

**FEC
FORM 1****STATEMENT OF
ORGANIZATION**

Office Use Only

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

12FE4M5

District No. 1-PCD, Marine Engineers' Beneficial Association - Retirees' Group Fund (MEBA-RGF)

ADDRESS (number and street)

444 North Capitol Street NW



(Check if address is changed)

Suite 800

Washington

CITY ▲

DC

STATE ▲

20001-1570

ZIP CODE ▲

COMMITTEE'S E-MAIL ADDRESS



(Check if address is changed)

MEBARGFPAC@electioncompliance.com

Optional Second E-Mail Address

COMMITTEE'S WEB PAGE ADDRESS (URL)



(Check if address is changed)

www.d1meba.org

2. DATE

01

11

2021

3. FEC IDENTIFICATION NUMBER ►

C

C00003863

4. 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.

Type or Print Name of Treasurer Rexha, Roland, , ,

Signature of Treasurer Rexha, Roland, , ,

[Electronically Filed]

Date

01

11

2021

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
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"/> |

Write or Type Committee Name

District No. 1-PCD, Marine Engineers' Beneficial Association - Retirees' Group Fund (MEBA-RGF)

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

District No.1 - PCD, MEBA (Marine Engineers' Beneficial Association)

Mailing Address

444 N. Capitol St., NW

Suite 800

Washington

DC

20001-1570

CITY

STATE

ZIP CODE

Relationship: ☒ 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

LLC, PAC Outsourcing, , ,

Mailing Address

5845 Richmond Highway

Suite 820

Alexandria

VA

22303

Title or Position

CITY

STATE

ZIP CODE

Custodian of Records

Telephone number

703

347

6551

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

Rexha, Roland, , ,

Mailing Address

444 N. Capitol St, NW, Suite 800

Washington

DC

20001

CITY

STATE

ZIP CODE

Title or Position
Treasurer

Telephone number

202

638

5355

Full Name of
Designated
Agent

Williams, Wade S., , ,

Mailing Address

5845 Richmond Highway

Suite 820

Alexandria

VA

22303

CITY

STATE

ZIP CODE

Title or Position

Assistant Treasurer

Telephone number

703

347

6551

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.

Amalgamated Bank

Mailing Address

275 Seventh Avenue

New York

NY

10001

CITY

STATE

ZIP CODE

Name of Bank, Depository, etc.

Mailing Address

CITY

STATE

ZIP CODE

5(g) or (h). **Joint Fundraising Participant:**

1.		FEC ID number	C
2.		FEC ID number	C
3.		FEC ID number	C
4.		FEC ID number	C

6. **Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC Sponsor**
District No. 1-PCD, Marine Engineers' Beneficial Association Political Action Fund (MEBA-PAF)

Mailing Address

 -
Relationship: CITY ▲ STATE ▲ ZIP CODE ▲

☐ Connected Organization ☒ Affiliated Committee ☐ Joint Fundraising Representative ☐ Leadership PAC Sponsor

8. **Designated Agent:** Identify by name, address (phone number – optional)

Full Name
Mailing Address

 -
TITLE OR POSITION ▼ CITY ▲ STATE ▲ ZIP CODE ▲
 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.
Mailing Address

 -
CITY ▲ STATE ▲ ZIP CODE ▲