Image# 10990012244

FEC

STATEMENT OF

FORM 1	ORGANIZATION	
1 011111 1	(See instructions)	Office use only
NAME OF COMMITTEE (in f	(Check if name Example: If typying over the lines	g, type 12FE4M5
NEW YORK ST	'ATE LABORERS' POLITICAL ACTION COMMITTEE	<u> </u>
ADDRESS (number and s	treet) 18 Corporate Woods Blvd.	
(Check if address		
is changed)	Albany	NY 12211 - 1
	CITY▲	STATE▲ ZIP CODE ▲
COMMITTEE'S E-MAI	L ADDRESS (Please provide only one e-mail address)	
(Check if address is changed)	melius@nysliuna.org	
o o mangata,		
COMMITTEE'S WEB I	PAGE ADDRESS (URL)	
	www.nysliuna.org	
(Check if address is changed)		
2. DATE 0.1	/ D D / Y Y Y Y Y Y D D D D D D D D D D	
3. FEC IDENTIFICATION	TION NUMBER C C00220566	
4. IS THIS STATEM	ENT NEW (N) OR X AMEND	DED (A)
I certify that I have examin	ned this Statement and to the best of my knowledge and belief it is tru	ue, correct and complete
	Jamasa Malikus	
Type or Print Name of	Treasurer James Wellus	
Signature of Treasurer	Electronically Filed by James Melius	Date 01 04 7 201 (
NOTE: Submission of fals	se, erroneous, or incomplete information may subject the person sign ANY CHANGE IN INFORMATION SHOULD BE RE	
Office		of a monthly in a contact.
Use Only		tion Commission FEC FORM 1

	ı	FEC F	Form 1 (Revised 02/2009)	Page 2
5.			OMMITTEE (Check One) 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 tinformation below.)	ne candidate
	Name Candi		<u> </u>	
	Candi Party	idate Affiliatio	on Office Sought: House Senate President	State District
	(c)		This committee supports/opposes only one candidate, and is NOT an authorized committee.	
	Name Candi			
	Party	Comm		
	(d)		This committee is a (National, State (or subordinate) committee of the	(Democratic, Republican,etc.) Party.
	Politic	cal Act	tion Committee (PAC):	
	(e)	X	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 X La	bor Organization
			Membership Organization Trade Association Co	poperative
			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)	d 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 F	Fundra	ising Representative:	
	(g)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for two o	r more political
	(0)		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 o committees/organizations, none of which is an authorized committee of a federal candidate.	r more political
		Com	mittees Participating in Joint Fundraiser	
			1. FEC ID number	
			2. FEC ID number	
			3. FEC ID number	
			. FEC ID number C	

Write or Type Committee Name

6. Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Repr LABORERS' INTERNATIONAL UNION OF NORTH AMERICA (LIUNA) PAC Mailing Address 905 16th St., N.W. Second Floor Washington CITY Relationship: Connected Organization X Affiliated Committee Joint Fundraising 7. Custodian of Records: Identify by name, address, (phone number optional) possession of Committee books and records. Full Name Mailing Address 18 Corporate Woods	DC STATE ▲	ZIP CODE A Leadership PAC Sponsor		
Mailing Address 905 16th St., N.W. Second Floor Washington CITY	DC STATE A	ZIP CODE ▲ Leadership PAC Sponsor		
Second Floor CITY Relationship: Connected Organization X Affiliated Committee Joint Fundraising 7. Custodian of Records: Identify by name, address, (phone number optional) possession of Committee books and records. Full Name 18 Comparets Woods	STATE ▲ Representative	ZIP CODE ▲ Leadership PAC Sponsor		
Second Floor CITY Relationship: Connected Organization X Affiliated Committee Joint Fundraising 7. Custodian of Records: Identify by name, address, (phone number optional) possession of Committee books and records. Full Name 18 Comparets Woods	STATE ▲ Representative	ZIP CODE ▲ Leadership PAC Sponsor		
Relationship: Connected Organization Custodian of Records: Identify by name, address, (phone number optional) possession of Committee books and records. Full Name Second Floor Washington X Affiliated Committee Joint Fundraising	STATE ▲ Representative	ZIP CODE ▲ Leadership PAC Sponsor		
Relationship: Connected Organization X Affiliated Committee Joint Fundraising 7. Custodian of Records: Identify by name, address, (phone number optional) possession of Committee books and records. Full Name 18 Commercia Woods	STATE ▲ Representative	ZIP CODE ▲ Leadership PAC Sponsor		
Relationship: Connected Organization X Affiliated Committee Joint Fundraising 7. Custodian of Records: Identify by name, address, (phone number optional) possession of Committee books and records. Full Name 18 Corporate Woods	Representative	Leadership PAC Sponsor		
7. Custodian of Records: Identify by name, address, (phone number optional) possession of Committee books and records. Full Name 18 Compared Woods				
possession of Committee books and records. Full Name 18 Commercia Woods), and position of	the person in		
Mailing Address 18 Corporate Woods				
Albany	NY_	12211 _		
Title or Position ♥ CITY ▲ Treasurer Telephone	STATE A	ZIP CODE \(\) <u>449</u> - <u>1715</u>		
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 James Melius				
Mailing Address 18 Corporate Woods				
Albany	NY	12211 =		
Title or Position ♥ CITY ▲	STATE	ZIP CODE A		
Treasurer Telephone				

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Full Name of Designated Agent			
Mailing Address			
Title or Position ▼	CITY A	STATE 🛦	ZIP CODE A
	Tele	phone number	
 Banks or Other Depositorie safety deposit boxes or maint Name of Bank, Depository, e 	tains funds.	committee deposits funds, hol	ds accounts, rents
First	Niagara Bank		
Mailing Address	PO Box 886		
	Lockport	NY	14095 _
	CITY 🗻	STATE ⊿	ZIP CODE 🛕
Name of Bank, Depository, e	tc.		
Mailing Address			
	CITY 🗻	STATE ⊿	ZIP CODE 🛕

Banks or Other Depositories: safety deposit boxes or maintain		ttee deposits funds, ho	lds accounts, rents
Name of Bank, Depository, etc.			[ADDITIONAL]
Mailing Address			
	CITY 🛕	STATE ⊿	ZIP CODE 🛕
Name of Any Connected Orga	anization, Affiliated Committee, Joint Fundraising Rep	resentative, or Leade	[ADDITIONAL]
Laborers International U	nion of North America (New York)		
Mailing Address	905 16th Street NW		
	Washington	, DC	20006
	2		
elationship:	CITY	STATE A	ZIP CODE A
Connected Organization	Affiliated Committee Joint Fundraising Rep	presentative Lea	adership PAC Sponsor
Designated Agent			[ADDITIONAL]
Full Name			
Mailing Address			
Title or Position ▼	CITY A	STATE₄	ZIP CODE A
	Telepho	one number	
Joint Fundraiser Participant			[ADDITIONAL]
	FE	C ID number	

Banks or Other Depositories: safety deposit boxes or maintain		ttee deposits funds, hold	ls accounts, rents
Name of Bank, Depository, etc.		I	[ADDITIONAL]
Mailing Address			
	CITY 🗖	STATE₄	ZIP CODE 🛕
	anization, Affiliated Committee, Joint Fundraising Rep		
Mailing Address	4332 KATONAH AVE		
	BRONX	NY I	10470
lationship:	CITY	STATE A	ZIP CODE 🛦
Connected Organization	X Affiliated Committee Joint Fundraising Rep	presentative Lead	dership PAC Sponsor
Designated Agent			[ADDITIONAL]
Full Name			
Mailing Address			
Title or Position ▼	CITY A	STATE	ZIP CODE A
	Telepho	one number	
Joint Fundraiser Participant			[ADDITIONAL]
		EC ID number C	-
		- In Hambel	

Banks or Other Depositories safety deposit boxes or maintain		mittee deposits funds, hold	s accounts, rents
Name of Bank, Depository, etc.		ſ	ADDITIONAL]
Mailing Address			
	1		
	CITY 🗻	STATE ⊿	ZIP CODE 🛕
	anization, Affiliated Committee, Joint Fundraising Re	epresentative, or Leader	[ADDITIONAL]
	LOSS SENECA AVENUE		
Mailing Address	2556 SENECA AVENUE		
	NIAGARA FALLS	⊥ LNY L	14305
elationship:	CITY	STATE A	ZIP CODE
Connected Organization	X Affiliated Committee Joint Fundraising R	epresentative Lead	dership PAC Sponsor
Designated Agent			[ADDITIONAL]
Full Name			
Mailing Address			
Mailing Address			
Title or Position ▼	CITY A	STATE ▲	ZIP CODE A
	Telex	ohone number	
			[ADDITIONAL]
Joint Fundraiser Participant		I. I	[, DDIIIONAL]
		FEC ID number	

safety deposit boxes or m	naintains funds.		
Name of Bank, Depositor			[ADDITIONAL]
Mailing Address			
	CITY 🛕	STATE∡	ZIP CODE 🛕
-	ed Organization, Affiliated Committee, Joint Fundraising	_	[ADDITIONAL ship PAC Sponsor
Mailing Address	266 West 37th Street		
	Suite 1150		
	New York	ı NYıı	10018
		ـا لـــُنا لـــــ	
ationshin:	CITY	STATE ▲	ZIP CODE A
ationship: Connected Organization	CITY▲ X Affiliated Committee Joint Fundraising	STATE A	ZIP CODE ▲ dership PAC Sponsor
Connected Organization		STATE A	
Connected Organization		STATE A	dership PAC Sponsor
Connected Organization Designated Agent		STATE A	dership PAC Sponsor
Connected Organization Designated Agent Full Name		STATE A	dership PAC Sponsor
Connected Organization Designated Agent Full Name		STATE A	dership PAC Sponsor
Designated Agent Full Name		STATE A	dership PAC Sponsor
Designated Agent Full Name Mailing Address	X Affiliated Committee Joint Fundraising	STATE A Lear	Clership PAC Sponsor [ADDITIONAL]

Banks or Other Depositories: safety deposit boxes or maintain		ttee deposits funds, hold	ds accounts, rents
Name of Bank, Depository, etc.			[ADDITIONAL]
Mailing Address			
		1 1 1 1 1 1 1	
	CITY 🗖	STATE ⊿	ZIP CODE 🛕
	anization, Affiliated Committee, Joint Fundraising Rep		
Mailing Address	451A LITTLE BRITAIN ROAD		
Ü	NEWBURGH	NY	12550
elationship:	CITY▲	STATE A	ZIP CODE
Connected Organization	X Affiliated Committee Joint Fundraising Rep	presentative Lead	dership PAC Sponsor
Designated Agent			[ADDITIONAL]
Full Name			
Mailing Address	-		
			_
Title or Position ▼	CITY A	STATE	ZIP CODE A
	Telepho	one number	
Joint Fundraiser Participant			[ADDITIONAL]
	FE	C ID number	