FEC

STATEMENT OF

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ORGANIZATION FORM 1 Office Use Only NAME OF (Check if name Example: If typing, type 12FE4M5 COMMITTEE (in full) is changed) over the lines. Agnew For Washington PO Box 192 ADDRESS (number and street) (Check if address is changed) LIBERTY LAKE 99019 WA CITY A STATE A ZIP CODE A COMMITTEE'S E-MAIL ADDRESS eric@agnewforwashington.com (Check if address is changed) Optional Second E-Mail Address raelynn@agnewforwashington.com COMMITTEE'S WEB PAGE ADDRESS (URL) www.AgnewForWashington.com (Check if address is changed) DATE 20 2017 C00651216 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. Mackay, Hunter, , Mr., Type or Print Name of Treasurer Mackay, Hunter, , Mr., [Electronically Filed] 12 2017 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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		rm 1 (Revised 02/2009)	Page 2			
		OMMITTEE • 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 Cand		Agnew, Eric, Justin, Mr.,				
Cand Party	lidate Affiliatio	on IDP Office Sought: X House Senate President	State WA District 05			
(c)		This committee supports/opposes only one candidate, and is NOT an authorized committee.				
Name Cand						
Part	y Con	nmittee:				
(d)		This committee is a (National, State or subordinate) committee of the	(Democratic, Republican, etc.) Party.			
Poli	tical A	ction Committee (PAC):				
(e)		This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected organization is a:				
		Corporation Wo 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 secommittee. (i.e., nonconnected committee)	egregated fund or party			
		In addition, this committee is a Lobbyist/Registrant PAC.				
		In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)				
Join [,]	t Fund	raising Representative:				
(g)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for to committees/organizations, at least one of which is an authorized committee of a federal candidate.	vo or more political			
(h)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for two committees/organizations, none of which is an authorized committee of a federal candidate.	vo or more political			
	Com	mittees Participating in Joint Fundraiser				
	1.					
	2.	FEC ID number				
	3.					

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Write or Type Committee		<u> </u>
Agnew For V	Vashington	
	cted Organization, Affiliated Committee, Joint Fundraising Representative,	or Leadership PAC Sponsor
NONE		
Mailing Address		
J		
		1 , , , , - , , ,
	CITY STATE	ZIP CODE
Relationship: Conr	nected Organization Affiliated Committee Joint Fundraising Representation	tive Leadership PAC Sponsor
Custodian of Records books and records.	s: Identify by name, address (phone number optional) and position of the pe	erson in possession of committee
Mack Full Name	kay, Hunter, , Mr.,	
Mailing Address	PO Box 192	
amig / taa: ese		
	Liberty Lake WA	99019
Title or Position	CITY STATE	ZIP CODE
Treasurer		
. Treasurer: List the name any designated agent (contents)	ne and address (phone number optional) of the treasurer of the committee; e.g., assistant treasurer).	and the name and address of
Full Name Mack of Treasurer	xay, Hunter, , Mr.,	
Mailing Address	PO Box 192	
	Liberty Lake WA	99019
Title or Position	CITY STATE	ZIP CODE
	Telephone number	

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Full Name of Designated	Barden, Rae-Lynn, , ,	1				
Agent						
Mailing Address	PO Box 192					
	Liberty Lake	99019				
	CITY STATE	ZIP CODE				
Title or Position Campaign Mana	ager Telephone number					
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.						
	STCU					
Mailing Address	P.O. Box 1954					
	Spokane	99210				
	CITY STATE	ZIP CODE				
Name of Bank, I	Depository, etc.					
Mailing Address						
	CITY STATE	ZIP CODE				