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Image# 15970337957

FEC FORM 3

REPORT OF RECEIPTS AND DISBURSEMENTS

FORM 3	For An A	Authorized Con	nmittee			Office Use Only
NAME OF COMMITTEE (in full)	TYPE OR PRIN		cample: If typinger the lines.	g, type	12FE4M5	
Peiser For Congress						
1						
	: D O D 2222	77				
ADDRESS (number and street)	P O Box 23092					
Check if different						
than previously reported. (ACC)	Encinitas				CA L	92083
2. FEC IDENTIFICATION N	UMBER ▼	CITY ▲			STATE A	ZIP CODE
C C00549212		3. IS THIS REPORT	× NEW	OR	AMEND (A)	STATE ▼ DISTRICT DED CA 49
4. TYPE OF REPORT (**)						
 TYPE OF REPORT (Cr (a) Quarterly Reports: 	noose One)	(b) 12-Day PRE	-Election Repo	ort for the:		
			Primary (12P)	General (1	2G) Runoff (12R)
X April 15 Quarterly	Report (Q1)	П	Convention (12C)	Special (1)	2S)
July 15 Quarterly I	Report (Q2)					
October 15 Quarte	erly Report (Q3)	Election on	M = M /	D D /	Y - Y - Y - Y	in the State of
January 31 Year-E	nd Report (YE)	(c) 30-Day PO \$	ST-Election Rep	port for the:		
			General (30G	i)	Runoff (30	OR) Special (30S)
Termination Report	t (TER)	Election on	M M /	D D /	Y " Y " Y	in the State of
5. Covering Period 0	M / 01 /	Y Y Y Y Y 2015	through	M M M	/ D D /	Y Y Y Y Y 2015
I certify that I have examined th	his Report and to	the best of my k	nowledge and	belief it is tr	rue, correct and	d complete.
Type or Print Name of Treasure	Patricia A Cra	atty				
Signature of Treasurer Pate	ricia A Cratty		[Electronically I	Filed] [Date 04	/ D D / Y Y Y Y Y 12 12 2015
NOTE: Submission of false, error	neous, or incomple	ete information may	subject the per	son signing	this Report to the	ne penalties of 2 U.S.C. §437g.
Office Use Only						FEC FORM 3 (Revised 02/2003)

SUMMARY PAGE

FEC Form 3 (Revised 02/2003) of Receipts and Disbursements

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Write or Type Committee Name

Peiser For Congress

01 03 31 2015 01 2015 Report Covering the Period: From: To: **COLUMN A COLUMN B Election Cycle-to-Date** This Period Net Contributions (other than loans) **Total Contributions** (a) 30.00 85.00 (other than loans) (from Line 11(e)) (b) Total Contribution Refunds 0.00 0.00 (from Line 20(d)) (c) Net Contributions (other than loans) 30.00 85.00 (subtract Line 6(b) from Line 6(a)) Net Operating Expenditures (a) Total Operating Expenditures 3740.11 3740.11 (from Line 17) (b) Total Offsets to Operating 719.22 719.22 Expenditures (from Line 14)..... (c) Net Operating Expenditures 3020.89 3020.89 (subtract Line 7(b) from Line 7(a)) Cash on Hand at Close of 5282.11 Reporting Period (from Line 27)..... Debts and Obligations Owed TO the Committee (Itemize all on 0.00 Schedule C and/or Schedule D) 10. Debts and Obligations Owed BY the Committee (Itemize all on 13000.00 Schedule C and/or Schedule D).....

For further information contact:

Federal Election Commission 999 E Street, NW Washington, DC 20463

> Toll Free 800-424-9530 Local 202-694-1100

DETAILED SUMMARY PAGE

of Receipts

FEC Form 3 (Revised 12/2003)

PAGE 3 / 12

Write or Type Committee Name

	Peiser	For	Congres	S
--	--------	-----	---------	---

Report Covering the Period: From: 01 01 2015 To: 03 31 2015

	I. RECEIPTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
1. (CONTRIBUTIONS (other than loans) FROM:		
(a) Individuals/Persons Other Than Political Committees		
	(i) Itemized (use Schedule A)	0.00	0.00
	(ii) Unitemized	30.00	85.00
	(iii) TOTAL of contributions from individuals	30.00	85.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
`	d) The Candidatee) TOTAL CONTRIBUTIONS	0.00	0.00
	(other than loans) (add Lines 11(a)(iii), (b), (c), and (d))	30.00	85.00
	TRANSFERS FROM OTHER AUTHORIZED COMMITTEES	0.00	0.00
3. L	OANS:		
(a) Made or Guaranteed by the Candidate	0.00	0.00
(b) All Other Loans	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b))	0.00	0.00
	DFFSETS TO OPERATING		
	EXPENDITURES Refunds, Rebates, etc.)	719.22	719.22
	OTHER RECEIPTS Dividends, Interest, etc.)	0.00	0.00
1	TOTAL RECEIPTS (add Lines 1(e), 12, 13(c), 14, and 15) Carry Total to Line 24, page 4)	749.22	804.22

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3 (Revised 02/2003)

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		II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17.	OPE	ERATING EXPENDITURES	3740.11	3740.11
18.		NNSFERS TO OTHER THORIZED COMMITTEES	0.00	0.00
19.	LOA	AN REPAYMENTS:		
	(a)	Of Loans Made or Guaranteed by the Candidate	0.00	0.00
	(b)	Of All Other Loans	0.00	0.00
	(c)	TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b))	0.00	0.00
20.	REF	FUNDS OF CONTRIBUTIONS TO:		
	(a)	Individuals/Persons Other Than Political Committees	0.00	0.00
	/l=\		0.00	0.00
	(b)	Political Party Committees Other Political Committees		
		(such as PACs)	0.00	0.00
	(d)	TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c))	0.00	0.00
21.	ОТН	HER DISBURSEMENTS	0.00	0.00
22.		TAL DISBURSEMENTS d Lines 17, 18, 19(c), 20(d), and 21)	3740.11	3740.11
		III. CASH SU	MMARY	
23.	CAS	SH ON HAND AT BEGINNING OF REPOF	RTING PERIOD	8273.00
24	TOT	TAL RECEIPTS THIS PERIOD (from Line 1	16, page 3)	749.22
25.	SUE	BTOTAL (add Line 23 and Line 24)		9022.22
26.	TOT	TAL DISBURSEMENTS THIS PERIOD (from	m Line 22)	3740.11
27.		SH ON HAND AT CLOSE OF REPORTING	G PERIOD	5282.11

	CHEDULE A (FEC Form 3) EMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 5 OF 12 (check only one) 11a 11b 11c 11d 11d 12 13a 13b X 14 15
	y information copied from such Reports and Sta for commercial purposes, other than using the			
$\overline{\ \ }$	NAME OF COMMITTEE (In Full) Peiser For Congress			
Α.	Full Name (Last, First, Middle Initial) NGP Mailing Address 1101 15th St NW			Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	Ste 500 City	State DC	Zip Code 20005-5006	Transaction ID : VNVP2DNT9C7
	Washington FEC ID number of contributing federal political committee.	С	20005-5006	Amount of Each Receipt this Period
	Name of Employer	Occupation	1	, , , , ,
	Receipt For: 2016 Primary General Other (specify)	Election C	ycle-to-Date 550.00	Credit voucher adjustment
Full Name (Last, First, Middle Initial)				Date of Receipt
ο.	Mailing Address			M M / D D / Y W W Y W Y
	City	State	Zip Code	
	FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Period
	Name of Employer	Occupation	1	
	Receipt For: Primary General Other (specify)	Election C	ycle-to-Date	
	Full Name (Last, First, Middle Initial)			Date of Receipt
Mailing Address			M M M / D D / Y M Y M Y	
	City	State	Zip Code	
	FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Period
	Name of Employer	Occupation	1	
	Receipt For: Primary General Other (specify)	Election C	ycle-to-Date	
s	UBTOTAL of Receipts This Page (optional)			550.00

TOTAL This Period (last page this line number only).....

550.00

1mage# 15970337962 PAGE 6 / 12

: 97 'A = G7 9 @ G5 B9 CI G'H9 LH'F9 @ 5 H98 'HC'5 'F9 DCFHZ'G7 < 98 I @ 'CF' ± H9 A ± N5 H± CB

Form/Schedule: SA14

Transaction ID: VNVP2DNT9C7

Credit voucher issued from NGP

Form/Schedule: Transaction ID:

S

	· ·			
	CHEDULE B (FEC Form 3) EMIZED DISBURSEMENTS	Use separate scl for each categor Detailed Summa	y of the	FOR LINE NUMBER: PAGE 7 OF 12 (check only one) X 17
	ny information copied from such Reports and Statement for commercial purposes, other than using the name a			
	NAME OF COMMITTEE (In Full) Peiser For Congress			
Α.	Full Name (Last, First, Middle Initial) Susan Cratty			Date of Disbursement
	Mailing Address 917 Rosemary Ave			01 07 2015
	City State Carlsbad CA	e Zip Code 92011-3941		Amount of Each Disbursement this Period
	Purpose of Disbursement Salary		001	1000.00 Transaction ID : VNTPT9RERD8
	Candidate Name		Category/ Type	
		t For: 2016 mary General mer (specify)		Salary
_	State: District:			
В.	Full Name (Last, First, Middle Initial) NGP Mailing Address 1101 15th St NW			Date of Disbursement M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	Ste 500 City State	e Zip Code		
	Washington DC	20005-5006		Amount of Each Disbursement this Period
	Purpose of Disbursement data base		001	550.00 Transaction ID : VNTPT9RERA4
	Candidate Name		Category/ Type	
	Office Sought: House Senate President Disbursement Prir Oth			data base
_	State: District:			
C.	Full Name (Last, First, Middle Initial) NGP			Date of Disbursement
	Mailing Address 1101 15th St NW Ste 500			01 13 7 2015
	City State Washington DC	Zip Code 20005-5006		Amount of Each Disbursement this Period
	Purpose of Disbursement data base		001	750.00
	Candidate Name		Category/ Type	Transaction ID : VNTPT9RERE6
		t For: 2016 mary General er (specify)		data base
	State: District:			
				2300.00

SUBTOTAL of Disbursements This Page (optional).....

TOTAL This Period (last page this line number only).....

S

Category						
Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other that using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (in Full) Peiser For Congress Full Name (Last, First, Middle Initial) A. Tazheen V Nizam Mailing Address 971 Sheffield Dr City State Zip Code CA 92081-8915 Purpose of Disbursement Salary Office Sought: House President Primary General President Senate President Senate President Other (specify) B. Date of Disbursement this Period Amount of Each Disbursement this Period Transaction ID : VNTPT9RERY2 Salary Date of Disbursement this Period Amount of Each Disbursement this Period Transaction ID : VNTPT9RERY2 Salary Date of Disbursement this Period Category/ Type Office Sought: House President Other (specify) State: District: Full Name (Last, First, Middle Initial) C. Mailing Address City State Zip Code Amount of Each Disbursement this Period Category/ Type Office Sought: House Disbursement For: Category/ Type Office Sought: House Disburse		•		for each category	edule(s) of the	(check only one) X 17 18 19a 19b
NAME OF COMMITTEE (in Full) Peiser For Congress Full Name (Last, First, Middle Initial) A. Tazheen V Nizzam Mailing Address 971 Sheffield Dr City Vista CA 92081-8915 Purpose of Disbursement Salary Office Sought: House Disbursement Primary General Office Sought: House Disbursement Disbursement Date of Disbursement State Disbursement Date of Disbursement Date of Disbursement Office Sought: Sonate Primary General Office Sought: House Disbursement Disbursement Date of Disbursement Office Sought: House Disbursement Date of Disbursement Office Sought:						
A. Tazheen V Nizam Mailing Address 971 Sheffield Dr City Vista CA 92081-8915 Purpose of Disbursement Salary Candidate Name Other (specify) Date of Disbursement this Period Transaction ID: VNTPT9RERY2 Salary Salary Category/ Type Salary Salary District: Full Name (Last, First, Middle Initial) B. Mailing Address City State Zip Code Purpose of Disbursement Candidate Name Office Sought: President District: Candidate Name Other (specify) Date of Disbursement this Period Amount of Each Disbursement this Period Transaction ID: VNTPT9RERY2 Salary Date of Disbursement Amount of Each Disbursement Category/ Type Other (specify) Date of Disbursement this Period Date of Disbursement this Period Purpose of Disbursement Category/ Type Other (specify) Date of Disbursement Category/ Type Other (specify) Date of Disbursement Category/ Type Other (specify) Category/ Type Other (specify) Category/ Type Other (specify) Date of Disbursement this Period Amount of Each Disbursement this Period Category/ Type Other (specify) Category/ Type Other (specify) Other (specify) Other (specify)		NAME OF COMMITTEE (In Full)				
City State Zip Code Purpose of Disbursement Salary Candidate Name Office Sought: House State: District: Full Name (Last, First, Middle Initial) B. Mailing Address City State Zip Code Purpose of Disbursement For: Disburse						M M / D D / Y Y Y
Nista		Mailing Address 971 Sheffield Dr				01 02 2015
Salary Candidate Name Office Sought: House Senate Primary General State: District: Full Name (Last, First, Middle Initial) B. Mailing Address City State Zip Code President Primary General President Candidate Name Office Sought: House Primary General President Candidate Name Other (specify) Date of Disbursement this Period Amount of Each Disbursement this Period Date of Disbursement this Period Category/ Type Office Sought: House Primary General President State: District: Full Name (Last, First, Middle Initial) C. Mailing Address City State Zip Code Amount of Each Disbursement this Period Date of Disbursement Category/ Type Office Sought: House Disbursement Candidate Name Category/ Category/ Type Office Sought: House Disbursement Candidate Name Category/ Type Office Sought: House Disbursement Candidate Name Category/ Type Office Sought: House Disbursement For: Category/ Type Office Sought: House Disbursement For: Salary				•		Amount of Each Disbursement this Period
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Senate President Other (specify) State: District: Full Name (Last, First, Middle Initial) B. Mailing Address City State Zip Code Amount of Each Disbursement this Period Purpose of Disbursement Candidate Name Office Sought: House Senate Primary General Other (specify) Full Name (Last, First, Middle Initial) C. Mailing Address City State Zip Code Amount of Each Disbursement this Period Purpose of Disbursement For: Senate Primary General Other (specify) Date of Disbursement Candidate Name City State Zip Code Amount of Each Disbursement Candidate Name City State Zip Code Amount of Each Disbursement this Period Purpose of Disbursement Candidate Name Office Sought: House Senate Primary General Other (specify) Office Sought: General Other (specify)		Candidate Name				Transaction ID: VNTP19RER12
Full Name (Last, First, Middle Initial) B. Mailing Address City State Zip Code Amount of Each Disbursement this Period Purpose of Disbursement Candidate Name Office Sought: Full Name (Last, First, Middle Initial) C. Mailing Address City State Zip Code Amount of Each Disbursement this Period Disbursement For: Primary General Office Sought: Category/ Type		Senate President	X Primary	General		Salary
Mailing Address City State Zip Code Purpose of Disbursement Candidate Name Category/ Type Office Sought: House Primary General President State: District: Full Name (Last, First, Middle Initial) C. Mailing Address City State Zip Code Purpose of Disbursement Candidate Name Category/ Type Other (specify) Date of Disbursement this Period Amount of Each Disbursement this Period Date of Disbursement this Period Category/ Type Office Sought: House Disbursement For: Candidate Name Office Sought: House Disbursement For: Senate Primary General Other (specify) Office Sought: Other (specify)	_					
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City State Zip Code Amount of Each Disbursement this Period Purpose of Disbursement Candidate Name Category/ Type Office Sought: House Disbursement For: Senate Primary General Other (specify)		State: District:				
City State Zip Code Purpose of Disbursement Candidate Name Category/ Type Office Sought: House Senate Primary General Other (specify) Primary General Other (specify)	C.	,				Date of Disbursement
Purpose of Disbursement Candidate Name Category/ Type Office Sought: Bisbursement For: Senate Primary General Other (specify)		Mailing Address				M M / D D / Y Y Y
Candidate Name Category/ Type Office Sought: House Disbursement For: Senate Primary General President Other (specify)		City	State Zi	p Code		Amount of Each Disbursement this Period
Office Sought: House Senate President Disbursement For: Primary General Other (specify) Type		Purpose of Disbursement			· · · ·	
Senate Primary General President Other (specify)						
		Senate	Primary	General		
			(-	. ,,		

SUBTOTAL of Disbursements This Page (optional).....

TOTAL This Period (last page this line number only).....

652.50

2952.50

SCHEDULE C (FEC Form 3)

Use separate schedule(s) for each category of the

FOR LINE NUMBER:

PAGE

9 OF

×	13a
	13b

12

DANS			Detailed Sum		(check only or	ne) X 13
AME OF COMMITTEE (In Full)				Transactio	on ID : VNVP2A38S	D5L
eiser For Congress						
LOAN SOURCE Full Name (Last,	First, Middle Initial)		[PERSONAL F	-UNDS]	Election: 2014	
Dave Peiser			-		Primary General	
Mailing Address 1106 2nd St PMB 127					Other (specify)	▼
City	State	ZIP Cod	e			
Encinitas	CA	92024-50	008			
Original Amount of Loan	Cumulative	e Payment To [Date	Balanc	e Outstanding at C	lose of This Pe
500	0.00	, ,	0.00		, , , ,	500.00
TERMS Date Incurred		Date Due	Into	erest Rate		Secured:
M ₀₉ M / D ₀₅ D / Y Y ₀₁₃	Y M M / D		none Y	none	% (apr)	Yes
List All Endorsers or Guarantors	(if any) to Loan Sou	ırce				163
1. Full Name (Last, First, Middle II	nitial)		Name of Employ	yer		
Mailing Address			Occupation			
City	State ZIP Code	-	Amount Guaranteed Outstanding:			
2. Full Name (Last, First, Middle In	itial)		Name of Employ	yer		
	,					
Mailing Address			Occupation			
City	State ZIP Code		Amount Guaranteed			
3. Full Name (Last, First, Middle In	itial)		Outstanding: Name of Employ	yer	7	
Mailing Address			0			
Mailing Address			Occupation			
City	State ZIP Code	2	Amount Guaranteed			
-			Outstanding:		7	
4. Full Name (Last, First, Middle In	itial)		Name of Employ	yer		
Mailing Address			Occupation			
			Amount			
City	State ZIP Code		Guaranteed Outstanding:	L.,	7	
UBTOTALS This Period This Page (optional)						
OTALS This Period (last page in this	line only))	· [_	, ,	
earry outstanding balance only to LII	NE 3, Schedule D, for	r this line. If n	o Schedule D, o	carry forwar	d to appropriate	ine of Summa

SCHEDULE C (FEC Form 3) **LOANS**

Use separate schedule(s) for each category of the

FOR LINE NUMBER: (check only one)

PAGE

10

×	13a
	13b

12

Detailed Summary Page Transaction ID: VNVP2A38SG9L NAME OF COMMITTEE (In Full) Peiser For Congress LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2014 [PERSONAL FUNDS] Primary **Dave Peiser** General Mailing Address Other (specify) \blacktriangledown 1106 2nd St PMB 127 City State ZIP Code CA 92024-5008 **Encinitas** Original Amount of Loan Balance Outstanding at Close of This Period Cumulative Payment To Date 7500.00 0.00 7500.00 **TERMS** Date Incurred Date Due Interest Rate Secured: 22 ^M 12^M 2013 none ňone % (apr) No List All Endorsers or Guarantors (if any) to Loan Source 1. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 2. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount State ZIP Code Guaranteed City Outstanding: SUBTOTALS This Period This Page (optional)..... 7500.00 TOTALS This Period (last page in this line only) Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3) **LOANS**

Use separate schedule(s) for each category of the

FOR LINE NUMBER: (check only one)

PAGE

11

×	13a
	13b

12

Detailed Summary Page Transaction ID: VNVP2A381H4L NAME OF COMMITTEE (In Full) Peiser For Congress LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2014 [PERSONAL FUNDS] Primary **Dave Peiser** General Mailing Address Other (specify) \blacktriangledown 1106 2nd St PMB 127 City State ZIP Code CA 92024-5008 **Encinitas** Original Amount of Loan Balance Outstanding at Close of This Period Cumulative Payment To Date 5000.00 0.00 5000.00 **TERMS** Date Incurred Date Due Interest Rate Secured: 05 ^M 05^M ž014 none ňone % (apr) List All Endorsers or Guarantors (if any) to Loan Source 1. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 2. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code State Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount State ZIP Code Guaranteed City Outstanding: SUBTOTALS This Period This Page (optional)..... 5000.00 TOTALS This Period (last page in this line only) 13000.00 Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

1mage# 15970337968 PAGE 12 / 12

: 97 A = G7 9 @ G B9 C I G H9 L H F 9 @ 5 H9 8 HC 5 F 9 D C F H Z G7 < 98 I @ C F → H9 A = N 5 H = C B

Form/Schedule: SC/10

Transaction ID: VNVP2A381H4L

Loan from candidate

Form/Schedule: Transaction ID: