Image# 201904019145974889				04/01/2019 13 : 23
FEC FORM 1	STATEMEN ORGANIZA	_		PAGE 1 / 4
			Offic	ce Use Only
1. NAME OF COMMITTEE (in full)	(Check if name is changed)	Example: If typing, type over the lines.	12FE4M5	
Peggy for Cong	ress			
	15333 Culver Drive, Suite 340			
ADDRESS (number and street)	 ,#234			
(Check if address is changed)				
			CA 9260	
	CITY A		STATE A	ZIP CODE▲
COMMITTEE'S E-MAIL ADDF	RESS			
(Check if address is changed)	info@peggyforcongress	.com		
is changed)	Optional Second E-Mail Add	ress		
	info@campaign-comp			
COMMITTEE'S WEB PAGE A (Check if address is changed)	DDRESS (URL)			
2. DATE 04	01 / 2019			
3. FEC IDENTIFICATION	NUMBER ► C co	0700807		
4. IS THIS STATEMENT	× NEW (N) OR	AMENDED (A)		
I certify that I have examined	this Statement and to the best of	of my knowledge and belief it i	s true, correct and o	complete.
Type or Print Name of Treasu	Irer Slater, Jen, , ,			
Signature of Treasurer	tter, Jen, , ,	[Electronically Filed]	Date 04	01 / Y Y Y Y 01 2019
NOTE: Submission of false, erro	oneous, or incomplete information m ANY CHANGE IN INFORMATIO			enalties of 2 U.S.C. §437g.
Office Use Only		For further information co Federal Election Commission Toll Free 800-424-9530 Local 202-694-1100		FEC FORM 1 (Revised 06/2012)

			For further information contact: Federal Election Commission Toll Free 800-424-9530 Local 202-694-1100	FEC FORM 1 (Revised 06/2012)
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	F	EC For	m 1 (Revised 02/2009)	Page 2	
	ГҮРЕ	OF C	OMMITTEE		
	Cand	lidate	Committee:		
(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. (Comp information below.)	lete the candidate	
	Name Candio	•	Huang, Peggy, , ,		
	Candic Party J	date Affiliatio	on REP Office Sought: K House Senate President	State	CA 45
(C)		This committee supports/opposes only one candidate, and is NOT an authorized committee.		
	Name Candio				
-	Party	/ Com	mittee:		
(d)			Democratic, Republican, etc.) Pa	arty.
I	Politi	ical A	ction Committee (PAC):		
(e)		This committee is a separate segregated fund. (Identify connected organization on line 6.) Its conr	ected organization	is a:
			Corporation Corporation w/o Capital Stock	Labor Organizatio	n
			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 seg committee. (i.e., nonconnected committee)	gregated fund or pa	arty
			In addition, this committee is a Lobbyist/Registrant PAC.		
			In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)		
J	oint	Fund	raising 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.	o or more political	
(ł	1)		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.	o or more political	
		Com	mittees Participating in Joint Fundraiser		
		1.	FEC ID number		
		2.	FEC ID number		
		3.	FEC ID number		
		4.	FEC ID number		

FEC Form 1 (Revised 02/2009)

Write or Type Committee Name

Peggy for Congress

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

Mailing Address				
	(CITY	STATE	ZIP CODE
Relationship: Connected	Organization Affiliate	d Committee	sing 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.

Slater, Je	n, , ,
Full Name	
Mailing Address	9070 Irvine Center Drive #150
	Irvine CA 92618 - - - -
Title or Position	CITY STATE ZIP CODE
Treasurer	Telephone number 949 858 7448

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	Slater, Jen, , ,
Mailing Address	9070 Irvine Center Drive #150
	Irvine CA 92618 - - -
	CITY STATE ZIP CODE
Title or Position Treasurer	Telephone number 949 858 7448

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Full Name of Designated Agent														1									1			
Mailing Address																										
			1																L			1				
							CI	ΓY								STA	ΤE				ZIF	р С	OD	θE		
Title or Position																										
											Tele	eph	one	e ni	umt	ber										

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.

Bank c	f America	
Mailing Address	67 Technology Drive	
		CA 92618 - - - - - - - - - -
	CITY	STATE ZIP CODE
Name of Bank, Depository,	etc.	
Mailing Address		
	CITY	STATE ZIP CODE