

FEC FORM 1

STATEMENT OF ORGANIZATION

RECEIVED 2014 FEB 25 AM 11:15 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

Thomas Casson for Congress

ADDRESS (number and street)

PO Box 525

(Check if address is changed)

Auburn

AL

36831

CITY

STATE

ZIP CODE

COMMITTEE'S E-MAIL ADDRESS (Please provide only one e-mail address)

(Check if address is changed)

commonsense@thomascassonforcongress.com

COMMITTEE'S WEB PAGE ADDRESS (URL)

(Check if address is changed)

www.thomascassonforcongress.com

2. DATE

02 / 24 / 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

Andrew K Jordan

Signature of Treasurer

Date

02 / 24 / 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 Use Only

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

FEC FORM 1 (Revised 02/2009)

14031190778

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 Thomas Casson

Candidate Party Affiliation  REP  DEM  IND  OTH

Office Sought:  House  Senate  President

State  AL  AK  AZ  CA  CO  CT  DC  DE  FL  GA  HI  IA  IL  IN  KS  KY  LA  MA  MD  ME  MI  MN  MO  MS  MT  NC  ND  NH  NJ  NM  NV  NY  OH  OK  OR  PA  RI  SC  SD  TN  TX  UT  VT  WA  WI  WY

District  1  2  3  4  5  6  7  8  9  10  11  12

- (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	<input type="checkbox"/> C _____
2.	_____	FEC ID number	<input type="checkbox"/> C _____
3.	_____	FEC ID number	<input type="checkbox"/> C _____
4.	_____	FEC ID number	<input type="checkbox"/> C _____

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Write or Type Committee Name

Thomas Casson for Congress

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

[Empty grid lines for organization name]

Mailing Address

[Empty grid lines for 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 Andrew K Jordan

Mailing Address PO Box 2166

[Empty grid lines for address]

Auburn

AL

36831

Title or Position

CITY

STATE

ZIP CODE

Treasurer

Telephone number 334 - 669 - 3953

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 Andrew K Jordan

Mailing Address PO Box 2166

[Empty grid lines for address]

Auburn

AL

36831

Title or Position

CITY

STATE

ZIP CODE

Treasurer

Telephone number 334 - 669 - 3953

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Full Name of Designated Agent

[Grid for Full Name of Designated Agent]

Mailing Address

[Grid for Mailing Address Line 1]

[Grid for Mailing Address Line 2]

[Grid for Mailing Address Line 3]

CITY

STATE

ZIP CODE

Title or Position

[Grid for Title or Position]

Telephone number

[Grid for 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.

National Bank of Commerce

Mailing Address

2443 Enterprise Drive

[Grid for Mailing Address Line 2]

Opelika AL 36801

CITY

STATE

ZIP CODE

Name of Bank, Depository, etc.

[Grid for Name of Bank, Depository, etc.]

Mailing Address

[Grid for Mailing Address Line 1]

[Grid for Mailing Address Line 2]

[Grid for Mailing Address Line 3]

CITY

STATE

ZIP CODE

14031190781

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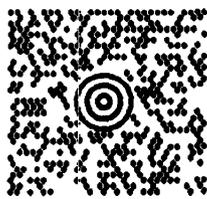
ANDY JORDAN  
(334) 669-3953  
THE UPS STORE #4222  
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1550 OPELIKA ROAD  
AUBURN AL 36830

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WASHINGTON DC 20463-0002

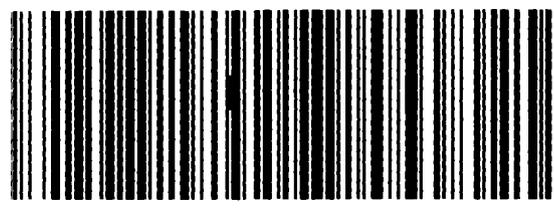
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Federal Election Commission  
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*[Signature]* *2/25/14*  
 PREPARER DATE PREPARED

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