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Only

STATEMENT OF

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FEC ORGANIZATION FORM 1 Office Use Only NAME OF (Check if name Example: If typing, type 12FE4M5 COMMITTEE (in full) is changed) over the lines. Friends of Renteria P.O. Box 655 ADDRESS (number and street) (Check if address is changed) Sanger 93657 CA CITY A STATE A ZIP CODE A COMMITTEE'S E-MAIL ADDRESS info@amandarenteria.com (Check if address is changed) Optional Second E-Mail Address COMMITTEE'S WEB PAGE ADDRESS (URL) http://www.amandarenteria.com (Check if address is changed) DATE 2013 C00550301 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. Jay Petterson Type or Print Name of Treasurer Jay Petterson [Electronically Filed] 12 18 2013 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

FE	EC Fo	rm 1 (Revised 02/2009)	Page 2
		OMMITTEE	
Cand		e Committee:	
(a)	×	This committee is a principal campaign committee. (Complete the candidate information below.)	
(b)	П	This committee is an authorized committee, and is NOT a principal campaign committee. (Complinformation below.)	ete the candidate
Name Candid		Amanda Renteria	
Candid	late	Office	State
Party A	Affiliati		District 21
(c)		This committee supports/opposes only one candidate, and is NOT an authorized committee.	
Name Candid			
Party	Con	nmittee:	
(d)			Democratic, epublican, etc.) Party.
Politic	cal A	ction Committee (PAC):	
(e)		This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected organization on line 6.	ected 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 segrommittee. (i.e., nonconnected committee)	egated fund or party
		In addition, this committee is a Lobbyist/Registrant PAC.	
		In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)	
Joint I	Fund	Iraising Representative:	
(g)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for two committees/organizations, at least one of which is an authorized committee of a federal candidate.	or more political
(h)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for two committees/organizations, none of which is an authorized committee of a federal candidate.	or more political
	Com	mittees Participating in Joint Fundraiser	
	1.		
	2.		
	3.		
	٥.		
	4.		

FEC Form 1 (Revi	sed 02/2009)	Page 3
Write or Type Committee I		r age c
Friends of Re	enteria	
	ed Organization, Affiliated Committee, Joint Fundraising Representative, or Le	adership PAC Sponsor
NONE		
Mailing Address		
	CITY STATE	ZIP CODE
Relationship: Conn	ected Organization Affiliated Committee Joint Fundraising Representative	Leadership PAC Sponso
Custodian of Records: books and records.	Identify by name, address (phone number optional) and position of the person	in possession of committee
1 1	etterson	
Full Name	3518 Fremont Avenue North	
Mailing Address		
	Seattle , WA , 98	103
Title or Position	CITY STATE	ZIP CODE
Treasurer		4440
 Treasurer: List the name any designated agent (e 	e and address (phone number optional) of the treasurer of the committee; and the distribution ${\sf u}$ and ${\sf u}$ assistant treasurer).	ne name and address of
	etterson	
of Treasurer	3518 Fremont Avenue North	
Mailing Address	1#545	
		103
	Seattle WA 98'	ZIP CODE
Title or Position Treasurer	Telephone number	- <u>941</u> - <u>4440</u>

FEC Form 1	(Revised 02/2009)	Page 4
Full Name of Designated Agent		
Mailing Address		
	CITY STATE	ZIP CODE
Title or Position		
safety deposit boxes Name of Bank, Depo	ository, etc.	nds decounts, rents
safety deposit boxes Name of Bank, Depo	ank of America	
safety deposit boxes Name of Bank, Depo	ank of America 1501 7th Street Sanger CA 93657	,
safety deposit boxes Name of Bank, Depo Bank, Depo Mailing Address	ank of America 1501 7th Street Sanger CITY STATE	
safety deposit boxes Name of Bank, Depo	ank of America 1501 7th Street Sanger CITY STATE	,
Safety deposit boxes Name of Bank, Depo Mailing Address Name of Bank, Depo	or maintains funds. pository, etc. ank of America 1501 7th Street Sanger CITY STATE Jository, etc.	,
Safety deposit boxes Name of Bank, Depo Mailing Address Name of Bank, Depo	ank of America 1501 7th Street Sanger CITY STATE	,
Name of Bank, Depo Mailing Address Name of Bank, Depo Name of Bank, Depo	or maintains funds. pository, etc. ank of America 1501 7th Street Sanger CITY STATE Jository, etc.	ZIP CODE