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STATEMENT	OF
ORGANIZATI	ON

FORM 1			Office	Use Only
1. NAME OF COMMITTEE (in full)	(Check if name is changed)	Example: If typing, type over the lines.	12FE4M5	
Jamie For Orego	n 2022			
ADDRESS (number and street)	1327 SE Tacoma St			
(Check if address is changed)	#247			
lo ondrigody	Portland CITY ▲		OR 97202 STATE ▲	ZIP CODE ▲
COMMITTEE'S E-MAIL ADDRE	SS			
(Check if address is changed)	sue@bluewavepolitics	.com		
	Optional Second E-Mail Add	dress olitics.com		1
COMMITTEE'S WEB PAGE ADI	DRESS (URL)			
2. DATE 07 / 10				
3. FEC IDENTIFICATION NU	JMBER ► C co	00792465		
4. IS THIS STATEMENT	NEW (N) OR	X AMENDED (A)		
I certify that I have examined th	is Statement and to the best	of my knowledge and belief it i	s true, correct and cor	nplete.
Type or Print Name of Treasure	Jackson, Sue, , ,			
Signature of Treasurer	m, Sue, , ,	[Electronically Filed]	Date	10 / Y Y Y Y 2023
NOTE: Submission of false, errone		may subject the person signing th TION SHOULD BE REPORTED V		alties of 52 U.S.C. §30109
Office Use Only		For further information con Federal Election Commission Toll Free 800-424-9530 Local 202-694-1100		C FORM 1 levised 06/2012)

C Form 1 (Revised 03/2022)	Page 2
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 information below.)	the candidate
Name of Candidate McLeod-Skinner, Jamie, , ,	<u> </u>
Candidate Office Party Affiliation DEM Sought: House Senate President	State OR
(c) This committee supports/opposes only one candidate, and is NOT an authorized committee.	District 05
Name of Candidate	
Party Committee:	
(d) This committee is a (National, State or subordinate) committee of the Republica	tic, n, etc.) Party
Political Action Committee (PAC):	
(e) This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected	ted organization is a:
Corporation Corporation w/o Capital Stock	Organization
Membership Organization Trade Association Coope	erative
In addition, this committee is a Lobbyist/Registrant PAC.	
(f) This committee supports/opposes more than one Federal candidate, and is NOT a separate segrega committee. (i.e., nonconnected committee)	ted 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).
	YPE OF COMMITTEE: Candidate Committee is a principal campaign committee. (Complete the candidate information below.) D This committee is an authorized committee, and is NOT a principal campaign committee. (Complete information below.) Name of Candidate Candidate DEM Office Sought: YHOURD FOR COMMITTEE: Candidate Candidate DEM Office Sought: X House Senate President Candidate DEM Office Senate Party Affiliation DEM Office Senate Party Committee supports/opposes only one candidate, and is NOT an authorized committee. Name of Candidate Candidate

Joint Fundraising Representative:

(i) 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
2.

In addition, this committee is a Lobbyist/Registrant PAC.

FEC Form	1 (Revised 02/2009)	Page 3
Write or Type Comr	mittee Name	
Jamie Fo	or Oregon 2022	
6. Name of Any C	onnected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership P	AC Sponsor
	TORY FUND	1
Mailing Address	1327 SE TACOMA ST	
	# 247	
	PORTLAND OR 97202	
	CITY ▲ STATE ▲ ZIP 0	CODE 🔺
Relationship:	Connected Organization Affiliated Organization X Joint Fundraising Representative Leader	ship PAC Sponso

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

Jackson, Su	ue, , ,
Full Name	
Mailing Address	1327 SE Tacoma St
	#247
	Portland OR 97202
	CITY ▲ STATE ▲ ZIP CODE ▲
Title or Position ▼	
Treasurer	Telephone number 919 592 9826

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	Jackson, Sue, , ,
of Treasurer	
Mailing Address	1327 SE Tacoma St
	#247
	Portland OR 97202 Image: Image of the state of the stat
	CITY ▲ STATE ▲ ZIP CODE ▲
Title or Position	,
Treasurer	Image:

FEC Form 1	(Revised 02/2009) Page 4
Full Name of Designated Agent	Thoman, Shayne, , ,
Mailing Address	1327 SE Tacoma St
	#247
	Portland OR 97202 Image: Ima
	CITY ▲ STATE ▲ ZIP CODE ▲
Title or Position	7
Assistant Treasur	er Telephone number 919 - 592 - 9826

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				
Mailing Address	1001 SW 5th Ave				
	Portland	OR 97204			
	CITY 🔺	STATE A	ZIP CODE		
Name of Bank, I	Name of Bank, Depository, etc.				
Mailing Address	1825 K St NW				
	Washington	DC 20006			
		STATE 🔺	ZIP CODE		

FFC	Form	1S	(Revised	02/2017)
			(11001000	02/2017/

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

5(g) or (h).	Joint Fundraising Participa	nt:		
1.			FEC ID number	С
2.			FEC ID number	С
3.			FEC ID number	С
4.			FEC ID number	С
	of Any Connected Organizatio	on, Affiliated Committee, Joint Fundrais ECT 2022	ing Representative	e, or Leadership PAC Sponsor

Mailing Address	600 PENNSYLVANIA AVE SE #15180	_	
			20003
Relationship:		STATE 🔺	ZIP CODE
Connecte	ed Organization	X Joint Fundraising Representative	Leadership PAC Sponsor

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

Full Name																												
Mailing Address																												
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TITLE OR POSITION	,					C	SITY	(🔺								S	TAT	Έ					ZIP	С	DD	E 🔺		
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Banks or Other Depositories: List all banks or other depositories in which the committee deposits funds, holds accounts, rents 9. safety deposit boxes or maintains funds.

Name of Bank, Depository, etc.																						
Mailing Address																						
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Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

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

1	FEC ID number	
2.	FEC ID number C	
3.	FEC ID number C	
4.	FEC ID number C	

6. Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC Sponsor LEAD THE WAY 2022

Mailing Address	2828 N CENTRAL AVE	
	FLOOR 10	
	PHOENIX	AZ 85004
Relationship:	CITY 🔺	STATE ▲ ZIP CODE ▲
Connected	Organization	Joint Fundraising Representative

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

Full Name																											
Mailing Address	L																										
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TITLE OR POSITION	▼					C	ידוכ	Y								S	TAT	E				ZIP	C	DD	E 🔺	•	
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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	L																							
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			(11001000	02/2017

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

5(g) or (h).	Joint	Fundraising	Participant:
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1.	FEC ID number	С
2.	FEC ID number	C
3.	FEC ID number	C
4	FEC ID number	C

6. Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC Sponsor 314 ACTION IMPACT SLATE 2022

Mailing Address	122 C ST NW		
·	SUITE 360		
			20001
Relationship:		STATE 🔺	ZIP CODE
Connected C	Drganization	X Joint Fundraising Representative	Leadership PAC Sponsor

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

Full Name																														
Mailing Address					1											1			1	1								1	1	
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TITLE OR POSITION	▼						С	IT	(🔺									S	TAT	Έ				ZIP	C	DC	E			
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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	L																								
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					С	ITY	′▲							S	TAT	Έ			ZIP	С	DD	E 🔺			ļ

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

5(g) or (h).	Joint	Fundraising	Participant:
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6. Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC Sponsor Jamie for Oregon

Mailing Address	PO Box 8750				
	Bend			OR 9770	08
Relationship:	C	ITY 🔺		STATE 🔺	ZIP CODE
Connected	Organization X 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		STATE A	ZIP CODE
	Te	ephone 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																							
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