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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) over the lines. is changed) PETERSEN FOR PRESIDENT 2016 LLC 4328 WALNUT STREET 3A ADDRESS (number and street) (Check if address is changed) KANSAS CITY 64111 MO CITY A STATE A ZIP CODE A COMMITTEE'S E-MAIL ADDRESS AUSTIN@PETERSEN2016.COM (Check if address is changed) Optional Second E-Mail Address CONTACT@PETERSEN2016.COM COMMITTEE'S WEB PAGE ADDRESS (URL) (Check if address is changed) DATE 2016 C00592790 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. Michael Knebel Type or Print Name of Treasurer Michael Knebel [Electronically Filed] 02 2016 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 Only

Local 202-694-1100

FEC Form 1 (F	Revised 02/2009)	Page 2
TYPE OF COMMIT		
(a) X This		
	committee is a principal campaign committee. (Complete the candidate information below.)	
inform	committee is an authorized committee, and is NOT a principal campaign committee. (Comp nation below.)	lete the candidate
Name of Candidate	Austin Petersen	
Candidate Party Affiliation	LIB Office Sought: House Senate X President	State
(c) This	committee supports/opposes only one candidate, and is NOT an authorized committee.	District
Name of Candidate		
Party Committe	e:	
	(National, State	Democratic, Republican, etc.) Party.
Political Action	Committee (PAC):	
(e) This	committee is a separate segregated fund. (Identify connected organization on line 6.) Its conn	nected 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 seg	gregated fund or party
	nittee. (i.e., nonconnected committee)	
Ä	In addition, this committee is a Lobbyist/Registrant PAC.	
	In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)	
Joint Fundraisin	g Representative:	
	committee collects contributions, pays fundraising expenses and disburses net proceeds for two nittees/organizations, at least one of which is an authorized committee of a federal candidate.	o or more political
	ommittee collects contributions, pays fundraising expenses and disburses net proceeds for two ittees/organizations, none of which is an authorized committee of a federal candidate.	o or more political
Committees	s Participating in Joint Fundraiser	
1.	FEC ID number	
2.	FEC ID number	
3.	FEC ID number	
4		

FFC Form 1 (Davised 03	(2000)			Daga 2
FEC Form 1 (Revised 02  Write or Type Committee Name	12003)			Page <b>3</b>
	R PRESIDENT 2016 LL	C		
	ganization, Affiliated Committee, Joint Fund		tive or Leaders	shin PAC Sponsor
-	jamzadon, rumadoa Gommidoo, Jone Fana	ruising Roprosonia	aro, or Loudon	omp i rie opense.
NONE				
Mailing Address				
	CITY	STAT	E	ZIP CODE
Relationship: Connected (	Organization Affiliated Committee Joint	t Fundraising Repres	sentative Le	adership PAC Sponsor
<ol> <li>Custodian of Records: Identiful books and records.</li> </ol>	fy by name, address (phone number optiona	al) and position of the	ne person in po	ssession of committee
Michael Kne	bel			1
	4328 Walnut Street			
	3A			
	Kansas City	MO	64111	-
'				
Title or Position	CITY	STATE		ZIP CODE
Treasurer		lephone number	402	770 7017
3. <b>Treasurer:</b> List the name and any designated agent (e.g., as	address (phone number optional) of the treasistant treasurer).	asurer of the commi	ttee; and the na	ame and address of
Full Name Michael Kne	oel			1
of Treasurer	4328 Walnut Street			
Mailing Address	3A			
L	Kansas City	1 1 1 1 1 1	64111	
L	CITY	MO STATE		ZIP CODE
Title or Position Treasurer		lephone number	402	770 - 7017

FEC Form	1 (Revised 02/2009)						Page <b>4</b>
Full Name of Designated	Tony Stiles						
Agent							
Mailing Address	4328 Walnut	Street					
	3A						
	Kansas City			MO	64111		-
		CITY		STATE		ZIP C	ODE
Title or Position Assistant Treas	irer		Telephone nu	mber [	816 – _	309	1557
	<b>Depositories:</b> List all ban xes or maintains funds. Depository, etc.	iks or other depositories i	n which the commi	nee deposits			and, rones
safety deposit be	xes or maintains funds.	iks or other depositories i	n which the commi	I I I I		1 1	into, ronto
safety deposit be Name of Bank,	xes or maintains funds. Depository, etc.		n which the commi		<u>                                     </u>		
safety deposit be	pepository, etc.  Bank of America		n which the commi	Liee deposits			
safety deposit be Name of Bank,	pepository, etc.  Bank of America		n which the commi	MO	64111		
safety deposit be Name of Bank,	Bank of America  331 Westport		n which the commi			ZIP C	
safety deposit be Name of Bank,	Bank of America  331 Westport	t Road	n which the commi	MO			
safety deposit be Name of Bank, Mailing Address	Bank of America  331 Westport  Kansas City  Depository, etc.	t Road	n which the commi	MO			
safety deposit be Name of Bank, Mailing Address	Bank of America  331 Westport	t Road	n which the commi	MO			
safety deposit be Name of Bank, Mailing Address	Bank of America  331 Westport  Kansas City  Depository, etc.	t Road	n which the commi	MO			
safety deposit be Name of Bank, Mailing Address	Bank of America  331 Westport  Kansas City  Depository, etc.	t Road	n which the commi	MO			
safety deposit be Name of Bank, Mailing Address	Bank of America  331 Westport  Kansas City  Depository, etc.	t Road	n which the commi	MO			