Only

## STATEMENT OF

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**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. United We Stand 4920a Barbour Dr ADDRESS (number and street) (Check if address is changed) Alexandria 22304 VACITY A STATE A ZIP CODE A COMMITTEE'S E-MAIL ADDRESS unitedwestandpac@gmail.com (Check if address is changed) Optional Second E-Mail Address COMMITTEE'S WEB PAGE ADDRESS (URL) unitedwestandpac.org (Check if address is changed) DATE 02 2018 C00688663 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. Shoemaker, Drew, , , Type or Print Name of Treasurer Shoemaker, Drew, , , [Electronically Filed] 10 02 2018 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

FI	FC Fo	rm 1 (Revised 02/2009)	Page <b>2</b>
TYPE	OF C	OMMITTEE	1 4go <b>2</b>
Cano	didate	Committee:	
(a)	Ш	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. (Cominformation below.)	plete the candidate
Name Candi			
Candid Party	date Affiliati	Office Sought: House Senate President	State
(c)		This committee supports/opposes only one candidate, and is NOT an authorized committee.	
Name Candid			
Party	y Con	nmittee:	
(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)	x	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 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
	Com	mittees Participating in Joint Fundraiser	
	1.	FEC ID number	
	2.	FEC ID number	
	3.	FEC ID number	
	4.		

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Write or Type Committee Nam	ne	
United We Sta	nd	
6. Name of Any Connected	Organization, Affiliated Committee, Joint Fundraising Representative, or Lead	ership PAC Sponsor
NONE		
		<u>, , , , , , , , , , , , , , , , , , , </u>
Mailing Address		
	CITY STATE	ZIP CODE
Relationship: Connecte	ed Organization Affiliated Committee Joint Fundraising Representative	Leadership PAC Sponsor
Custodian of Records: Ide books and records.	entify by name, address (phone number optional) and position of the person in	possession of committee
Shoemak Full Name	ker, Drew, , ,	
Mailing Address	4920a Barbour Dr.	
<b>3</b>		
	Alexandria VA 2230	4
Title or Position	CITY STATE	ZIP CODE
Treasurer	Telephone number 202	480 - 5103
Treasurer: List the name an any designated agent (e.g.,	nd address (phone number optional) of the treasurer of the committee; and the assistant treasurer).	name and address of
Full Name Shoemak of Treasurer	rer, Drew, , ,	
Mailing Address	4920a Barbour Dr.	
	Alexandria VA 22304	
Title or Position Treasurer	CITY STATE  Telephone number =	ZIP CODE

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Full Name of Designated		
Agent		
Mailing Address		
	CITY STATE	ZIP CODE
Title or Position	Tolophono number	1=1 1
	Telephone number	
safety deposit b	oxes or maintains funds.	
safety deposit b Name of Bank,		1
-	Depository, etc.  Bank of America  ,2747 Duke St	
Name of Bank,	Depository, etc.  Bank of America  ,2747 Duke St	
Name of Bank,	Depository, etc.  Bank of America  ,2747 Duke St	
Name of Bank,	Depository, etc.  Bank of America  2747 Duke St	ZIP CODE
Name of Bank,	Depository, etc.  Bank of America  2747 Duke St  Alexandria  CITY  STATE	ZIP CODE
Name of Bank,  Mailing Address	Depository, etc.  Bank of America  2747 Duke St  Alexandria  CITY  STATE	ZIP CODE
Name of Bank,  Mailing Address	Depository, etc.  Bank of America  2747 Duke St  Alexandria  CITY  STATE	ZIP CODE
Name of Bank,  Mailing Address	Depository, etc.    Bank of America     2747 Duke St     Alexandria   VA   22314     CITY   STATE     Depository, etc.	ZIP CODE
Name of Bank,  Mailing Address  Name of Bank,	Depository, etc.    Bank of America     2747 Duke St     Alexandria   VA   22314     CITY   STATE     Depository, etc.	ZIP CODE
Name of Bank,  Mailing Address  Name of Bank,	Depository, etc.    Bank of America     2747 Duke St     Alexandria   VA   22314     CITY   STATE     Depository, etc.	ZIP CODE

## : 97 A = G7 9 @ G5 B9 CI G H9 L H F 9 @ 5 H9 8 HC 5 F 9 DC F H Z G7 < 98 I @ C F → H9 A = N 5 H = C B

Form/Schedule: F1N Transaction ID:

This committee intends to make independent expenditures, and consistent with the U.S. Court of Appeals for the District of Columbia Circuit decision in SpeechNow v. FEC, it therefore intends to raise funds in unlimited amounts. This committee will not use those funds to make contributions, whether direct, in-kind, or via coordinated communications, to federal candidates or committees.

Form/Schedule: Transaction ID: