Only

STATEMENT OF

PAGE 1 / 4

FEC ORGANIZATION FORM 1 Office Use Only NAME OF Example: If typing, type (Check if name 12FE4M5 COMMITTEE (in full) is changed) over the lines. Shawn Lassiter for Congress PO Box 120471 ADDRESS (number and street) (Check if address is changed) Arlington 76012 TX CITY A STATE A ZIP CODE A COMMITTEE'S E-MAIL ADDRESS readyornotpac@gmail.com (Check if address is changed) Optional Second E-Mail Address |brandon@bisonstrategies.net COMMITTEE'S WEB PAGE ADDRESS (URL) www.shawnlassiterforcongress.com (Check if address is changed) DATE 30 2021 C00770016 FEC IDENTIFICATION NUMBER > 3. X 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. Walker Ross, Jackie, , , Type or Print Name of Treasurer Walker Ross, Jackie, , , [Electronically Filed] 80 2021 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 Fo	rm 1 (Revised 02/2009)	Page 2			
	E OF COMMITTEE					
	naidate	Committee:				
(a)	Ш	This committee is a principal campaign committee. (Complete the candidate information below.)				
(b)	Ш	This committee is an authorized committee, and is NOT a principal campaign committee. (Complete the candidate information below.)				
	ne of didate					
	didate y Affiliatio	Office Sought: House Senate President	State			
(c)		This committee supports/opposes only one candidate, and is NOT an authorized committee.	District			
	ne of didate					
Par	erty Committee:					
(d)		· · · · · · · · · · · · · · · · · · ·	Democratic, Republican, etc.) Party.			
Pol	itical A	ction Committee (PAC):				
(e)		This committee is a separate segregated fund. (Identify connected organization on line 6.) Its cont	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.				
(5)			areasted fund or porty			
(f)	X	This committee supports/opposes more than one Federal candidate, and is NOT a separate segregated fund or par 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.)				
Joir	nt Fund	raising Representative:				
(g)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for two committees/organizations, at least one of which is an authorized committee of a federal candidate.	o 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			
	Committees Participating in Joint Fundraiser					
	1.	FEC ID number				
	2.	FEC ID number				
	3.	FEC ID number				
	4.					

FEC Form 1 (Revised	02/2009)	Page 3
Write or Type Committee Name		
Shawn Lassiter	for Congress	
6. Name of Any Connected (Organization, Affiliated Committee, Joint Fundraising Representative, or Leaders	hip PAC Sponsor
NONE		
		<u> </u>
Mailing Address		
	CITY STATE	ZIP CODE
Relationship: Connecte	d Organization Affiliated Committee Joint Fundraising Representative Lea	adership PAC Sponsor
 Custodian of Records: Idea books and records. 	ntify by name, address (phone number optional) and position of the person in pos	ssession of committee
Philipczyk	, Brandon, , ,	1
Full Name	,1874 SW St Andrews Dr	
Mailing Address		
	Palm City , FL , 34990	
	Palm City FL 34990	
Title or Position	CITY STATE	ZIP CODE
Compliance Consult		769 3196
3. Treasurer: List the name an any designated agent (e.g.,	d address (phone number optional) of the treasurer of the committee; and the na assistant treasurer).	me and address of
Full Name Walker Ro	ss, Jackie, , ,	
Mailing Address	2471 Pinebluff Dr	
	Dallas	
Title or Position	CITY STATE	ZIP CODE
Treasurer		514 - 2206

FEC Form	n 1 (Revised 02/2009)	Page 4					
Full Name of Designated Agent	Philipczyk, Brandon, , ,						
Mailing Address	1874 SW St Andrews Dr						
	Palm City FL 34990 CITY STATE Z	ZIP CODE					
Title or Position Compliance Cor	nsult Telephone number 651 – 7	69 - 3196					
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.							
	Amalgamated Bank						
Mailing Address	1825 K St NW						
	Washington DC 20006						
	CITY STATE 2	ZIP CODE					
Name of Bank, [Depository, etc.						
Mailing Address							
	CITY STATE Z	ZIP CODE					