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STATEMENT OF ORGANIZATION

FORM 1														
										Office	Use O	nly		
1. NAME OF COMMITTEE (in	full)	(Check if name is changed)		ple:If typir the lines.	ng, type		12F	'E4M	15					
Jerrod Sessi	er for C	Congress												
								1 1	I		1 1	1 1	1 1	
ADDRESS (number a	nd street)	600 8th St												
(Check if a	address													
is changed	l)	Prosser					I WA		199	9350				
]	STAT		L		Z		 DE▲	
COMMITTEE'S E-MA		S												
(Check if a	address	CG.Edwards53@gmail.co	m											. 1
is changed	1)													
		Optional Second E-Mail Ad	aaress											
COMMITTEE'S WEB	address	RESS (URL)												
2. DATE 02	2 / D 1 2 28	2024												
3. FEC IDENTIFIC	CATION NU	MBER ► C	C00773101											
4. IS THIS STATEN	IENT	NEW (N) OR	×	AMEN	DED (A)									
I certify that I have e	examined this	s Statement and to the bes	st of my kr	iowledge a	ind belie	f it is	true,	corre	ct ar	id co	mplete	Э.		
Type or Print Name of	of Treasurer	Edwards, Conner, , ,								_				
Signature of Treasure	er Edwar	ds, Conner, , ,				D	ate)2)2	/	28	/ Y	2024	
NOTE: Submission of	false, erroned	ous, or incomplete information ANY CHANGE IN INFORM								e per	alties	of 52 l	J.S.C.	§30109
Office Use Only				For further in Federal Elect Foll Free 800 Local 202-69	ion Comm -424-9530	ission	act:					ORN 1 06/20		

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TYPE OF COMMITTEE:	
Candidate Committee:	
(a) X 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 t information below.)	he candidate
Name of Sessler, Jerrod, , , Candidate	
Candidate Party Affiliation REP Office Sought: X House Senate President	State WA District 04
(c) This committee supports/opposes only one candidate, and is NOT an authorized committee.	
Name of Candidate Candidate	
Party Committee: (National, State (Democrat (d) This committee is a or subordinate) committee of the Republican	iic, n, etc.) Party
Political Action Committee (PAC):	
(e) This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connect	ted organization is a:
Corporation Corporation w/o Capital Stock	Organization
Membership Organization Trade Association Cooper	rative
In addition, this committee is a Lobbyist/Registrant PAC.	
(f) This committee supports/opposes more than one Federal candidate, and is NOT a separate segregat committee. (i.e., nonconnected committee)	ed 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.)	
(g) This committee is an independent expenditure-only political committee (Super PAC).	

		In addition,	this	committee	is	a Lobbyist/Registrant PAC.	
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(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.
Committees Participating in Joint Fundraiser
1.
2.

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Wr	ite or Type Committee Name																									
	Jerrod Sessler fo	or Congre	SS																							
6.	Name of Any Connected O	rganization, Aff	iliated	Co	mmi	ittee	e, Jo	oin	t Fu	und	rais	sing	Re	pre	sei	ntati	ive,	or	Le	ade	rsh	ip I	PAC	Sp	one	sor
																			<u> </u>							
	Mailing Address	PO BOX 183																								
		HUDSON													Ľ	VI			54	016	' 			· L		
				С	ITY										ST	ΑΤΕ					7	7IP	COI	DF		

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

Edwards, C	Conner, , ,			
Full Name				
Mailing Address	600 8th St.			
	Prosser		WA 99350	
		CITY 🔺	STATE	ZIP CODE
Title or Position ▼				
Treasurer			Telephone number	533 - 1677

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 of Treasurer	Edwards, Conner, , ,							
Mailing Address	600 8th St.							
	Prosser WA99350							
	CITY ▲ STATE ▲ ZIP CODE ▲							
Title or Position ▼								
Treasurer	Image:							

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Full Name of Designated Agent		
Mailing Address		
	CITY A STATE A 2	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.

Whea	tland Bank									
Mailing Address	9715 Sandifur Parkway									
		WA 99301								
	CITY A	STATE ▲	ZIP CODE							
	Name of Bank, Depository, etc.									
Mailing Address	1445A Laughlin Avenue									
	McLean	VA 22101								
	CITY A	STATE A	ZIP CODE							