FEC

Only

STATEMENT OF

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ORGANIZATION FORM 1 Office Use Only NAME OF (Check if name Example: If typing, type 12FE4M5 COMMITTEE (in full) is changed) over the lines. Jennifer Schultz Volunteer Committee P.O. Box 3218 ADDRESS (number and street) (Check if address is changed) Duluth 55803 MNCITY A STATE A ZIP CODE ▲ COMMITTEE'S E-MAIL ADDRESS SchultzCD8@gmail.com (Check if address is changed) Optional Second E-Mail Address Schultzformnrep@gmail.com COMMITTEE'S WEB PAGE ADDRESS (URL) JenSchultzForCongress.com (Check if address is changed) DATE 2022 C00810416 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. Type or Print Name of Treasurer Weidner, Robert, , Date 80 19 2024 Signature of Treasurer Weidner, Robert, , , NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to the penalties of 52 U.S.C. §30109. 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

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TYPE OF COMMITTEE:		
Candidate 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 information below.)	the candidate	
Name of Candidate Schultz, Jennifer, , ,		
Candidate Party Affiliation DFL Office Sought: X House Senate President	State MN District 08	
(c) This committee supports/opposes only one candidate, and is NOT an authorized committee.		
Name of Candidate		
Party Committee:		
(d) This committee is a (National, State or subordinate) committee of the Republication	atic, an, etc.) Party	
Political Action Committee (PAC):		
(e) This committee is a separate segregated fund. (Identify connected organization on line 6.) Its conne	cted organization is a:	
Corporation Corporation w/o Capital Stock Labor	r Organization	
	erative	
In addition, this committee is a Lobbyist/Registrant PAC.		
This committee supports/opposes more than one Federal candidate, and is NOT a separate segregation committee. (i.e., nonconnected committee)	ated 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.)		
(g) This committee is an independent expenditure-only political committee (Super PAC).		
In addition, this committee is a Lobbyist/Registrant PAC.		
(h) This committee is a political committee with both contribution and non-contribution accounts (Hybrid	PAC).	
In addition, this committee is a Lobbyist/Registrant PAC.		
Joint Fundraising Representative:		
(i) 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	
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.		
Committees Participating in Joint Fundraiser		
1C		
C		

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V	Vrite or Type Committee Name	·	g. c
		Volunteer Committee	
6.	Name of Any Connected C	Organization, Affiliated Committee, Joint Fundraising Representative, or Leaders	ship PAC Sponsor
	LYERLY SCHULTZ	VICTORY FUND	
	Mailing Address	PO BOX 65322	
	-		
		Washington DC 20035	1 - 1 1
		CITY ▲ STATE ▲	ZIP CODE ▲
	Relationship: Connected	Organization Affiliated Organization X Joint Fundraising Representative	Leadership PAC Sponso
7.	Custodian of Records: Identification books and records.	sion of committee	
	. Weidner,	Robert, , ,	
	Full Name		
	Mailing Address	P.O. Box 3218	
		Duluth 55803	
		CITY ▲ STATE ▲	ZIP CODE ▲
	Title or Position ▼		
	Treasurer	Telephone number	464 3573
8.	Treasurer: List the name ar any designated agent (e.g., Full Name Weidner,		ame and address of
	of Treasurer	NOBER, , ,	
	Mailing Address	P.O. Box 3218	
		Duluth 55803	
		CITY ▲ STATE ▲	ZIP CODE ▲
	Title or Position ▼		
	Treasurer		464 - 3573

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Full Name o Designated Agent	of					
Mailing Addr	ress					
	CITY ▲ STATE A	▲ ZIP CODE ▲				
Title or Posi	tion ▼					
	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 Bar	Name of Bank, Depository, etc.					
	North Shore Bank of Commerce					
Mailing Addr	ess 131 W Superior St					
	Duluth	55802				
	CITY ▲ STATE 4	XIP CODE ▲				
Name of Bank, Depository, etc.						
Mailing Addr	ess					
	CITY ▲ STATE 4	∑IP CODE ▲				