2012 JUL 26 AM 8:50

FEC MAIL CENTER

Committee Name:	LO IMIL OF MIEK
Cascadia PAC	
If registered, FEC ID:	
Today's Date: 7/15/2012	

Federal Election Commission 999 E Street, N.W. Washington, D.C. 20463

Re: Form 1, Statement of Organization—Unlimited Contributions

To Whom It May Concern:

This committee intends to make independent expenditures, and consistent with the U.S. Court of Appeals for the District of Columbia Circuit decision in SpeechNow v. FEC, it therefore intends to raise funds in unlimited amounts. This committee will not use those funds to make contributions, whether direct, in-kind, or via coordinated communications, to federal candidates or committees.

Treasurer's Warne:

Colby Clipston

Treasurer

Treasurer

12030862236

FEC FORM 1

STATEMENT OF ORGANIZATION

RECEIVED

2012 JUL 26 AM 8: 50

NAME OF COMMITTEE (in full)	(Check if name is changed)	Example: If typing, type over the lines.	12FE4M5 AL CEI	ITER
Ciaisiciaidiiai iPi	AC		1111111	
			1111111	
ADDRESS (number and street)	61181 NE LIA	urellhiurisiti	Piliaiciei I I I	
(Check if address is changed)				
	PIOITITI I I AINIS			2 - 2,6,5,1 IP CODE ▲
COMMITTEE'S E-MAIL ADDRE	ess			
(Check if address is changed)	10, rii 10, ang 10, Ph	OF Mail 1 . COM		
	Optional Second E-Mail Add	tress TimidiiliojCivim		
COMMITTEE'S WEB PAGE AD				
(Check if address is changed)	mmmaiciaisicia	dijapaci ocom		
2. DATE 07 1	5 2012			
3. FEC IDENTIFICATION N	UMBER ▶ C	en de la transperagrame de la composition della		
4. IS THIS STATEMENT V	NEW (N) OR	AMENDED (A)	•	
I certify that I have examined to	his Statement and to the best	of my knowledge and belief it	is true, correct and complete	9 .
Type or Print Name of Treasure	colby Clips	iton		
Signature of Treasurer	ly lup	Me	Date O 7 1 5	2012
NOTE: Submission of false, erron		may subject the person signing to ON SHOULD BE REPORTED W		of 2 U.S.C. §437g.
Office Use		For further information of Federal Election Commission Toll Free 800-424-9530	n FEC F	ORM 1 06/2012)

FEC Form 1 (Revised 02/2009)	Page Z
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 information below.)	e candidate
Name of Candidate	1111
Carrididate Office State Party Affiliation Sought: House Senate President Disc	te trict
(c) This committee supports/opposes only one candidate, and is NOT an authorized committee.	
Name of Candidate	
Party Committee:	
(National, State (Democi (d) This committee is a or subordinate) committee of the Republic	ratic, can, etc.) Party.
Political Action Committee (PAC):	
(e) This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected organization	organization is a:
Corporation Corporation w/o Capital Stock Labor	Organization
Membership Organization Trade Association Coope	rative
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 committee. (i.e., nonconnected committee)	d 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 Fundralsing Representative:	
(g) This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or mo committees/organizations, at least one of which is an authorized committee of a federal cardidate.	re political
(h) This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or more committees/organizations, none of which is an authorized committee of a federal candidate.	re political
Committees Participating in Joint Fundraiser	
1. FEC ID number C	·
2. FEC ID number C	
3. FEC ID number C	
4.	

d Organization Affiliated	none number optio		Leadership PA the person in possession of
d Organization Affiliated	d Committee Jo	oint Fundraising Repre	Leadership PA
d Organization Affiliated	d Committee Jo	oint Fundraising Repre	Leadership PA
d Organization Affiliated	d Committee Jo	oint Fundraising Repre	Leadership PA
d Organization Affiliated	d Committee Jo	oint Fundraising Repre	Leadership PA the person in possession of
ntify by name, address (ph	none number optio	onal) and position of t	the person in possession of
ntify by name, address (ph	none number optio	onal) and position of t	the person in possession of
			
16.1.8. W.E. 1.			
		~ ,	<u> </u>
Pioiritianid			R 9,7,2,3,2-
C	YTK	STATI	E ZIP CODE
	٠ لــــا	Telephone number	503-901-
d address (phone number	optional) of the tr	reasurer of the comm	nittee; and the name and ad
	P101r11 a1n16	P ₁ o ₁ r ₁ r ₁ i ₁ a ₁ n ₁ i ₁ CITY	CITY STATE

Piortiliand

Tirierasiurieiri

CITY

6,1,8, NE, Laure, i, hick 1, 5,7, P, 1, a, c,e,

Telephone number

OR

STATE

[9,7,2,3,2]-[2,6,5,1]

ZIP CODE

503-901-7299

Name of Any Connected Organization, Affiliated Committee, Joint Fundralsing Representative, or Leadership PAC Sponsor

Page 3

FEC Form 1 (Revised 02/2009)

Write or Type Committee Name

Cascadia

Mailing Address

Title or Position

9.

FEC For	m 1 (Revised 02/2009)		Page 4	
-				
Full Name of Designated				
Agent	James, Diorian, Chiriisitiia	$n_1 S_1 e_1 n_1 + 1$		
Mailing Address	19,2,4, ISIE 11,6+14, Aviein	પાલાં ા ા ા ા		
	PIDITITIANI	OR	9,7,2,1,4 - [2,6,2,1]	
Title or Desition	CITY	STATE	ZIP CODE	
Title or Position	TIAINITI ITINEIAISIUIPIEIRI Telep	hone number 5	0,3]-[6,2,1]-[7,8,3,1]	
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.			
	ISITIEIr II ing I Salviings Bain	<u>K </u>		
Mailing Address	4171281 INE ISlainidigi Bio	u, l, e, v, a, r, d,		
	Pioiritiliainidi	UR	9.7.2113-	
	CITY	STATE	ZIP CODE	
Name of Bank,	Depository, etc.			
	1		,	
Mailing Address			,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
·				
	СІТУ	STATE	ZIP CODE	

Federal Election Commission ENVELOPE REPLACEMENT PAGE FOR INCOMING The FEC added this page to the end of this filing to indicate	
Hand Delivered	Date of Receipt
USPS First Class Mail	Postmarked
USPS Registered/Certified	Postmarked (R/C)
USPS Priority Mail	Postmarked
Delivery Confirmation™ or Signature Confir	mation™ Label
USPS Express Mail	Postmarked
Postmark Illegible	
No Postmark	
Overnight Delivery Service (Specify):	Shipping Date
Next Busines	ss 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):	Receipt or Postmarked
for the same of th	1/26/12
PREPARER	DATE PREPARED

(3/2005)