

STATEMENT OF ORGANIZATION

(See reverse side for instructions)

1. (a) NAME OF COMMITTEE IN FULL W: Washington 94 (Check if name is changed)

(b) Number and Street Address 223-6th Ave N (Check if address is changed)

(c) City, State and ZIP Code Seattle, WA 98109

2. DATE 10/17/94

3. FEDERAL ELECTION COMMISSION IDENTIFICATION NUMBER Oct 28 9 06 AM '94

4. IS THIS STATEMENT AN AMENDMENT? ☐ YES ☒ NO

5. TYPE OF COMMITTEE (Check one)

- ☐ (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 | State-District |
|-------------------|-----------------------------|---------------|----------------|
| | | | |
- ☐ (c) This committee supports/opposes only one candidate _____ and is NOT an authorized committee. (Name of candidate)
- ☐ (d) This committee is a _____ committee of the _____ Party. (National, State or subordinate) (Democratic, Republican, etc.)
- ☐ (e) This committee is a separate segregated fund.
- ☒ (f) This committee supports/opposes more than one Federal candidate and is NOT a separate segregated fund or a party committee.

Name of Any Connected Organization or Affiliated Committee	Mailing Address and ZIP Code	Relationship
Sen. Sims for U.S. Senate	223-6th Ave N Seattle, WA 98109	JOINT FUNDRAISING
Democratic Sen. Cam. Comm.	430 S. Capitol, SF WASH. DC 20003	PARTICIPANT (Sen.)
Type of Connected Organization ☒ Corporation ☐ Corporation w/o Capital Stock ☐ Labor Organization ☐ Membership Organization ☐ Trade Association ☐ Cooperative		

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	Mailing Address	Title or Position
TREASURER		

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	Mailing Address	Title or Position
Sean A. Olson	223-6th Ave N, Sea, WA 98109	Treasurer

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 and ZIP Code
US BANK	530 DEXTER N, SEATTLE, WA 98109

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	SIGNATURE OF TREASURER	DATE
SEAN A. OLSON	Sean A. Olson	10/17/94

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.

Federal Election Commission
**ENVELOPE REPLACEMENT PAGE
FOR INCOMING DOCUMENTS**

The Commission has added this page to the end of this filing to indicate how it was received.

☐ Hand Delivered

DATE OF RECEIPT

☒ First Class Mail

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☐ Received from the House Office of Records
and Registration

DATE OF RECEIPT

☐ Received from the Senate Office of Public
Records

DATE OF RECEIPT

☐ Other (Specify):

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DATE OF RECEIPT

JP
PREPARED

10/28/94
DATE PREPARED