Only

PAGE 1/5

STATEMENT OF **FEC ORGANIZATION** FORM 1 Office Use Only NAME OF (Check if name Example: If typing, type 12FE4M5 COMMITTEE (in full) over the lines. is changed) Association of Administrative Law Judges, IFPTE, AFL-CIO Political Action Committee 277 PARKER AVENUE ADDRESS (number and street) (Check if address is changed) **BUFFALO** 14214-1659 NY CITY A STATE A ZIP CODE A COMMITTEE'S E-MAIL ADDRESS vze24n8e@verizon.net (Check if address is changed) Optional Second E-Mail Address vze24n8e@verizon.net COMMITTEE'S WEB PAGE ADDRESS (URL) (Check if address is changed) DATE 2018 C00575738 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. Evans, George, L.,, Type or Print Name of Treasurer Evans, George, L.,, [Electronically Filed] 2018 Signature of Treasurer Date 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 For further information contact: FEC FORM 1 Federal Election Commission Use (Revised 06/2012)

Toll Free 800-424-9530

Local 202-694-1100

FFC F	orm 1 (Revised 02/2009)	Page 2
TYPE OF (COMMITTEE	i aye £
Candidat	e Committee:	
(a)	This committee is a principal campaign committee. (Complete the candidate information below	<i>(</i> .)
(b)	This committee is an authorized committee, and is NOT a principal campaign committee. (Con information below.)	mplete the candidate
Name of Candidate		<u> </u>
Candidate Party Affilia	tion Office Sought: House Senate President	State NY District
(c)	This committee supports/opposes only one candidate, and is NOT an authorized committee.	
Name of Candidate		
Party Co		
(d)	This committee is a (National, State or subordinate) committee of the	(Democratic, Republican, etc.) Party.
Political A	Action Committee (PAC):	
(e) x	This committee is a separate segregated fund. (Identify connected organization on line 6.) Its co	nnected organization is ϵ
	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 scommittee. (i.e., nonconnected committee)	segregated 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 Fun	draising Representative:	
(g)	This committee collects contributions, pays fundraising expenses and disburses net proceeds for 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 to committees/organizations, none of which is an authorized committee of a federal candidate.	wo or more political
Con	nmittees Participating in Joint Fundraiser	
1.	FEC ID number	
2.	FEC ID number	
3.	FEC ID number C	
4.		

FEC Form 1 (Revised (72/2009)		Page 3
Write or Type Committee Name			. ago C
3.	inistrative Law Judges, IF	PTE AFL-CIO Politica	I Action Committee
	Organization, Affiliated Committee, Join		
INT'L FED OF PROFESS	SIONAL AND TECHNICAL ENGI	NEERSLEG EDU ACTION	PROGRAM - PAC
Mailing Address	501 3RD STREET NW		
	WASHINGTON	DC 2	20001
	CITY	STATE	ZIP CODE
Relationship: Connected	d Organization 🗶 Affiliated Committee	Joint Fundraising Representative	Leadership PAC Sponsor
 Custodian of Records: Ider books and records. 	ntify by name, address (phone number	- optional) and position of the perso	n in possession of committee
zahm, mar	ilyn, , ,		1
Full Name	277 Parker ave		
Mailing Address			
	Duttala	NV	14214-1659
	Buffalo	NY L	14214-1059
Title or Position	CITY	STATE	ZIP CODE
Treasurer		Telephone number 716	830 4056
3. Treasurer: List the name and any designated agent (e.g., a	d address (phone number optional) of assistant treasurer).	the treasurer of the committee; and	d the name and address of
Full Name Evans, Ge	orge, L., ,		ı
of Treasurer	12716 Hamlack Park Priva		
Mailing Address	3716 Hemlock Park Drive		
	Kingsport		37663-2064
Title or Position	CITY	STATE	ZIP CODE
Treasurer		Telephone number 423	_ 612 9156

FEC Forr	1 1 (Revised 02/2009)		Page 4
Full Name of Designated Agent	1		
Mailing Address			
-			
	CITY	STATE	ZIP CODE
Title or Position		Telephone number	- , , - , , ,
Banks or Other safety deposit be Name of Bank,		en the committee deposits funds	, 10.00 00000110, 10.110
safety deposit be	exes or maintains funds.		
safety deposit be Name of Bank,	Depository, etc. M&T Bank		203
safety deposit be Name of Bank,	M&T Bank One Fountain Plaza		
safety deposit be Name of Bank,	Depository, etc. M&T Bank One Fountain Plaza Buffalo CITY	NY 14	203
safety deposit be Name of Bank, Mailing Address	Depository, etc. M&T Bank One Fountain Plaza Buffalo CITY	NY 14	203
safety deposit be Name of Bank, Mailing Address	Depository, etc. M&T Bank One Fountain Plaza Buffalo CITY Depository, etc.	NY 14	203
Name of Bank, Mailing Address Name of Bank,	Depository, etc. M&T Bank One Fountain Plaza Buffalo CITY Depository, etc.	NY 14	203
Name of Bank, Mailing Address Name of Bank,	Depository, etc. M&T Bank One Fountain Plaza Buffalo CITY Depository, etc.	NY 14	203

Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

FEC Form 1S (Revised 02/2017)

Page ____ **of** ____

n). Joint Fundraising	, i artiolpanti		
1.		FEC ID number	C
2.		FEC ID number	C
3		FEC ID number	C
4.		FEC ID number	C
	Organization, Affiliated Committee, Joint Fund		e, or Leadership PAC Spor
Association of Adn	ninistrative Law Judges, IFPTE, AFI	L-CIO	
Mailing Address	277 Parker Ave,		
	Buffalo	NY NY	14214-1659
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
X Connected	Organization Affiliated Committee	t Fundraising Panrasant	etivo I Loadorchia BAC S
X Connected		t Fundraising Representa	Leadership PAC S
esignated Agent: Identify	Organization Affiliated Committee Join by name, address (phone number – optional)	t Fundraising Representa	Leadership PAC S
esignated Agent: Identify Full Name		t Fundraising Representa	Leadership PAC S
esignated Agent: Identify		t Fundraising Representa	Leadership PAC S
esignated Agent: Identify Full Name		t Fundraising Representa	Leadership PAC S
esignated Agent: Identify Full Name			Leadership PAC S
esignated Agent: Identify Full Name	by name, address (phone number – optional)		
esignated Agent: Identify Full Name Mailing Address	by name, address (phone number – optional) CITY		
Full Name Mailing Address TITLE OR POSITION anks or Other Depositor	by name, address (phone number – optional) CITY CITY Total cies: List all banks or other depositories in which	STATE A	ZIP CODE A
Full Name Mailing Address TITLE OR POSITION anks or Other Depositor fety deposit boxes or mai	by name, address (phone number – optional) CITY CITY Total cies: List all banks or other depositories in which	STATE A	ZIP CODE A
Full Name Mailing Address TITLE OR POSITION anks or Other Depositor	by name, address (phone number – optional) CITY CITY Total cies: List all banks or other depositories in which	STATE A	ZIP CODE A
Full Name Mailing Address TITLE OR POSITION Anks or Other Depositor fety deposit boxes or main arme of Bank,	by name, address (phone number – optional) CITY CITY Total cies: List all banks or other depositories in which	STATE A	ZIP CODE A
Full Name Mailing Address TITLE OR POSITION anks or Other Depositor fety deposit boxes or main arme of Bank, epository, etc.	by name, address (phone number – optional) CITY CITY Total cies: List all banks or other depositories in which	STATE A	ZIP CODE A