

FEC
FORM 1

STATEMENT OF
ORGANIZATION

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Office Use Only

1. NAME OF
COMMITTEE (in full)

☐

(Check if name
is changed)

Example: If typing, type
over the lines.

12FE4M5

Shawn for Georgia

ADDRESS (number and street)

P.O. Box 1688

☐

(Check if address
is changed)

145 West Avenue

Cedartown

CITY ▲

GA

STATE ▲

30125

- 9998

ZIP CODE ▲

COMMITTEE'S E-MAIL ADDRESS

☐

(Check if address
is changed)

Renee.Schaeffer@Democracypartners.com

Optional Second E-Mail Address

COMMITTEE'S WEB PAGE ADDRESS (URL)

☐

(Check if address
is changed)

www.ShawnforGeorgia.com

2. DATE

08

08

2023

3. FEC IDENTIFICATION NUMBER ►

C

4. IS THIS STATEMENT

☒

NEW (N)

OR

☐

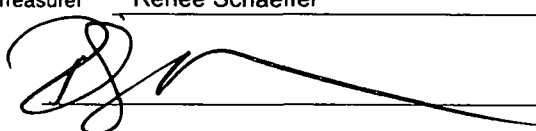
AMENDED (A)

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

Renee Schaeffer

Signature of Treasurer



Date

08

08

2023

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
Use
Only

For further information contact:
Federal Election Commission
Toll Free 800-424-9530

FEC FORM 1
(Revised 03/2022)

2. |

C *Chlorophyll a* (mg/L)

C *Chlorophyll a* (mg/L)

Write or Type Committee Name

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 Organization ☐ 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

Renee Schaeffer

Mailing Address

P.O. Box 1688
145 West Avenue
Cedartown GA 30125 - 9998

CITY ▲

STATE ▲

ZIP CODE ▲

Title or Position ▼

Treasure _____

Telephone number 773 - 895 - 4713

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

Renee Schaeffer**Mailing Address**

P.O. Box 1688
145 West Avenue
Cedartown GA 30125 - 9998

CITY ▲

STATE ▲

ZIP CODE ▲

Title or Position ▼

Treasurer _____

Telephone number 773 - 895 - 4713

Full Name of
Designated
Agent

Renee Schaeffer

Mailing Address

P.O. Box 1688

145 West Avenue

Cedartown

GA

30125

- 9998

CITY ▲

STATE ▲

ZIP CODE ▲

Title or Position ▼

Treasurer

Telephone number

773

- 895

- 4713

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.

United Community Bank

Mailing Address

307 East 2nd Avenue

Rome

GA

30161

-

CITY ▲

STATE ▲

ZIP CODE ▲

Name of Bank, Depository, etc.

Mailing Address

CITY ▲

STATE ▲

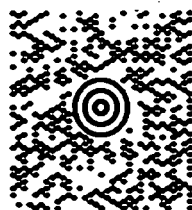
ZIP CODE ▲

LBS 1 OF 1
SHP WT: 1 LBS
DATE: 07 AUG 2023

SHIP FEDERAL ELECTION COMMISSION
TO: 1050 1ST ST NE

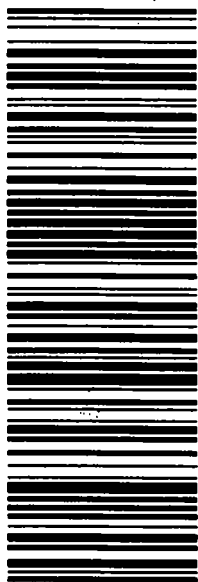
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SECURITY



Federal Election Commission
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☐ Other (Specify):	Date of Receipt or Postmarked
PB PREPARER (4/2023)	08/09/2023 DATE PREPARED

(4/2023)