Image# 201810089124394401				PAGE 1 / 4
FEC FORM 1	STATEMEN ORGANIZA		Office	Use Only
1. NAME OF	(Check if name	Example: If typing, type	12FE4M5	
	is changed)	over the lines.		-
ADDRESS (number and street)	PO Box 34566			
(Check if address				
is changed)	WASHINGTON		DC 20043	
			L L_⊥_⊥ STATE ▲	
COMMITTEE'S E-MAIL ADDRE	SS			
(Check if address	info@workingforuspac.	-		
is changed)	Optional Second E-Mail Add			
	info@up-law.com			
COMMITTEE'S WEB PAGE ADD	DRESS (URL)			
2. DATE 03 / 14				
3. FEC IDENTIFICATION NU	JMBER ► C co	00430876		
4. IS THIS STATEMENT	NEW (N) OR	× AMENDED (A)		
I certify that I have examined th	is Statement and to the best	of my knowledge and belief it	is true, correct and co	omplete.
Type or Print Name of Treasure	Rosenthal, Steven, , ,			
Signature of Treasurer	thal, Steven, , ,	[Electronically Filed]	Date 10	08 08 08
NOTE: Submission of false, errone		may subject the person signing to N SHOULD BE REPORTED W		nalties of 2 U.S.C. §437g.
Office Use Only		For further information c Federal Election Commissi Toll Free 800-424-9530 Local 202-694-1100	on <b>F</b>	EC FORM 1 Revised 06/2012)

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FEC I	Form 1 (Revised 02/2009) Page 2
TYPE OF	COMMITTEE
Candida	te 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 Affili	ation Office Sought: House Senate President District
(c)	This committee supports/opposes only one candidate, and is NOT an authorized committee.
Name of Candidate	
Party Co	ommittee:
(d)	This committee is a(National, State or subordinate) committee of the(Democratic, Republican, etc.) Pa
Political	Action Committee (PAC):
(e)	This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected organization
	Corporation Corporation w/o Capital Stock Labor Organization
	Membership Organization Trade Association Cooperative
	In addition, this committee is a Lobbyist/Registrant PAC.
(f) <b>x</b>	This committee supports/opposes more than one Federal candidate, and is NOT a separate segregated fund or pa 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 Fu	ndraising 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.
Со	mmittees Participating in Joint Fundraiser
1.	FEC ID number
2.	FEC ID number
3.	FEC ID number
4.	FEC ID number

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FEC Form 1 (Revised 02/2009)

Write or Type Committee Name

## WORKING FOR US POLITICAL ACTION COMMITTEE INC

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

Mailing Address			
	CITY	STATE	ZIP CODE
Relationship: Connected	Organization Affiliated Committee	oint Fundraising Representative	Leadership PAC Sponsor
<ol> <li>Custodian of Records: Ident books and records.</li> </ol>	ify by name, address (phone number opt	ional) and position of the person in	possession of committee
Gruver, Ga	у,,,		
	PO Box 34566		
Mailing Address			
			3 
Title or Position	CITY	STATE	ZIP CODE
Custodian of Records		Telephone number	427 4692

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	Rosenthal, Steven, , ,
Mailing Address	PO Box 34566
	L
	Washington         DC         20043
	CITY STATE ZIP CODE
Title or Position Treasurer	Telephone number     202     974     8310

FEC Form 1 (Revised 02/2009)

Full Name of Designated Agent																				1			I		1			_
Mailing Address																												
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					1	I	1	1											I			1		1	]-			
									CI	ΓY								ST/	λΤΕ				ZI	> C	OD	Ε		
Title or Position																												
													Tele	eph	ione	e ni	umt	ber			_							

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	1825 K Street, NW	
	Washington	DC 20006
	CITY	STATE ZIP CODE
Name of Bank, D	epository, etc.	
Mailing Address		
	CITY	STATE ZIP CODE