FEC FORM 1	STATEMEN ORGANIZA	-		PAGE 1 / 4
1. NAME OF COMMITTEE (in full)	(Check if name is changed)	Example:If typing, type over the lines.	12FE4M5	
State Building & C	Construction Trades			PAC
COMMITTEE'S E-MAIL ADDR	ESS			
(Check if address is changed)	Optional Second E-Mail Add			
COMMITTEE'S WEB PAGE A (Check if address is changed)	DDRESS (URL)			
2. DATE 07	03 ⁷ Y Y Y Y 2024			
3. FEC IDENTIFICATION N	NUMBER ► C co	00882571		
4. IS THIS STATEMENT	× NEW (N) OR	AMENDED (A)		
I certify that I have examined Type or Print Name of Treasu	this Statement and to the best rer <u>Hannan, Chris, , ,</u>	of my knowledge and belief it i	is true, correct an	d complete.
Signature of Treasurer Ha	nnan, Chris, , ,		Date 07	/ D D / Y Y Y Y 03 2024
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 co Federal Election Commissio Toll Free 800-424-9530 Local 202-694-1100		FEC FORM 1 (Revised 06/2012)

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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	<u> </u>			
Candidate Office Party Affiliation Sought: House Senate President	State			
(c) This committee supports/opposes only one candidate, and is NOT an authorized committee.	District			
Name of Candidate				
Party Committee: (National, State (Demo (d) This committee is a or subordinate) committee of the Repub	cratic, lican, etc.) Party			
Political Action Committee (PAC):				
(e) This committee is a separate segregated fund. (Identify connected organization on line 6.) Its con	nected organization is a:			
Corporation Corporation w/o Capital Stock	oor Organization			
Membership Organization Trade Association Co	operative			
In addition, this committee is a Lobbyist/Registrant PAC.				
(f) This committee supports/opposes more than one Federal candidate, and is NOT a separate segre committee. (i.e., nonconnected committee)	egated 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) X 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 (Hybr	rid PAC).			

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

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.

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Write or Type Committee Name		
State Building & Construction Trades Co	uncil of California Federal PAC	

6.	Name of Any Connected Or	ganization,	Affiliated	Committee, Joi	int Fundraising	Representative, or	Leadership PAC Sponsor
	Mailing Address						
				CITY A		STATE A	ZIP CODE
	Relationship: Connected	Organization	Affilia	ted Organization	Joint Func	Iraising 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.

Rios, Richa	ard, R., ,
Full Name	
Mailing Address	555 Capitol Mall, Suite 400
	[
	Sacramento CA 95814 - - - -
	CITY ▲ STATE ▲ ZIP CODE ▲
Title or Position ▼	
Custodian of Records	Telephone number 916 442 2952

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	Hannan, Chris, , ,
Mailing Address	1231 I Street, #302
	Sacramento CA 95814
	CITY ▲ STATE ▲ ZIP CODE ▲
Title or Position	7
Treasurer	Image:

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Full Name of Designated Agent	Jitahidi, Kokayi, Kwa, ,	
Mailing Address	1231 I Street, #302	
	Sacramento CA 95814	
	CITY ▲ STATE ▲ ZIP CODE ▲	
Title or Position		
Assistant Treasur	er 	

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.

	California Bank & Trust		
Mailing Address	550 South Hope Street, Suite 100		
	Los Angeles	CA 9007	1
	CITY 🔺	STATE A	ZIP CODE
Name of Bank, E			
Mailing Address			
	CITY 🔺	STATE ▲	ZIP CODE