Only

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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) is changed) over the lines. FRIENDS OF DOUG BASLER PO BOX 6145 ADDRESS (number and street) (Check if address is changed) **KENT** WA 98064 CITY A STATE A ZIP CODE ▲ COMMITTEE'S E-MAIL ADDRESS CANDIDATE@DOUGBASLER.COM (Check if address is changed) Optional Second E-Mail Address info@dougbasler.com COMMITTEE'S WEB PAGE ADDRESS (URL) dougbasler.com (Check if address is changed) DATE 2018 C00566232 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. Basler, Doug, , , Type or Print Name of Treasurer Basler, Doug, , , [Electronically Filed] 07 13 2023 Signature of Treasurer Date NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to the penalties of 52 U.S.C. §30109. 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

Local 202-694-1100

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|---|--|-----------------|--|--|--|
|   | TYPE OF COMMITTEE:   |                 |  |  |  |
|   | Candidate Committee:   |                 |  |  |  |
|   | (a) X 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 candinformation below.)  | didate          |  |  |  |
|   | Name of Candidate Basler, Douglas, , Mr.,  |                 |  |  |  |
|   | Party Affiliation REP Sought: House Senate President   | State WA        |  |  |  |
|   | (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 Republican, etc.)  | Party           |  |  |  |
|   | Political Action Committee (PAC):  |                 |  |  |  |
|   | (e) This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected organization or line 6.   | anization is a: |  |  |  |
|   | Corporation Corporation w/o Capital Stock Labor Organiz  | ation           |  |  |  |
|   | 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 function committee. (i.e., nonconnected committee)   | l or party      |  |  |  |
|   | In addition, this committee is a Lobbyist/Registrant PAC.  |                 |  |  |  |
|   | In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)   |                 |  |  |  |
|   | (g) This committee is an independent expenditure-only political committee (Super PAC).   |                 |  |  |  |
|   | In addition, this committee is a Lobbyist/Registrant PAC.  |                 |  |  |  |
|   | (h) This committee is a political committee with both contribution and non-contribution accounts (Hybrid PAC).   |                 |  |  |  |
|   | In addition, this committee is a Lobbyist/Registrant PAC.  |                 |  |  |  |
|   | Joint Fundraising Representative:  |                 |  |  |  |
|   | (i) 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. |                 |  |  |  |
|   | 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. C   |                 |  |  |  |

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|----|--|--|-------------------------|--|--|
| ٧  | Vrite or Type Committee Name   |  |                         |  |  |
|    |  | OOUG BASLER  |                         |  |  |
| 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 Organization Joint Fundraising Repres        |                         |  |  |
|    | Tiolation in p.  | organization of animator organization of contracting representations | 2500010 III 1710 Openio |  |  |
| _  |  |  |                         |  |  |
| 7. | <b>Custodian of Records:</b> Identify by name, address (phone number optional) and position of the person in possession of committee books and records.                              |  |                         |  |  |
|    | Basler, Doug, , ,  |  |                         |  |  |
|    | Full Name  | 91))<br>   |                         |  |  |
|    | Mailing Address  | PO BOX 6145  |                         |  |  |
|    |  |  |                         |  |  |
|    |  | KENT   | 98064                   |  |  |
|    |  | CITY ▲ STATE   | ▲ ZIP CODE ▲            |  |  |
|    | Title or Position ▼  | OIT = STATE  | ZIF GODE Z              |  |  |
|    | TREASURER  | Telephone number   | 206 - 601 - 3133        |  |  |
| 8. | <b>Treasurer:</b> 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 Basler, Dou  | g, , ,   |                         |  |  |
|    | of Treasurer   |  |                         |  |  |
|    | Mailing Address  | PO BOX 6145  |                         |  |  |
|    |  |  |                         |  |  |
|    |  |  | 98064                   |  |  |
|    |  | CITY ▲ STATE   | ▲ ZIP CODE ▲            |  |  |
|    | Title or Position ▼  | 5  | 0051 —                  |  |  |
|    | TREASURER  | Telephone number   | 206   601   3133        |  |  |

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|-------------------------------------|--|-----------------------|--|--|
| Full Name of<br>Designated<br>Agent | Basler, Douglas, , ,   |                       |  |  |
| Mailing Address                     | 22716 126th Place SE   |                       |  |  |
|                                     |  |                       |  |  |
|                                     | Kent   WA   98   | 031                   |  |  |
| Title or Decition                   | CITY ▲ STATE ▲   | ZIP CODE ▲            |  |  |
| Title or Position                   |  | _   639   _   4334    |  |  |
| Ass. Heastier                       | Telephone number   | -                     |  |  |
| Banks or Other<br>safety deposit bo | <b>Depositories:</b> List all banks or other depositories in which the committee deposits funds, xes or maintains funds. | holds accounts, rents |  |  |
| Name of Bank, Depository, etc.      |  |                       |  |  |
|                                     | US Bank  |                       |  |  |
| Mailing Address                     | 10231 SE 240th St.   |                       |  |  |
|                                     |  |                       |  |  |
|                                     | Kent WA 980  | 031                   |  |  |
|                                     | CITY ▲ STATE ▲   | ZIP CODE ▲            |  |  |
| Name of Bank, Depository, etc.      |  |                       |  |  |
|                                     |  |                       |  |  |
| Mailing Address                     |  |                       |  |  |
|                                     |  |                       |  |  |
|                                     |  |                       |  |  |
|                                     | CITY ▲ STATE ▲   | ZIP CODE ▲            |  |  |