**FEC** 

Only

## 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. Kshama for Congress 1404 E Yesler Way ADDRESS (number and street) Suite B (Check if address is changed) Seattle 98122 WA CITY A STATE A ZIP CODE ▲ COMMITTEE'S E-MAIL ADDRESS (Check if address campaign@kshamasawant.org is changed) Optional Second E-Mail Address sonjaponath@live.com COMMITTEE'S WEB PAGE ADDRESS (URL) (Check if address is changed) DATE 2025 C00906511 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. Type or Print Name of Treasurer Ponath, Sonja,, Date 05 28 2025 Signature of Treasurer Ponath, Sonja,,, 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 For further information contact: FEC FORM 1 Federal Election Commission Use (Revised 06/2012)

Toll Free 800-424-9530

Local 202-694-1100

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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 the information below.)	e candidate		
Name of Candidate Sawant, Kshama, , ,	<u> </u>		
Candidate Party Affiliation IND Office Sought: X House Senate President	State WA  District 09		
(c) This committee supports/opposes only one candidate, and is NOT an authorized committee.			
Name of Candidate			
Party Committee:			
(d) This committee is a (National, State or subordinate) committee of the Republican,	•		
Political Action Committee (PAC):			
(e) This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connecte	d organization is a:		
Corporation Corporation w/o Capital Stock Labor O	rganization		
Membership Organization Trade Association Coopera	tive		
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.)			
(g) This committee is an independent expenditure-only political committee (Super PAC).			
In addition, this committee is a Lobbyist/Registrant PAC.			
(h) This committee is a political committee with both contribution and non-contribution accounts (Hybrid PA	AC).		
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 o committees/organizations, at least one of which is an authorized committee of a federal candidate.	r more political		
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 C			

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Write or Type Committee N	Name	
Kshama for C	Congress	
6. Name of Any Connect	ted Organization, Affiliated Committee, Joint Fundraising Representative	e, or Leadership PAC Sponsor
NONE		
Mailing Address		
	CITY ▲ STATE ₄	ZIP CODE ▲
Polationship: Conn.	ected Organization	
Relationship: Conne	ected Organization	Leadership PAC Sponso
Custodian of Records: books and records.	Identify by name, address (phone number optional) and position of the personal	son in possession of committee
Dana	the Caria	
Full Name	ath, Sonja, , ,	
Mailing Address	15224 97th Court NE	
Mailing Address		
	bothell	98011
	CITY ▲ STATE 4	ZIP CODE ▲
Title or Position ▼		
Treasurer	Telephone number	206 954 9962
	ne and address (phone number optional) of the treasurer of the committee	ee; and the name and address of
any designated agent (e	e.g., assistant treasurer).	
	ath, Sonja, , ,	
	··· / · <b>/</b>	
Full Name Pona of Treasurer		
1	15224 97th Court NE	
of Treasurer		
of Treasurer		98011
of Treasurer	15224 97th Court NE	
of Treasurer	15224 97th Court NE	

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Full Name of Designated Agent	Henderson, Shirley, , ,		
Mailing Address	5220 S Brandon		
	Seattle   V	VA 	98118
Title or Position <b>▼</b>		ATE 🛦	ZIP CODE ▲
Asst. Treasurer	Telephone number		206 - 850 - 8082
Banks or Other safety deposit box	<b>Depositories:</b> List all banks or other depositories in which the committee deces or maintains funds.	eposits	funds, holds accounts, rents
Name of Bank, D	epository, etc.		
	US Bank		
Mailing Address	135 Broadway E		
	Seattle	VA 	98102
	CITY ▲ STA	TE 🛦	ZIP CODE ▲
Name of Bank, D	epository, etc.		
Mailing Address			
	CITY ▲ STA	TE 🛦	ZIP CODE ▲