**FEC** 

Only

## STATEMENT OF

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**ORGANIZATION** FORM 1 Office Use Only NAME OF (Check if name Example: If typing, type 12FE4M5 COMMITTEE (in full) is changed) over the lines. Peters for Congress 1426 Hudson Way ADDRESS (number and street) (Check if address is changed) Livermore 94550 CA CITY A STATE A ZIP CODE ▲ COMMITTEE'S E-MAIL ADDRESS petersforcongress2022ffof@gmail.com (Check if address is changed) Optional Second E-Mail Address ipeters13@ucsbalum.com COMMITTEE'S WEB PAGE ADDRESS (URL) www.jointhefightforourfuture.com/ (Check if address is changed) DATE 2022 C00805135 FEC IDENTIFICATION NUMBER 3. X 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. Amerison, Donald, Joseph, Mr., Type or Print Name of Treasurer Amerison, Donald, Joseph, Mr., [Electronically Filed] 05 19 2022 Signature of Treasurer Date 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 For further information contact: FEC FORM 1 Federal Election Commission Use (Revised 06/2012)

Toll Free 800-424-9530

Local 202-694-1100

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	TYPE OF COMMITTEE:				
	Candidate 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. (Complete the candidate information below.)				
Name of Candidate Peters, James, Andrew, Mr., Jr					
	Candidate Party Affiliation  Office Sought:  House  Senate  President	State CA  District 14			
	(c) This committee supports/opposes only one candidate, and is NOT an authorized committee.	District 14			
Name of Candidate					
	Party Committee:				
	(d) This committee is a (National, State or subordinate) committee of the Republican, e	etc.) Party			
	Political Action Committee (PAC):				
(e) This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected organization or line 6.					
	Corporation Corporation w/o Capital Stock Labor Org	ganization			
	Membership Organization Trade Association Cooperati	ve			
	In addition, this committee is a Lobbyist/Registrant PAC.				
	This committee supports/opposes more than one Federal candidate, and is NOT a separate segregated fund or party 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.)				
	(g) This committee is an independent expenditure-only political committee (Super PAC).				
	In addition, this committee is a Lobbyist/Registrant PAC.				
	(h) This committee is a political committee with both contribution and non-contribution accounts (Hybrid PAC	S).			
	In addition, this committee is a Lobbyist/Registrant PAC.				
	Joint Fundraising Representative:				
	(i) This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or committees/organizations, at least one of which is an authorized committee of a federal candidate.	more political			
	This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or more political committees/organizations, none of which is an authorized committee of a federal candidate.				
	Committees Participating in Joint Fundraiser				
	1. C				

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٧	Irite or Type Committee Name				
	Peters for Con	gress			
6.	Name of Any Connected O	rganization, Affiliated Committee, Joint Fundraising Represent	ative, or Leadership PAC Sponsor		
	Mailing Address				
		I	.         -		
		CITY ▲ STAT	TE ▲ ZIP CODE ▲		
	Relationship: Connected	Organization Affiliated Organization Joint Fundraising Repr	resentative Leadership PAC Sponso		
7.	Custodian of Records: Identify by name, address (phone number optional) and position of the person in possession of committee books and records.				
	Amerison,	Donald, Joseph, Mr.,			
	Full Name				
	Mailing Address	359 21st Ave			
		<b> #1</b>			
		San Francisco CA	94121		
		CITY ▲ STAT	TE ▲ ZIP CODE ▲		
	Title or Position ▼				
	Treasurer	Telephone number	229		
8.	<b>Treasurer:</b> 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 Amerison, of Treasurer	Oonald, Joseph, Mr.,			
	or freasurer	<sub>1</sub> 359 21st Ave			
	Mailing Address				
		San Francisco C	A 94121 -   -		
	Title or Position ▼	CITY ▲ STAT	TE ▲ ZIP CODE ▲		
	Treasurer	Telephone number	229  -   220  -   1247		

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	Full Name of Designated Agent	Esquibel, Kristen, , ,			
	Mailing Address	120 Tammy Circle			
		Bay Point CA	94565		
		CITY ▲ STATE ▲	ZIP CODE ▲		
	Title or Position		925     348     6579		
	Assistant freasur	Telephone number	925 - 348 - 6579		
	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.				
	Wells Fargo				
	Mailing Address	420 Montgomery Street			
		San Francisco CA	94104		
		CITY ▲ STATE ▲	ZIP CODE ▲		
Name of Bank, Depository, etc.					
	Mailing Address				
		CITY ▲ STATE ▲	ZIP CODE ▲		