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. Northern Leadership PAC P.O. Box 90938 ADDRESS (number and street) (Check if address is changed) Anchorage 99509 ΑK CITY A STATE A ZIP CODE A COMMITTEE'S E-MAIL ADDRESS jay@bluewavepolitics.com (Check if address is changed) Optional Second E-Mail Address COMMITTEE'S WEB PAGE ADDRESS (URL) (Check if address is changed) DATE 06 2022 C00710822 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. Petterson, Jay, , , Type or Print Name of Treasurer Petterson, Jay, , , [Electronically Filed] 04 06 2022 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 Federal Election Commission Use (Revised 06/2012) Toll Free 800-424-9530

Local 202-694-1100

| FF0 = | 4 (Davided 00/0000) | D 0 | |
|--|---|--|--|
| | 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. (Complete the candidate information below.) | | |
| Name of Candidate | | | |
| Candidate Party Affiliat | ion Office Sought: House Senate President | State District | |
| (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 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 s 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 tw 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 Name | . ago C |
| Northern Leadership PAC | |
| 6. Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadershi | in PAC Sponsor |
| GROSS, ALAN, , , | p i no oponisoi |
| GROSS, ALAIN, , , , | |
| | |
| PO BOX 90938 Mailing Address | |
| ANCHORAGE AK 99509 | |
| CITY STATE Z | ZIP CODE |
| Relationship: Connected Organization Affiliated Committee Joint Fundraising Representative Lead | dership PAC Sponsor |
| Custodian of Records: Identify by name, address (phone number optional) and position of the person in poss books and records. | ession of committee |
| Petterson, Jay, , , Full Name | 1 |
| 401 2nd Avenue South | |
| Mailing Address Suite 303 | |
| Seattle WA 98104 | |
| | |
| Title or Position CITY STATE Z | IP CODE |
| Treasurer Telephone number 206 6 | 82 7328 |
| 3. Treasurer: List the name and address (phone number optional) of the treasurer of the committee; and the nam any designated agent (e.g., assistant treasurer). | e and address of |
| Full Name Petterson, Jay, , , | 1 |
| of Treasurer 401 2nd Avenue South | |
| Mailing Address | |
| Suite 303 | |
| Seattle WA 98104 | |
| CITY STATE Z Title or Position | IP CODE |
| Treasurer | 82 7328 |

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| | | |
| Full Name of Designated Agent | | |
| Mailing Address | | |
| | | |
| | CITY STATE | ZIP CODE |
| Title or Position | | |
| | Telephone number | |
| safety deposit boxes of Name of Bank, Depos | | sits funds, holds accounts, rents |
| | Anchorage |] [99503 |
| | Anchorage AK CITY STATE | 99503 ZIP CODE |
| Name of Bank, Depos | CITY STATE | |
| Name of Bank, Depos | CITY STATE | |
| Name of Bank, Depos | CITY STATE ository, etc. | |
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