 10: 48

1. NAME OF COMMITTEE (in full)	(Check if name is changed)	Example: If typing, type over the lines.	12FE4M5	
Reeder for Congress				
		1 1 1 1 1 1 1 1		
ADDRESS (number and street)	PO Box 843			
(Check if address is changed)				
- ,	Arnolds Park / / / / / CITY A		[IA 51,331 STATE ▲	ZIP CODE A
COMMITTEE'S E-MAIL ADDRES	SS			
(Check if address is changed)	steve@reederforcongres	s.com		
io sitaligody	Optional Second E-Mail Add	ress		
				!
COMMITTEE'S WEB PAGE ADD	DRESS (URL)			
(Check if address is changed)	www.reederforcongress.c	com .		
	1,,,,,,,,,,			
·				
2. DATE 09 23	2019			
3. FEC IDENTIFICATION NU	IMBER ▶ C			
4. IS THIS STATEMENT X	NEW (N) OR	AMENDED (A)		
I certify that I have examined th	is Statement and to the best	of my knowledge and belief it	is true, correct and com	plete.
Type or Print Name of Treasurer	Mary Jo Schettler			•
Signature of Treasurer	lary So Schet	der	M M / D Date 09 23	0 / Y Y Y Y 2019
NOTE: Submission of false, errone		nay subject the person signing t		Ities of 52 U.S.C. §30109
Office Use Only		For further information of Federal Election Commission Toll Free 800-424-9530	on FE'	C FORM 1 vised 06/2012)

5.

	COMMITTEE Committee:						
(a) X	This committee is a	principal campaig	n com	mittee. (Cor	nplete the candidate in	formation below	N.)
(b)	This committee is an authorized committee, and is NOT a principal campaign committee. (Complete the candidate information below.)						
Name of Candidate	Steven Reeder		1 1	11-1-1		<u> </u>	
Candidate Party Affiliati	_{ion} Rep	Office Sought:	×	House	Senate	President	State IA District 04
(c)	This committee supp	orts/opposes only	one o	candidate, a	nd is NOT an authorize	ed committee.	
Name of Candidate			1 1			1 1 1 1	
Party Cor	nmittee:						
(d)	This committee is a		•	tional, State subordinate)	committee of the		(Democratic, Republican, etc.) Party.
Political A	Action Committee (PAC):					
(e)	This committee is a	separate segrega	ted fur	nd. (Identify	connected organization	on line 6.) Its c	onnected organization is a:
	Corporation			Corp	oration w/o Capital Sto	ck	Labor Organization
	Membership	Organization		Trade	e Association		Cooperative
	In ad	dition, this commit	tee is a	a Lobbyist/R	egistrant PAC.		
(f)	This committee supposemmittee. (i.e., nonc			n one Feder	al candidate, and is No	OT a separate	segregated fund or party
	In addition, th	is committee is a	Lobbyi	st/Registran	t PAC.		,
	In addition, th	is committee is a	Leader	rship PAC. (Identify sponsor on line	6.)	
Joint Fund	draising Represen	tative:	•				
(g)					penses and disburses n orized committee of a fe		
(h)					penses and disburses n committee of a federal o		two or more political
Com	nmittees Participating	j in Joint Fundr	aiser				
1.					FEC ID nu	mber C	
2.					FEC ID nu	mber C	
3.					FEC ID nu	mber C	
4.					FEC ID nur	mber C	

Write or Type Committee Name

٧٠	vrite or Type Committee Name		`			
6.	Name of Any Connected O	rganization, Affiliated	Committee, Joint F	undraising Repr	esentative, or Leade	ership PAC Sponsor
L		<u> </u>		1		
L						
	Mailing Address					
			CITY		STATE	ZIP CODE
	Relationship: Connected	Organization Affili	ated Committee .	Joint Fundraising	Representative	Leadership PAC Sponsor
	Custodian of Records: Iden	tify by name, address	(phone number opi	tional) and positi	on of the person in p	oossession of committee
	books and records.	• •		, .		•
	Full Name Mary, Jo S	chettler				
	Mailing Address	PO Box 843	L			
		Arnolds Park			IA 5133	1
	Title or Position		CITY		STATE	ZIP CODE
	Treasurer			Telephone num	ber 712 - [392 [41,07,
3.	Treasurer: List the name and any designated agent (e.g., a		ber optional) of the	treasurer of the	committee; and the	name and address of
	Full Name of Treasurer Mary Jo S	chettler	1 1 1 1 1			
	Mailing Address	PO Box 843	- 			
	·	Arnolds Park			[IA] [51,331	
	Title or Position		CITY		STATE	ZIP CODE
1	Treasurer			Telephone num	ber 712 - [392 [41,07

FEC Form 1 (Rev	vised 02/2009)		Page 4
			·
Full Name of Designated Agent			
Mailing Address			
	·CITY	STATE	ZIP CODE
Title or Position			
	Т	elephone number	
safety deposit boxes or r Name of Bank, Deposito		n the committee deposits funds, no	oids accounts, rents
Mailing Address	46 UŞ-7,1		
Mailing Address			
	Arnolds Park	[IA] [51 ₃ 3	1
	CITY	STATE	ZIP CODE
Name of Bank, Deposito	ry, etc.		,
<u>لــــا</u>			
Mailing Address			
		 	
	CITY	STATE	ZIP CODE

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FEC Form 1S (Revised 02/2017)

Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

5(g) or (h). Joint Fundraisi n	g Participant:		
1		FEC ID number C	
3.		FEC ID number C	·
4.		FEC ID number C	
6. Name of Any Connected	Organization, Affiliated Committee, Joint Fundrais	sing Representative, o	Leadership PAC Sponsor
		111111	
' Mailing Address			
Relationship:	CITY A	STATE ▲	ZIP CODE A
Connected	d Organization Affiliated Committee oint Fu	undraising Representative	Leadership PAC Sponsor
8. Designated Agent: Identify	y by name, address (phone number – optional)		
Mailing Address		 	· · · · · · · · · · · · · · · · · · ·
		. 1 1 . 1	1 1_1 1
TITLE OR POSITION	CITY ▲	STATE ▲	ZIP CODE A
TITLE OR POSITION		STATE ▲	ZIP CODE A
9. Banks or Other Deposito safety deposit boxes or ma	Tele	phone Number	
9. Banks or Other Deposito safety deposit boxes or many Name of Bank, Depository, etc.	ries: List all banks or other depositories in which the aintains funds.	phone Number	
9. Banks or Other Deposito safety deposit boxes or ma	ries: List all banks or other depositories in which the aintains funds.	phone Number	
9. Banks or Other Deposito safety deposit boxes or many Name of Bank, Depository, etc.	ries: List all banks or other depositories in which the aintains funds.	phone Number	

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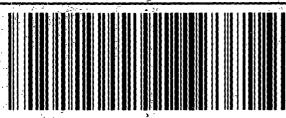
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