Image# 202010309336670729			_	PAGE 1 / 9
FEC FORM 1	STATEMEI ORGANIZ			
1. NAME OF	(Check if name	Example:If typing, type		fice Use Only
COMMITTEE (in full)	is changed)	over the lines.	12FE4M5	
TIFFANY SHED	D FOR CONGRE	ESS COMMITTE	E	
ADDRESS (number and street)	111 W Florence Blvd			
(Check if address	Suite 7			
is changed)	, Casa Grande		AZ	22
	CITY 🔺		STATE A	ZIP CODE▲
COMMITTEE'S E-MAIL ADDR	ESS			
(Check if address	compliance@complian	ceconsultingva.com		
is changed)				
	Optional Second E-Mail Ad			
COMMITTEE'S WEB PAGE AD	www.sheddforcongress.com			
	^D / Y Y Y Y 30 2020			
B. FEC IDENTIFICATION N	IUMBER ► C C	00657155		
. IS THIS STATEMENT	NEW (N) OR	× AMENDED (A)		
certify that I have examined	this Statement and to the best	of my knowledge and belief i	t is true, correct and	complete.
,		,	,	,
ype or Print Name of Treasur	er Hobbs, Cabell, , ,			
Signature of Treasurer	bs, Cabell, , ,	[Electronically Filed]	Date 10	D D / Y
IOTE: Submission of false, error	neous, or incomplete information ANY CHANGE IN INFORMATI	may subject the person signing ON SHOULD BE REPORTED \		penalties of 2 U.S.C. §437g.
Office Use Only		For further information Federal Election Commiss Toll Free 800-424-9530 Local 202-694-1100		FEC FORM 1 (Revised 06/2012)

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FEC	Form 1 (Revised 02/2009) Page 2
	COMMITTEE
Candida	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	
Candidate Party Affil	
(C)	This committee supports/opposes only one candidate, and is NOT an authorized committee.
Name of Candidate	
Party C	ommittee:
(d)	This committee is a (National, State or subordinate) committee of the (Democratic, Republican, etc.) Party.
Politica	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 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 committees/organizations, none of which is an authorized committee of a federal candidate.
Co	ommittees Participating in Joint Fundraiser
1.	FEC ID number
2.	
3.	
4.	EC
4.	

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FEC Form 1 (Revised 02/2009)

Write or Type Committee Name

TIFFANY SHEDD FOR CONGRESS COMMITTEE

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

S	hedd for AZ-01				
	Mailing Address	Po Box 30844			
		Bethesda CITY		MD 20824	
	Relationship: Connected	Organization X Affiliated Committee	Joint Fundraising	_	eadership PAC Sponsor
7.	Custodian of Records: Ident books and records.	tify by name, address (phone number	optional) and position	on of the person in po	ossession of committee
	Hobbs, Cal	ɔell, , , │			
	Mailing Address	PO Box 365			
		McLean		VA 22101	
	Title or Position	CITY		STATE	ZIP CODE
	Treasurer		Telephone num	ber	

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	Hobbs, Cabell, , ,	
of frouded of		
Mailing Address	PO Box 365	
	McLean	
	CITY STATE ZIP CODE	
Title or Position Treasurer	Telephone_number	

FEC Form 1 (Revised 02/2009)

Full Name of Designated Agent					1					1	I				I												
Mailing Address																											
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						(СІТ	Y									STA	ΤE				ZII	PC	COD	۶E		
Title or Position																											
												Tele	eph	one	e ni	umt	ber										

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.

BB&T			
Mailing Address	2200 Wilson Blvd		
	Suite 100		
	CITY	STATE	ZIP CODE
Name of Bank, Depository,	etc.		
EagleE			
Mailing Address	7815 Woodmont Ave		

STATE

ZIP CODE

CITY

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Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

5(g) or (h).	Joint	Fundraising	Participant:
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6. Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC Sponsor SLS VICTORY COMMITTEE

Mailing Address	PO BOX 30844				
-					
	BETHESDA			MD 208	;24
Relationship:		CITY 🔺		STATE A	ZIP CODE
Connected	Organization Affiliate	ed Committee	Joint Fundraising	Representative	Leadership PAC Sponsor

8. Designated Agent: Identify by name, address (phone number - optional)

Full Name																											
Mailing Address	l																										
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TITLE OR POSITION	▼					C	۲I	(🔺	•							S	TAT	Ε				ZIP	C	DD	E 4		
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Name of Bank, Depository, etc.											1			1									
Mailing Address																							
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Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

5(g) or (h).	Joint	Fundraising	Participant:

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

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

Mailing Address	PO BOX 30844											
	SUITE 401											
	BETHESDA		MD	20824								
Relationship:		CITY A	STATE A	ZIP CODE								
Connected Organization												

8. Designated Agent: Identify by name, address (phone number - optional)

Full Name		
Mailing Address		
TITLE OR POSITION	STATE 🔺	ZIP CODE
	Telephone Number	

Name of Bank, Depository, etc.												1				1				1												
Mailing Address																																
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	CITY 🔺										STATE A							ZIP CODE														

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Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

5(g) or (h).	Joint Fundraising	Participant:		
1.			FEC ID number	C
2.			FEC ID number	C
3.			FEC ID number	C
4.			FEC ID number	C
	-	Drganization, Affiliated Committee, Joint Fundra	ising Representative,	or Leadership PAC Sponsor
W				
	Mailing Address	228 S WASHINGTON ST		
		STE. 115		
		ALEXANDRIA		22314
	Relationship:		STATE A	
			STATE ▲	
	Connected			
8. Desig	Connected	Organization Affiliated Committee		
8. Desig Fu	Connected	Organization Affiliated Committee		
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8. Desig Fu	Connected	Organization Affiliated Committee		
8. Desig Fu M	Connected	Organization Affiliated Committee Joint F		
8. Desig Fu M	Connected	Organization Affiliated Committee Joint F	Fundraising Representation Image:	ive Leadership PAC Sponsor

Name of Bank, Depository, etc.																								
Mailing Address																								
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FEC Form 1S (Revised 02/20		and/or 9	Page	0I
)or(h). Joint Fundraising	Participant:			
1.		FEC ID number	С	
2.		FEC ID number	С	
3.		FEC ID number	С	
4.		FEC ID number	С	
Name of Any Connected C	organization, Affiliated Committee, Joint Fundr	aising Representativ	ve, or Leadership	PAC Spons
-	organization, Affiliated Committee, Joint Fundr URBAN AND RURAL AMERICAN I		re, or Leadership	PAC Spons
-	-		re, or Leadership	PAC Spons
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	-		re, or Leadership	PAC Sponse
-			/e, or Leadership	PAC Sponse
	URBAN AND RURAL AMERICAN I 228 S. WASHINGTON ST.		22314	PAC Sponso
	URBAN AND RURAL AMERICAN I 228 S. WASHINGTON ST. STE. 115			PAC Sponse
RECONNECTING	URBAN AND RURAL AMERICAN I		 	
RECONNECTING	URBAN AND RURAL AMERICAN I		 	
RECONNECTING	URBAN AND RURAL AMERICAN I		 	

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.

CITY

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1 1

Mailing Address

TITLE OR POSITION V

Name of Bank, Depository, etc.																								1	
Mailing Address																									
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STATE A

Telephone Number

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Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

5(g) or (h).	Joint	Fundraising	Participant:
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1	FEC ID number	C
2.	FEC ID number	C
3.	FEC ID number	C
4.	FEC ID number	C

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

Mailing Address	PO BOX 365										
			VA								
Relationship:		CITY 🔺	STATE	E A ZIP CODE A							
Connected Organization											

8. Designated Agent: Identify by name, address (phone number - optional)

Full Name				
Mailing Address				
TITLE OR POSITION	•	CITY A	STATE A	ZIP CODE
		Telep	hone Number	

Name of Bank, Depository, etc.																														
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