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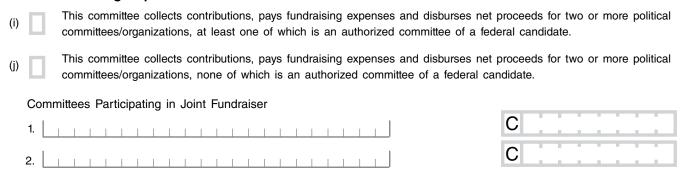
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STATEMENT OF ORGANIZATION

				Office Use Only
1. NAME OF COMMITTEE (in full)	(Check if name is changed)	Example: If typing, type over the lines.	12FE4M5	
Kim Nguyen for C	Congress			
	401 2nd Ave S Ste 303			
ADDRESS (number and street)				
is changed)				
				8104
	CITY ▲		STATE 🔺	ZIP CODE▲
COMMITTEE'S E-MAIL ADDRE	SS			
(Check if address is changed)	compliance@bluewave	epolitics.com		
lis changed)	Optional Second E-Mail Add	dress		
COMMITTEE'S WEB PAGE AD (Check if address is changed)				
2. DATE 01 2	5 / Y Y Y Y 2023			
3. FEC IDENTIFICATION N	UMBER ► C co	00832170		
4. IS THIS STATEMENT	NEW (N) OR	AMENDED (A)		
I certify that I have examined th	his Statement and to the best	of my knowledge and belief it	is true, correct ar	nd complete.
		, ,	,	·
Type or Print Name of Treasure	r Olsen, Josie, , ,			
Signature of Treasurer	, Josie, , ,	[Electronically Filed]	Date 01	/ D D / Y Y Y Y Y 25 2023
NOTE: Submission of false, errone		may subject the person signing t		ne penalties of 52 U.S.C. §3010
Office Use Only		For further information of Federal Election Commissio Toll Free 800-424-9530 Local 202-694-1100	ontact:	FEC FORM 1 (Revised 06/2012)

	C Form 1 (Revised 03/2022)	Page 2
	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.)	candidate
	Name of Nguyen, Kim, , , Candidate	
	Candidate Office Party Affiliation DEM Sought: House Senate President	State CA
	(c) This committee supports/opposes only one candidate, and is NOT an authorized committee.	District 45
	Name of Candidate	
-	Party Committee: (National, State or subordinate) committee of the (Democratic Republican, Committee of the	
	Political Action Committee (PAC): (e) This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected	d organization is a:
	Corporation Corporation w/o Capital Stock Labor Or	ganization
	Membership Organization Trade Association Cooperation	ive
	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 committee. (i.e., nonconnected committee)	I 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.	
	(h) This committee is a political committee with both contribution and non-contribution accounts (Hybrid PA	C).

Joint Fundraising Representative:



In addition, this committee is a Lobbyist/Registrant PAC.

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1			
	FEC Form 1 (Revised 02/2009)	Page	ə 3
Ν	Vrite or Type Committee Name		
	Kim Nguyen for Congress		
6.	Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership F NONE	AC S	Sponso

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Relationship: Connected C	rga	niz	atio	on		A	Affili	ate	d C	Drga	aniz	atio	on	Ľ		loin	t F	uno	drai	isin	ıg F	Rep	res	sen	tativ	ve			Le	ad	ers	hip	PA	c s	por	isor

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

Olsen, Jos	ie, , ,
Full Name	
Mailing Address	401 2nd Ave S Ste 303
	Seattle WA 98104
	CITY ▲ STATE ▲ ZIP CODE ▲
Title or Position ▼	
Treasurer	Telephone number 206 - 682 - 7328

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	Olsen, Josie, , ,
of Treasurer	
Mailing Address	401 2nd Ave S Ste 303
	Seattle WA 98104
	CITY ▲ STATE ▲ ZIP CODE ▲
Title or Position	,
Treasurer	Telephone number 206 682 7328

FEC Form 1 (Revised 02)2/2(009)																			F	Pag	e 4	۱ ــــــــــــــــــــــــــــــــــــ		
Full Name of Designated Agent										ĺ									ĺ							1	
Mailing Address																											
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Title or Position ▼																											
											Tele	eph	ione	e n	umł	ber				· [_							

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.

Amalg	amated Bank		1
Mailing Address	1825 K St NW		
	Washington		6
	CITY 🔺	STATE 🔺	ZIP CODE
Name of Bank, Depository,	etc.		
Mailing Address			
	CITY 🔺	STATE A	ZIP CODE ▲