

FEC
FORM 1

STATEMENT OF
ORGANIZATION

RECEIVED
SECRETARY OF THE SENATE
05 MAR -7 AM 2:17 #D
Office Use Only

1. NAME OF COMMITTEE (In full) (Check if name is changed) Example: If typing, type over the lines. 12FE4M5
Washington Senate 2006

ADDRESS (number and street) 120 Maryland Avenue, NE
 (Check if address is changed)
Washington DC 20002
CITY STATE ZIP CODE

COMMITTEE'S E-MAIL ADDRESS

COMMITTEE'S WEB PAGE ADDRESS (URL)

COMMITTEE'S FAX NUMBER
202 - 485 - 3120


2. DATE 03 / 07 / 2005

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 Chris Kopp

Signature of Treasurer  Date 03 / 07 / 2005

NOTE: Submission of false, erroneous or incomplete information may subject the person signing this Statement to the penalties of 2 U.S.C. 6437g.
ANY CHANGE IN INFORMATION SHOULD BE REPORTED WITHIN 10 DAYS.

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 House Senate President State District

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

Name of Candidate _____

(d) This committee is a (National, State or subordinate) committee of the (Democratic, Republican, etc.) Party.

(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 party committee.

6. Name of Any Connected Organization or Affiliated Committee

Cantwell 2006 _____

Mailing Address 122 Maryland Avenue, NE _____

Washington DC 20002 - _____
 CITY ▲ STATE ▲ ZIP CODE ▲

Relationship Joint Fundraising Participant _____

Type of Connected Organization:

- Corporation Corporation w/o Capital Stock Labor Organization
- Membership Organization Trade Association Cooperative

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:

House

Senate

President

State

District

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

Name of Candidate _____

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

- (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 party committee.

6. Name of Any Connected Organization or Affiliated Committee

Democratic Senatorial Campaign Committee

Mailing Address

120 Maryland Avenue, NE

Washington DC 20002 - _____

CITY ▲

STATE ▲

ZIP CODE ▲

Relationship Joint Fundraising Participant _____

Type of Connected Organization:

- Corporation Corporation w/o Capital Stock Labor Organization
- Membership Organization Trade Association Cooperative

Write or Type Committee Name

Washington Senate 2006

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 | Chris Koob |

Mailing Address | 120 Maryland Avenue, NE |

| Washington | | DC | | 20002 | - |

Title or Position ▼ CITY ▲ STATE ▲ ZIP CODE ▲

| Treasurer | Telephone number | 202 | - | 224 | - | 2447 |

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 | Chris Koob |

Mailing Address | 120 Maryland Avenue, NE |

| Washington | | DC | | 20002 | - |

Title or Position ▼ CITY ▲ STATE ▲ ZIP CODE ▲

| Treasurer | Telephone number | 202 | - | 224 | - | 2447 |

Full Name of Designated Agent | Darlene Setter |

Mailing Address | 120 Maryland Avenue, NE |

| Washington | | DC | | 20002 | - |

Title or Position ▼ CITY ▲ STATE ▲ ZIP CODE ▲

| Assistant Treasurer | Telephone number | 202 | - | 224 | - | 2447 |

Write or Type Committee Name

Washington Senate 2006

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 CITY STATE ZIP CODE

Telephone number

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

Mailing Address

Title or Position CITY STATE ZIP CODE

Telephone number

Full Name of Designated Agent
Phil Lloyd

Mailing Address
P.O. Box 1727

Title or Position CITY STATE ZIP CODE
Assistant Treasurer Seattle WA 98111

Telephone number 206 255 3367

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.

Bank of America

Mailing Address

730 - 15th Street, NW

Washington, DC 20005

CITY ▲

STATE ▲

ZIP CODE ▲

Name of Bank, Depository, etc.

Mailing Address

CITY ▲

STATE ▲

ZIP CODE ▲

EMILY J. REYNOLDS
SECRETARY

PAMELA B. GAVIN
SUPPORTER

HART SENATE OFFICE BUILDING
SUITE 232
WASHINGTON, DC 20510-2116
Phone: (202) 224-0322

United States Senate

OFFICE OF THE SECRETARY

OFFICE OF PUBLIC RECORDS

THE PRECEDING DOCUMENT WAS:

HAND DELIVERED 03-07-05
Date of Receipt

REGISTERED/CERTIFIED MAIL _____
Postmarked

RECEIVED FROM THE FEDERAL ELECTION
COMMISSION _____
Date of Receipt

DELIVERY CONFIRMATION/ON LINE TRACKING SYSTEM
 PRIORITY MAIL /WITH CONFIRMATION SHEET
 EXPRESS MAIL
 FEDERAL EXPRESS
 UPS
 DHL
 AIRBORNE EXPRESS _____
Postmark

PRIORITY MAIL (NO CONFIRMATION) _____
Date of Receipt

FIRST CLASS MAIL _____
Date of Receipt

FAX _____
Date of Receipt

NO POSTMARK POSTMARK ILLEGIBLE

OTHER _____
Date of Receipt

RD 03-07-05
Preparer Date Prepared

25020101614
25020101614

