

ORIGINAL STATEMENT OF ORGANIZATION

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Office Use Only **FEC MAIL CENTER**

**FEC
FORM 1**

1. NAME OF
COMMITTEE (in full)



(Check if name
is changed)

Example: If typing, type
over the lines.

12FE4M5

Scott Peters Victory Fund 2012

ADDRESS (number and street)

330 Encinitas Blvd., Ste. 101



(Check if address
is changed)

Encinitas

CA

92024

CITY

STATE

ZIP CODE

COMMITTEE'S E-MAIL ADDRESS (Please provide only one e-mail address)

nhaley@thinkcpa.com



(Check if address
is changed)

COMMITTEE'S WEB PAGE ADDRESS (URL)

http://www.scottpeters.com



(Check if address
is changed)

2. DATE

08

17

2012

3. FEC IDENTIFICATION NUMBER

C

4. IS THIS STATEMENT



NEW (N)

OR

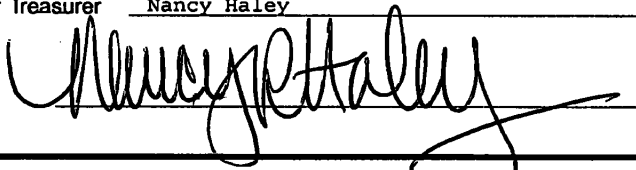


AMENDED (A)

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 Nancy Haley

Signature of Treasurer



Date

08

17

2012

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

FEC FORM 1
(Revised 02/2009)

12030874824

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 _____

Candidate Party Affiliation: _____ Office Sought: House Senate President State: _____ 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.	Scott Peters for Congress 2012	FEC ID number	C00503110
2.	Democratic State Central Committee of CA - Federal	FEC ID number	C00105668
3.		FEC ID number	C
4.		FEC ID number	C

12030874825

Write or Type Committee Name

Scott Peters Victory Fund 2012

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

None

Mailing Address

[Mailing address grid]

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 Nancy Haley

Mailing Address 330 Encinitas Blvd., Ste. 101

Encinitas CA 92024

Title or Position

CITY

STATE

ZIP CODE

Custodian of Records Telephone number 760 632 3600

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 Nancy Haley

Mailing Address 330 Encinitas Blvd., Ste. 101

Encinitas CA 92024

Title or Position

CITY

STATE

ZIP CODE

Treasurer Telephone number 760 632 3600

12030874826

Write or Type Committee Name

Scott Peters Victory Fund 2012

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

Two rows of empty grid boxes for text entry.

Mailing Address

Three rows of empty grid boxes for mailing address.

CITY

STATE

ZIP CODE

Relationship:

Connected Organization

Affiliated Committee

Leadership PAC Sponsor

Joint Fundraising Representative

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

One row of empty grid boxes for full name.

Mailing Address

Three rows of empty grid boxes for mailing address.

CITY

STATE

ZIP CODE

Title or Position

One row of empty grid boxes for title or position.

Telephone number

One row of empty grid boxes for 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

One row of empty grid boxes for full name of treasurer.

Mailing Address

Three rows of empty grid boxes for mailing address.

CITY

STATE

ZIP CODE

Title or Position

One row of empty grid boxes for title or position.

Telephone number

One row of empty grid boxes for telephone number.

12030874827

Write or Type Committee Name

Scott Peters Victory Fund 2012

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

Grid for Name of Any Connected Organization, Affiliated Committee, Leadership PAC Sponsor or Joint Fundraising Representative

Mailing Address

Grid for Mailing Address

CITY

STATE

ZIP CODE

Relationship:

Connected Organization

Affiliated Committee

Leadership PAC Sponsor

Joint Fundraising Representative

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

Grid for Full Name

Mailing Address

Grid for Mailing Address

CITY

STATE

ZIP CODE

Title or Position

Grid for Title or Position

Telephone number

Grid for 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

Grid for Full Name of Treasurer

Mailing Address

Grid for Mailing Address

CITY

STATE

ZIP CODE

Title or Position

Grid for Title or Position

Telephone number

Grid for Telephone number

12030874828

Full Name of Designated Agent

Robin Stephen

Mailing Address

330 Encinitas Blvd., Ste. 101

Encinitas

CITY

CA

STATE

92024

ZIP CODE

Title or Position

Assistant Treasurer

Telephone number

760

632

3600

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.

California Bank & Trust

Mailing Address

550 S. Hope St., Ste. 100

Los Angeles

CITY

CA

STATE

90071

ZIP CODE

Name of Bank, Depository, etc.

Mailing Address

CITY

STATE

ZIP CODE

12030874829

Full Name of Designated Agent

[Grid for Full Name of Designated Agent]

Mailing Address

[Grid for Mailing Address Line 1]

[Grid for Mailing Address Line 2]

[Grid for Mailing Address Line 3]

CITY

STATE

ZIP CODE

Title or Position

[Grid for Title or Position]

Telephone number

[Grid for 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.

[Grid for Name of Bank, Depository, etc.]

Mailing Address

[Grid for Mailing Address Line 1]

[Grid for Mailing Address Line 2]

[Grid for Mailing Address Line 3]

CITY

STATE

ZIP CODE

Name of Bank, Depository, etc.

[Grid for Name of Bank, Depository, etc.]

Mailing Address

[Grid for Mailing Address Line 1]

[Grid for Mailing Address Line 2]

[Grid for Mailing Address Line 3]

CITY

STATE

ZIP CODE

12030874830

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.

Hand Delivered Date of Receipt

USPS First Class Mail Postmarked

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USPS Priority Mail Postmarked
Delivery Confirmation™ or Signature Confirmation™ Label

USPS Express Mail Postmarked

Postmark Illegible

No Postmark

Overnight Delivery Service (Specify): *FedEx* Shipping Date
8/17/12
Next Business Day Delivery

Received from House Records & Registration Office Date of Receipt

Received from Senate Public Records Office Date of Receipt

Received from Electronic Filing Office Date of Receipt

Other (Specify): Date of Receipt or Postmarked

[Signature]

PREPARER

(3/2005)

8/20/12

DATE PREPARED

12030874831