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. Elect Carolyn Long PO Box 821288 ADDRESS (number and street) (Check if address is changed) Vancouver 98682 WA CITY A STATE A ZIP CODE A COMMITTEE'S E-MAIL ADDRESS compliance@bluewavepolitics.com (Check if address is changed) Optional Second E-Mail Address vote@electlong.com COMMITTEE'S WEB PAGE ADDRESS (URL) electlong.com (Check if address is changed) DATE 29 2018 C00660472 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] 01 29 2018 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 Form 1 (Revi	sed 02/2009)	Page 2
TYPE OF COMMITTE	E	
Candidate Commi	ttee:	
(a) X This com	nmittee is a principal campaign committee. (Complete the candidate information below.)	
information	nmittee is an authorized committee, and is NOT a principal campaign committee. (Comon below.)	plete the candidate
Name of LOI Candidate	ng, Carolyn, N., ,	
Candidate	Office DEM Sought: X House Senate President	State
Party Affiliation	DEM Sought: * House Senate President	District 03
(c) This com	nmittee supports/opposes only one candidate, and is NOT an authorized committee.	
Name of Candidate		
Party Committee:		
(d) This com		(Democratic, Republican, etc.) Party.
Political Action Co	mmittee (PAC):	
(e) This com	nmittee is a separate segregated fund. (Identify connected organization on line 6.) Its con-	nected organization is a:
	Corporation W/o Capital Stock	Labor Organization
	Membership Organization Trade Association	Cooperative
	In addition, this committee is a Lobbyist/Registrant PAC.	
	nmittee supports/opposes more than one Federal candidate, and is NOT a separate see. (i.e., nonconnected committee)	egregated fund or party
lr.	n addition, this committee is a Lobbyist/Registrant PAC.	
lr	n addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)	
Joint Fundraising I	Representative:	
(8)	mittee collects contributions, pays fundraising expenses and disburses net proceeds for twes/organizations, at least one of which is an authorized committee of a federal candidate.	vo or more political
	mittee collects contributions, pays fundraising expenses and disburses net proceeds for twes/organizations, none of which is an authorized committee of a federal candidate.	o or more political
Committees P	articipating in Joint Fundraiser	
1.	FEC ID number	
2.	FEC ID number	
3.	FEC ID number	
4.		

FEC Form 1 (Revised 0	2/2009)	Page 3
Write or Type Committee Name		-
Elect Carolyn Lo	ong	
	rganization, Affiliated Committee, Joint Fundraising Representative, or Lead	lership PAC Sponsor
NONE		
Mailing Address		
	CITY STATE	ZIP CODE
Custodian of Records: Ident	Organization Affiliated Committee Joint Fundraising Representative ify by name, address (phone number optional) and position of the person in	Leadership PAC Sponsor possession of committee
books and records.		
Petterson, .	Jay, , ,	
Mailing Address	119 1st Ave S	
	Ste 320	
	Seattle WA 9810)4
Title or Position	CITY STATE	ZIP CODE
Tresurer	Telephone number 206	682 7328
Treasurer: List the name and any designated agent (e.g., as	address (phone number optional) of the treasurer of the committee; and the ssistant treasurer).	name and address of
Full Name Petterson, Soft Treasurer	lay, , ,	
Mailing Address	119 1st Ave S	
	Ste 320	
	Seattle WA 9810 CITY STATE	ZIP CODE
Title or Position Tresurer	Telephone number	682 - 7328

FEC Forn	n 1 (Revised 02/2009)	Page 4
Full Name of Designated Agent	Arnall, Wyatt, , ,	
Mailing Address	PO Box 702	
	Scappoose WA 97056	
Title or Position		P CODE 4076
	Depositories: List all banks or other depositories in which the committee deposits funds, holds access or maintains funds. Depository, etc.	ccounts, rents
safety deposit bo Name of Bank, [oxes or maintains funds.	counts, rents
safety deposit bo	Depository, etc. Columbia Credit Union	counts, rents
safety deposit bo Name of Bank, [Depository, etc. Columbia Credit Union	counts, rents
safety deposit bo Name of Bank, [Depository, etc. Columbia Credit Union 3003 NE 62nd Ave Vancouver WA 98661	ccounts, rents
safety deposit bo Name of Bank, [Depository, etc. Columbia Credit Union 3003 NE 62nd Ave Vancouver CITY STATE ZIF	
safety deposit bo Name of Bank, I Mailing Address	Depository, etc. Columbia Credit Union 3003 NE 62nd Ave Vancouver CITY STATE ZIF	
safety deposit bo Name of Bank, I Mailing Address	Depository, etc. Columbia Credit Union 3003 NE 62nd Ave Vancouver WA 98661 CITY STATE ZIF	
Safety deposit bo Name of Bank, I Mailing Address	Depository, etc. Columbia Credit Union 3003 NE 62nd Ave Vancouver WA 98661 CITY STATE ZIF	
Safety deposit bo Name of Bank, I Mailing Address	Depository, etc. Columbia Credit Union 3003 NE 62nd Ave Vancouver WA 98661 CITY STATE ZIF	