Only

STATEMENT OF

PAGE 1 / 4

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. Friends of Bill Driscoll 1019 Pacific Avenue ADDRESS (number and street) Suite 1020 (Check if address is changed) Tacoma 98402-4491 WA CITY A STATE A ZIP CODE A COMMITTEE'S E-MAIL ADDRESS katie@katiegranger.com (Check if address is changed) Optional Second E-Mail Address COMMITTEE'S WEB PAGE ADDRESS (URL) www.electbilldriscoll.org (Check if address is changed) DATE 2013 C00521468 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. Sands McKinley Type or Print Name of Treasurer Sands McKinley [Electronically Filed] 01 2013 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

Local 202-694-1100

FEC F	orm 1 (Revised 02/2009)	Page 2			
TYPE OF COMMITTEE					
Candidat	e Committee:				
(a) X	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. (Corinformation below.)	mplete the candidate			
Name of Candidate	Bill Driscoll				
Candidate	Office	State			
Party Affiliat	ion REP Sought: X House Senate President	District 06			
(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 A	Action Committee (PAC):				
(e)	This committee is a separate segregated fund. (Identify connected organization on line 6.) Its co	nnected 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 scommittee. (i.e., nonconnected committee)	segregated 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.)				
Joint Fundraising Representative:					
(g)	This committee collects contributions, pays fundraising expenses and disburses net proceeds for 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 t committees/organizations, none of which is an authorized committee of a federal candidate.	wo or more political			
Committees Participating in Joint Fundraiser					
1.	FEC ID number				
2.	FEC ID number				
3.	FEC ID number				
4.					

FEC Form 1 (Revise	4 03/3000)	Page 3
Write or Type Committee Na		i aye J
Friends of Bill		
	Organization, Affiliated Committee, Joint Fundraising Representative, or Leade	rship PAC Sponsor
NONE		
	<u> </u>	
Mailing Address	<u> </u>	
	<u>-</u>	
	- WA 00000	
	CITY STATE	ZIP CODE
Relationship: Connec	ted Organization Affiliated Committee Joint Fundraising Representative L	eadership PAC Sponso
7. Custodian of Records: lo books and records.	lentify by name, address (phone number optional) and position of the person in p	ossession of committee
Sarah K Full Name	. Granger	
Mailing Address	PO Box 81	
	Dewey AZ 86327	-0081
Title or Position	CITY STATE	ZIP CODE
Custodian of Records		266
Treasurer: List the name any designated agent (e.g.	and address (phone number optional) of the treasurer of the committee; and the r , assistant treasurer).	name and address of
Full Name Sands Notes of Treasurer	lcKinley	
Mailing Address	PO Box 1432	
	Tacoma WA 98401-	
Title or Position Treasurer	CITY STATE	ZIP CODE 266 - 5571

9.

FEC For i	n 1 (Revised 02/2009)	Page 4				
Full Name of Designated	Sarah K. Granger					
Agent Mailing Address	PO Box 81					
	Dewey AZ 86327-0081 CITY STATE ZIP	CODE				
Title or Position Assistant Treas		5571				
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	JP Morgan Chase Bank PO Box 659754					
Mailing Address						
	San Antonio					
	CITY STATE ZIP	CODE				
Name of Bank,	Depository, etc.					
Mailing Address						
	CITY STATE ZIP	CODE				