

FEC FORM 1

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

WORKING FOR WORKING AMERICANS - FEDERAL

ADDRESS (number and street) 6801 PLACID STREET

(Check if address is changed)

LAS VEGAS

CITY ▲

NV

STATE ▲

89119

ZIP CODE ▲

COMMITTEE'S E-MAIL ADDRESS

(Check if address is changed)

payroll@carpenters.org

Optional Second E-Mail Address
admin@evanskatz.com

COMMITTEE'S WEB PAGE ADDRESS (URL)

(Check if address is changed)

2. DATE

MM / DD / YYYY
10 / 02 / 2012

3. FEC IDENTIFICATION NUMBER ▶

C C00490847

4. 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 Justin Weidner

Signature of Treasurer Justin Weidner

[Electronically Filed]

Date

MM / DD / YYYY
10 / 11 / 2013

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 Use Only

For further information contact:
Federal Election Commission
Toll Free 800-424-9530
Local 202-694-1100

FEC FORM 1
(Revised 06/2012)

5. TYPE OF COMMITTEE

Candidate 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 Affiliation 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 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 on line 6.) Its connected organization is a:
 - 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 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.)

Joint Fundraising Representative:

- (g) 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.
- (h) 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. _____ FEC ID number
2. _____ FEC ID number
3. _____ FEC ID number
4. _____ FEC ID number

Write or Type Committee Name

WORKING FOR WORKING AMERICANS - FEDERAL

6. Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC Sponsor

CARPENTERS LEGISLATIVE IMPROVEMENT COMMITTEE UNITED BROTHERHOOD OF CARPENTERS AND JOINERS

Mailing Address 101 CONSTIUTION AVENUE, NW
 10TH FLOOR WEST
 WASHINGTON DC 20001
 CITY STATE ZIP CODE

Relationship: Connected Organization Affiliated Committee Joint Fundraising Representative Leadership PAC Sponsor

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

Full Name Loreen Ziska
 Mailing Address 6801 Placid Street
 Las Vegas NV 89119
 CITY STATE ZIP CODE
 Assistant Treasurer Telephone number 702 - 938 - 1111

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 Justin Weidner
 Mailing Address 6801 Placid Street
 Las Vegas NV 89119
 CITY STATE ZIP CODE
 Treasurer Telephone number 702 - 938 - 1111

Full Name of Designated Agent: Loreen Ziska
Mailing Address: 6801 Placid Street
Las Vegas, NV 89119
Title or Position: Assistant Treasurer
Telephone number: 702-938-1111

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.

Pacific Western Bank

Mailing Address: 200 S. Los Robles Ave.
Suite 110
Pasadena, CA 91101

Name of Bank, Depository, etc.

Mailing Address: [Empty fields for address, city, state, and zip code]

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: F1A
Transaction ID :

The committee intends to make independent expenditures or contributions to federally-registered committees that make independent expenditures only. Consistent with the U.S. Court of Appeals for the District of Columbia Circuit decision in *SpeechNow v. FEC*, 599 F.3d 686 (D.C. Cir. 2010), it therefore intends to raise and contribute funds in unlimited amounts in accordance with Federal Election Commission Advisory Opinion 2010-11. This committee will not use these funds to make contributions, whether direct, in-kind, or via coordinated communications, to federal candidates or committees.

Form/Schedule:
Transaction ID:

FORM 1S -STATEMENT OF ORGANIZATION (Supplemental Page)

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.

[ADDITIONAL]

Mailing Address

_____ - _____

CITY ▲

STATE ▲

ZIP CODE ▲

[ADDITIONAL]

Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC Sponsor

SOUTHWEST REGIONAL COUNCIL OF CARPENTERS CARPENTERS LEGISLATIVE IMPROVEMENT CMTE UNITED BR

Mailing Address

533 SOUTH FREMONT AVENUE

5TH FLOOR ACCOUNTING DEPARTMENT

LOS ANGELES

CA

90071

_____ - _____

CITY ▲

STATE ▲

ZIP CODE ▲

Relationship:

Connected Organization

Affiliated Committee

Joint Fundraising Representative

Leadership PAC Sponsor

[ADDITIONAL]

Designated Agent

Full Name

Mailing Address

_____ - _____

Title or Position ▼

CITY ▲

STATE ▲

ZIP CODE ▲

Telephone number

____ - ____ - ____

Joint Fundraiser Participant

[ADDITIONAL]

FEC ID number

C _____

FORM 1S -STATEMENT OF ORGANIZATION (Supplemental Page)

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Name of Bank, Depository, etc.

[ADDITIONAL]

Mailing Address

_____ - _____

CITY ▲

STATE ▲

ZIP CODE ▲

[ADDITIONAL]

Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC Sponsor

UNITED BROTHERHOOD OF CARPENTERS/JOINERS OF AMER NEW ENGLAND REG CARPENTERS LEGIS EMP CMTE

Mailing Address

P O BOX 562

NORWALK CT 06852
_____ - _____

CITY ▲

STATE ▲

ZIP CODE ▲

Relationship:

Connected Organization

Affiliated Committee

Joint Fundraising Representative

Leadership PAC Sponsor

[ADDITIONAL]

Designated Agent

Full Name

Mailing Address

_____ - _____

Title or Position ▼

CITY ▲

STATE ▲

ZIP CODE ▲

Telephone number _____ - _____ - _____

Joint Fundraiser Participant

[ADDITIONAL]

FEC ID number

C _____

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Name of Bank, Depository, etc.

[ADDITIONAL]

Mailing Address

_____ - _____

CITY ▲

STATE ▲

ZIP CODE ▲

[ADDITIONAL]

Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC Sponsor
UNITED BROTHERHOOD OF CARPENTERS AND JOINERS OF AMERICA LOCAL UNION 1024 PAC

Mailing Address

327 N CENTRE STREET

CUMBERLAND

MD

21502

_____ - _____

CITY ▲

STATE ▲

ZIP CODE ▲

Relationship:

Connected Organization

Affiliated Committee

Joint Fundraising Representative

Leadership PAC Sponsor

[ADDITIONAL]

Designated Agent

Full Name

Mailing Address

_____ - _____

Title or Position ▼

CITY ▲

STATE ▲

ZIP CODE ▲

Telephone number

____ - ____ - ____

Joint Fundraiser Participant

[ADDITIONAL]

FEC ID number

C [_____]

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Name of Bank, Depository, etc.

[ADDITIONAL]

Mailing Address

_____ - _____

CITY ▲

STATE ▲

ZIP CODE ▲

[ADDITIONAL]

Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC Sponsor
CARPENTERS FEDERAL PAC OF PHILADELPHIA METROPOLITAN REGIONAL COUNCIL OF CARPENTERS

Mailing Address

1803 SPRING GARDEN STREET

PHILADELPHIA

PA

19130

_____ - _____

CITY ▲

STATE ▲

ZIP CODE ▲

Relationship:

Connected Organization

Affiliated Committee

Joint Fundraising Representative

Leadership PAC Sponsor

[ADDITIONAL]

Designated Agent

Full Name

Mailing Address

_____ - _____

Title or Position ▼

CITY ▲

STATE ▲

ZIP CODE ▲

Telephone number

____ - ____ - ____

Joint Fundraiser Participant

[ADDITIONAL]

FEC ID number

C _____