FEC

STATEMENT OF ORGANIZATION

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FORM 1		O	RGAN	IZATI(ON								
									Office	Use Or	ıly		
1. NAME OF COMMITTEE (in	full)		Check if name changed)		mple:If typing, typ the lines.	ре	12FE	4M5					
PACIFIC SE	AFOOI	D PRC	CESSO	RS PO	LITICAL A	CTIC	N C	OM	MIT	TEE	: (P	SPA	(C)
ADDRESS (number a	nd street)	1900 W E	EMERSON PLA	ACE STE 205									
(Check if a is changed													
Ü	,	SEATTL	E 				WA STATE	_	98119	Z	- [IP COI	DE 🛦	
COMMITTEE'S E-MA	AL ADDRES	SS											
(Check if a is changed		admin	@pspafish.n	et 									
			Second E-Mai @pspafish.						<u> </u>				
COMMITTEE'S WEB (Check if a is changed	address	DRESS (UF pspafish.	•										
2. DATE 05	M / D 5		2020										
3. FEC IDENTIFIC	CATION NU	MBER ▶	. C	C0019367	2								
4. IS THIS STATEM	MENT	NEW	(N) OF	3	AMENDED ((A)							
I certify that I have e	examined thi	s Stateme	nt and to the	best of my	knowledge and be	elief it is	true, c	orrect	and co	mplete) .		
Type or Print Name o	of Treasurer	JoHahns	son, Mark, , ,										
Signature of Treasure	er <i>JoHah</i> i	nson, Mark,	, ,		[Electronically Filed	<i>d]</i>	ate	02	/	23	/ Y	2023	YYY
NOTE: Submission of	false, errone				oject the person sig					nalties	of 52 l	J.S.C.	§30109.
Office Use Only					For further informa Federal Election Con Toll Free 800-424-95 Local 202-694-1100	mmission	tact:			EC F			

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TYPE OF COMMITTEE:					
Candidate Committee:					
(a) This committee is a principal campaign committee. (Complete the candidate inform	mation below.)				
(b) This committee is an authorized committee, and is NOT a principal campaign con information below.)	mmittee. (Complete the candidate				
Name of Candidate					
Candidate Office Sought: House Senate	President 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 or	n line 6.) Its connected organization is as				
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 committee. (i.e., nonconnected committee)	a separate segregated fund or party				
In addition, this committee is a Lobbyist/Registrant PAC.					
In addition, this committee is a Leadership PAC. (Identify sponsor on lin	ne 6.)				
(g) This committee is an independent expenditure-only political committee (Super PAC	C).				
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 no committees/organizations, at least one of which is an authorized committee of a form	·				
(j) 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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V	Vrite or Type Committee Name		. ago o				
	• •	OD PROCESSORS POLITICAL ACTION COMMITTE	EE (PSPAC)				
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	Leadership PAC Sponso				
7.	Custodian of Records: Ident books and records.	ify by name, address (phone number optional) and position of the person in possess	sion of committee				
	JoHahnson	, Mark, , ,					
	Full Name						
	Mailing Address	4108 Midvale Ave. N.					
		Seattle					
		CITY ▲ STATE ▲	ZIP CODE ▲				
	Title or Position ▼						
	Treasurer		399 - 1998				
8.	Treasurer: List the name and any designated agent (e.g., a	d address (phone number optional) of the treasurer of the committee; and the nates assistant treasurer).	ame and address of				
	Full Name JoHahnson	. Mark					
	of Treasurer						
	Mailing Address	4108 Midvale Ave. N.					
		Seattle					
		CITY ▲ STATE ▲	ZIP CODE ▲				
	Title or Position ▼		200 1 4000				
	Treasurer	Telephone number 206	399 - 1998				

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Full Name of Designated			<u> </u>
Agent			
Mailing Address			
Title or Position ▼		STATE ▲	ZIP CODE ▲
	Telephone num	iber	
	Depositories: List all banks or other depositories in which the committee es or maintains funds.	e deposits fu	inds, holds accounts, rents
Name of Bank, D	epository, etc.		
	Key Bank		
Mailing Address	127 Public Square		
		1 1 1 1	
	Cleveland	ОН	44114
	CITY ▲	STATE A	ZIP CODE ▲
Name of Bank, D	epository, etc.		
Mailing Address			
	CITY ▲	STATE ▲	ZIP CODE ▲