PAGE 1 / 4

STATEMENT OF **FEC ORGANIZATION** FORM 1 Office Use Only NAME OF (Check if name Example: If typing, type 12FE4M5 COMMITTEE (in full) is changed) over the lines. Rouda Hill Victory Fund 1327 SE Tacoma St ADDRESS (number and street) #247 (Check if address is changed) Portland 97202 OR CITY A STATE A ZIP CODE A COMMITTEE'S E-MAIL ADDRESS sue@bluewavepolitics.com (Check if address is changed) Optional Second E-Mail Address COMMITTEE'S WEB PAGE ADDRESS (URL) (Check if address is changed) DATE 04 2018 C00686717 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. Jackson, Sue, , , Type or Print Name of Treasurer Jackson, Sue,,, [Electronically Filed] 09 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 Only Local 202-694-1100

	FEC Fo	rm 1 (Revised 02/2009)	Page 2
		OMMITTEE	
	ndidate	Committee:	
(a)	Ц	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 Cand	e 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	e 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)		This committee supports/opposes more than one Federal candidate, and is NOT a separate se committee. (i.e., nonconnected committee)	gregated 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.)	
Join	t 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.	HARLEY ROUDA FOR CONGRESS FEC ID number C C006	333982
	2.	KATIE HILL FOR CONGRESS FEC ID number C C006	34212
	3.	FEC ID number	
	4.		

FEC Form 1 (Revi	sed 02/2009)	Page 3
Write or Type Committee I	Name	· ·
Rouda Hill Vi	ctory Fund	
	ted Organization, Affiliated Committee, Joint Fundraising Representa	tive, or Leadership PAC Sponsor
NONE		
Mailing Address		
	CITY STAT	E ZIP CODE
Relationship: Conn	ected Organization Affiliated Committee Joint Fundraising Repres	sentative Leadership PAC Sponsor
Custodian of Records: books and records.	Identify by name, address (phone number optional) and position of the	he person in possession of committee
Jacks	son, Sue, , ,	
Mailing Address	1327 SE Tacoma St	
J	#247	
	Portland OR	97202
Title or Position	CITY STATE	ZIP CODE
Treasurer	Telephone number	919 - 592 - 9826
. Treasurer: List the nam	e and address (phone number optional) of the treasurer of the commise.g., assistant treasurer).	ittee; and the name and address of
Full Name Jacks of Treasurer	on, Sue, , ,	
Mailing Address	1327 SE Tacoma St	
	#247	
	Portland	
Title or Position Treasurer	CITY STATE	ZIP CODE
	Telephone number	

FEC Form	1 (Revised 02/2009)	Page 4
Full Name of Designated Agent		
Mailing Address		
	CITY STATE	ZIP CODE
Title or Position		
	Telephone number	
Banks or Other I safety deposit box Name of Bank, De	Depositories: List all banks or other depositories in which the committee deposits funds, hol ces or maintains funds. epository, etc.	us accounts, rents
safety deposit box Name of Bank, De	xes or maintains funds.	us accounts, rents
safety deposit box Name of Bank, De	epository, etc. Bank of America	us accounts, rents
safety deposit box Name of Bank, De	epository, etc. Bank of America	
safety deposit box Name of Bank, De	Bank of America 1001 SW 5th Ave	ZIP CODE
safety deposit box Name of Bank, De	Portland CITY STATE	
safety deposit box Name of Bank, De Mailing Address	Portland CITY STATE	
safety deposit box Name of Bank, De Mailing Address	Portland CITY STATE	
safety deposit box Name of Bank, De Mailing Address	Portland CITY STATE	
safety deposit box Name of Bank, De Mailing Address Name of Bank, De	Portland CITY STATE	
safety deposit box Name of Bank, De Mailing Address Name of Bank, De	Portland CITY STATE	