## STATEMENT OF

RECEIVED T

FORM 1 ORGANIZATION				.21	2012 FEB 27 AM 9: 10		
				<u> </u>	FORMER USE BANK CENTER		
NAME OF COMMITTEE (in	ı full)	(Check if name is changed)	Example: If typing, type over the lines.	12FE4M5			
Wilson 201	12						
ADDRESS (number a	nd street)	11017 N 13t	h Ave.	11111			
(Check if a							
is changed)		Phoenix		AZ	85029		
			CITY	STATE	ZIP CODE		
COMMITTEE'S E MA	II ADDRESS	C (Blassa provide ash es	a a mail address)				
COMMITTEE'S E-MA	IL ADDRESS	6 (Please provide only on fourinfinities	a@yahoo.com		,		
(Check if				1111	<del>                                      </del>		
is change	d)						
COMMITTEE'S WEB	PAGE ADD	RESS (URL)					
			Vilson2012.org				
(Check if is change		<u> </u>			<u> </u>		
	-,		<del></del>				
2. DATE <b>02</b>	<u>"</u> 21°	2012			·		
3. FEC IDENTIFIC	CATION NUM	MBER C	C00512962				
4. IS THIS STATE	MENT	NEW (N) OR	AMENDED (A)				
I certify that I have a	examined this	Statement and to the b	nest of my knowledge and belief	it is true, correct	and complete.		
Type or Print Name	of Treasurer	Peter Wilso	ρή				
Signature of Treasure	er _//	Detel.	Aton	Date 02	<u> </u>		
NOTE: Submission of			ion may subject the person signing ATION SHOULD BE REPORTED V		the penalties of 2 U.S.C. §437g.		
Office Use			For further information Federal Election Commiss Toll Free 800-424-9530		FEC FORM 1 (Revised 02/2009)		

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	FEC Fo	rm 1 (Revised 02/2009) Page 2							
5.		СОММІТТЕЕ							
		Committee:							
	(a) X	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	Peter Wilson							
	Candidate Party Affiliati	on Grn Office Sought: House Senate President District 6							
	(c)	This committee supports/opposes only one candidate, and is NOT an authorized committee.							
	Name of Candidate								
	Party Con								
	(d)	This committee is a (National, State or subordinate) committee of the Republican, etc.) Party.							
	Political A	ction 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.							
	(1)	This committee supports/opposes more than one Federal candidate, and is NQT 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.)							
	_	raising 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.							
	Com	mittees Participating in Joint Fundraiser							
	1.								
	1.								
	2.	FEC ID number							
	3.	FEC ID number							
	4.	FEC ID number							

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FEC Form 1 (Revised		Page 3
Write or Type Committee Nam		r age o
Wilson 2012		
6. Name of Any Connected	Organization, Affiliated Committee, Joint Fundraising Representative, or Leaders	ship PAC Sponsor
1111111111		
		<u> </u>
Mailing Address		<del></del>
Mailing Address		<del>*                                    </del>
		<del> l_l l</del>
	CITY STATE	ZIP CODE
Relationship: Connecte	ed Organization Affiliated Committee Joint Fundraising Representative Le	eadership PAC Sponsor
<ol> <li>Custodian of Records: Ide books and records.</li> </ol>	entify by name, address (phone number optional) and position of the person in po	ssession of committee
Peter	· Wilson	
Full Name  Mailing Address	111017 N 13th Ave.	
Mailing Address		
	Phoenix	29  -
Title or Position	CITY STATE	ZIP CODE
Custodian	Telephone number [602] - [8	61, - 8071
Treasurer: List the name are any designated agent (e.g.,	nd address (phone number optional) of the treasurer of the committee; and the na assistant treasurer).	ame and address of
Full Name of Treasurer	Wilson	
Mailing Address	11017 N 13th Ave.	
	Phoenix AZ 8502	ZIP CODE
Title or Position Treasurer	Telephone number [602] - [8	61,[8071

CITY

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ZIP CODE

STATE

FEC Form 1 (Revised 02/2009)

Name of Bank, Depository, etc.

Mailing Address

Federal Election Commiss ENVELOPE REPLACEMENT PAGE FOR INC The FEC added this page to the end of this filing to	COMING DOCUMENTS
Hand Delivered	Date of Receipt
USPS First Class Mail	Postmarked 2/01/12
USPS Registered/Certified	Postmarked (R/C)
USPS Priority Mail	Postmarked
Delivery Confirmation™ or Signatur	re Confirmation™ Label
USPS Express Mail	Postmarked
Postmark Illegible	
No Postmark	
Overnight Delivery Service (Specify):	Shipping Date
Next	Business Day Delivery
Received from House Records & Registration Off	Date of Receipt ice
Received from Senate Public Records Office	Date of Receipt
Received from Electronic Filing Office	Date of Receipt
Other (Specify):	Date of Receipt or Postmarked
Jup	2/27/12
PREPARER (3/2005)	DATÉ PREPARED
(3/2003)	