Only

STATEMENT OF **ORGANIZATION**

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FEC FORM 1 Office Use Only NAME OF (Check if name Example: If typing, type 12FE4M5 COMMITTEE (in full) is changed) over the lines. Susie Lee Victory Fund 5130 S Fort Apache Rd ADDRESS (number and street) Ste 215-382 (Check if address is changed) Las Vegas 89148 NV CITY A STATE A ZIP CODE A COMMITTEE'S E-MAIL ADDRESS jay@bluewavepolitics.com (Check if address is changed) Optional Second E-Mail Address COMMITTEE'S WEB PAGE ADDRESS (URL) (Check if address is changed) DATE 07 2018 C00678201 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. Petterson, Jay, , , Type or Print Name of Treasurer Petterson, Jay, , , [Electronically Filed] 05 2018 Signature of Treasurer Date 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 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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		OMMITTEE	
Car	ndidate	Committee:	
(a)	Ш	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. (Cominformation below.)	plete the candidate
Nam Can	ne of didate		
	didate y Affiliatio	Office Sought: House Senate President	State
(c)		This committee supports/opposes only one candidate, and is NOT an authorized committee.	District
Nam Cand	ne of didate		
Par	ty Con	nmittee:	
(d)			(Democratic, Republican, etc.) Party.
Poli	itical A	ction Committee (PAC):	
(e)		This committee is a separate segregated fund. (Identify connected organization on line 6.) Its con-	nected 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)	п	This committee supports/opposes more than one Federal candidate, and is NOT a separate se	gregated fund or party
(.)		committee. (i.e., nonconnected committee)	grogatod fame of party
		In addition, this committee is a Lobbyist/Registrant PAC.	
		In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)	
Join	nt Fund	raising Representative:	
(g)	×	This committee collects contributions, pays fundraising expenses and disburses net proceeds for two committees/organizations, at least one of which is an authorized committee of a federal candidate.	o or more political
(h)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for two committees/organizations, none of which is an authorized committee of a federal candidate.	o or more political
	Com	mittees Participating in Joint Fundraiser	
	1.	SUSIE LEE FOR CONGRESS FEC ID number C COOR	555613
	2.	NEVADA STATE DEMOCRATIC PARTY FEC ID number C C002	208991
	3.	FEC ID number	
	4.		

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Write or Type Committee Name		-
Susie Lee Victor	ry Fund	
	ganization, Affiliated Committee, Joint Fundraising Representative, or Lo	eadership PAC Sponsor
NONE		
Mailing Address		
	CITY STATE	ZIP CODE
Relationship: Connected	Organization Affiliated Committee Joint Fundraising Representative	Leadership PAC Sponsor
Custodian of Records: Ident books and records.	ify by name, address (phone number optional) and position of the person	in possession of committee
Petterson, C	lay, , ,	
Mailing Address	119 1st Avenue South	
3	Suite 320	
	Seattle WA 9	8104
Title or Position	CITY STATE	ZIP CODE
Treasurer		_ 682 7328
Treasurer: List the name and any designated agent (e.g., as	address (phone number optional) of the treasurer of the committee; and sistant treasurer).	the name and address of
Full Name Petterson, J	ay, , ,	
Mailing Address	119 1st Avenue South	
	Suite 320	
		3104
Title or Position Treasurer	CITY STATE 206 Telephone number	ZIP CODE - 682 - 7328

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Full Name of Designated	1,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
Agent		
Mailing Address		
	CITY STATE	ZIP CODE
Title or Position		
	Telephone number	
Banks or Other	r Depositories: List all banks or other depositories in which the committee deposits funds, hold	ao aoooanto, ronto
Banks or Other safety deposit b Name of Bank,	Depository, etc.	as assume, remo
safety deposit b	Depository, etc. Bank of America	
safety deposit b	Depository, etc. Bank of America 3601 Stone Way North	
safety deposit b Name of Bank,	Depository, etc. Bank of America 3601 Stone Way North	
safety deposit b Name of Bank,	Depository, etc. Bank of America 3601 Stone Way North	
safety deposit b Name of Bank,	Depository, etc. Bank of America 3601 Stone Way North	ZIP CODE
safety deposit b Name of Bank,	Depository, etc. Bank of America 3601 Stone Way North Seattle CITY STATE	
safety deposit b Name of Bank, Mailing Address	Depository, etc. Bank of America 3601 Stone Way North Seattle CITY STATE Depository, etc.	ZIP CODE
safety deposit b Name of Bank, Mailing Address	Depository, etc. Bank of America 3601 Stone Way North Seattle CITY STATE	ZIP CODE
safety deposit b Name of Bank, Mailing Address	Depository, etc. Bank of America 3601 Stone Way North Seattle CITY STATE Depository, etc.	ZIP CODE
safety deposit b Name of Bank, Mailing Address Name of Bank,	Depository, etc. Bank of America 3601 Stone Way North Seattle CITY STATE Depository, etc.	ZIP CODE
safety deposit b Name of Bank, Mailing Address Name of Bank,	Depository, etc. Bank of America 3601 Stone Way North Seattle CITY STATE Depository, etc.	ZIP CODE