

FEC
FORM 1

STATEMENT OF
ORGANIZATION

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2019 MAR 25 PM 12:32
Office Use Only

1. NAME OF COMMITTEE (in full) ☒ (Check if name is changed) Example: If typing, type over the lines.

12FE4M5

John H Haake Branch 343 NATIONAL ASSOCIATION
of Letter Carriers Political Action Fund

ADDRESS (number and street)

612 CHARLESTON OAKS DRIVE

☐ (Check if address is changed)

BALLWIN

CITY ▲

MO

STATE ▲

63021-7387

ZIP CODE ▲

COMMITTEE'S E-MAIL ADDRESS

☐ (Check if address is changed)

deviceweir@att.net

Optional Second E-Mail Address

COMMITTEE'S WEB PAGE ADDRESS (URL)

☐ (Check if address is changed)

2. DATE

03/20/2019

3. FEC IDENTIFICATION NUMBER ►

C00140772

4. IS THIS STATEMENT

NEW (N)

OR

A

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

Michael Wein

Signature of Treasurer

Michael Wein

Date

03/21/2019

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to the penalties of 52 U.S.C. §30109.

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 AffiliationOffice
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. | <input type="text"/> | FEC ID number | <input type="text"/> |
| 2. | <input type="text"/> | FEC ID number | <input type="text"/> |
| 3. | <input type="text"/> | FEC ID number | <input type="text"/> |
| 4. | <input type="text"/> | FEC ID number | <input type="text"/> |

NOT FOR RELEASE UNDER E.O. 14176

Write or Type Committee Name

John H. HAAKE Branch 343 NATIONAL Association of Letter Carriers Political Action Fund

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

John H. HAAKE Branch 343 NATIONAL Association
of Letter Carriers

Mailing Address

1600 S Broadway
ST. LOUIS MO 63104-3806
CITY STATE ZIP CODERelationship: ☒ 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

Michael Weir

Mailing Address

612 Charleston Oaks Drive
BALDWIN MO 63021-7387
CITY STATE ZIP CODE

Title or Position

TREASURER

Telephone number 636-256-1927

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

Michael Weir

Mailing Address

612 Charleston Oaks Drive
BALDWIN MO 63021-7387
CITY STATE ZIP CODE

Title or Position

TREASURER

Telephone number 636-256-1927

Full Name of
Designated
Agent

DANIEL S. BRAUCHLE

Mailing Address

10612 Hayden Hill Drive

ST. LOUIS

CITY

MO

STATE

63123-3929

ZIP CODE

Title or Position

ASSISTANT TREASURER

Telephone number

314-849-6032

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.

PING BANK

Mailing Address

15061 Manchester Road

BALLWIN

CITY

MO

STATE

63011-4626

ZIP CODE

Name of Bank, Depository, etc.

Mailing Address

CITY

STATE

ZIP CODE

Weir
ston Oaks Drive
O 63021

2014 MAR 25 PM 12:32




7013 1710 0001 4881 1018

Federal Election Commission
1050 First Street, NE
Washington, DC 20463



NOTION : ON : NA : ON : COORDINATION

Federal Election Commission
ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS
 The FEC added this page to the end of this filing to indicate how it was received.

<input type="checkbox"/> Hand Delivered	Date of Receipt
<input type="checkbox"/> USPS First Class Mail	Postmarked Date of Receipt
<input checked="" type="checkbox"/> USPS Registered/Certified	Postmarked (R/C) 3-21-19
<input type="checkbox"/> USPS Priority Mail	Postmarked
<input type="checkbox"/> USPS Priority Mail Express	Postmarked
<input type="checkbox"/> Postmark Illegible	
<input type="checkbox"/> No Postmark	
<input type="checkbox"/> Overnight Delivery Service (Specify):	Shipping Date
	Next Business Day Delivery <input type="checkbox"/>
<input type="checkbox"/> Received from House Records & Registration Office	Date of Receipt
<input type="checkbox"/> Received from Senate Public Records Office	Date of Receipt
<input type="checkbox"/> Received from Electronic Filing Office	Date of Receipt
<input type="checkbox"/> Other (Specify):	Date of Receipt or Postmarked
 PREPARER	3-25-19 DATE PREPARED