**FEC** 

Only

## STATEMENT OF

PAGE 1 / 4

**ORGANIZATION** FORM 1 Office Use Only NAME OF (Check if name Example: If typing, type 12FE4M5 COMMITTEE (in full) is changed) over the lines. Shawn Roberts for Congress 4909 SE Brighton Dr. ADDRESS (number and street) (Check if address is changed) Lawton 73501 OK CITY A STATE A ZIP CODE A COMMITTEE'S E-MAIL ADDRESS roberts4ushouse@gmail.com (Check if address is changed) Optional Second E-Mail Address COMMITTEE'S WEB PAGE ADDRESS (URL) shawnrobertsok.com (Check if address is changed) DATE 20 2016 C00609552 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. Shawn Roberts Type or Print Name of Treasurer Shawn Roberts [Electronically Filed] 02 20 2016 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	Form 1 (Revised 02/2009) Page 2				
	COMMITTEE				
	ate 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	Shawn Michael Roberts				
Candidate	Office State				
Party Affili	ation REP Sought: X House Senate President				
-	District				
(c)	This committee supports/opposes only one candidate, and is NOT an authorized committee.				
Name of Candidate					
Party Co	ommittee:				
	(National, State (Democratic,				
(d)	This committee is a or subordinate) committee of the Republican, etc.) Party.				
Political	Action Committee (PAC):				
(e) This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected					
	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.)				
	in addition, this committee is a Leadership 1 70. (Identity Sponsor on line 0.)				
Joint Fu	ndraising 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				
(11)	committees/organizations, none of which is an authorized committee of a federal candidate.				
Сс	ommittees Participating in Joint Fundraiser				
1.					
1.					
2.	FEC ID number				
3.	FEC ID number				
4.					

FEC <b>Form 1</b> (Revised	d 02/2009)	   Page <b>3</b>
Write or Type Committee Nar		
Shawn Robert	s for Congress	
	Organization, Affiliated Committee, Joint Fundraising Representative	re, or Leadership PAC Sponsor
NONE		
Mailing Address		
	CITY STATE	ZIP CODE
Relationship: Connect	ted Organization Affiliated Committee Joint Fundraising Represen	ntative Leadership PAC Sponsor
Custodian of Records: Id books and records.	entify by name, address (phone number optional) and position of the	person in possession of committee
Shawn F	Roberts	
Mailing Address	4909 SE Brighton Dr.	
Ü		
	Lawton	73501
Title or Position	CITY STATE	ZIP CODE
Candidate/Treasurer		580 - 574 - 7851
. <b>Treasurer:</b> List the name a any designated agent (e.g.,	and address (phone number optional) of the treasurer of the committe , assistant treasurer).	ee; and the name and address of
Full Name Shawn R	Roberts	
Mailing Address	4909 SE Brighton Dr.	
	Lawton	73501
Title or Position	CITY STATE	ZIP CODE
Candidate/Treasurer	Telephone number	580 574 7851

9.

FEC <b>Form 1</b> (Revised	1 02/2009)		Page <b>4</b>			
Full Name of Designated Agent  Lesley Rot	perts					
Mailing Address	4909 SE Brighton Dr.					
	Lawton	OK 7350° STATE	ZIP CODE			
Title or Position Asst. Treasurer		Telephone number 580 -	458   -   1304			
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.						
First Na	ational Bank & Trust Co.					
Mailing Address	130 E. Macarthur					
	Shawnee	OK 74804	1			
	CITY	STATE	ZIP CODE			
Name of Bank, Depository, etc.						
Mailing Address						
	CITY	STATE	ZIP CODE			