2018-09-27-08-00280072

FEC FORM 1

STATEMENT OF **ORGANIZATION**

RECEIVED FEC MAIL CENTER

:		· 	20180000000000 PrivAM 8: 14
1. NAME OF COMMITTEE (in full)	(Check if name is changed)	Example: If typing, type over the lines.	12FE4M5
, Women for Good Go	vernance , , , , , , ,		
ADDRESS (number and street)	_ , 321, High Şchool F	Rd _i NE	
	Suite D3-220		
	լ Bainbridge,Islandլ CITY ▲		
COMMITTEE'S E-MAIL ADDRE	ss		
(Check if address is changed)	sophia₁hume@gma	ail.com	
	Optional Second E-Mail Add		
COMMITTEE'S WEB PAGE AD (Check if address is changed)	DRESS (URL)		
2. DATE 09 1	4 2018		
3. FEC IDENTIFICATION N	UMBER ▶ C		
4. IS THIS STATEMENT	NEW (N) OR	AMENDED (A)	•
I certify that I have examined t	his Statement and to the best	of my knowledge and belief i	t is true, correct and complete.
Type or Print Name of Treasure	er Sophia Avent		
Signature of Treasurer	- Tab		Date 09 14 2018
NOTE: Submission of false, error	-	may subject the person signing ION SHOULD BE REPORTED	this Statement to the penalties of 52 U.S.C. §3010 WITHIN 10 DAYS.
Office Use Only		For further information of Federal Election Commiss Toll Free 800-424-9530 Local 202-694-1100	EEL ELIBIN I

	FE	C For	m 1 (Revised 02/2009)	Page 2
i.			OMMITTEE .	
	(a)	L	Committee: 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. (Complinformation below.)	ete the candidate
	Name o			
	Candida Party A		Office Sought: House Senate President	State District
	(c)		This committee supports/opposes only one candidate, and is NOT an authorized committee.	
	Name o Candida			
	Party	Com	imittee: (National, State	Democratic,
	(d)			epublican, etc.) Party.
	Politic	al A	ction Committee (PAC):	
	(e)		This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected organization on line 6.)	ected 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)	X	This committee supports/opposes more than one Federal candidate, and is NOT a separate seg committee. (i.e., nonconnected committee)	regated fund or party
			In addition, this committee is a Lobbyist/Registrant PAC.	
			In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)	
	Joint F	Fund	raising Representative:	•
	(g)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for two committees/organizations, at least one of which is an authorized committee of a federal candidate.	or more political
	(h)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for two committees/organizations, none of which is an authorized committee of a federal candidate.	or more political
		Comi	mittees Participating in Joint Fundraiser	
		1.		
		2.	FEC ID number	
		3.	FEC ID number	
		4.		

	FEC FORM I (Neviseu (02/2009)	raye 3
Wr	ite or Type Committee Name		
6.	Name of Any Connected C	Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership	PAC Sponsor
	Nqne		
ı	Mailing Address		
		CITY STATE ZIP	CODE
ı	Relationship:	d Organization Affiliated Committee Joint Fundraising Representative Leader	ship PAC Sponsor
	Custodian of Records: Idea books and records.	ntify by name, address (phone number optional) and position of the person in posses	sion of committee
I	Full Name Sophia	a Αγεηt , , , , , , , , , , , , , , , , , , ,	
I	Mailing Address	[, 9,17,5,Ferncliff,Ave NE, , , , , , , , , , , , , , , ,	
		Bainbridge Island WA 98110	
	Title or Position	CITY STATE ZIP	CODE
	i Treasurer ,		7
8.	Treasurer: List the name an any designated agent (e.g.,	d address (phone number optional) of the treasurer of the committee; and the name assistant treasurer).	and address of
	Full Name of Treasurer Soph	ia Avent , , , , , , , , , , , , , , , , , , ,	
ı	Mailing Address	_ 9175,Ferncliff,Ave NE,	1 1 1 1 1
			1111
		L Bainbridge Island L L L L L L L L L L L L L L L L L L L	
	Title or Position	CITY STATE ZIP Telephone number 703 - 403	CODE 7 - 1653
1			

	evised 02/2009)		Page 4
Full Name of Designated Agent	, Şophia Ανent, , , , , , , , , , , , , , , , , , ,		
Mailing Address	[9175,Ferncliff Ave NE	· 	
	[լ Bajnþriḍge lsland, լ լ լ լ լ լ լ сітү	LWA STATE	98110 -
Title or Position	<u> </u>	e number 2	03 -[407]-[1653
Banks or Other Depo- safety deposit boxes or Name of Bank, Deposi		nmittee deposits	funds, holds accounts, rents
Name of Barn, Beposi		1111	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
Mailing Address	, Қеу Bank , , , , , , , , , , , , , , , , , , ,		
<u>لــــ</u>	, Қеу Bank , , , , , , , , , , , , , , , , , , ,		
<u>لــــ</u>	, Қеу Bank , , , , , , , , , , , , , , , , , , ,	LQHI	
ــــــــــــــــــــــــــــــــــــــ	, Қеу Bank , , , , , , , , , , , , , , , , , , ,	LQH STATE	ZIP CODE
ــــــــــــــــــــــــــــــــــــــ	Key Bank , , , , , , , , , , , , , , , , , , ,		
Mailing Address	Key Bank , , , , , , , , , , , , , , , , , , ,		
Mailing Address Name of Bank, Deposi	Key Bank 111111111111111111111111111111111111		
Mailing Address Name of Bank, Deposi	Key Bank 111111111111111111111111111111111111		
Mailing Address Name of Bank, Deposi	Key Bank 111111111111111111111111111111111111		

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FEC Form 1S (Revised 02/2017)

Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

Page	of	

				
5(g) or (h). Joint Fundrai	sing Participant:			
_{1.} L _{1.1.} None	<u> </u>		FEC ID number	C
2.			FEC ID number	C
3.			FEC ID number	C
4.			FEC ID number	C
6. Name of Any Connect	ed Organization, Affiliated Co	ommittee, Joint Fundr	aising Representativ	re, or Leadership PAC Sponsor
L , , , None				
	1111111			
Marilla a Addunas	ı			
Mailing Address				<u> </u>
Relationship:	<u> </u>	CITY A	STATE A	ZIP CODE 🛦
	F-4	1960	Fundraising Represen	
	Cled Organization Annated	7 Committee 7 3 Some	- undialising riepresen	Leadership (AC Sponsor
8. Designated Agent: Iden	ntify by name, address (phone	number – optional)		
Full Name	N/A , , , , , , , ,			
Mailing Address	1,,,,,,,			
	1		 	
	l			
	Cr	<u> </u>	STATE ▲	ZIP CODE A
TITLE OR POSITION	ON ▼ .	,	elephone Number	!-! !-! !
			erepriorie Number	
9. Banks or Other Depos	sitories: List all banks or othe	r depositories in which	the committee depos	its funds, holds accounts, rents
safety deposit boxes or	maintains funds.			no tarias, riotas associnto, torno
Name of Bank, Depository, etc.	, <u>Ņ</u> /Ą , , , , , , ,			
Mailing Address			<u> </u>	
		<u> </u>		<u> </u>
•	Ci	TY A	STATE ▲	ZIP CODE A

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Federal Election Commission ENVELOPE REPLACEMENT PAGE FOR INCOMING The FEC added this page to the end of this filing to indicate I	
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	Postmarked
USPS Priority Mail Express	
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No Postmark	
Overnight Delivery Service (Specify):	Shipping Date
Next Busines	s 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):	eceipt or Postmarked
af .	9-27-18
(3/2015)	DATE PREPARED