Only

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STATEMENT OF **FEC ORGANIZATION** FORM 1 Office Use Only NAME OF Example: If typing, type (Check if name 12FE4M5 COMMITTEE (in full) is changed) over the lines. AMEICA FIRST PARTY OF CALIFORNIA, USA 101 S. SANTA CRUZ AVENUE ADDRESS (number and street) **BOX 885** (Check if address is changed) LOS GATOS 95031 CA CITY A STATE A ZIP CODE A COMMITTEE'S E-MAIL ADDRESS JURISPRUDE@PROTONMAIL.COM (Check if address is changed) Optional Second E-Mail Address COMMITTEE'S WEB PAGE ADDRESS (URL) AMERICAFIRSTPARTYCA.COM (Check if address is changed) DATE 01 2022 C00811406 FEC IDENTIFICATION NUMBER 3. 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. WHEELING, JOHN, J, MR, Type or Print Name of Treasurer WHEELING, JOHN, J, MR, [Electronically Filed] 04 03 2022 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

F	EC For	m 1 (Revised 02/2009)	Page 2
		DMMITTEE 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. (Cominformation below.)	plete the candidate
Name Candi			
Candi Party	idate Affiliatio	Office Sought: House Senate President	State
(c)		This committee supports/opposes only one candidate, and is NOT an authorized committee.	
Name Candi			
Party	y Com	mittee: (National, State	(Democratic,
(d)	x	CTA CFD	Republican, etc.) Party
Polit	ical A	ction Committee (PAC):	
(e) This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected			
		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 segre committee. (i.e., nonconnected committee)			
		In addition, this committee is a Lobbyist/Registrant PAC.	
		In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)	
Joint	t Fund	raising Representative:	
(g)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for tw	vo or more political
	_	committees/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 committees/organizations, none of which is an authorized committee of a federal candidate.	o or more political
	Comr	mittees Participating in Joint Fundraiser	
	1.	FEC ID number	
	2.		
	3.		

			_
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	rite or Type Committee Name		
		PARTY OF CALIFORNIA, USA	
6.	-	Organization, Affiliated Committee, Joint Fundraising Representative, or Leade	ership PAC Sponsor
N	ONE		
	Mailing Address		
		CITY STATE	ZIP CODE
	Relationship: Connected	d Organization Affiliated Committee Joint Fundraising Representative	Leadership PAC Sponsor
	Custodian of Records: Identification books and records.	tify by name, address (phone number optional) and position of the person in p	possession of committee
		G, JOHN, J, MR,	
	Full Name	PO BOX 885	
	Mailing Address	101 S.SANTA CRUZ AVE.	
		LOS GATOS , CA , 9503°	
	Title or Position	CITY STATE	ZIP CODE
	TREAS.		360 - 4470
	Treasurer: List the name and any designated agent (e.g., a	d address (phone number optional) of the treasurer of the committee; and the issistant treasurer).	name and address of
	Full Name WHEELING of Treasurer	G, JOHN, J, MR,	
	Mailing Address	PO BOX 885	
		101 S.SANTA CRUZ AVE.	
		LOS GATOS CITY STATE	ZIP CODE
_	Title or Position TREAS.	Telephone number	360 - 4470

9.

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Full Name of Designated Agent	WHEELING, JOHN, J, ,	
Mailing Address	PO BOX 885	
	LOS GATOS CA 95031	
	CITY STATE ZI	P CODE
Title or Position TREAS.		0 4470
safety deposit be Name of Bank,	Depositories: List all banks or other depositories in which the committee deposits funds, holds a exes or maintains funds. Depository, etc. COMERICA BANK	accounts, rents
Mailing Address	ONLINE	
maming / laar see	INTERNET	
	LOS GATOS CA 95031	
	CITY STATE ZI	P CODE
Name of Bank,	Depository, etc.	
		1
Mailing Address		
maming ridarese		
	CITY STATE ZI	P CODE

: 97 'A = G7 9 @ 5 B9 CI G'H9 LH'F9 @ 5 H98 'HC'5 'F9 DCFHŽG7 < 98 I @ 'CF' ± H9 A = N5 H± CB

Form/Schedule: F1N Transaction ID:

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Form/Schedule: Transaction ID: