FEC FORM 1	STATEMENT OF ORGANIZATION	Office Use Only
1. NAME OF COMMITTEE (in full)	(Check if name Example: If typing, type over the lines.	12FE4M5
Peace Throug	h Strength Political Action Commi	
ADDRESS (number and stre	701 8th Street, NW et)	
(Check if address	Suite 500	
is changed)	Washington	DC 20001
	CITY	STATE ZIP CODE
COMMITTEE'S E-MAIL AD (Check if addre is changed)	DRESS (Please provide only one e-mail address) <pre> mklesher@wms-jen.com ss </pre>	<u> </u>
COMMITTEE'S WEB PAGI	ADDRESS (URL)	
(Check if addre is changed)	ss	
2. DATE 10	06 / Y Y Y Y 06 2011	
3. FEC IDENTIFICATIC	N NUMBER C C00377010	
4. IS THIS STATEMENT	NEW (N) OR AMENDED (A)	
I certify that I have examin	ed this Statement and to the best of my knowledge and belief it	is true, correct and complete.
Type or Print Name of Tre	asurer Bruce Young	
Bignature of Treasurer	ruce Young [Electronically Filed]	Date 10 / 06 / Y Y Y Y Y 2011
NOTE: Submission of false,	erroneous, or incomplete information may subject the person signing the ANY CHANGE IN INFORMATION SHOULD BE REPORTED W	
Office Use Only	For further information co Federal Election Commissio Toll Free 800-424-9530 Local 202-694-1100	

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(b) This committee is an authorized committee, and is NOT a principal campaign committee. (Complete the candidate information below.) Name of Candidate	•	-
Candidate Committee: (a) This committee is a principal campaign committee. (Complete the candidate information below.) Name of Candidate	FEC FC	orm 1 (Revised 02/2009) Page 2
(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 Office Sought: House Senate President District District Candidate Candidate Office This committee supports/opposes only one candidate, and is NOT an authorized committee. (a) This committee is a Comports/opposes only one candidate, and is NOT an authorized committee. Party Committee: (Mational, State or subordinate) committee of the Comporation, etc.) Part Political Action Committee is a separate segregated fund. (identify connected organization on line 6.) Its connected organization Corporation Corporation Corporation Corporation wio Capital Stock Labor Organization In addition, this committee is a Lobbyist/Registrant PAC. (I) Membership Organization In addition, this committee is a Lobbyist/Registrant PAC.	TYPE OF (COMMITTEE
(b) This committee is an authorized committee, and is NOT a principal campaign committee. (Complete the candidate information below.) Name of Candidate	Candidat	e Committee:
Information below.) Name of Candidate Party Affiliation (c) This committee supports/opposes only one candidate, and is NOT an authorized committee. Name of Candidate Party Committee: (Democratic, Republican, etc.) Party Committee is a (d) This committee is a (National, State or subordinate) committee of the Republican, etc.) Party Committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected organization (d) This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected organization (e) This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected organization (f) Corporation Corporation w/o Capital Stock Labor Organization (f) In addition, this committee is a Lobbylst/Registrant PAC. In addition, this committee is a Lobbylst/Registrant PAC. (f) In addition, this committee is a Lobbylst/Registrant PAC. In addition, this committee is a Lobbylst/Registrant PAC. (g) In addition, this contributions, pays fundraising expenses and disburses net proceeds for two or more political committee 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/organi	(a)	This committee is a principal campaign committee. (Complete the candidate information below.)
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	(h)	
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2 FEC ID number	2.	FEC ID number
3 FEC ID number	3.	FEC ID number
4. FEC ID number	4.	FEC ID number

FEC Form 1 (Revised 02/2009)

Write or Type Committee Name

Peace Through Strength Political Action Committee

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

Duncan D. Hunter		
Mailing Address	223 Cannon HOB	
	Washington	DC 20515
	CITY	STATE ZIP CODE
Relationship: Connected	Organization Affiliated Committee Joint Fundraisin	g 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.

Meredith L	esher
Full Name	
Mailing Address	701 8th Street, NW
	Suite 500
	Washington DC 20001
Title or Position	CITY STATE ZIP CODE
Treasurer	Telephone number 202 659 8201

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	Bruce Young
Mailing Address	436 Country Club Lane
	Coronado
	CITY STATE ZIP CODE
Title or Position Treasurer	Image:

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Full Name of Designated Agent			 																							1					
Mailing Address																															
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Title or Position																															
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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.

Chain I	Bridge Bank		
Mailing Address	1445-A Laughlin Avenue		
	McLean	VA 22101	
_	CITY	STATE	ZIP CODE
Name of Bank, Depository, e	etc.		
Mailing Address			
	CITY	STATE	ZIP CODE