

FEC
FORM 1

STATEMENT OF
ORGANIZATION

RECEIVED
FEC MAIL CENTER

2021 JUL -8 AM 8:54
Once Use Only

1. NAME OF
COMMITTEE (in full)

☐

(Check if name
is changed)

Example: If typing, type
over the lines.

12FE4M5

PECKARSKY FOR WISCONSIN, INC.

ADDRESS (number and street)

1345 N JEFFERSON ST

☐

(Check if address
is changed)

SUITE 189

MILWAUKEE

CITY ▲

WI

STATE ▲

53202

ZIP CODE ▲

COMMITTEE'S E-MAIL ADDRESS

☐

(Check if address
is changed)

PETER4WI@GMAIL.COM

Optional Second E-Mail Address

COMMITTEE'S WEB PAGE ADDRESS (URL)

☐

(Check if address
is changed)

2. DATE

07

01

2021

3. FEC IDENTIFICATION NUMBER ►

C00783365

4. 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 PETER PECKARSKY

Signature of Treasurer

Peter Peckarsky

Date

07

01

2021

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
Only

For further information contact:
Federal Election Commission
Toll Free 800-424-9530
Local 202-694-1100

FEC FORM 1
(Revised 06/2012)

5. 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

PETER PECKARSKY

Candidate Party Affiliation

DEM

Office Sought:

☐

House

☒

Senate

☐

President

State

WI

District

- (c) ☐ This committee supports/opposes only one candidate, and is NOT an authorized committee.

Name of Candidate

Party Committee:

- (d) ☐ This committee is a (National, State or subordinate) committee of the (Democratic, Republican, etc.) Party.

Political Action Committee (PAC):

- (e) ☐ This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected organization is a:
- ☐ 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 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.)

Joint Fundraising Representative:

- (g) ☐ This committee collects contributions, pays fundraising expenses and disburses net proceeds for two 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 or more political committees/organizations, none of which is an authorized committee of a federal candidate.

Committees Participating in Joint Fundraiser

- | | | | |
|----|----------------------|---------------|----------------------|
| 1. | <input type="text"/> | FEC ID number | <input type="text"/> |
| 2. | <input type="text"/> | FEC ID number | <input type="text"/> |
| 3. | <input type="text"/> | FEC ID number | <input type="text"/> |
| 4. | <input type="text"/> | FEC ID number | <input type="text"/> |

Write or Type Committee Name

PECKARSKY FOR WISCONSIN, INC.

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

[illegible]**Mailing Address**

CITY

STATE

ZIP CODE

Relationship: ☐ Connected Organization ☐ Affiliated Committee ☐ Joint Fundraising 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.

Full Name

PETER PECKARSKY

Mailing Address

1345 N JEFFERSON ST

|SUITE 189

MILWAUKEE

|W|

153202

Title or Position

CITY

STATE

ZIP CODE

TREASURER

Telephone number

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

PETER PECKARSKY

Mailing Address

1345 N JEFFERSON ST

|SUITE 189

MILWAUKEE

|W|

|53202

Title or Position

|TREASURER

Telephone number

Full Name of
Designated
Agent

PETER PECKARSKY

Mailing Address

1345 N JEFFERSON ST

SUITE 189

MILWAUKEE

CITY

WI

STATE

53202

ZIP CODE

Title or Position

TREASURER

Telephone number

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.

BMO HARRIS BANK

Mailing Address

7501 W NORTH AVE

WAUWATOSA

CITY

WI

STATE

53213

ZIP CODE

Name of Bank, Depository, etc.

Mailing Address

CITY

STATE

ZIP CODE

2021-07-13 PM 04:00:00

5(g) or (h). **Joint Fundraising Participant:**

1. _____
 2. _____
 3. _____
 4. _____

FEC ID number

C _____

FEC ID number

C _____

FEC ID number

C _____

FEC ID number

C _____

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

Mailing Address

 _____ - _____

Relationship:

CITY ▲

STATE ▲

ZIP CODE ▲

☐

Connected Organization

☐

Affiliated Committee

☐

Joint Fundraising Representative

☐

Leadership PAC Sponsor

8. **Designated Agent:** Identify by name, address (phone number – optional)

Full Name _____

Mailing Address _____

 _____ - _____

TITLE OR POSITION ▼

CITY ▲

STATE ▲

ZIP CODE ▲

Telephone Number

_____-_____-_____

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.

Mailing Address

 _____ - _____

CITY ▲

STATE ▲

ZIP CODE ▲

2021-07-13 PM 03:00:00

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JUL -8 AM 8:54



Pull to open.

ORIGIN ID: MKEA (414) 316-6456
CHRIS TREBATOSKI

SHIP DATE: 01JUL21
ACTWGT: 0.50 LB
CAD: 250244993/INET4340

1110 NORTH OLD WORLD THIRD STR
SUITE 400
MILWAUKEE, WI 53203
UNITED STATES US

BILL SENDER

TO **FEDERAL ELECTIONS COMMISSION**
FEDERAL ELECTIONS COMMISSION
1050 FIRST STREET, NE

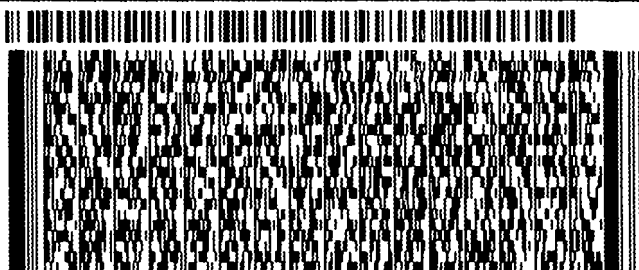
WASHINGTON DC 20002

(414) 369-6182
INV.
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DEPT.

56DJ20265/FE4A



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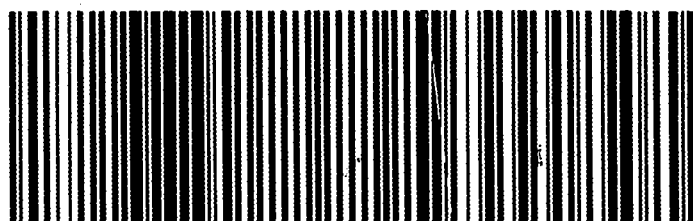
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DC-US IAD



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2
10:30
2850
02

Federal Election Commission
ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS
The FEC added this page to the end of this filing to indicate how it was received.

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<input type="checkbox"/> No Postmark	
<input checked="" type="checkbox"/> Overnight Delivery Service (Specify): FED EX	Shipping Date 07-01-21
	Next Business Day Delivery <input checked="" type="checkbox"/>
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<input type="checkbox"/> Other (Specify):	Date of Receipt or Postmarked
 PREPARER	07-13-21 DATE PREPARED

(3/2015)

2021-07-13 10:00:00