

2010 JUL 12 AM 11:44

FEC  
FORM 1STATEMENT OF  
ORGANIZATION

(See instructions)

Office use only

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

12FE4M5

Washington Senate 2010

ADDRESS (number and street)

1050 17th Street, NW

Suite 590

☐ (Check if address is changed)

Washington

DC

20036

CITY ▲

STATE ▲

ZIP CODE ▲

COMMITTEE'S E-MAIL ADDRESS (Please provide only one e-mail address)

☐ (Check if address is changed)

Support@PCMSLLC.com

COMMITTEE'S WEB PAGE ADDRESS (URL)

☐ (Check if address is changed)

none

2. DATE

M M / D D / Y Y Y Y  
0 7 / 0 8 / 2 0 1 0

3. FEC IDENTIFICATION NUMBER

C C00484048

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

Brian Foucart

Signature of Treasurer

Electronically Filed by Brian Foucart

Date

M M / D D / Y Y Y Y  
0 7 / 0 8 / 2 0 1 0

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  
Use  
OnlyFor further information contact:  
Federal Election Commission  
Toll Free 800-424-9530  
Local 202-694-1100FEC FORM 1  
(Revised 02/2009)

10030363130

## 5. TYPE OF COMMITTEE (Check One)

## 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. | DEMOCRATIC SENATORIAL CAMPAIGN COMMITTEE      | FEC ID number | C C00042366 |
| 2. | WASHINGTON STATE DEMOCRATIC CENTRAL COMMITTEE | FEC ID number | C C00114439 |
| 3. |   | FEC ID number | C           |
| 4. |   | FEC ID number | C           |

10030363131

Write or Type Committee Name

**Washington Senate 2010**

## 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

**Brian Foucart**

Mailing Address

**1050 17th Street, NW****Suite 490****Washington****DC****20036** -

Title or Position ▼

CITY ▲

STATE ▲

ZIP CODE ▲

Telephone number

## 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**Brian Foucart**

Mailing Address

**1050 17th Street, NW****Suite 490****Washington****DC****20036** -

Title or Position ▼

CITY ▲

STATE ▲

ZIP CODE ▲

Telephone number

10030363132

Full Name of  
Designated  
Agent

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.

Bank of America

Mailing Address

730 15th Street, NW

Washington

DC

20005

CITY ▲

STATE ▲

ZIP CODE ▲

Name of Bank, Depository, etc.

Mailing Address

CITY ▲

STATE ▲

ZIP CODE ▲

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Federal Election Commission  
**ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS**  
The FEC added this page to the end of this filing to indicate how it was received.

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*Jaw*  
PREPARER  
(3/2005)

7/12/10  
DATE PREPARED

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