FEC

Only

STATEMENT OF

PAGE 1 / 18 ·

ORGANIZATION FORM 1 Office Use Only NAME OF (Check if name Example: If typing, type 12FE4M5 COMMITTEE (in full) is changed) over the lines. Elaine for Congress PO Box 66191 ADDRESS (number and street) (Check if address is changed) Virginia Beach 23466 CITY A STATE A ZIP CODE ▲ COMMITTEE'S E-MAIL ADDRESS jay@bluewavepolitics.com (Check if address is changed) Optional Second E-Mail Address COMMITTEE'S WEB PAGE ADDRESS (URL) elaineforcongress.com (Check if address is changed) DATE 2022 C00664375 FEC IDENTIFICATION NUMBER > 3. X OR IS THIS STATEMENT NEW (N) 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. Petterson, Jay, , , Type or Print Name of Treasurer Petterson, Jay, , , [Electronically Filed] 28 2022 Signature of Treasurer Date NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to the penalties of 52 U.S.C. §30109. 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

E	EC Form 1 (Revised 03/2022)	Page 2
	TYPE OF COMMITTEE:	
	Candidate 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. (Complete the information below.)	candidate
	Name of Candidate Luria, Elaine, , ,	
	Candidate Party Affiliation DEM Office Sought: House Senate President	State VA District 02
	(c) This committee supports/opposes only one candidate, and is NOT an authorized committee.	02
	Name of Candidate	
	Party Committee:	
	(d) This committee is a (National, State or subordinate) committee of the Republican, e	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 Org	anization
	Membership Organization Trade Association Cooperation	ve .
	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 committee. (i.e., nonconnected committee)	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	5).
	In addition, this committee is a Lobbyist/Registrant PAC.	
	Joint Fundraising Representative:	
	(i) This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or committees/organizations, at least one of which is an authorized committee of a federal candidate.	more political
	(j) This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or committees/organizations, none of which is an authorized committee of a federal candidate.	more political
	Committees Participating in Joint Fundraiser	
	1C	

	FEC Form 1 (Revised 0)	2/2009)	Page 3
٧	Vrite or Type Committee Name		
	Elaine for Cong		
6.	Name of Any Connected Or Luria Victory Fund	ganization, Affiliated Committee, Joint Fundraising Representative, or Leade	rship PAC Sponsor
	Mailing Address	PO Box 66191	
		1	
		Virginia Beach VA 23466	
		CITY ▲ STATE ▲	ZIP CODE ▲
	Б. и. По. и.		
	Relationship: Connected	Organization Affiliated Organization X Joint Fundraising Representative	Leadership PAC Sponso
7.	Custodian of Records: Identi books and records.	fy by name, address (phone number optional) and position of the person in posses	sion of committee
	Petterson, J	lav	
	Full Name		
	Mailing Address	401 2nd Avenue South	
		Suite 303	
		Carella WA 00404	
		Seattle WA 98104	
		CITY ▲ STATE ▲	ZIP CODE ▲
	Title or Position ▼		
	Treasurer		682 7328
8.	Treasurer: List the name and any designated agent (e.g., a	d address (phone number optional) of the treasurer of the committee; and the resistant treasurer).	name and address of
	Full Name Petterson, C	lay, , ,	
	of Treasurer		
	Mailing Address	401 2nd Avenue South	
		Suite 303	
		Seattle	
		CITY ▲ STATE ▲	ZIP CODE ▲
	Title or Position ▼	SIT - SIAIL -	2.1 OODL =
	Treasurer		682 _ 7328
		Telephone number	

	FEC Form 1	(Revised 02/2009)		Page 4
	Full Name of Designated Agent			
	Mailing Address			
		CITY ▲	STATE ▲	ZIP CODE ▲
	Title or Position			
		Telephone n	umber	
•	Banks or Other safety deposit bo	Depositories: List all banks or other depositories in which the commes or maintains funds.	ittee deposits funds, ho	lds accounts, rents
	Name of Bank, D	epository, etc.		
		Bank of America		
	Mailing Address	4616 Virginia Beach Blvd		
		Virginia Beach	VA 23462	:
		CITY ▲	STATE ▲	ZIP CODE ▲
	Name of Bank, D	epository, etc.		
		Woodsboro Bank		
	Mailing Address	900 N East St		
		Frederick	MD 21701	
		CITY ▲	STATE ▲	ZIP CODE ▲

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

Page ____ **of** _____ 18___

h). Joint Fundraisi			
1.		FEC ID number	C
2.		FEC ID number	C
3.		FEC ID number	C
4.		FEC ID number	С
ama of Amy Compositor	A Committee Affiliated Committee Laint Friedrich	raining Danyanantativ	a ay Landayahin DAC Char
=	d Organization, Affiliated Committee, Joint Fundr WOMEN'S VICTORY FUND	aising Representative	e, or Leadership PAC Spon
Mailing Address	PO BOX 9		
	1		
	LEXINGTON	KY	40588
Relationship:	CITY A	STATE ▲	ZIP CODE ▲
Connecte	ed Organization Affiliated Committee	Fundraising Representa	ative Leadership PAC S
	Affiliated Committee	Fundraising Representa	ative Leadership PAC S
esignated Agent: Identi		Fundraising Representa	ative Leadership PAC S
esignated Agent: Identi		Fundraising Representa	ative Leadership PAC S
esignated Agent: Identi		Fundraising Representation	Leadership PAC S
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Full Name Mailing Address TITLE OR POSITION anks or Other Deposit afety deposit boxes or mame of Bank,	fy by name, address (phone number – optional) CITY CITY Te ories: List all banks or other depositories in which	STATE A	ZIP CODE A
Full Name Mailing Address TITLE OR POSITION anks or Other Deposit afety deposit boxes or mame of Bank,	fy by name, address (phone number – optional) CITY CITY Te ories: List all banks or other depositories in which	STATE A	ZIP CODE A
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FEC Form 1S (Revised 02/2017)

h). Joint Fundraisir			
1.		FEC ID number	C
2.		FEC ID number	C
3.		FEC ID number	С
4.		FEC ID number	С
=	Organization, Affiliated Committee, Joint Fundra JRIA TORRES VICTORY FUND	aising Representative	e, or Leadership PAC Spon
GOTTTEINIER	SKIA TOKKES VICTORT FOND		
Mailing Address	611 PENNSYLVANIA AVENUE SE		
Mailing Address	SUITE 143		
	WASHINGTON	, DC	, 20003
Deletionahin			
Relationship:	CITY A	STATE ▲	ZIP CODE ▲
Connecte	CITY ▲ d Organization	Fundraising Represent	ative Leadership PAC S
Connecte	d Organization Affiliated Committee	Fundraising Represent	ative Leadership PAC S
Connecte	d Organization Affiliated Committee	Fundraising Represent	ative Leadership PAC S
Connecte esignated Agent: Identif	d Organization Affiliated Committee	Fundraising Represent	ative Leadership PAC S
Connecte esignated Agent: Identif	d Organization Affiliated Committee	Fundraising Represent	ative Leadership PAC S
Connecte esignated Agent: Identif	d Organization Affiliated Committee y by name, address (phone number – optional)	Fundraising Represent	ative Leadership PAC S
esignated Agent: Identification Full Name Mailing Address	Affiliated Committee y by name, address (phone number – optional) CITY		
Connecte esignated Agent: Identif Full Name Mailing Address TITLE OR POSITION	Affiliated Committee y by name, address (phone number – optional) CITY Te	STATE A lephone Number	ZIP CODE A
Esignated Agent: Identification Full Name Mailing Address TITLE OR POSITION anks or Other Depositor	Affiliated Committee y by name, address (phone number – optional) CITY CITY Te	STATE A lephone Number	ZIP CODE A
Esignated Agent: Identification Full Name Mailing Address TITLE OR POSITION Lanks or Other Depositor defety deposit boxes or mail arms of Bank,	Affiliated Committee y by name, address (phone number – optional) CITY CITY Te	STATE A lephone Number	ZIP CODE A
connecte esignated Agent: Identification Full Name Mailing Address TITLE OR POSITION anks or Other Depositor affety deposit boxes or material boxes or material boxes. ame of Bank, epository, etc.	Affiliated Committee y by name, address (phone number – optional) CITY CITY Te	STATE A lephone Number	ZIP CODE A
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Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

n). Joint Fundraising	Participant:			0
1.			FEC ID number	C
2.			FEC ID number	C
3.			FEC ID number	C
4.			FEC ID number	C
	Organization, Affiliated Committee	e, Joint Fundrais	ng Representative	e, or Leadership PAC Spor
MEECA VICTORY	FUND			
Mailing Address	910 17TH ST NW STE 925			
	WASHINGTON		DC DC	20006
Relationship:	CITY ▲		STATE ▲	ZIP CODE ▲
Connected	Organization Affiliated Commit	ee X Joint Fu	ndraising Representa	Leadership PAC S
	Organization Affiliated Committee by name, address (phone number		ndraising Representa	Leadership PAC S
esignated Agent: Identify Full Name	_		ndraising Representa	Leadership PAC S
esignated Agent: Identify	_		ndraising Representa	Leadership PAC S
esignated Agent: Identify Full Name	by name, address (phone number	- optional)		
esignated Agent: Identify Full Name	by name, address (phone number	- optional)		Leadership PAC S
esignated Agent: Identify Full Name Mailing Address	by name, address (phone number	- optional)		
Full Name Mailing Address TITLE OR POSITION anks or Other Depositor fety deposit boxes or mail	by name, address (phone number	- optional)	STATE A	ZIP CODE A
Full Name Mailing Address	by name, address (phone number	- optional)	STATE A	ZIP CODE A
Full Name Mailing Address TITLE OR POSITION anks or Other Depositor fety deposit boxes or mail ame of Bank, epository, etc.	by name, address (phone number	- optional)	STATE A	ZIP CODE A

FEC Form 1S (Revised 02/2017)

(h). Joint Fundraisi	ng Participant:		
1.		FEC ID number	C
2.		FEC ID number	С
3.		FEC ID number	C
4		FEC ID number	C
Name of Any Connected	I Organization, Affiliated Committee, Joint Fu	undraising Representative	e, or Leadership PAC Spons
Mailing Address	600 PENNSYLVANIA AVE SE #15180		
	WASHINGTON	DC	20003
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
Designated Agent: Identif	fy by name, address (phone number – optional)	
Mailing Address			
	CITY A	STATE A	ZIP CODE A
TITLE OR POSITION	CITY A	STATE A	ZIP CODE A
TITLE OR POSITION	CITY ▲	STATE ▲ Telephone Number	ZIP CODE A
	ories: List all banks or other depositories in wh	Telephone Number	
Banks or Other Depositors of Bank, Depository, etc.	ories: List all banks or other depositories in wh	Telephone Number	
Banks or Other Depositors of Bank, Depository, etc.	ories: List all banks or other depositories in wh	Telephone Number	

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

1	The state of the s	EEO ID	C
1.		FEC ID number	
2.		FEC ID number	С
3.		FEC ID number	C
4.		FEC ID number	C
ame of Any Connected	l Organization, Affiliated Committee, Joint Fundi	raising Representative	e, or Leadership PAC Spon
EDW HOLD THE	HOUSE FUND		
Mailing Address	600 PENNSYLVANIA AVE SE #15180		
	WASHINGTON	DC	20003
Relationship:	CITY A	STATE ▲	ZIP CODE ▲
	ed Organization Affiliated Committee X Joint	t Fundraising Representa	tive Leadership PAC Sp
esignated Agent: Identi	fy by name, address (phone number - optional)		
esignated Agent: Identi	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	fy by name, address (phone number – optional)		
Full Name	CITY A	STATE A	ZIP CODE A
Full Name	CITY A	STATE A	ZIP CODE A
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Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

h). Joint Fundraisi	ng Participant:		
1.		FEC ID number	C
2.		FEC ID number	С
3.		FEC ID number	С
4.		FEC ID number	C
ame of Any Connected	Organization, Affiliated Committee, Joint Fund	draising Representativ	e, or Leadership PAC Spon
SERVE AMERIC	A VICTORY FUND		
	PO D. COMO		
Mailing Address	PO Box 2013		
	Salem	MA L	01970
Relationship:	CITY A	STATE ▲	ZIP CODE ▲
Connecte	d Organization Affiliated Committee	nt Fundraising Represent	ative Leadership PAC Sp
	Affiliated Committee Jointy by name, address (phone number – optional)	nt Fundraising Represent	ative Leadership PAC Sp
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FEC Form 1S (Revised 02/2017)

Mailing Address 499 SOUTH CAPITOL STREET SW
Mailing Address SUITE 407 WASHINGTON PRelationship: CITY ▲ Connected Organization Affiliated Committee Joint Fundraising Representative Leadership PAC STATE A STATE A Leadership PAC STATE A Leaders
Mailing Address SUITE 407 WASHINGTON PRelationship: CITY ▲ Connected Organization Affiliated Committee Joint Fundraising Representative Leadership PAC STATE A STATE A Leadership PAC STATE A Leaders
Mailing Address SUITE 407 WASHINGTON CITY ▲ STATE ▲ ZIP CODE ▲
Mailing Address SUITE 407 WASHINGTON CITY ▲ STATE ▲ ZIP CODE ▲
Mailing Address SUITE 407 WASHINGTON DC 20003
Mailing Address SUITE 407
Mailing Address
Mailing Address 499 SOUTH CAPITOL STREET SW

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

Mailing Address TITLE OR POSITION anks or Other Deposito afety deposit boxes or ma ame of Bank, epository, etc. Mailing Address	▼	CITY A s or other depositories in whi	STATE ▲ Telephone Number	ZIP CODE ZIP CODE its funds, holds accounts, rent
anks or Other Deposito afety deposit boxes or material ame of Bank, epository, etc.	▼	CITY A	STATE ▲ Telephone Number	ZIP CODE A
TITLE OR POSITION anks or Other Deposito afety deposit boxes or ma	▼	CITY A	STATE ▲ Telephone Number	ZIP CODE A
TITLE OR POSITION	▼	CITY A	STATE ▲ Telephone Number	ZIP CODE A
			STATE ▲	
Mailing Address				
Mailing Address				
Mailing Address				
AA-WA-U-	1			
Full Name				
	y by name, addres	s (phone number – optional)		
Connected	d Organization	Affiliated Committee X Jo	oint Fundraising Represen	tative Leadership PAC Sp
Relationship:		CITY A	STATE A	ZIP CODE ▲
	Washington		DC	20003
	Suite 407			
Mailing Address	499 South Capi	tol Street SW		
LURIA SHERRILI	_		ndraising Representativ	ve, or Leadership PAC Spons
4.			FEC ID number	C
			FEC ID number	C
3.			FEC ID number	С
1				

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

1.					
			FEC II	0 number	С
2.			FEC II	0 number	С
3.			FEC II	0 number	С
4.			FEC II	O number	С
lame of Any Conne	ected Organization,	Affiliated Committee, Joint	Fundraising Re	oresentativ	e, or Leadership PAC Spons
HOUSE VICT	ORY PROJEC	T 2022		1 1 1 1	
Mailing Address	600 PENNS	SYLVANIA AVE SE #15180			
	WASHING	ΓΟN		DC	20003
Relationship:		CITY A		STATE A	ZIP CODE ▲
	nected Organization	Affiliated Committee	Joint Fundraising	y nepresem	tative Leadership PAC Sp
Full Name	Johns by Hame, au	arooc (priorie maribor optior			
Mailing Address					
		CITY A		STATE A	ZIP CODE A

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

h). Joint Fundraisir		FEC ID number	C
2.		FEC ID number	С
3.		FEC ID number	С
		FEC ID number	С
4.			
ame of Any Connected	Organization, Affiliated Committee, Joint Funda	raising Representative	e, or Leadership PAC Spon
FORWARD VIRG	i <mark>inia</mark>		
	1751 POTOMAC GREENS DR		
Mailing Address			
	ALEXANDRIA	, VA	22314
Dalatianahin			
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
	d Organization Affiliated Committee	t Fundraising Representa	ative Leadership PAC S
esignated Agent: Identif		t Fundraising Representa	Leadership PAC S
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FEC Form 1S (Revised 02/2017)

1.	Participant:		
1		FEC ID number	C
2.		FEC ID number	C
3.		FEC ID number	C
4.		FEC ID number	С
Name of Any Connected O	rganization, Affiliated Committee, Joint Fundi	raising Representative	e, or Leadership PAC Sponsor
Mailing Address	611 Pennsylvania Ave SE		
	Suite 143		
	Washington	DC	20003
Relationship:	CITY A	STATE A	ZIP CODE ▲
Connected	Organization Affiliated Committee	t Fundraising Representa	ative Leadership PAC Sponso
Full Name	by name, address (phone number – optional)		
Mailing Address			
			I I-I
TITLE OR POSITION \	CITY A	STATE ▲	ZIP CODE ▲
TITLE OR POSITION •		STATE ▲	ZIP CODE A
Banks or Other Depositorie safety deposit boxes or main	es: List all banks or other depositories in which	elephone Number	
Banks or Other Depositoric safety deposit boxes or main Name of Bank, Depository, etc.	es: List all banks or other depositories in which	elephone Number	
Banks or Other Depositorie safety deposit boxes or main	es: List all banks or other depositories in which	elephone Number	
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FEC Form 1S (Revised 02/2017)

h). Joint Fundraisi			
1.		FEC ID number	C
2.		FEC ID number	C
3.		FEC ID number	С
4.		FEC ID number	С
-	I Organization, Affiliated Committee, Joint Fundra	aising Representative	e, or Leadership PAC Spon
Mailing Address	401 2ND AVE S		
ag / taaooo	STE 303		
	SEATTLE	WA	98104
Relationship:	CITY A	STATE A	ZIP CODE A
Connecte	ed Organization Affiliated Committee Joint	Fundraising Represent	ative Leadership PAC S
	Affiliated Committee Joint fy by name, address (phone number – optional)	Fundraising Represent	ative Leadership PAC S
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Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

h). Joint Fundraisi	ig i ai ticipant.		
1.		FEC ID number	C
2.		FEC ID number	С
3.		FEC ID number	С
4.		FEC ID number	C
	Organization, Affiliated Committee, Joint Fu	ndraising Representativ	e, or Leadership PAC Spon
NewDem Summe	er victory Fund		
Martina Addison	910 17th St NW		
Mailing Address	Ste 925		
		DC	20006
5.1	Washington	DC	
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
	Affiliated Committee X Joy by name, address (phone number – optional)	oint Fundraising Represent	ative Leadership PAC S
			ative Leadership PAC S
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esignated Agent: Identing Full Name	fy by name, address (phone number – optional)		
esignated Agent: Identification Full Name	fy by name, address (phone number – optional) CITY	STATE A Telephone Number	ZIP CODE A
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Full Name Mailing Address TITLE OR POSITION anks or Other Deposite fety deposit boxes or mane of Bank,	fy by name, address (phone number – optional) CITY CITY pries: List all banks or other depositories in whi	STATE A Telephone Number	ZIP CODE A
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FEC Form 1S (Revised 02/2017)

5(g) or (f	h). Joint Fundraisin g	g Participant:		
	1.		FEC ID number	C
	2.		FEC ID number	C
	3.		FEC ID number	C
	4.		FEC ID number	С
	<u>-</u>	Organization, Affiliated Committee, Joint Fundrais	sing Representative	e, or Leadership PAC Sponsor
	I			
ı				
	Mailing Address	PO BOX 5418		
		TAKOMA PARK	MD MD	20913
	Relationship:	CITY A	STATE ▲	ZIP CODE ▲
	Connected	Organization Affiliated Committee X Joint Fu	undraising Representa	ative Leadership PAC Sponsor
8. D e	esignated Agent: Identify Full Name	by name, address (phone number – optional)		
	Mailing Address			
				I I-I
	TITLE OR POSITION	▼ CITY ▲	STATE ▲	ZIP CODE ▲
		1	phone Number	
sa Na	anks or Other Depositor afety deposit boxes or mai ame of Bank, epository, etc.	ies: List all banks or other depositories in which the intains funds.	e committee deposit	s funds, holds accounts, rents
	Mailing Address	1	1 1 1 1 1 1	
	Mailing Address			
			1 1 1	1 1_1