Image# 14941849177				07/16/2014 21 : 20
FEC FORM 1	STATEMEN ORGANIZA			PAGE 1 / 4
			O	ffice Use Only
1. NAME OF COMMITTEE (in full)	(Check if name is changed)	Example: If typing, type over the lines.	12FE4M5	
	ernational Union of Pa	ainters and Allied Trac	des Local Job	s For Local People
ADDRESS (number and street)	2240 Young St.			
(Check if address is changed)				
	Honolulu		HI 968	³²⁶
	CITY ▲		STATE A	ZIP CODE▲
COMMITTEE'S E-MAIL ADDRE	SS			
(Check if address is changed)	tfield@dc50.org			
<i>c i</i>	Optional Second E-Mail Add	lress		
	info@dc50.org			
COMMITTEE'S WEB PAGE ADD	DRESS (URL)			
2. DATE 07 / 16	D / Y Y Y Y 2014			
3. FEC IDENTIFICATION NU	JMBER ► C cc	00527978		
4. IS THIS STATEMENT	NEW (N) OR	AMENDED (A)		
I certify that I have examined th	is Statement and to the best	of my knowledge and belief it	is true, correct and	complete.
Type or Print Name of Treasure	r Ryden Valmoja			
Signature of Treasurer	Valmoja	[Electronically Filed]	Date 07	16 / Y Y Y Y Y 2014
NOTE: Submission of false, errone	eous, or incomplete information r ANY CHANGE IN INFORMATIO			penalties of 2 U.S.C. §437g.
Office Use Only		For further information c Federal Election Commissi Toll Free 800-424-9530		FEC FORM 1 (Revised 06/2012)

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	FEC Fo	rm 1 (Revised 02/2009)	Page 2
TYP	E OF C	OMMITTEE	
Ca	ndidate	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. (Comple information below.)	te the candidate
	ne of didate		
	didate y Affiliati	on Office Sought: House Senate President	State
(c)		This committee supports/opposes only one candidate, and is NOT an authorized committee.	
	ne of didate		
Par	rty Con	nmittee:	
(d)			emocratic, publican, etc.) Party.
Pol	itical A	ction Committee (PAC):	
(e)	X	This committee is a separate segregated fund. (Identify connected organization on line 6.) Its conner	cted organization is a
		Corporation Corporation w/o Capital Stock	abor 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 segre committee. (i.e., nonconnected committee)	egated 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.)	
Joir	nt Func	Iraising Representative:	
(g)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for two committees/organizations, at least one of which is an authorized committee of a federal candidate.	or more political
(h)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for two c committees/organizations, none of which is an authorized committee of a federal candidate.	or more political
	Com	mittees Participating in Joint Fundraiser	
	1.	FEC ID number	
	2.	FEC ID number	
	3.	FEC ID number	
	4.	FEC ID number	

Title or Position

FEC Form 1 (Revised 02/2009)

Write or Type Committee Name

District Council 50 International Union of Painters and Allied Trades Local Jobs For Local People

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

Dist	rict Council	50 Intern	ational Ur	nion of	Pain	ters	and	Alli	ied	Trac	des	Loc	al Jo	bs	For	Loc	al F	,eot	ble		
M	ailing Address		2240 Young	St.																	
			Honolulu									ŀ	HI		9682	6]-[
					CIT	Y						S	TATE			1	ZIP (COD	Ε		
Re	elationship:	Connected	Organization	Affi	iated C	Commit	tee	J	loint	Fundr	raisin	g Rej	oreser	itativ	e	Lea	dersł	hip P	AC S	Spon	sor
	ustodian of Re boks and record		ify by name,	address	(phon	e num	ber	- opt	ional) and	posi	ition (of the	pers	son in	poss	sessi	on of	i cor	nmitt	.ee
		Ryden Valm	noja																		
Fu	ull Name																				
M	ailing Address		2240 Young	St.																	
			Honolulu												9682	26]-[

	Treasurer	Telephone number	808 941	0991
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STATE

ZIP CODE

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).

CITY

Full Name of Treasurer	Ryden Valmoja	I														I <u> </u>	
Mailing Address	2240 Young St.																
		<u> </u>															
	Honolulu	1 1			1			ЦН	I	96	826		1	-			
		C	CITY				S	STAT	E			ZIF	P C	ODE	Ξ		

Full Name of Designated Agent	Ryden Valmoja
Mailing Address	2240 Young St.
	CITY STATE ZIP CODE
Title or Position	Telephone number 808 - 941 - 0991

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.

First H	awaiian Bank		
Mailing Address	2411 South King St.		
		HI 96826	
	CITY	STATE ZIP CODE	
Name of Bank, Depository,	etc.		
Mailing Address			
	CITY	STATE ZIP CODE	