			the second s
	FEC FORM 1	STATEMENT OF ORGANIZATION	RECEIVED FEC MAIL CENTER 2015 OCT 19 PM 1:49 Office Use Only
	1. NAME OF COMMITTEE (in ful	05	
~~^	Ulahn Sch	iers for President	
)	ADDRESS (number and s	treet) 12205 29th St	
, 1 	(Check if addr is changed)	ress	
		Rice hate	STATE STATE STATE
. 🤉 - 1	COMMITTEE'S E-MAIL	ADDRESS	
	(Check if addr is changed)	Optional Second E-Mail Address	
03	ł		
000	COMMITTEE'S WEB PA (Check if addr is changed)		
290 7			
6	2. DATE	' i'ð žól 5	
	3. FEC IDENTIFICAT		
	4. IS THIS STATEMEN		ED (A)
	l certify that I have exan	nined this Statement and to the best of my knowledge an	d belief it is true, correct and complete.
) Type or Print Name of Ti	reasurer John Schied	5
	Signature of Treasurer	Job dehios	Date 10 13 20 15
	NOTE: Submission of false	e, erroneous, or incomplete information may subject the perso ANY CHANGE IN INFORMATION SHOULD BE REI	n signing this Statement to the penalties of 52 U.S.C. §30109. PORTED WITHIN 10 DAYS.
	୦ffice ଏse Only-	For further inf Federal Electio Toll Free 800-4 Local 202-694-	24-9530 (Revised 06/2012)

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FEC Form 1 (Revised 02/2009)

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5.			COMMITTEE e Committee:
	(a)	X	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.)
	Nam Cano	e of didate	John Schiess
		didate / Affiliat	ion 60 P Office Sought: House Senate X President District
	(c)		This committee supports/opposes only one candidate, and is NOT an authorized committee.
	Nam Cano	e of didate	
	Par	ty Con	nmittee:
,	(d)	k i The Second	(National, State (Democratic, This committee is a or subordinate) committee of the Republican, etc.) Party.
	Poli	tical A	ction 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
		۲. ۲	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.)
	Join	t Func	Iraising 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.
I	(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.
		Com	mittees Participating in Joint Fundraiser
		1.	FEC ID number
		` 2.	FEC ID number C
		3.	FEC ID number
		4.	
1	٢	•	

Write or Type Committee Nan		President
6. Name of Any Connected	Organization, Affiliated Committee, Joint Fundraising Representa	tive, or Leadership PAC Sponsor
Mailing Address		
Contact }	CITY STAT	entative
Custodian of Records: Ide	ed Organization Affiliated Committee Joint Fundraising Repres	entative Leadership PAC Spon
Custodian of Records: Ide	Affiliated Committee Joint Fundraising Repres	entative Leadership PAC Spon
Custodian of Records: Ide	ed Organization Affiliated Committee Joint Fundraising Repres	entative Leadership PAC Spon
Full Name	Affiliated Committee Joint Fundraising Repres	entative Leadership PAC Spon
Full Name	Affiliated Committee Joint Fundraising Repres	entative Leadership PAC Spon
Full Name	ed Organization Affiliated Committee Joint Fundraising Representify by name, address (phone number optional) and position of the Schicos	Leadership PAC Spon

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Full Name of Treasurer	nn Schies		
Mailing Address	2205 29th of	<u></u>	
	Rice Late	<u> </u>	1548681-1
, Title or Position	CITY	STATE	ZIP CODE
Treasure	6	Telephone number	08-692-7305

FEC Form 1 (Revised 02/2009)

Page 4

Full Name of Designated Agent	<u> </u>	1	<u> </u>	_ _	1				L	_1_	 <u> </u>	1							1			_1_	L	_[<u></u>		_1_		[_1	<u> </u>				<u> </u>
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	CITY																	ST/	ATE			-			Z	IP	co	DE							
Title or Position																																			
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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.

Community Bank of Northern Wisconsin 1 1204 W trapp Mailing Address Rice Late 868 1657 51 CITY STATE ZIP CODE

Name of Bank, Depository, etc.

,			
Mailing Address			
ì	CITY	STATE	ZIP CODE
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9.



Federal Election Commiss ENVELOPE REPLACEMENT PAGE FOR INC The FEC added this page to the end of this filing to i	OMING DOCUMENTS
Hand Delivered	Date of Receipt
Postmarked USPS First Class Mail	Date of Receipt
USPS Registered/Certified	Postmarked (R/C)
USPS Priority Mail	Postmarked
	Postmarked
USPS Priority Mail Express	
Postmark Illegible	
No Postmark	
	Ground 10/14/15
Next	Business Day Delivery
Received from House Records & Registration Office	Date of Receipt ce
Received from Senate Public Records Office	Date of Receipt
Received from Electronic Filing Office	Date of Receipt
D Other (Specify):	ate of Receipt or Postmarked
A	10/19/15
PREP A RER (3/2015)	DATE PREPARED