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STATEMENT OF **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. Hold the House PAC 401 2nd Ave S ADDRESS (number and street) Ste 303 (Check if address is changed) Seattle 98104 WA CITY A STATE A ZIP CODE A COMMITTEE'S E-MAIL ADDRESS jay@bluewavepolitics.com (Check if address is changed) Optional Second E-Mail Address COMMITTEE'S WEB PAGE ADDRESS (URL) www.holdthehouse.org (Check if address is changed) DATE 06 2020 C00704593 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] 03 06 2020 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

FF0 =	4 (Davided 00/0000)	D 0
	orm 1 (Revised 02/2009) COMMITTEE	Page 2
	e 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. (Compinformation below.)	plete the candidate
Name of Candidate		
Candidate Party Affiliat	ion 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 Cor		_
(d)		Democratic, Republican, etc.) Party
Political A	Action Committee (PAC):	
(e)	This committee is a separate segregated fund. (Identify connected organization on line 6.) Its con-	nected organization is
	Corporation Corporation w/o Capital Stock	Labor Organization
	Membership Organization Trade Association	Cooperative
	In addition, this committee is a Lobbyist/Registrant PAC.	
(f) x	This committee supports/opposes more than one Federal candidate, and is NOT a separate secommittee. (i.e., nonconnected committee)	gregated 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.)	
Joint Fund	draising Representative:	
(g)	This committee collects contributions, pays fundraising expenses and disburses net proceeds for tw committees/organizations, at least one of which is an authorized committee of a federal candidate.	o 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.	o or more political
Com	nmittees Participating in Joint Fundraiser	
1.	FEC ID number	
2.	FEC ID number	
3.	FEC ID number	
4.		

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Write or Type Committee Name	
Hold the House PAC	
6. Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership	PAC Sponsor
RED TO BLUE CA	
1750 LUNDY AVE #612286 Mailing Address	
Ivialing Address	
SAN JOSE CA 95161	. _
CITY STATE ZII	P CODE
Relationship: Connected Organization 🗶 Affiliated Committee Joint Fundraising Representative Leade	ership PAC Sponsor
Relationship. Connected Organization A Anniated Committee Sound and Indicate the Economic Sound States and Sta	Tallip I Ac apolisor
Custodian of Records: Identify by name, address (phone number optional) and position of the person in posses books and records.	ssion of committee
Petterson, Jay, , ,	1
Full Name 401 2nd Ave S	
Mailing Address Ste 303	
Seattle , WA , 98104	
Title or Position CITY STATE ZIF	CODE
Treasurer Telephone number 206 - 68:	2 7328
3. Treasurer: List the name and address (phone number optional) of the treasurer of the committee; and the name any designated agent (e.g., assistant treasurer).	and address of
Full Name Petterson, Jay, , , of Treasurer	
Mailing Address 401 2nd Ave S	
Ste 303	
Seattle WA 98104	
CITY STATE ZIF	CODE
Title or Position Treasurer Telephone number Telephone number	2 7328

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Full Name of Designated		
Agent		
Mailing Address		
	CITY STATE	ZIP CODE
Title or Position		1 1
	Depositories: List all banks or other depositories in which the committee deposits funds, hold exes or maintains funds. Depository, etc. Bank of America	s accounts, rents
safety deposit bo	oxes or maintains funds. Depository, etc.	
safety deposit bo Name of Bank, I	Depository, etc. Bank of America 230 SW 152nd St	ZIP CODE
safety deposit bo Name of Bank, I	Depository, etc. Bank of America 230 SW 152nd St Seattle CITY STATE	
safety deposit bo Name of Bank, I Mailing Address	Depository, etc. Bank of America 230 SW 152nd St Seattle CITY STATE	
safety deposit be Name of Bank, I Mailing Address Name of Bank, I	Depository, etc. Bank of America 230 SW 152nd St Seattle CITY STATE Depository, etc.	
safety deposit bo Name of Bank, I Mailing Address	Depository, etc. Bank of America 230 SW 152nd St Seattle CITY STATE Depository, etc.	
safety deposit bo Name of Bank, I Mailing Address Name of Bank, I	Depository, etc. Bank of America 230 SW 152nd St Seattle CITY STATE Depository, etc.	
safety deposit bo Name of Bank, I Mailing Address Name of Bank, I	Depository, etc. Bank of America 230 SW 152nd St Seattle CITY STATE Depository, etc.	

FEC Form 1S (Revised 02/2017)

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

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(h). Joint Fundraisi	ig Farticipant.		
1.		FEC ID number	C
2.		FEC ID number	С
3.		FEC ID number	C
4.		FEC ID number	С
=	Organization, Affiliated Committee, Joint Fundr	raising Representative	e, or Leadership PAC Spons
HOLD THE HOU	SE FRONTLINE FUND		
Mailing Address	401 2ND AVENUE SOUTH		
	SUITE 303		
	SEATTLE	, , WA	98104
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
Connecte	ad Organization Affiliated Committee X Joint	Fundraising Represent	ative Leadership PAC Sr
	Affiliated Committee Affiliated Committee Y Joint y by name, address (phone number – optional)	EFundraising Represent	Leadership PAC Sp
		Fundraising Represent	Leadership PAC Sp
esignated Agent: Identi		E Fundraising Represent	Leadership PAC Sp
esignated Agent: Identi		Fundraising Represent	Leadership PAC Sp
esignated Agent: Identi	fy by name, address (phone number – optional)	Fundraising Represent	
esignated Agent: Identi Full Name Mailing Address	fy by name, address (phone number – optional)	STATE	Leadership PAC Sp
esignated Agent: Identi	fy by name, address (phone number – optional) CITY		
esignated Agent: Identi Full Name Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or management of Bank,	fy by name, address (phone number – optional) CITY CITY Telepries: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identi Full Name Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or management of Bank,	fy by name, address (phone number – optional) CITY CITY Telepries: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identii Full Name Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or management of Bank, epository, etc	fy by name, address (phone number – optional) CITY CITY Telepries: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identi Full Name Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or mame of Bank, epository, etc	fy by name, address (phone number – optional) CITY CITY Telepries: List all banks or other depositories in which	STATE A	ZIP CODE A