FEC FORM 1		STATEMEN ORGANIZA						Office	Use Only	PAGE 1 / 4 —
1. NAME OF COMMITTEE (in	full)	(Check if name is changed)		mple: If typing, the lines.	type	12F	E4M	5		
U.A. PLUMB	ERS &	STEAMFITTERS	LO	CAL NO.	22 P.	A.C.	., IN	C.		
ADDRESS (number ar	nd street)	120 Gardenville Parkway								
X ◀ (Check if a is changed	ddress									
	·/	West Seneca └ └ └ └ └ └ └ └ └ └ └ └ └ └ └ └ └ └			<u> </u>	 STAT	 E ▲	14224	ZIP	
COMMITTEE'S E-MA	IL ADDRES	S								
× (Check if a is changed		revans@ualocal22.com								
		Optional Second E-Mail Addr	ess							
COMMITTEE'S WEB	ddress	RESS (URL)								
2. DATE 01		/ Y Y Y Y 2024								
3. FEC IDENTIFIC	ation Nui	MBER ► C COC	)36841	5						
4. IS THIS STATEM	IENT	NEW (N) OR	×	AMENDE	ED (A)					
I certify that I have e	examined this	Statement and to the best o	of my k	nowledge and	d belief it	is true,	correc	t and co	mplete.	
Type or Print Name of	of Treasurer	Evans, Richard, , ,								
Signature of Treasure	er Evans,	Richard, , ,				Date	0 0	M / 1	09 /	2024
NOTE: Submission of	false, erronec	us, or incomplete information m ANY CHANGE IN INFORMATI							nalties of s	52 U.S.C. §301
Office Use Only				For further info Federal Election Toll Free 800-42 Local 202-694-1	n Commissio 24-9530				EC FO Revised 06	

Image# 202401099599996923

01/09/2024 16 : 18

FEC Form	1 (Revised 03/2022)	Page <b>2</b>
5. TYPE C	OF COMMITTEE:	
Candid	late 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 information below.)	e candidate
Name Candio		
Candio Party	date Office Affiliation Sought: House Senate President	State
		District
(c)	This committee supports/opposes only one candidate, and is NOT an authorized committee.	
Nam Cano	ne of didate	
(d)	Committee:   (National, State   (Democratic     This committee is a   or subordinate) committee of the   Republican	c, , etc.) Party
Politica	al Action Committee (PAC):	
(e) 🗙	This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected	ed organization is a:
	Corporation Corporation w/o Capital Stock X Labor C	Organization
	Membership Organization Trade Association Coopera	ative
	In addition, this committee is a Lobbyist/Registrant PAC.	
(f)	This committee supports/opposes more than one Federal candidate, and is NOT a separate segregate 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.)	
(g)	This committee is an independent expenditure-only political committee (Super PAC).	
	In addition, this committee is a Lobbyist/Registrant PAC.	
(h)	This committee is a political committee with both contribution and non-contribution accounts (Hybrid P	AC).

## Joint Fundraising Representative:

(i) 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.
(j) 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
2.

In addition, this committee is a Lobbyist/Registrant PAC.

Relationship:

7.

-	FEC Form 1 (Revised 02	/2009)	Page <b>3</b>
V	Vrite or Type Committee Name		
	U.A. PLUMBERS	& STEAMFITTERS LOCAL NO. 22	2 P.A.C., INC.
6.	Name of Any Connected Or	ganization, Affiliated Committee, Joint Fundraising Repres	sentative, or Leadership PAC Sponsor
	U.A. Plumbers & Stea	mfitters Local No. 22	
	Mailing Address	120 Gardenville Parkway	

NY

STATE

Joint Fundraising Representative

14224

ZIP CODE

Leadership PAC Sponsor

West Seneca

X Connected Organization

books and recor		
	ns, Richard, , ,	
Full Name		

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

CITY

Affiliated Organization

Full Name	······································
Mailing Address	35 Chancellor Lane
	L
	West Seneca     NY     14224       -     -     -
	CITY ▲ STATE ▲ ZIP CODE ▲
Title or Position ▼	
Treasurer	Telephone number 716 656 0220

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	Evans, Richard, , ,							
Mailing Address	35 Chancellor Lane							
	West Seneca     NY     14224       Image:							
	CITY ▲ STATE ▲ ZIP CODE ▲							
Title or Position ▼								
Treasurer	Telephone number 716 656 0220							

FEC Form 1 (Revised 02	)2/2	20(	09)	)																							Pag	je 4	4		
Full Name of Designated Agent																			1												
Mailing Address	L																														
	L																														
	L																											- [			
										CI	TΥ										ST	ΑΤΕ			Z	IP (	COI	DE			
Title or Position ▼																															
Telephone number																															

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.

M&	T Bank		
Mailing Address	750 Main Street		
	Niagara Falls	NY 14301	
	CITY 🔺	STATE A	ZIP CODE
Name of Bank, Deposi	tory, etc.		
Mailing Address			
	CITY 🔺	STATE A	ZIP CODE