FEC FORM 1	STATEMEN ORGANIZA	_	PAGE 1 / Office Use Only	4
1. NAME OF COMMITTEE (in full)	(Check if name is changed)	Example: If typing, type over the lines.	12FE4M5	
				EE
ADDRESS (number and street)		V SUITE 900		
(Check if address is changed)				
	WASHINGTON CITY ▲		DC 20004 STATE ▲ ZIP CODE ▲	
COMMITTEE'S E-MAIL ADDRE	SS			
(Check if address is changed)	e.roy@nwseo.org			
	Optional Second E-Mail Add c.jacobson@nwseo.org	lress		
COMMITTEE'S WEB PAGE ADD	DRESS (URL)			
2. DATE 12 / 21				
3. FEC IDENTIFICATION NU	JMBER ► C CO	0318311		
4. IS THIS STATEMENT	NEW (N) OR	× AMENDED (A)		
I certify that I have examined th	is Statement and to the best	of my knowledge and belief it	is true, correct and complete.	
Type or Print Name of Treasure	Roy, Emily, , ,			
Signature of Treasurer Roy,	Emily, , ,		Date 09 / 20 / 2023	
NOTE: Submission of false, errone		may subject the person signing t ION SHOULD BE REPORTED	his Statement to the penalties of 52 U.S.C. WITHIN 10 DAYS.	§30109
Office Use Only		For further information co Federal Election Commissio Toll Free 800-424-9530 Local 202-694-1100		

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5. TYI	PE OF COMMITTEE:	
Ca	Indidate 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 t information below.)	he candidate
	Name of Candidate	
	Candidate Office Party Affiliation Sought: House Senate President	State
(c)	This committee supports/opposes only one candidate, and is NOT an authorized committee.	District
	Name of Candidate	
Pa	rty Committee:	
(d)	This committee is a (National, State or subordinate) committee of the (Democration of the Republication)	tic, n, etc.) Party
Ро	litical Action Committee (PAC):	
(e)		ted organization is a:
	Corporation Corporation w/o Capital Stock X Labor	Organization
	Membership Organization Trade Association Coope	rative
	In addition, this committee is a Lobbyist/Registrant PAC.	
(f)	This committee supports/opposes more than one Federal candidate, and is NOT a separate segregat committee. (i.e., nonconnected committee)	ed 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 F	PAC).

Joint Fundraising Representative:

(i) 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.
(j) 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
2.

In addition, this committee is a Lobbyist/Registrant PAC.

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۷	Write or Type Committee Name					
	NATIONAL WEATHE	R SERVICE EMPLOYEES	S ORGANIZ	ATION POL	ITICAL ACTI	ON COMMITTEE
6.	Name of Any Connected C	Organization, Affiliated Committed	ee, Joint Fund	raising Repres	entative, or Lea	dership PAC Sponsor
	Mailing Address	601 PENNSYLVANIA AVE NW S				
						004
		CITY 🔺	L	S		ZIP CODE
	Relationship: X Connected	Organization Affiliated Organ	ization Jo	int Fundraising F	Representative	Leadership PAC Sponse

7. **Custodian of Records:** Identify by name, address (phone number -- optional) and position of the person in possession of committee books and records.

Roy, Emily	', , ,		1
Full Name			
Mailing Address	601 PENNSYLVANIA AVE NW SUITE 900		
		DC 20004	
		STATE A	ZIP CODE
Title or Position ▼			
Treasurer	Te	elephone number	770 - 7983

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	Roy, Emily, , ,		
Mailing Address	601 PENNSYLVANIA AVE NW SUITE 900		
		DC 20004	
	CITY A STAT	TE 🔺	ZIP CODE
Title or Position	▼		
Treasurer	Telephone number	202	770 - 7983

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Full Name of Designated Agent	Jacobson, Chris, , ,	
Mailing Address	601 PENNSYLVANIA AVE NW SUITE 900	
	WASHINGTON DC 20004	
	CITY A STATE A ZI	IP CODE 🔺
Title or Position	,	
	Image:	74 - 6893

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	5100 Wisconsin Ave NW		
	Washington	DC 20016	
	CITY A	STATE ▲	ZIP CODE ▲
Name of Bank, D	Pepository, etc.		
Mailing Address			
	CITY A	STATE A	ZIP CODE ▲