

FEC FORM 1

STATEMENT OF ORGANIZATION

Office Use Only

1. NAME OF COMMITTEE (in full) (Check if name is changed) Example: If typing, type over the lines.

12FE4M5

Hold the House Frontline Fund

ADDRESS (number and street) 401 2nd Avenue South
 (Check if address is changed) Suite 303
Seattle WA 98104
CITY ▲ STATE ▲ ZIP CODE ▲

COMMITTEE'S E-MAIL ADDRESS

(Check if address is changed) jay@bluewavepolitics.com

Optional Second E-Mail Address

COMMITTEE'S WEB PAGE ADDRESS (URL)

(Check if address is changed)

2. DATE 12 / 19 / 2019

3. FEC IDENTIFICATION NUMBER ▶ C C00708909

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 Petterson, Jay, , ,

Signature of Treasurer Petterson, Jay, , , [Electronically Filed] Date 12 / 19 / 2019

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.

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. HOLD THE HOUSE PAC FEC ID number C C00704593
2. KATIE PORTER FOR CONGRESS FEC ID number C C00636571
3. HARLEY ROUDA FOR CONGRESS FEC ID number C C00633982
4. MIKE LEVIN FOR CONGRESS FEC ID number C C00634253

Write or Type Committee Name

Hold the House Frontline Fund

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 Petterson, Jay, , ,

Mailing Address 401 2nd Avenue South

Suite 303

Seattle WA 98104

Title or Position CITY STATE ZIP CODE

Treasurer Telephone number 206 - 682 - 7328

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 Petterson, Jay, , ,

Mailing Address 401 2nd Avenue South

Suite 303

Seattle WA 98104

Title or Position CITY STATE ZIP CODE

Treasurer Telephone number 206 - 682 - 7328

Full Name of Designated Agent

[Empty grid for Full Name of Designated Agent]

Mailing Address

[Empty grid for Mailing Address line 1]

[Empty grid for Mailing Address line 2]

[Empty grid for Mailing Address line 3]

CITY

STATE

ZIP CODE

Title or Position

[Empty grid for Title or Position]

Telephone number

[Empty grid for 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.

Bank of America

[Empty grid for Name of Bank, Depository, etc.]

Mailing Address

701 2nd Avenue

[Empty grid for Mailing Address line 2]

Seattle WA 98104

CITY

STATE

ZIP CODE

Name of Bank, Depository, etc.

[Empty grid for Name of Bank, Depository, etc.]

Mailing Address

[Empty grid for Mailing Address line 1]

[Empty grid for Mailing Address line 2]

[Empty grid for Mailing Address line 3]

CITY

STATE

ZIP CODE

Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

5(g) or (h).

Joint Fundraising Participant:

- 1. DEBBIE FOR CONGRESS
- 2. FINKENAUER FOR CONGRESS
- 3. CINDY AXNE FOR CONGRESS
- 4. SHARICE FOR CONGRESS

FEC ID number	C00652065
FEC ID number	C00637074
FEC ID number	C00646844
FEC ID number	C00670034

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

Name of organization field

Mailing Address

Mailing address fields

Relationship:

CITY ▲

STATE ▲

ZIP CODE ▲

- Connected Organization
- Affiliated Committee
- Joint Fundraising Representative
- Leadership PAC Sponsor

8. Designated Agent: Identify by name, address (phone number – optional)

Full Name

Full name field

Mailing Address

Mailing address fields

TITLE OR POSITION ▼

CITY ▲

STATE ▲

ZIP CODE ▲

Title or position and telephone number fields

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.

Name of bank field

Mailing Address

Mailing address fields

CITY ▲

STATE ▲

ZIP CODE ▲

Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

5(g) or (h). Joint Fundraising Participant:

- 1. HALEY STEVENS FOR CONGRESS
- 2. ANGIE CRAIG FOR CONGRESS
- 3. ANDY KIM FOR CONGRESS
- 4. JOSH GOTTHEIMER FOR CONGRESS

FEC ID number	C00638650
FEC ID number	C00575209
FEC ID number	C00648220
FEC ID number	C00573949

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

Name of organization field

Mailing Address field

Relationship: CITY STATE ZIP CODE
 Connected Organization
 Affiliated Committee
 Joint Fundraising Representative
 Leadership PAC Sponsor

8. Designated Agent: Identify by name, address (phone number - optional)

Full Name, Mailing Address, TITLE OR POSITION, CITY, STATE, ZIP CODE, 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., Mailing Address, CITY, STATE, ZIP CODE

Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

5(g) or (h).

Joint Fundraising Participant:

- 1. XOCHITL FOR NEW MEXICO
- 2. SUSIE LEE FOR CONGRESS
- 3. DELGADO FOR CONGRESS
- 4. BRINDISI FOR CONGRESS

FEC ID number	C	C00666149
FEC ID number	C	C00655613
FEC ID number	C	C00633859
FEC ID number	C	C00648725

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

[Empty text input fields for organization name]

Mailing Address

[Empty text input fields for mailing address]

Relationship:

CITY ▲

STATE ▲

ZIP CODE ▲

- Connected Organization
- Affiliated Committee
- Joint Fundraising Representative
- Leadership PAC Sponsor

8. Designated Agent: Identify by name, address (phone number – optional)

Full Name

[Empty text input field for full name]

Mailing Address

[Empty text input fields for mailing address]

TITLE OR POSITION ▼

CITY ▲

STATE ▲

ZIP CODE ▲

[Empty text input fields for title and 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.

[Empty text input field for bank name]

Mailing Address

[Empty text input fields for mailing address]

CITY ▲

STATE ▲

ZIP CODE ▲

Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

5(g) or (h).

Joint Fundraising Participant:

- 1. KENDRA HORN FOR CONGRESS
- 2. CONOR LAMB FOR CONGRESS
- 3. ELAINE FOR CONGRESS
- 4. DR KIM SCHRIER FOR CONGRESS

FEC ID number	C00648915
FEC ID number	C00657411
FEC ID number	C00664375
FEC ID number	C00652628

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

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

Mailing Address

Mailing Address fields

Relationship:

CITY ▲

STATE ▲

ZIP CODE ▲

- Connected Organization
- Affiliated Committee
- Joint Fundraising Representative
- Leadership PAC Sponsor

8. Designated Agent: Identify by name, address (phone number – optional)

Full Name

Full Name field

Mailing Address

Mailing Address fields

TITLE OR POSITION ▼

CITY ▲

STATE ▲

ZIP CODE ▲

Telephone Number field

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.

Name of Bank, Depository, etc. field

Mailing Address

Mailing Address fields

CITY ▲

STATE ▲

ZIP CODE ▲

Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

5(g) or (h).

Joint Fundraising Participant:

- 1. ELISSA SLOTKIN FOR CONGRESS
- 2. CISNEROS FOR CONGRESS
- 3. TJ COX FOR CONGRESS
- 4. FRIENDS OF LUCY MCBATH

FEC ID number	C00650150
FEC ID number	C00650648
FEC ID number	C00648956
FEC ID number	C00672295

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

Name of organization field

Mailing Address

Mailing address fields

Relationship:

CITY ▲

STATE ▲

ZIP CODE ▲

- Connected Organization
- Affiliated Committee
- Joint Fundraising Representative
- Leadership PAC Sponsor

8. Designated Agent: Identify by name, address (phone number – optional)

Full Name

Full name field

Mailing Address

Mailing address fields

TITLE OR POSITION ▼

CITY ▲

STATE ▲

ZIP CODE ▲

Title or position field

Telephone Number

Telephone number field

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.

Name of bank field

Mailing Address

Mailing address fields

CITY ▲

STATE ▲

ZIP CODE ▲

Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

5(g) or (h).

Joint Fundraising Participant:

- 1. TOM O'HALLERAN FOR CONGRESS
- 2. CASTEN FOR CONGRESS
- 3. COMMITTEE TO ELECT JARED GOLDEN
- 4. TOM MALINOWSKI FOR CONGRESS

FEC ID number	C	C00582890
FEC ID number	C	C00648493
FEC ID number	C	C00653816
FEC ID number	C	C00656686

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

Empty text input fields for organization name.

Mailing Address input fields.

Relationship: CITY STATE ZIP CODE. Includes checkboxes for Connected Organization, Affiliated Committee, Joint Fundraising Representative, and Leadership PAC Sponsor.

8. Designated Agent: Identify by name, address (phone number - optional)

Full Name, Mailing Address, TITLE OR POSITION, CITY, STATE, ZIP CODE, Telephone Number input fields.

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., Mailing Address, CITY, STATE, ZIP CODE input fields.

Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

5(g) or (h).

Joint Fundraising Participant:

- 1. SUSAN WILD FOR CONGRESS
- 2. JOE CUNNINGHAM FOR CONGRESS
- 3. ELIZABETH PANNILL FLETCHER FOR CONGRESS
- 4. COLIN ALLRED FOR CONGRESS

FEC ID number	C00658567
FEC ID number	C00650507
FEC ID number	C00640045
FEC ID number	C00637868

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

[Empty text input fields for organization name]

Mailing Address [Empty text input fields]

Relationship: CITY STATE ZIP CODE [Empty dropdowns and checkboxes for Connected Organization, Affiliated Committee, Joint Fundraising Representative, Leadership PAC Sponsor]

8. Designated Agent: Identify by name, address (phone number – optional)

Full Name, Mailing Address, TITLE OR POSITION, CITY, STATE, ZIP CODE, Telephone Number [Empty text input fields]

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., Mailing Address, CITY, STATE, ZIP CODE [Empty text input fields]

Optional Supplemental Information
for Lines 5(g) or (h), 6, 8 and/or 9

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5(g) or (h). **Joint Fundraising Participant:**

1.	JOSH HARDER FOR CONGRESS	FEC ID number	C00639146
2.	JASON CROW FOR CONGRESS	FEC ID number	C00637363
3.	LAUREN UNDERWOOD FOR CONGRESS	FEC ID number	C00652719
4.	CHRIS PAPPAS FOR CONGRESS	FEC ID number	C00660464

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

Mailing Address _____

Relationship: CITY ▲ STATE ▲ ZIP CODE ▲
 Connected Organization Affiliated Committee Joint Fundraising Representative Leadership PAC Sponsor

8. **Designated Agent:** Identify by name, address (phone number – optional)

Full Name _____
 Mailing Address _____

TITLE OR POSITION ▼ CITY ▲ STATE ▲ ZIP CODE ▲
 _____ 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. _____
 Mailing Address _____

CITY ▲ STATE ▲ ZIP CODE ▲

Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

5(g) or (h). Joint Fundraising Participant:

- 1. MIKIE SHERRILL FOR CONGRESS
2.
3.
4.

FEC ID number C C00640003
FEC ID number C
FEC ID number C
FEC ID number C

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

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

Mailing Address
Relationship: CITY STATE ZIP CODE

- Connected Organization
Affiliated Committee
Joint Fundraising Representative
Leadership PAC Sponsor

8. Designated Agent: Identify by name, address (phone number - optional)

Full Name
Mailing Address
TITLE OR POSITION CITY STATE ZIP CODE
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.
Mailing Address
CITY STATE ZIP CODE