Only

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STATEMENT OF **FEC ORGANIZATION** FORM 1 Office Use Only NAME OF (Check if name Example: If typing, type 12FE4M5 COMMITTEE (in full) is changed) over the lines. JUAW EDUCATION FUND 8000 EAST JEFFERSON AVENUE ADDRESS (number and street) (Check if address is changed) DETROIT 48214 MI CITY A STATE A ZIP CODE ▲ COMMITTEE'S E-MAIL ADDRESS uawvcap@uaw.net (Check if address is changed) Optional Second E-Mail Address COMMITTEE'S WEB PAGE ADDRESS (URL) (Check if address is changed) DATE 20 2021 C00528448 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. MOCK, MARGARET, , , Type or Print Name of Treasurer MOCK, MARGARET, , , [Electronically Filed] 2022 Signature of Treasurer Date 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:			
ndidate Committee:			
(a) This committee is a principal campaign committee. (Complete the candidate info	rmation below.)		
(b) This committee is an authorized committee, and is NOT a principal campaign coinformation below.)	ommittee. (Complete the candidate		
Name of Candidate			
Candidate Party Affiliation Office Sought: House Senate	State President District		
(c) This committee supports/opposes only one candidate, and is NOT an authorized	d committee.		
Name of Candidate			
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 of	on line 6.) Its connected organization is as		
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 committee. (i.e., nonconnected committee)	a separate segregated fund or party		
In addition, this committee is a Lobbyist/Registrant PAC.			
In addition, this committee is a Leadership PAC. (Identify sponsor on li	ine 6.)		
(g) This committee is an independent expenditure-only political committee (Super PA	AC).		
In addition, this committee is a Lobbyist/Registrant PAC.			
(h) This committee is a political committee with both contribution and non-contribution	on accounts (Hybrid PAC).		
In addition, this committee is a Lobbyist/Registrant PAC.			
Joint Fundraising Representative:			
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.			
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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٧	Vrite or Type Committee Name			
	UAW EDUCA	TION FUND		
6.	-	Organization, Affiliated Committee, Joint Fundraising Repres OMOBILE AEROSPACE & AGRICULTURAL IMPLEMENT WO		
	Mailing Address	8000 EAST JEFFERSON AVENUE		
		DETROIT	MI 48214	
		CITY ▲ S	STATE ▲ ZIP CODE ▲	
	Relationship: X Connected	Organization Affiliated Organization Joint Fundraising F	Representative Leadership PAC Sponso	
			_	
7.	Custodian of Records: Identify by name, address (phone number optional) and position of the person in possession of committee books and records.			
	MOCK. M	ARGARET,,,		
	Full Name			
	Mailing Address	8000 EAST JEFFERSON AVENUE		
		DETROIT	MI 48214	
		CITY ▲ S	STATE ▲ ZIP CODE ▲	
	Title or Position ▼			
	SECRETARY TREASURER	Telephone numb	per 313 - 926 - 5035	
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 MOCK, MA	ARGARET, , ,		
	of Treasurer			
	Mailing Address	8000 EAST JEFFERSON AVENUE		
		DETROIT	MI 48214	
		CITY ▲ S	STATE ▲ ZIP CODE ▲	
Title or Position ▼				
	SECRETARY TREASURER		per 313 - 926 - 5035	

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Full Name of Designated Agent						
Mailing Address						
Title or Position ▼	CITY A	STATE ▲	ZIP CODE ▲			
	Tel	ephone number				
Banks or Other Depositorion safety deposit boxes or main	es: List all banks or other depositories in which that it is the state of the state	he committee deposits funds,	holds accounts, rents			
Name of Bank, Depository, e	Name of Bank, Depository, etc.					
JP MORGAN CHASE						
Mailing Address	611 WOODWARD					
	DETROIT	MI 482	226			
	CITY A	STATE ▲	ZIP CODE ▲			
Name of Bank, Depository, etc.						
Mailing Address						
	CITY ▲	STATE ▲	ZIP CODE ▲			