Image# 201804099104794345				PAGE 1 / 4
FEC FORM 1	STATEME ORGANIZ			
			0	Office Use Only
I. NAME OF COMMITTEE (in full)	(Check if name is changed)	Example: If typing, type over the lines.	12FE4M5	
Shannon Pierce	for Congress			
DDRESS (number and street)	21 Germander Court			
(Check if address is changed)	1			
lis changed)	Greenville		SC 29	615
			STATE A	
COMMITTEE'S E-MAIL ADDRE	ISS			
(Check if address	_davidandjana@charter	r.net		
is changed)				
	Optional Second E-Mail Ad	dress		
(Check if address is changed)				
2. DATE 03	D / Y Y Y Y 0 2018			
B. FEC IDENTIFICATION N	UMBER ► C C	:00673020		
. IS THIS STATEMENT	NEW (N) OR	× AMENDED (A)		
certify that I have examined t	his Statement and to the best	of my knowledge and belief i	t is true, correct an	d complete.
		-		
ype or Print Name of Treasure	Pr Moore, David, , ,			
Signature of Treasurer Moon	re, David, , ,	[Electronically Filed]	Date 04	/ D D / Y Y Y 09 2018
IOTE: Submission of false, erron		may subject the person signing		e penalties of 2 U.S.C. §437
Office		For further information		FEC FORM 1
Use Only		Federal Election Commiss Toll Free 800-424-9530 Local 202-694-1100		(Revised 06/2012)

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5.			DMMITTEE	
	Cano	didate	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. (Com information below.)	plete the candidate
	Name Candi		Pierce, Donna, Shannon, ,	
	Candie Party	date Affiliatio	on REP Office Sought: K House Senate President	State SC District 04
	(C)		This committee supports/opposes only one candidate, and is NOT an authorized committee.	
	Name Candie			
	Party	y Com	mittee:	
	(d)			(Democratic, Republican, etc.) Party.
	Politi	ical A	ction Committee (PAC):	
	(e)		This committee is a separate segregated fund. (Identify connected organization on line 6.) Its con	nected 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 se committee. (i.e., nonconnected committee)	gregated 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	Fund	raising Representative:	
	(g)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for tw committees/organizations, at least one of which is an authorized committee of a federal candidate.	vo or more political
	(h)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for two committees/organizations, none of which is an authorized committee of a federal candidate.	o or more political
		Com	nittees Participating in Joint Fundraiser	
		1.	FEC ID number	
		2.	FEC ID number	
		3.	FEC ID number	
		4.	FEC ID number C	

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Write or Type Committee Name

Shannon Pierce for Congress

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

N																																
	Mailing Address																															
																			L							<u> </u>			·L			
									СП	ΓY										STA	ΤE					ZI	IP (CO	DE			
	Relationship:	Connecte	d Org	ganiz	atior	1	Aff	filiat	ed (Con	nmitt	ee		Jo	oint I	Fun	drai	sinç	Re	epre	eser	ntati	ive		Le	ade	ersł	hip	PA	.C S	Spor	sor
7.	Custodian of Rebooks and record		ntify I	by n	ame,	ado	lres	s (p	hor	ne r	numl	ber	0	ptic	onal) ar	nd p	osit	ion	of	the	pe	rsor	n in	ро	sse	essi	ion	of	con	nmit	tee
		Moore, Da	avid, ,	, ,																												.
	Full Name																															
			21	Gor	man	nor (COLIN	+																								
	Mailing Address		21	Ger	mano		Cour	t																								

	Greenville		29615
Title or Position	CITY	STATE	ZIP CODE
Treasurer		Telephone number	864 918 2785

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	Moore, David, , ,		
Mailing Address	21 Germander Court		
			29615
	CITY	STATE	ZIP CODE
Title or Position Treasurer		Telephone number	864 918 2785

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Full Name of Designated Agent	Farmer, Frank, Hunter, , Image: Im
Mailing Address	36 Wedgewood Drive
	Greenville SC 29609
	CITY STATE ZIP CODE
Title or Position	rer Telephone number 864 - 752 - 8167

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.

Mailing Address	PO Box 17465	
	Greenville	SC 29606
	CITY	STATE ZIP CODE
Name of Bank, D	epository, etc.	
Mailing Address		
	CITY	STATE ZIP CODE