Only

STATEMENT OF

PAGE 1 / 4

FEC ORGANIZATION FORM 1 Office Use Only NAME OF (Check if name Example: If typing, type 12FE4M5 COMMITTEE (in full) is changed) over the lines. Schock for Congress PO Box 10555 ADDRESS (number and street) (Check if address is changed) Peoria 61612 IL CITY A STATE A ZIP CODE A COMMITTEE'S E-MAIL ADDRESS aaronschock@aol.com (Check if address is changed) Optional Second E-Mail Address COMMITTEE'S WEB PAGE ADDRESS (URL) (Check if address is changed) DATE 07 2019 C00437756 FEC IDENTIFICATION NUMBER > 3. X OR IS THIS STATEMENT NEW (N) 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. Schock, Aaron, , , Type or Print Name of Treasurer Schock, Aaron, , , [Electronically Filed] 06 2019 Signature of Treasurer Date 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 For further information contact: FEC FORM 1 Federal Election Commission Use (Revised 06/2012)

Toll Free 800-424-9530

Local 202-694-1100

FEC Form 1 (Revised 02/2009)	Page 2
TYPE OF COMMITTEE Candidate Committee:	
(a) This committee is a principal campaign committee. (Complete the candidate information	n below.)
(b) This committee is an authorized committee, and is NOT a principal campaign committee information below.) Name of Schock, Aaron, Jon, Mr.,	эе. (Complete the candidate
Candidate Office	State IL sident District 18
(c) This committee supports/opposes only one candidate, and is NOT an authorized comm	nittee.
Name of Candidate	
Party Committee: (National, State	(Democratic,
(d) This committee is a or subordinate) committee of the	Republican, etc.) Party.
Political Action Committee (PAC):	
(e) This committee is a separate segregated fund. (Identify connected organization on line 6	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 ser committee. (i.e., nonconnected committee)	parate segregated fund or party
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 proced committees/organizations, at least one of which is an authorized committee of a federal ca	•
(h) This committee collects contributions, pays fundraising expenses and disburses net proceed committees/organizations, none of which is an authorized committee of a federal candidate.	
Committees Participating in Joint Fundraiser	
1. FEC ID number	
2. FEC ID number	
3.	
4.	

	1.00(0000)	
FEC Form 1 (Revise		Page 3
Write or Type Committee No		
Schock for Co	_	
6. Name of Any Connecte	ed Organization, Affiliated Committee, Joint Fundraising Representative, or Le	adership PAC Sponsor
Schock Victory Com	nmittee	
Mailing Address	PO Box 10555	
	Peoria	612
	CITY STATE	ZIP CODE
Relationship: Conne	ected Organization Affiliated Committee X Joint Fundraising Representative	Leadership PAC Sponsor
Custodian of Records: books and records.	Identify by name, address (phone number optional) and position of the person	in possession of committee
Full Name		
Mailing Address		
Title or Position	CITY STATE	ZIP CODE
	Telephone number	
3. Treasurer: List the name any designated agent (e.	and address (phone number optional) of the treasurer of the committee; and tg., assistant treasurer).	he name and address of
Full Name Schock of Treasurer	k, Aaron, , ,	
Mailing Address	PO Box 10555	
	Peoria	612
Title on Decision	CITY STATE	ZIP CODE
Title or Position Treasurer		- 1777

FEC Forr	n 1 (Revised 02/2009)	Page 4
Full Name of Designated	I	
Agent		
Mailing Address		
	CITY STATE 2	ZIP CODE
Title or Position		1 1
		accounts, rents
safety deposit be	Depository, etc. Citizens Equity First Credit Union 5401 W Dirkson Pkwy Peoria	
safety deposit be Name of Bank,	Depository, etc. Citizens Equity First Credit Union 5401 W Dirkson Pkwy Peoria IL 61607	
safety deposit be Name of Bank,	Depository, etc. Citizens Equity First Credit Union 5401 W Dirkson Pkwy Peoria IL 61607	ZIP CODE
safety deposit be Name of Bank,	Depository, etc. Citizens Equity First Credit Union 5401 W Dirkson Pkwy Peoria CITY STATE	
safety deposit be Name of Bank, Mailing Address	Depository, etc. Citizens Equity First Credit Union 5401 W Dirkson Pkwy Peoria CITY STATE	
safety deposit be Name of Bank, Mailing Address	Depository, etc. Citizens Equity First Credit Union 5401 W Dirkson Pkwy Peoria CITY STATE	
Name of Bank, Mailing Address Name of Bank,	Depository, etc. Citizens Equity First Credit Union 5401 W Dirkson Pkwy Peoria CITY STATE	
Name of Bank, Name of Bank, Mailing Address	Depository, etc. Citizens Equity First Credit Union 5401 W Dirkson Pkwy Peoria CITY STATE	