

FEC
FORM 1

STATEMENT OF ORGANIZATION

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PUBLIC RECORDS

2018 APR 17 PM 1:41

Office Use Only

1. NAME OF
COMMITTEE (in full)



(Check if name
is changed)

Example: If typing, type
over the lines.

12FE4M5

Committee To Elect Donl Rivers
For United States Senate

ADDRESS (number and street)



(Check if address
is changed)

CITY ▲

STATE ▲

ZIP CODE ▲

COMMITTEE'S E-MAIL ADDRESS



(Check if address
is changed)

DonlRivers@mail.com

Optional Second E-Mail Address

reesiemore@gmail.com

COMMITTEE'S WEB PAGE ADDRESS (URL)



(Check if address
is changed)

www.DonlRivers.com

2. DATE

04/05/2018

3. FEC IDENTIFICATION NUMBER ▶

C00558346

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

Linda Manning

* Signature of Treasurer

Linda Manning

Date

2018 APR 17 10549

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to the penalties of 52 U.S.C. §30109.
ANY CHANGE IN INFORMATION SHOULD BE REPORTED WITHIN 10 DAYS.

Office
Use
Only

For further information contact:
Federal Election Commission
Toll Free 800-424-9530
Local 202-694-1100

FEC FORM 1
(Revised 06/2012)

5. TYPE OF COMMITTEE

Candidate 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 of Candidate

Don L. Rivers

Candidate Party Affiliation

Dem

Office Sought:

☐

House

☒

Senate

☐

President

State

District

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

Name of Candidate

Don L. Rivers

Party Committee:

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

Political Action Committee (PAC):

- (e) ☐ This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected organization is a:
- ☐ Corporation ☐ Corporation w/o 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 segregated fund or party committee. (i.e., nonconnected committee)
- ☐ In addition, this committee is a Lobbyist/Registrant PAC.
- ☐ In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)

Joint Fundraising Representative:

- (g) ☐ 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.
- (h) ☐ 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.

Committees Participating in Joint Fundraiser

1.

FEC ID number

2.

FEC ID number

3.

FEC ID number

4.

FEC ID number

Write or Type Committee Name

Committee to Elect T

1 Rivers For

6. Name of Any Connected Organization, Affiliated Committee, Joint Fundra

entative, or Leadership PAC Sponsor

United States
Senate

Mailing Address

P.O. BOX 22525

Seattle

CITY

STATE

ZIP CODE

Relationship: ☐ Connected Organization ☐ Affiliated Committee ☐ Joint Frepresentative ☐ Leadership PAC Sponsor

7. Custodian of Records: Identify by name, address (phone number -- optional) books and records.

of the person in possession of committee

Full Name

Sharesha Sum

Mailing Address

5839 Radian

Fife

Title or Position

CITY

TE

ZIP CODE

Campaign Manager

Telep

206-356-4621

8. Treasurer: List the name and address (phone number -- optional) of the treasurer and any designated agent (e.g., assistant treasurer).

mittee; and the name and address of

Full Name
of Treasurer

Linda Maxwell

Mailing Address

20545 121st

Kent

CITY

TE

ZIP CODE

Title or Position

Treasurer

Telep

206-931-0549

Full Name of
Designated
Agent

Sharese Summers

Mailing Address

5839 Radiance Blvd E

Fife

CITY

WA

STATE

98424

ZIP CODE

Title or Position

Campaign Manager

Telephone number

206-354-4621

* Change due to Ms. Cassandra Smith illness.
* Corran L. Allen

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.

Mailing Address

CITY

STATE

ZIP CODE

Name of Bank, Depository, etc.

Mailing Address

CITY

STATE

ZIP CODE

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Senate Post Office
APR 16 2018

Secretary of the Senate
Office of Public Records
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Washington, DC 20513-7578



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United States Senate

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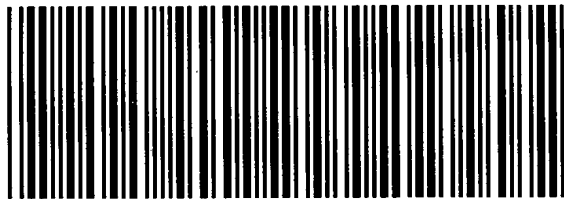
Date of Receipt or Postmark

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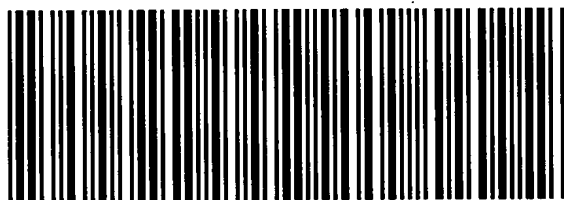
DH

DATE PREPARED

4-17-18



SEN PATCH



SEN PATCH