Only

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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. Defund The Police PAC 216 W GOWE ST #202 ADDRESS (number and street) (Check if address is changed) **KENT** 98032-9997 WA CITY A STATE A ZIP CODE A COMMITTEE'S E-MAIL ADDRESS KICKEMOUTPAC@GMAIL.COM (Check if address is changed) Optional Second E-Mail Address COMMITTEE'S WEB PAGE ADDRESS (URL) defundpolicepac.com (Check if address is changed) DATE 02 2020 C00722710 FEC IDENTIFICATION NUMBER > 3. 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. Orozco, Adrian, , , Type or Print Name of Treasurer Orozco, Adrian, , , [Electronically Filed] 07 03 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 Use

Federal Election Commission Toll Free 800-424-9530 Local 202-694-1100

(Revised 06/2012)

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	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. (Com information below.)	plete the candidate
Name of Candidate		
Candidate Party Affiliat	ion Office Sought: House Senate President	State
(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 Wo 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 se committee. (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 two 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 N		. age v
Defund The F		
	ed Organization, Affiliated Committee, Joint Fundraising Representative, or Lo	eadership PAC Sponsor
NONE		, ,
Mailing Address		
	CITY STATE	ZIP CODE
Relationship: Conne	ected Organization Affiliated Committee Joint Fundraising Representative	Leadership PAC Sponsor
Custodian of Records: books and records.	Identify by name, address (phone number optional) and position of the person	in possession of committee
Orozc Full Name	o, Adrian, , ,	
	216 W Gowe St #202	
Mailing Address		
	Kent WA 9	8032
Title or Position	CITY STATE	ZIP CODE
	Telephone number	
3. Treasurer: List the name any designated agent (e.	e and address (phone number optional) of the treasurer of the committee; and g., assistant treasurer).	the name and address of
Full Name Orozco	o, Adrian, , ,	
Mailing Address	216 W Gowe St #202	
		3032
Title or Position	CITY STATE	ZIP CODE
	Telephone number	

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Full Name of Designated Agent		
Mailing Address		
	CITY STATE	ZIP CODE
Title or Position	Telephone number	
Banks or Other	Depositories: List all banks or other depositories in which the committee deposits funds, holds	s accounts, rents
safety deposit bo Name of Bank, I	oxes or maintains funds. Depository, etc. Key Bank	
safety deposit bo	oxes or maintains funds. Depository, etc.	
safety deposit bo Name of Bank, I	oxes or maintains funds. Depository, etc. Key Bank	
safety deposit bo Name of Bank, I	Depository, etc. Key Bank 512 W Smith St Kent WA 98032	ZIP CODE
safety deposit bo Name of Bank, I	Depository, etc. Key Bank 512 W Smith St Kent Kent	
safety deposit be Name of Bank, I	Depository, etc. Key Bank 512 W Smith St Kent Kent	
safety deposit be Name of Bank, I	Depository, etc. Key Bank 512 W Smith St Kent Kent	
Name of Bank, I	Depository, etc. Key Bank 512 W Smith St Kent Kent	
Name of Bank, I	Depository, etc. Key Bank 512 W Smith St Kent Kent	

: 97 A = G7 9 @ 5 B9 CI G'H9 LHF9 @ 5 H98 'HC' 5 F9 DCFHz G7 < 98 I @ 'CF' ± H9 A ± N5 H± CB

Form/Schedule: F1N Transaction ID:

This amended form reflects a change in name for the committee and a change in the Treasurer and Custodian of Records' phone number.

Form/Schedule: F1N Transaction ID:

This committee intends to make independent expenditures, and consistent with the U.S. Court of Appeals for the District of Columbia Circuit decision in SpeechNow v. FEC, it therefore intends to raise funds in unlimited amounts. This committee will not use those funds to make contributions, whether direct, in-kind, or via coordinated communications, to federal candidates or committees.