

**FEC
FORM 1**

**STATEMENT OF
ORGANIZATION**

RECEIVED
FEC MAILCENTER

2024 JAN -5 AM 9:53
Office Use Only

1. NAME OF COMMITTEE (in full) ☐ (Check if name is changed) Example: If typing, type over the lines.

12FE4M5

Scott Nazarino for U.S. Senate

ADDRESS (number and street)

PO BOX 31085

- ☐ (Check if address is changed)

SEATTLE

CITY ▲

WA

STATE ▲

98103

- 31085

ZIP CODE ▲

COMMITTEE'S E-MAIL ADDRESS

- ☐ (Check if address is changed)

scott@scottforsenate.net

Optional Second E-Mail Address

snazarino@gmail.com

COMMITTEE'S WEB PAGE ADDRESS (URL)

- ☐ (Check if address is changed)

scottforsenate.net

2. DATE

1 2 / 2 6 / 2 0 2 3

3. FEC IDENTIFICATION NUMBER ►

C

4. IS THIS STATEMENT



NEW (N)

OR

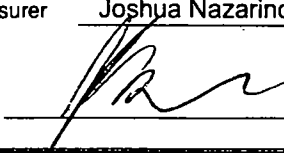


AMENDED (A)

I certify that I have examined this Statement and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Joshua Nazarino

Signature of Treasurer



Date

1 2 / 2 6 / 2 0 2 3

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
Use
Only

For further information contact:
Federal Election Commission
Toll Free 800-424-9530
Local 202-694-1100

FEC FORM 1
(Revised 03/2022)

5. TYPE OF COMMITTEE:

Candidate 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 the candidate information below.)

Name of
Candidate

Scott Nazario

Candidate
Party Affiliation

REP

Office
Sought:☐ House☒ Senate☐ President

State

District

- (c) ☐ This committee supports/opposes only one candidate, and is NOT an authorized committee.

Name of
Candidate**Party Committee:**

- (d) ☐ This committee is a (National, State or subordinate) committee of the (Democratic, 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.)

- (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).

☐

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 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

1.

2.

C

C

Telephone number 425 - 786 - 5475

Full Name of
Designated
Agent

Mailing Address

CITY ▲

STATE ▲

ZIP CODE ▲

Title or Position ▼

Telephone number

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

CITY ▲

STATE ▲

ZIP CODE ▲

Name of Bank, Depository, etc.

Mailing Address

CITY ▲

STATE ▲

ZIP CODE ▲

2025 RELEASE UNDER E.O. 14176

5(i) or (j). Joint Fundraising Participant:

1. _____
2. _____
3. _____
4. _____

FEC ID number

C _____

FEC ID number

C _____

FEC ID number

C _____

FEC ID number

C _____

6. Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC Sponsor

Mailing Address

Relationship:

CITY ▲

STATE ▲

ZIP CODE ▲

☐

Connected Organization

☐

Affiliated Committee

☐

Joint Fundraising Representative

☐

Leadership PAC Sponsor

8. Designated Agent: Identify by name, address (phone number – optional)

Full Name

Mailing Address

TITLE OR POSITION ▼

CITY ▲

STATE ▲

ZIP CODE ▲

Telephone Number

_____-_____-_____

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.

Wells Fargo Bank

Mailing Address

3042 NE 45th St

STE A

Seattle

CITY ▲

WA

STATE ▲

98105

ZIP CODE ▲

133035 MISSOURI AVE
#178

SPOKANE, WA 99216

Valley

AAH; Office of Public Records

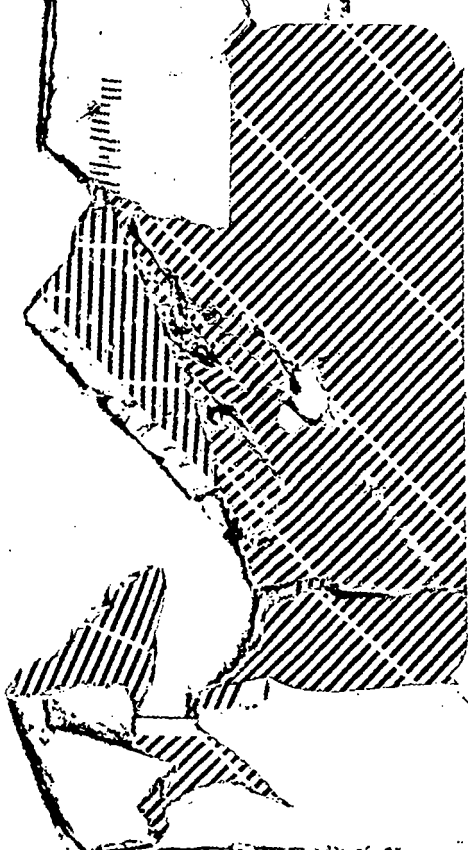
1050 First St NE

WASHINGTON, DC 20463

SPOKANE WA 99216
29 DEC 2023 PM 3 L



20463-



NOVA ET OM. OM. POSTMORON

Federal Election Commission ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS The FEC added this page to the end of this filing to indicate how it was received.		
<input type="checkbox"/> Hand Delivered	Date of Receipt	
<input checked="" type="checkbox"/> USPS First Class Mail	Date of Receipt <i>01/05/2024</i>	
<input type="checkbox"/> USPS Registered/Certified	Postmarked (R/C)	
<input type="checkbox"/> USPS Priority Mail	Postmarked	
<input type="checkbox"/> USPS Priority Mail Express	Postmarked	
<input type="checkbox"/> Postmark Illegible		
<input type="checkbox"/> No Postmark		
<input type="checkbox"/> Overnight Delivery Service (Specify):	Shipping Date	Date of Receipt
	Next Business Day Delivery	<input type="checkbox"/>
<input type="checkbox"/> Received via FAX	Date of Receipt	
<input type="checkbox"/> Received via Email	Date of Receipt	
<input type="checkbox"/> Received from Electronic Filing Office	Date of Receipt	
<input type="checkbox"/> Other (Specify):	Date of Receipt or Postmarked	
PREPARER	<i>01/05/2024</i> DATE PREPARED	