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Only

FEC

STATEMENT OF

TARY

17 JUN 29 AM 10: 19 **ORGANIZATION** FORM 1 Office Use Only NAME OF (Check if name Example: If typing, type 12FE4M5 COMMITTEE (in full) over the lines. is changed) INUSITIM PEYER CITIZENS FOR L ADDRESS (number and street) (Check if address is changed) COMMITTEE'S E-MAIL ADDRESS (Check if address Perser for sengitied Gong in Licion is changed) Optional Second E-Mail Address COMMITTEE'S WEB PAGE ADDRESS (URL) (Check if address MWW. PEIXELFIONS EMPHELLONG is changed) 0.6 [19] [Z617] FEC IDENTIFICATION NUMBER ▶ 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. Type or Print Name of Treasurer Date Signature of Treasurer NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to the penalties of 52 U.S.C. §30109.

ANY CHANGE IN INFORMATION SHOULD BE REPORTED WITHIN 10 DAYS.				
Office Use		For further information contact: Federal Election Commission Toll Free 800-424-9530	FEC FORM 1 (Revised 06/2012)	

Local 202-694-1100

i.	TYPE OF CO	COMMITTEE e Committee:							
	(a) X	This committee is a principal	I campaign cor	nmittee. (Con	nplete	the candidate inf	ormation belov	w.)	
	(b)	This committee is an author information below.)	ized committee	, and is NOT	a prin	cipal campaign o	committee. (Co	emplete the candi	date
	Name of Candidate	DUSTIM D	ANID	PEYE	R	1111			
	Candidate Party Affiliation	111 // // //	Office Gought:	House	×	Senate	President	State District	ND
	(c)	This committee supports/op	poses only one	candidate, a	nd is t	NOT an authorize	ed committee.		
	Name of Candidate								
	Party Com	mittee:					• • •	(Democratic,	•
	(d)	This committee is a		lational, State subordinate)		ittee of the		Republican, etc	:.) Party.
	Political A	ction Committee (PAC)	:						
	(e)	This committee is a separat	te segregated f	und. (Identify	connec	cted organization	on line 6.) Its o	connected organization	ation is a:
		Corporation		Corp	oration	w/o Capital Sto	ck	Labor Organi	zation
		Membership Organ	ization	Trade	e Asso	ciation		Cooperative	
		In addition, t	his committee is	a Lobbyist/R	egistra	int PAC.			
	(f)	This committee supports/op committee. (i.e., nonconnect	poses more the ed committee)	an one Fede	ral can	didate, and is NO	OT a separate	segregated fund	or party
		In addition, this com	mittee is a Lobb	yist/Registrar	it PAC.				
		In addition, this com	mittee is a Lead	ership PAC. (Identify	y sponsor on line	6.)		
	Joint Fund	raising Representative	:						
	(g)	This committee collects cont committees/organizations, a	ributions, pays t t least one of wi	fundraising ex nich is an autl	pense: norized	s and disburses n committee of a fe	et proceeds fo ederal candida	r two or more polit te.	icaf
	(h)	This committee collects cont committees/organizations, no	ributions, pays fone of which is	undraising ex an authorized	penses comm	s and disburses n ittee of a federal o	et proceeds fo candidate.	r two or more polit	ical
	Com	mittees Participating in Jo	int Fundraise	r					
	1.				11	FEC ID nu	mber C		
	2.				11	FEC ID nu	mber C		
	3.					FEC ID nu	mber C		
	4.		1111			FEC ID nu	mber C		

٧	Vrite or Type Committee Nat	е	
	DUSTIN	PEYER Citizens for	
6.	Name of Any Connected	Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC Sponsor	
ı			
ı	1 1 1 1		ل
	Mailing Address		
	Maining / Coross		
			_
		CITY STATE ZIP CODE	
	Relationship: Connec	ed Organization Affiliated Committee Joint Fundraising Representative Leadership PAC Spons	:or
 7.	Custodian of Records: k books and records.	entify by name, address (phone number optional) and position of the person in possession of committee	98
	Full Name DUS	TIM DAVID PEYER	┙
	Mailing Address	328 SE 1151 ST 1	
			╝
		DRISIGOCCI WID 585321-LI	
	Title or Position	CITY STATE ZIP CODE	
		Telephone number 7011-4211-268.	<u>ন</u>
8.	Treasurer: List the name any designated agent (e.g.	nd address (phone number optional) of the treasurer of the committee; and the name and address of assistant treasurer).	
	Full Name of Treasurer	TIM DAVID PEYER	_
	Mailing Address	328 S.E. 15T S.T. 111111111111111111111111111111111	
		DR. T. S.C. Q L.C W.D 58.5.371-	
		CITY STATE ZIP CODE	

CITY

Telephone number 7011-4211-2685

FEC Form 1 (Revised 02/2009)

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Title or Position

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Full Name of Designated Agent

Mailing Address

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United States Senate

OFFICE OF THE SECRETARY

OFFICE OF PUBLIC RECORDS

WASHINGTION, DC 20510-7116 . PHONE[202] 224-0322

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