

FEC  
FORM 1

STATEMENT OF  
ORGANIZATION

RECEIVED

2012 JUL 18 AM 8:12  
Office Use Only

1. NAME OF  
COMMITTEE (in full)

(Check if name  
is changed)

Example: If typing, type  
over the lines.

12FE4M5

FEC MAIL CENTER

Student Voice Project

ADDRESS (number and street)

P.O. Box 2897

(Check if address  
is changed)

Pasco

WA 99302

CITY

STATE

ZIP CODE

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

jcostanzo@svppac.com

(Check if address  
is changed)

COMMITTEE'S WEB PAGE ADDRESS (URL)

SVPPAC.org

(Check if address  
is changed)

2. DATE 07 6 2012

3. FEC IDENTIFICATION NUMBER

C 00524090

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

Jared M Costanzo

Signature of Treasurer



Date

07 06 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)

12030851335

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. \_\_\_\_\_ FEC ID number
- 2. \_\_\_\_\_ FEC ID number
- 3. \_\_\_\_\_ FEC ID number
- 4. \_\_\_\_\_ FEC ID number

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Write or Type Committee Name

# Student Voice Project

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

None

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 **Jared M Costanzo**

Mailing Address **P.O. Box 2897**

**Pasco**

**WA**

**99302**

Title or Position

CITY

STATE

ZIP CODE

**President and Treasurer**

Telephone number **509 460 0643**

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 **Jared M Costanzo**

Mailing Address **P.O. Box 2897**

**Pasco**

**WA**

**99302**

Title or Position

CITY

STATE

ZIP CODE

**President and Treasurer**

Telephone number **509 460 0643**

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Full Name of Designated Agent

Mailing Address

	CITY	STATE	ZIP CODE
Title or Position			
	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.

Hapo Community Credit Union

Mailing Address 4902 Road 68

Pasco WA 99301

CITY	STATE	ZIP CODE
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Name of Bank, Depository, etc.

Mailing Address

CITY	STATE	ZIP CODE
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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 Registered/Certified Postmarked (R/C)

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

USPS Express Mail Postmarked

Postmark Illegible

No Postmark


Overnight Delivery Service (Specify): Shipping Date  
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

  
PREPARER  
(3/2005)

7/18/12  
DATE PREPARED

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