Image# 202302019578112628				PAGE 1 / 5
FEC FORM 1	STATEMEI ORGANIZ			
1. NAME OF	(Check if name	Example: If typing, type	10000404	Office Use Only
COMMITTEE (in full)	is changed)	over the lines.	12FE4M	5
Nevadans for Ste	even Horsford			
ADDRESS (number and street)	PO Box 336664			
(Check if address is changed)				
с <i>,</i>	North Las Vegas		NV	89033
	CITY ▲		STATE ▲	ZIP CODE▲
COMMITTEE'S E-MAIL ADDRE	SS			
(Check if address is changed)	jay@bluewavepolitics.	com		
	Optional Second E-Mail Ad	dress		
(Check if address is changed)	https://www.stevenhorsford.co	om/		
2. DATE 02 0	D / Y Y Y Y 1 2023			
3. FEC IDENTIFICATION N	UMBER ► C C	00668228		
4. IS THIS STATEMENT	NEW (N) OR	× AMENDED (A)		
Leartify that I have a service of the	his Otstoment and to the kind	of my knowledge and balls (*)	io truc	t and complete
I certify that I have examined t	nis Statement and to the best	or my knowledge and belief if	is true, correc	a and complete.
Type or Print Name of Treasure	Petterson, Jay, , ,			
Signature of Treasurer	rson, Jay, , ,	[Electronically Filed]	Date 02	2 / D D / Y Y Y Y 2 01 2023
NOTE: Submission of false, erron		may subject the person signing TION SHOULD BE REPORTED		o the penalties of 52 U.S.C. §30109
Office Use Only		For further information of Federal Election Commiss Toll Free 800-424-9530 Local 202-694-1100	ontact:	FEC FORM 1 (Revised 06/2012)

02/01/2023 12 : 59

FEC Form 1 (Revised 03/2022)		Page 2
. TYPE OF COMMITTEE:		
Candidate Committee:		
(a) X This committee is a principal campaign committee. (Comple	te the candidate information below.)
(b) This committee is an authorized committee, and is NOT a pinformation below.)	principal campaign committee. (Com	nplete the candidate
Name of Horsford, Steven, Alexzander, , Candidate		
Candidate Office Party Affiliation DEM Sought: House	Senate Presider	State NV nt District 04
(c) This committee supports/opposes only one candidate, and	is NOT an authorized committee.	· · ·
Name of Candidate		
Party Committee: (National, State (d) This committee is a or subordinate) committee	, , , , , , , , , , , , , , , , , , ,	emocratic, publican, etc.) Party
Political Action Committee (PAC):		
(e) This committee is a separate segregated fund. (Identify con	nected organization on line 6.) Its c	connected organization is a:
Corporation Corporation	w/o Capital Stock	Labor Organization
Membership Organization Trade Assoc	ciation	Cooperative
In addition, this committee is a Lobbyist/Registran	It PAC.	
(f) This committee supports/opposes more than one Federal committee. (i.e., nonconnected committee)	andidate, and is NOT a separate se	egregated fund or party
In addition, this committee is a Lobbyist/Registran	it 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/Registran		

(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.
(j) Committees Participating in Joint Fundraiser

 (j) Committees Participating in Joint Fundraiser
 (j) Committees Participating in Joint Fundraiser
 (j) Committees Participating in Joint Fundraiser
 (j) Committees Participating in Joint Fundraiser
 (j) Committees Participating in Joint Fundraiser
 (j) Committees Participating in Joint Fundraiser
 (j) Committees Participating in Joint Fundraiser
 (j) Committees Participating in Joint Fundraiser
 (j) Committee C

FEC Form 1 (Revised 02/2009)	FEC F	orm 1	(Revised	02/2009)
------------------------------	-------	-------	----------	----------

Write or Type Committee Name

Nevadans for Steven Horsford

6.	Name of Any Connected Or SEEC VICTORY FUN	-	Comm	ittee,	Join	nt F	undra	ising	Repi	resei	ntat	ive,	or	Lead	lershi	ip PA	CS	Spor	sor	
	Mailing Address	PO BOX 15320																		
														2000)3		-[
			CITY	′▲						ST	ATE				Z	IP C	ODE	E 🔺		
	Relationship: Connected	Organization Affilia	ated Org	anizat	ion	x	Join	t Fund	draisin	g Re	pres	enta	tive		Le	aders	hip	PAC	Spo	nsor

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

Petterson,	Jay, , ,
Full Name	
Mailing Address	401 2nd Avenue South
	Suite 303
	Seattle WA 98104
	CITY ▲ STATE ▲ ZIP CODE ▲
Title or Position ▼	
Treasurer	Telephone number 206 - 682 - 7328

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	Petterson, Jay, , ,				
of Treasurer					
Mailing Address	401 2nd Avenue South				
	Suite 303				
	Seattle WA 98104 Image: Imag				
	CITY ▲ STATE ▲ ZIP CODE ▲				
Title or Position	,				
Treasurer 206 682 7328 Telephone number - <t< td=""></t<>					

FEC Form 1 (Revised 0	02/2009)	Page 4
Full Name of Designated Agent		
Mailing Address		
	CITY A STATE A	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.

Ban	k of America		
Mailing Address	3601 Stone Way North		
	Seattle	WA 9810	3
	CITY 🔺	STATE A	ZIP CODE
Name of Bank, Deposite	pry, etc.		
Mailing Address			
	CITY 🔺	STATE ▲	ZIP CODE

FFC	Form	1S	(Revised	02/2017)
	1 01111	10	(11001300	02/2017

Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

5(g) or (h).	Joint	Fundraising	Participant:
0(9)01(11).	00111	ranaraionig	i ui uoipuiiti

1.	FEC ID number	С
2.	FEC ID number	C
3.	FEC ID number	C
4	FEC ID number	C

6. Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC Sponsor HOUSE VICTORY PROJECT 2022

1			
Mailing Address	600 PENNSYLVANIA AVE SE		· · · · · · · · · · · · · · · · · · ·
0	#15180		
	Washington		20003
Relationship:	CITY 🔺	STATE 🔺	ZIP CODE
Connected	Organization Affiliated Committee	X Joint Fundraising Representative	Leadership PAC Sponsor

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

Full Name											
Mailing Address											
TITLE OR POSITION		STATE A	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.					1																										
Mailing Address	L																														
	L																														
													STATE A							ZIP CODE											