Only

STATEMENT OF

PAGE 1 / 8 =

FORM 1		0	RGAN	IZATI	ON					c	Office	Use O	nlv			
NAME OF COMMITTEE (ir	n full)		(Check if name s changed)		cample:If ty		e	12F	'E4M		Jilice (Jse O	ШУ			_
Nevadans fo	r Steve	en Hor	sford									<u> </u>				
 				1 1 1			1 1	1 1						I I	1 1	_
ADDRESS (number a	nd street)	PO Box	336664			1 1 1										_
(Check if a	address			1 1 1	1 1 1 1	1 1 1	1 1	1 1							1 1	_
is changed	1)	North La	as Vegas					NV STAT	_ E ▲	89	033	Z		 ODE ▲		_
COMMITTEE'S E-MA	AIL ADDRE	SS														
(Check if a is changed		jay@blu	uewavepolitics.	com												
Ç	,	Optional	Second E-Ma	il Address												
																╛
COMMITTEE'S WEB (Check if a is changed	address	,	RL) ww.stevenhorsf	ord.com/												
2. DATE 02	2 / 0′	D / Y	2023													
3. FEC IDENTIFIC	CATION NU	JMBER)	C	C006682	228											
4. IS THIS STATEM	MENT	NEW	(N) OI	R	× AM	ENDED (A)									
I certify that I have e	examined th	nis Stateme	ent and to the	best of my	knowledg	e and bel	lief it is	true,	corre	ct an	d cor	nplete	∍.			_
Type or Print Name	of Treasure	r Petterso	on, Jay, , ,													
Signature of Treasure	er Pette	rson, Jay, ,	,				_ [Date	M ()7	/ D	11	/ [202	4	Υ
NOTE: Submission of	false, errone		complete informa								pen:	alties	of 52	U.S.C). §30	109.
Office Use					Federal E	er informat lection Con 800-424-95	nmission					C F		M 1		_

Local 202-694-1100

TYPE OF COMMITTEE:	Page 2
TYPE OF COMMITTEE:	
Candidate Committee: (a) X This committee is a principal campaign committee. (Complete the candidate information of the candidate i	mation helow)
	·
(b) This committee is an authorized committee, and is NOT a principal campaign con information below.)	mmittee. (Complete the candidate
Name of Candidate Horsford, Steven, Alexzander, ,	
Candidate Office Party Affiliation DEM Sought: X House Senate	State NV President
(c) This committee supports/opposes only one candidate, and is NOT an authorized	District 04 committee.
Name of Candidate	
Party Committee:	(C) 1
(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 of	n 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 committee. (i.e., nonconnected committee)	a separate segregated fund or party
In addition, this committee is a Lobbyist/Registrant PAC.	
In addition, this committee is a Leadership PAC. (Identify sponsor on lin	ne 6.)
(g) This committee is an independent expenditure-only political committee (Super PA	C).
In addition, this committee is a Lobbyist/Registrant PAC.	
(h) This committee is a political committee with both contribution and non-contribution	n accounts (Hybrid PAC).
In addition, this committee is a Lobbyist/Registrant PAC.	
Joint Fundraising Representative:	
(i) This committee collects contributions, pays fundraising expenses and disburses n committees/organizations, at least one of which is an authorized committee of a finding expense.	·
(j) This committee collects contributions, pays fundraising expenses and disburses n committees/organizations, none of which is an authorized committee of a federal	
Committees Participating in Joint Fundraiser	
1.	C

1	FEC Form 1 (Revised 0)	2/2009)		Page 3
V	Irite or Type Committee Name			
	Nevadans for Ste			
6.		ganization, Affiliated Committee, Joint Fundraising Represe	entative, or Leaders	ship PAC Sponsor
	SEEC VICTORY FUN			
	Mailing Address	PO BOX 15320		
		WASHINGTON	DC 20003	
		CITY ▲ S	STATE A	ZIP CODE ▲
	Relationship: Connected	Organization Affiliated Organization X Joint Fundraising R	Representative	Leadership PAC Sponso
7.	Custodian of Records: Identi books and records.	fy by name, address (phone number optional) and position of the	the person in possess	ion of committee
	Petterson, C			
	Mailing Address	401 2nd Avenue South		
		Suite 303		
		Seattle	WA 98104	
		CITY ▲ S	STATE A	ZIP CODE ▲
	Title or Position ▼			
	Treasurer	Telephone number	er 206 – _	682
8.	Treasurer: List the name and any designated agent (e.g., a	l address (phone number optional) of the treasurer of the cossistant treasurer).	committee; and the na	ame and address of
	Full Name Petterson, of Treasurer	lay, , ,		
	Mailing Address	401 2nd Avenue South		
	-	Suite 303		<u> </u>
		Seattle	WA 98104	
		CITY ▲ S	STATE A	ZIP CODE ▲
	Title or Position ▼			
	Treasurer	Telephone numbe	er	682 - 7328

FEC	C Form 1 (R	evised 02/2009)		Page 4
Full Nar Designa	me of	0.1002 02.2000)		
Agent				
Mailing	Address			
Title or	Position ▼	CITY ▲	STATE ▲	ZIP CODE ▲
			Telephone number	
Banks of safety de	or Other Dependence	positories: List all banks or other depositories or maintains funds.	in which the committee deposits	funds, holds accounts, rents
Name o	f Bank, Depo	ository, etc.		
	В	ank of America		
Mailing /	Address	3601 Stone Way North		
		Seattle	WA WA	98103
		CITY ▲	STATE ▲	ZIP CODE ▲
Name o	f Bank, Depo	ository, etc.		
	L			
Mailing A	Address			
		CITY ▲	STATE ▲	ZIP CODE ▲

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

Page	of ⁸	

1			
2.		FEC ID number	С
		FEC ID number	C
3.		FEC ID number	С
4.		FEC ID number	С
		•	
HOUSE VICTORY F	d Organization, Affiliated Committee, Joint Fu PROJECT 2022	ndraising Representative	e, or Leadership PAC Spons
Mailing Address	600 PENNSYLVANIA AVE SE		1 1 1 1 1 1 1 1 1 1
	#15180		
	Washington	DC	20003
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
esignated Agent: Identi	fy by name, address (phone number – optional)		
Full Name	fy by name, address (phone number – optional)		
	fy by name, address (phone number – optional)		
Full Name	fy by name, address (phone number – optional)		
Full Name			
Full Name	CITY	STATE A	ZIP CODE A

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

Page ___ **of** 8___

h). Joint Fundraisi	ng Participant:		
1.		FEC ID number	С
2.		FEC ID number	С
3.		FEC ID number	C
4.		FEC ID number	C
-	I Organization, Affiliated Committee, Joint Fu	ndraising Representativ	e, or Leadership PAC Spons
Democracy Summer	· 2024 		
Mailing Address	600 PENNSYLVANIA AVE SE		
	#15180		
	Washington	DC	20003
Dolotionobina	CITY ▲	STATE ▲	ZIP CODE ▲
Relationship:		oint Fundraising Represent	ative Leadership PAC Sp
Connecte esignated Agent: Identi			ative Leadership PAC Sp
Connecte	ed Organization Affiliated Committee X J		ative Leadership PAC Sp
Connecte esignated Agent: Identi	ed Organization Affiliated Committee X J		ative Leadership PAC Sp
esignated Agent: Identi	ed Organization Affiliated Committee X J		ative Leadership PAC Sp
esignated Agent: Identi	ed Organization Affiliated Committee X J		ative Leadership PAC Sp
esignated Agent: Identi	Affiliated Committee X John Stranger of Stranger of Stranger Stranger of Stran		ative Leadership PAC Sp
esignated Agent: Identi Full Name Mailing Address	Affiliated Committee X John Stranger of Stranger of Stranger Stranger of Stran		
esignated Agent: Identi Full Name Mailing Address	Affiliated Committee X John Stranger of Stranger of Stranger Stranger of Stran	STATE A	
esignated Agent: Identification Full Name Mailing Address TITLE OR POSITION anks or Other Deposite	Affiliated Committee X John String of the St	STATE A Telephone Number	ZIP CODE A
esignated Agent: Identification Full Name Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or market	Affiliated Committee X John String of the St	STATE A Telephone Number	ZIP CODE A
esignated Agent: Identification Full Name Mailing Address TITLE OR POSITION anks or Other Deposite	Affiliated Committee X John String of the St	STATE A Telephone Number	ZIP CODE A
esignated Agent: Identification Full Name Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or mane of Bank,	Affiliated Committee X John String of the St	STATE A Telephone Number	ZIP CODE A
esignated Agent: Identification Full Name Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or mane of Bank, epository, etc.	Affiliated Committee X John String of the St	STATE A Telephone Number	ZIP CODE A
esignated Agent: Identification Full Name Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or mane of Bank, epository, etc.	Affiliated Committee X John String of the St	STATE A Telephone Number	ZIP CODE A

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

Page	of ⁸	

2024 430 SOUTH CA 2ND FLOOR WASHINGTON ected Organization	CITY A	FEC	DC STATE A	20003	hip PAC Spons
2024 430 SOUTH CA 2ND FLOOR WASHINGTON ected Organization	APITOL STREET SE	FE(C ID number C ID number Representativ	e, or Leadersl	ZIP CODE A
2024 430 SOUTH CA 2ND FLOOR WASHINGTON ected Organization	APITOL STREET SE	nt Fundraising	Representative DC STATE	e, or Leadersl	ZIP CODE A
2024 430 SOUTH CA 2ND FLOOR WASHINGTON ected Organization	APITOL STREET SE	nt Fundraising	Representativ	e, or Leadersl	ZIP CODE A
2024 430 SOUTH CA 2ND FLOOR WASHINGTON ected Organization	APITOL STREET SE		DC STATE A	20003	ZIP CODE A
2ND FLOOR WASHINGTON Cotted Organization	CITY A	X Joint Fundra	STATE A	Z	
2ND FLOOR WASHINGTON Cotted Organization	CITY A	X Joint Fundra	STATE A	Z	
WASHINGTON ected Organization	CITY A	X Joint Fundra	STATE A	Z	
ected Organization	CITY A	X Joint Fundra	STATE A	Z	
	1	X Joint Fundra			
	Affiliated Committee	X Joint Fundra	ising Represen	etive	
	s (phone number – opti	ional)	1 1 1 1 1		
ON ▼	CITY A		STATE ▲	ZIF	P CODE ▲
		Telephon	e Number		
	or maintains funds.	psitories: List all banks or other depositories in maintains funds.	Telephone Disitories: List all banks or other depositories in which the corpor maintains funds.	Telephone Number Disitories: List all banks or other depositories in which the committee depositor maintains funds.	Telephone Number Telephone Number Desitories: List all banks or other depositories in which the committee deposits funds, holds or maintains funds.

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

Page	of ⁸
i aye	O.

(h). Joint Fundraisi	ng Participant:		
1.		FEC ID number	С
2.		FEC ID number	С
3.		FEC ID number	С
4.		FEC ID number	C
		_	
_	Organization, Affiliated Committee, Joint Fo	undraising Representative	e, or Leadership PAC Spons
GOT THEIMER HOR	SFORD VICTORY FUND		
Mailing Address	122 C ST NW		
-	STE 360		
	WASHINGTON	l DC l	20001
Relationship:	CITY ▲	STATE A	ZIP CODE ▲
Designated Agent: Identi	Affiliated Committee X	Joint Fundraising Represent	alive Leadership PAC Spo
Pesignated Agent: Identi			Leadership PAC Spo
Designated Agent: Identi			ative Leadership PAC Spo
Pesignated Agent: Identi			Leadership FAC Spc
Pesignated Agent: Identi	fy by name, address (phone number – optiona		
Pesignated Agent: Identi	fy by name, address (phone number – optiona		ZIP CODE A
Pesignated Agent: Identi Full Name Mailing Address TITLE OR POSITION	fy by name, address (phone number – optiona		
Pesignated Agent: Identi Full Name Mailing Address TITLE OR POSITION	fy by name, address (phone number – optiona	STATE A	
Pesignated Agent: Identi Full Name Mailing Address TITLE OR POSITION	fy by name, address (phone number – optiona CITY CITY pries: List all banks or other depositories in whether the state of the stat	STATE A Telephone Number	ZIP CODE A
Pesignated Agent: Identi Full Name Mailing Address TITLE OR POSITION	fy by name, address (phone number – optiona CITY CITY pries: List all banks or other depositories in whether the state of the stat	STATE A Telephone Number	ZIP CODE A
Pesignated Agent: Identi Full Name Mailing Address TITLE OR POSITION	fy by name, address (phone number – optiona CITY CITY pries: List all banks or other depositories in what intains funds.	STATE A Telephone Number	ZIP CODE A
Pesignated Agent: Identic Full Name	fy by name, address (phone number – optiona CITY CITY pries: List all banks or other depositories in what intains funds.	STATE A Telephone Number	ZIP CODE A
Pesignated Agent: Identic Full Name	fy by name, address (phone number – optiona CITY CITY pries: List all banks or other depositories in what a sintains funds.	STATE A Telephone Number	ZIP CODE A
Pesignated Agent: Identic Full Name	fy by name, address (phone number – optiona CITY CITY pries: List all banks or other depositories in what a sintains funds.	STATE A Telephone Number	ZIP CODE A