FEC FORM 1	STATEMEN ORGANIZA		PAGE 1 / 4
1. NAME OF COMMITTEE (in full)	(Check if name is changed)	Example: If typing, type over the lines.	12FE4M5
DULCICH INC	DBA PACIFIC SE	AFOOD GROUP	EMPLOYEE PAC
ADDRESS (number and stree	t)		
(Check if address is changed)			
	CLACKAMAS └ │ │ │ │ │ │ │ │ │ │ CITY ▲		OR 97015 STATE ▲ ZIP CODE ▲
COMMITTEE'S E-MAIL ADI	DRESS		
 (Check if address is changed) 	legal@pacseafood.con	n 	
	Optional Second E-Mail Add	Iress	
COMMITTEE'S WEB PAGE (Check if address is changed)	· · · ·		
2. DATE 12	08 / Y Y Y Y 08 2022		
3. FEC IDENTIFICATION	N NUMBER ► C CC	00475350	
4. IS THIS STATEMENT	NEW (N) OR	X AMENDED (A)	
I certify that I have examine	ed this Statement and to the best	of my knowledge and belief it i	is true, correct and complete.
Type or Print Name of Treas	surer Occhipinti, Daniel, C., ,		
Signature of Treasurer	Occhipinti, Daniel, C., ,	[Electronically Filed]	Date 12 08 2022
NOTE: Submission of false, e		may subject the person signing th TON SHOULD BE REPORTED V	is Statement to the penalties of 52 U.S.C. §30109
Office Use Only		For further information co Federal Election Commissio Toll Free 800-424-9530 Local 202-694-1100	

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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 th information below.)	e candidate
Name of Candidate	
Candidate Office Party Affiliation Sought: House Senate President	State
(c) This committee supports/opposes only one candidate, and is NOT an authorized committee.	District
Name of Candidate	
Party Committee: (National, State or subordinate) committee of the (Democratic Republican, Committee of the	
Political Action Committee (PAC): (e) x This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected	d organization is a:
Corporation Corporation w/o Capital Stock	organization
Membership Organization Trade Association Coopera	itive
In addition, this committee is a Lobbyist/Registrant PAC.	
(f) This committee supports/opposes more than one Federal candidate, and is NOT a separate segregate committee. (i.e., nonconnected committee)	d 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 PA	AC).
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 (i) committees/organizations, at least one of which is an authorized committee of a federal candidate. This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or more political (j) committees/organizations, none of which is an authorized committee of a federal candidate. Committees Participating in Joint Fundraiser С 1. С 2.

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V	Vrite or Type Committee Name	
	DULCICH INC DBA PACIFIC SEAFOOD GROUP EMPLOY	YEE PAC
6.	Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadersl	hip PAC Sponsor

			С	ITY								S	ТА	ΤE					ZI	ΡC	OC	DE 🖌		
	Clackamas									1			Lo	R ∣		6	70 1	15						
Mailing Address	16797 SE 130th	n Ave.																						

7. **Custodian of Records:** Identify by name, address (phone number -- optional) and position of the person in possession of committee books and records.

Occhipi	ti, Daniel, C., ,
Full Name	
Mailing Address	16797 SE 130th Ave
	Clackamas OR 97015
	CITY ▲ STATE ▲ ZIP CODE ▲
Title or Position ▼	
Treasurer	Telephone number 503 - 905 - 4000

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	Occhipinti, Daniel, C., ,						
of Treasurer							
Mailing Address	16797 SE 130th Ave						
	Clackamas OR 97015 Image:						
	CITY ▲ STATE ▲ ZIP CODE ▲						
Title or Position ▼							
Treasurer 503 - 905 - 4000 Telephone number - - - - - - -							

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Full Name of Designated Agent							
Mailing Address							
			CITY A	STATE 🔺	ZIP CODE		
Title or Position ▼							
				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.

	Fargo		
Mailing Address	PO Box 6995		
	Portland		97228
	CITY 🔺	STATE 🔺	ZIP CODE
Name of Bank, Depository,	etc.		
Mailing Address			
	CITY 🔺	STATE ▲	ZIP CODE