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STATEMENT OF **FEC ORGANIZATION** FORM 1 Office Use Only NAME OF Example: If typing, type (Check if name 12FE4M5 COMMITTEE (in full) is changed) over the lines. Stephen T Major for Congress 9116 E. Sprague Ave. ADDRESS (number and street) #285 (Check if address is changed) Spokane Valley 99206-4397 WA CITY A STATE A ZIP CODE A COMMITTEE'S E-MAIL ADDRESS stephentmajor@msn.com (Check if address is changed) Optional Second E-Mail Address mitch@spkcpa.com COMMITTEE'S WEB PAGE ADDRESS (URL) (Check if address is changed) DATE 06 2020 C00750729 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. Johnson, Mitchell, Paul, , Sr. Type or Print Name of Treasurer Johnson, Mitchell, Paul, , Sr. [Electronically Filed] 07 06 2020 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 Only

Local 202-694-1100

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	COMMITTEE te 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 candidate information below.)
Name of Candidate	Major, Stephen, T, ,
Candidate Party Affilia	Ation REP Office Sought: We House Senate President District WA Office Sought: Mean Senate President District WA
(c)	This committee supports/opposes only one candidate, and is NOT an authorized committee.
Name of Candidate	
Party Co	mmittee: (National, State (Democratic,
(d)	This committee is a or subordinate) committee of the Republican, 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 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 segregated fund or party committee. (i.e., nonconnected committee)
	In addition, this committee is a Lobbyist/Registrant PAC.
	In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)
Joint Fun	adraising Representative:
(g)	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.
(h)	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.
Cor	mmittees Participating in Joint Fundraiser
1.	FEC ID number
2.	FEC ID number
3.	FEC ID number C
4	FEC ID number

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Write or Type Committee Na		
Stephen T Ma	jor for Congress	
•	d Organization, Affiliated Committee, Joint Fundraising Representative	ve, or Leadership PAC Sponsor
NONE		
Mailing Address		
J		
	CITY STATE	ZIP CODE
Relationship: Connec	cted Organization Affiliated Committee Joint Fundraising Represen	ntative Leadership PAC Sponsor
 Custodian of Records: lo books and records. 	dentify by name, address (phone number optional) and position of the	person in possession of committee
Johnson	n, Mitchell, Paul, , Sr.	
Mailing Address	P.O. Box 550	
Walling Address		
	Liberty Lake WA	99019
Title or Position	CITY STATE	ZIP CODE
Campaign Treasurer	Telephone number	509 922 4879
Treasurer: List the name any designated agent (e.g.)	and address (phone number optional) of the treasurer of the committee., assistant treasurer).	ee; and the name and address of
Full Name Johnson of Treasurer	n, Mitchell, Paul, , Sr.	
Mailing Address	P.O. Box 550	
	Liberty Lake WA	99019
Title or Position Campaign Treasurer	CITY STATE	ZIP CODE 509 922 4879
	Telephone number	

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Full Name of Designated			
Agent			
Mailing Address	5		
		CITY STATE	ZIP CODE
Title or Position		Tolophono number	-1 1-1 1
		Telephone number	
. Banks or Othe	r Depositori	es: List all banks or other depositories in which the committee deposits funds,	holds accounts, rents
safety deposit l	ooxes or main	ntains funds.	
safety deposit I Name of Bank,	ooxes or mair	ntains funds.	
safety deposit I	Depository, e	ntains funds.	
safety deposit I	ooxes or mair	ntains funds. etc.	
safety deposit I	Depository, e	ntains funds.	
safety deposit I Name of Bank,	Depository, e	ntains funds. etc.	
safety deposit I Name of Bank,	Depository, e	ntains funds. etc.	210
safety deposit I Name of Bank,	Depository, e	P.O. Box 1954	210 ZIP CODE
safety deposit I Name of Bank,	Depository, e	P.O. Box 1954 Spokane CITY STATE	
safety deposit I Name of Bank, Mailing Address	Depository, e	P.O. Box 1954 Spokane CITY STATE	
safety deposit I Name of Bank, Mailing Address	Depository, e	P.O. Box 1954 Spokane CITY STATE	
safety deposit I Name of Bank, Mailing Address	Depository, e	P.O. Box 1954 Spokane CITY STATE	
safety deposit I Name of Bank, Mailing Address	Depository, e	P.O. Box 1954 Spokane CITY STATE	
safety deposit I Name of Bank, Mailing Address	Depository, e	P.O. Box 1954 Spokane CITY STATE	

: 97 'A = G7 9 @ G B9 C I G'H9 L H'F9 @ 5 H98 'HC'5 'F9 DC F HZ G7 < 98 I @ 'C F' + H9 A = N5 H + C B

Form/Schedule: F1N Transaction ID:

Candidate ID: HOWA05141 F2N filing ID: FEC-1415077

Form/Schedule: Transaction ID: