

FEC
FORM 1

STATEMENT OF
ORGANIZATION

RECEIVED
SECRETARY OF THE
PUBLIC RECEIVED

14 MAY 23 2014 12:38 PM 4:13

FEC MAIL CENTER

Office Use Only

1. NAME OF
COMMITTEE (in full)



(Check if name
is changed)

Example: If typing, type
over the lines.

12FE4M5

THE JACK SHEPARD FOR EQUAL JUSTICE FOR ALL & TO LEGALIZE MARIJUANA

ADDRESS (number and street)

VIA ROMUALDO MARENCO 20A



(Check if address
is changed)

ROME

CITY ▲



STATE ▲

00124

ZIP CODE ▲

COMMITTEE'S E-MAIL ADDRESS



(Check if address
is changed)

CONTACT @ JACK SHEPARD.NET

Optional Second E-Mail Address

COMMITTEE'S WEB PAGE ADDRESS (URL)



(Check if address
is changed)

WWW.JACKSHEPARD.NET

2. DATE

05 / 15 / 2014

3. FEC IDENTIFICATION NUMBER ►

C

4. 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

Dr. Jack Shepard - DR. JACK SHEPARD

Signature of Treasurer

Dr. Jack Shepard

Date

05 / 15 / 2014

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
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Only

For further information contact:
Federal Election Commission
Toll Free 800-424-9530
Local 202-694-1100

FEC FORM 1
(Revised 06/2012)

COMMITTEE FOR SENATE

INDEPENDENCE PARTY OF MINNESOTA

5. TYPE OF COMMITTEE

Candidate 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. (Complete the candidate information below.)

Name of Candidate

JACK SHEPARD

Candidate Party Affiliation

Office Sought:

☐

House

☒

Senate

☐

President

State

MN

District

- (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 (Democratic, Republican, etc.) Party.

Political Action Committee (PAC):

- (e) ☐ This committee is a separate segregated fund. (Identify connected organization on line 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 separate segregated fund or party 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.)

Joint Fundraising Representative:

- (g) ☐ This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or more political committees/organizations, at least one of which is an authorized committee of a federal candidate.
- (h) ☐ 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

1. FEC ID number
2. FEC ID number
3. FEC ID number
4. FEC ID number

14020400615

Write or Type Committee Name

THE JACK SHEPARD FOR EQUAL JUSTICE FOR ALL & TO LEGALIZE MARIJUANA

COMMITTEE
FOR SENATE

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

Mailing Address

CITY

STATE

ZIP CODE

Relationship: ☐ Connected Organization ☐ Affiliated Committee ☐ Joint Fundraising Representative ☐ Leadership PAC Sponsor

7. Custodian of Records: Identify by name, address (phone number -- optional) and position of the person in possession of committee books and records.

Full Name

Mailing Address

Title or Position

CITY

ITALY
STATE

ZIP CODE

CANDIDATE

Telephone number

651-222-9838

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

Mailing Address

Title or Position

CITY

STATE

ZIP CODE

CANDIDATE

Telephone number

651-222-9838

14020400616

Full Name of
Designated
Agent

Mailing Address

Title or Position

CITY

STATE

ZIP CODE

Telephone number

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.

SUNRISE BANK

Mailing Address

200 UNIVERSITY AVE W

ST. PAUL

MIN

55105

CITY

STATE

ZIP CODE

Name of Bank, Depository, etc.

Mailing Address

CITY

STATE

ZIP CODE

14020400617

140204000018

SECURITY
THE CONTENTS OF THIS PACKAGE HAVE BEEN CHECKED BY A DHL STAFF MEMBER FOR SECURITY PURPOSES IN THE PRESENCE OF THE SHIPPER.
FOR DHL (PRINT NAME)
FOR CLIENT (PRINT NAME)

Will be there
STATION
NOM

5661

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DHL EXPRESS
Track this shipment: <http://www.dhl.com>
Shipment Waybill
(from registration)

1 Payer account number and insurance details
Charge to ☒ Shipper ☐ Receiver ☐ 3rd party
Payer Account No. _____
Not all payment options are available in all countries.
Shipment Insurance - see reverse
☐ Yes ☐ No

2 From (Shipper)
Shipper's account number
CA-5420M
Contact name
ST. DENZ. DOTZ JACK
VIET LI SUPERMART 434F
Company name
VIET LI SUPERMART 434F
Address
37 DENZ. DOTZ JACK
Postcode/Zip Code (required)
333906179
Phone, Fax or E-mail (required)
333906179

3 To (Receiver)
FEDERAL ELECTION
333 E. 1117, E
A.S.
USA
Postcode/Zip Code (required)
60463
Country
USA
Phone, Fax or E-mail (required)
202-694-1006
Contact person
JOHNS

4 Shipment details
Blind weight is calculated from total weight and dimensions.
Total number of packages
Total weight
Dimensions in cm
Ple s Length Width Height
gr @
PT0713 F35 IT MP

5 Full description
Give content of
Content:
description:

6 Non-Doc
Attach the
Shipper's
0
Government (where applicable)
Destination
Rel code
7 SM
Unless
the term
and 12
Sign

8 Products & Services
☐ Domestic ☒ International Document
☐ Express ☐ International Non-Doc
Producers that are available to and from all countries:
☐ EXP ☐ EX ☐ EX ☐ EX ☐ EX ☐ EX
Special Services (extra charges may apply)
☐ Saturday Delivery ☐ Hold Collection
☐ Delivery Address ☐ Pay
☐ OTHER
Rel code

DESTINATION CODE
ORIGIN
130A

Recomm weight

1 = 0.
2 =
3 =
4 =
5 = 1
6 = 1
7 = 2
8 = 2

20463, United States
US-DCA-DCA
DOX
EXPRESS WORLDWIDE
U012
Account No. CASHROM
Rel code
Date:
Poe / Shpl Weight Piece
Day Time
1/1

Waybill
WYBLL93 2458 3122
(2L)US20463 + 42000000
(J)J001 4600 0005

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made from
recycled materials

NANCY ERICKSON
SECRETARY

DANA K. McALLUM
SUPERINTENDENT
HARRIS WATE OFFICE BUILDING
SUITE 232
WASHINGTON, DC 20510-7111
PHONE (202) 224-0322

United States Senate

OFFICE OF THE SECRETARY

OFFICE OF PUBLIC RECORDS

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Postmark

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Postmark

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USPS EXPRESS MAIL _____
Postmark

OVERNIGHT DELIVERY SERVICE:

SHIPPING DATE

NEXT BUSINESS DAY DELIVERY

FEDERAL EXPRESS _____

UPS _____

DHL _____

AIRBORNE EXPRESS _____

5-20-14

☐
☐
☐
☐

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5-23-14
Date of Receipt

POSTMARK ILLEGIBLE ☐

NO POSTMARK ☐

FAX _____
Date of Receipt

OTHER **5-20-14**
Date of Receipt or Postmark

PREPARER **DH**

DATE PREPARED **5-23-14**

14020400619



SEN PATCH



SEN PATCH

14020400620