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) over the lines. is changed) WASHINGTON COMMUNITY ACTION NETWORK 1806 East Yesler Way ADDRESS (number and street) (Check if address is changed) **SEATTLE** 98122 WA CITY A STATE A ZIP CODE ▲ COMMITTEE'S E-MAIL ADDRESS serenasatoran@washingtoncan.org (Check if address is changed) Optional Second E-Mail Address COMMITTEE'S WEB PAGE ADDRESS (URL) (Check if address is changed) DATE 26 2022 C90012709 FEC IDENTIFICATION NUMBER 3. 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. Evans-Satoran, Serena, , , Type or Print Name of Treasurer Evans-Satoran, Serena, , , [Electronically Filed] 09 2022 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:	date Committee:				
(a) This committee is a principal campaign committee. (Complete the candidate info	ormation below.)				
(b) This committee is an authorized committee, and is NOT a principal campaign c information below.)	committee. (Complete the candidate				
Name of Candidate					
Candidate Party Affiliation Office Sought: House Senate	State President District				
(c) This committee supports/opposes only one candidate, and is NOT an authorize	d 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 NO committee. (i.e., nonconnected committee)	T 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	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:					
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.					
(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				
	C				

Finance Director

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٧	Vrite or Type Committee Nam			
_		N COMMUNITY ACTION		
6.	Name of Any Connected (Organization, Affiliated Committee, Joint Fund	draising Representative, or Le	eadership PAC Sponsor
	Mailing Address			
		CITY ▲	STATE ▲	ZIP CODE ▲
	Relationship: Connecte	d Organization Affiliated Organization Je	oint Fundraising Representative	Leadership PAC Sponso
7.	Custodian of Records: Idea books and records.	ntify by name, address (phone number optional)	and position of the person in po	essession of committee
	Nguyen, I	Mary, , ,		
	Full Name			
	Mailing Address	1806 East Yesler Way		
		Seattle		8122
		CITY ▲	STATE ▲	ZIP CODE ▲
	Title or Position ▼			
	Executive Director	-	Telephone number	
8.	Treasurer: List the name a any designated agent (e.g.,	nd address (phone number optional) of the trassistant treasurer).	reasurer of the committee; and	the name and address of
	Full Name Evans-Sa	toran, Serena, , ,		
	of Treasurer	400 5 17 1 17		
	Mailing Address	1806 East Yesler Way		
		Seattle		8122
		CITY ▲	STATE ▲	ZIP CODE ▲
	Title or Position ▼			

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Telephone number

389

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Full Name of Designated Agent						
Mailing Address						
Title or Position ▼	CITY ▲	STATE ▲	ZIP CODE ▲			
L		Telephone number				
Banks or Other Depositor safety deposit boxes or mai	ies: List all banks or other depositories ntains funds.	s in which the committee deposits	funds, holds accounts, rents			
Name of Bank, Depository,	Name of Bank, Depository, etc.					
Benefi	cial State Bank					
Mailing Address	1438 Webster St #100					
	Oakeland	CA L	94612			
	CITY ▲	STATE ▲	ZIP CODE ▲			
Name of Bank, Depository, etc.						
Mailing Address						
	CITY ▲	STATE ▲	ZIP CODE ▲			