

FEC
FORM 1

STATEMENT OF
ORGANIZATION

RECEIVED

2012 FEB 22 AM 7:44

Office Use Only

FEC MAIL CENTER

12FE4M5

1. NAME OF
COMMITTEE (in full)

(Check if name
is changed)

Example: If typing, type
over the lines.

Shelli Yoder for Congress

ADDRESS (number and street)

704 W. 3rd St.

(Check if address
is changed)

Bloomington

IN

47404 - 5000

CITY

STATE

ZIP CODE

COMMITTEE'S E-MAIL ADDRESS (Please provide only one e-mail address)

(Check if address
is changed)

info@shellyoderforcongress.com

COMMITTEE'S WEB PAGE ADDRESS (URL)

(Check if address
is changed)

www.shellyoderforcongress.com

2. DATE

02 15 2012

3. FEC IDENTIFICATION NUMBER

C

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

Sarah Ryterband

Signature of Treasurer

Sarah Ryterband

Date

02 15 2012

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 02/2009)

12030744461

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 Shelli Yoder

Candidate Party Affiliation Dem Office Sought: House Senate President State _____ District _____

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

Name of Candidate _____

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 Fundraisor

1. _____ FEC ID number: C
2. _____ FEC ID number: C
3. _____ FEC ID number: C
4. _____ FEC ID number: C

12030744482

Write or Type Committee Name

Shelli Yoder for Congress

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

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 **Joshua E. Perry**

Mailing Address **4625 E. Sheffield Dr.**

Bloomington **IN** **47408** - **3137**

Title or Position CITY STATE ZIP CODE

Assistant Campaign Manager Telephone number **812** - **272** - **8822**

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 **Sarah Ryterband**

Mailing Address **820 W. 2nd St.**

Bloomington **IN** **47403** - **2213**

Title or Position CITY STATE ZIP CODE

Treasurer Telephone number **812** - **333** - **9139**

12030744483

Full Name of Designated Agent

Joshua E. Perry

Mailing Address

4625 E. Sheffield Dr.

Bloomington

CITY

IN

STATE

47408

ZIP CODE

-3137

Title or Position

Assistant Campaign Manager

Telephone number

812 - 272 - 8822

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.

IU Credit Union

Mailing Address

P.O. Box 368

Bloomington

CITY

IN

STATE

47402

ZIP CODE

-0368

Name of Bank, Depository, etc.

Mailing Address

CITY

STATE

ZIP CODE

1203074484

Federal Election Commission
ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS
The FEC added this page to the end of this filing to indicate how it was received.

Hand Delivered Date of Receipt

USPS First Class Mail Postmarked
2/17/12

USPS Registered/Certified Postmarked (R/C)

USPS Priority Mail Postmarked
Delivery Confirmation™ or Signature Confirmation™ Label

USPS Express Mail Postmarked

Postmark Illegible

No Postmark


Overnight Delivery Service (Specify): Shipping Date
Next Business Day Delivery

Received from House Records & Registration Office Date of Receipt

Received from Senate Public Records Office Date of Receipt

Received from Electronic Filing Office Date of Receipt

Other (Specify): Date of Receipt or Postmarked


PREPARER
(3/2005)

2/22/12
DATE PREPARED

1203074485