

**FEC
FORM 1**

**STATEMENT OF
ORGANIZATION**

(See Instructions)

Ofc. Use Only

1. NAME OF COMMITTEE (in full) (Check if name is changed) Example: If typing, type over the lines 12FE4M5
 Americans for Peace through Justice

ADDRESS (Home or street) 288 Bush Street, #2830
 (Check if address is changed) San Francisco CA 94104
 CITY STATE ZIP CODE

COMMITTEE'S E-MAIL ADDRESS
 info@americansforpeacethroughjustice.org

COMMITTEE'S WEB PAGE ADDRESS (URL)
 www.americansforpeacethroughjustice.org

COMMITTEE'S FAX NUMBER
 4157513691

2. DATE 10 / 08 / 2004

3. FEC IDENTIFICATION NUMBER C C00406165

4. IS THIS STATEMENT X 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 Mr. Richard Teich, Jr.

Signature of Treasurer Electronically Filed by Mr. Richard Teich, Jr. Date 10 / 08 / 2004

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to the penalties of 2 U.S.C. 5437g.

ANY CHANGE IN INFORMATION SHOULD BE REPORTED WITHIN 10 DAYS

5. TYPE OF COMMITTEE (Check One)

- (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 _____

Candidate Party Affiliation	Office Sought:	House	Senate	President	State District
--------------------------------	-------------------	-------	--------	-----------	-------------------

- (c) This committee supports/opposes only one candidate, and is NOT an authorized committee.

Name of Candidate _____

- (d) This committee is a _____ (National, State (or subordinate) committee of the _____ (Democratic, Republican, etc.) Party.

- (e) This committee is a separate segregated fund

- (f) This committee supports/opposes more than one Federal candidate, and is NOT a separate segregated fund or party committee.

6. Name of Any Connected Organization or Affiliated Committee

Mailing Address _____

_____ - _____

CITY ▲

STATE ▲

ZIP CODE ▲

Relationship _____

Type of Connected Organization:

Corporation

Corporation w/o Capital Stock

Labor Organization

Membership Organization

Trade Association

Cooperative

Write or Type Committee Name

Americans for Peace through Justice

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 Mr. Richard Teich, Jr.

Mailing Address 754 3rd Ave.

	<u>SF</u>	<u>CA</u>	<u>94118</u>	<u>-</u>
Title or Position ▼	<u>CITY ▲</u>	<u>STATE ▲</u>	<u>ZIP CODE ▲</u>	
<u>Treasurer</u>		Telephone number	<u>415</u>	<u>-</u> <u>751</u> <u>-</u> <u>1590</u>

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 Mr. Richard Teich, Jr.

Mailing Address 754 3rd Ave.

	<u>SF</u>	<u>CA</u>	<u>94118</u>	<u>-</u>
Title or Position ▼	<u>CITY ▲</u>	<u>STATE ▲</u>	<u>ZIP CODE ▲</u>	
<u>Treasurer</u>		Telephone number	<u>415</u>	<u>-</u> <u>751</u> <u>-</u> <u>1590</u>

Full Name of Designated Agent _____

Mailing Address _____

	<u> </u>	<u> </u>	<u> </u>	<u>-</u>
Title or Position ▼	<u>CITY ▲</u>	<u>STATE ▲</u>	<u>ZIP CODE ▲</u>	
<u> </u>		Telephone number	<u> </u>	<u>-</u> <u> </u> <u>-</u> <u> </u>

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.

Mailing Address _____

_____ - _____

CITY Δ STATE Δ ZIP CODE Δ