FEC

Only

STATEMENT OF

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ORGANIZATION FORM 1 Office Use Only NAME OF (Check if name Example: If typing, type 12FE4M5 COMMITTEE (in full) over the lines. is changed) International Union of Operating Engineers Local 158 Voluntary Political Action Fund 27 Hannay Lane ADDRESS (number and street) (Check if address is changed) Glenmont 12077 NY CITY A STATE A ZIP CODE A COMMITTEE'S E-MAIL ADDRESS dmcgraw@iuoe158.org (Check if address is changed) Optional Second E-Mail Address mmoore@iuoe158.org COMMITTEE'S WEB PAGE ADDRESS (URL) (Check if address is changed) DATE 2017 C00112995 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. McGraw, Daniel, J,, Type or Print Name of Treasurer McGraw, Daniel, J,, [Electronically Filed] 12 12 2017 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

г	EC Ec	m 1 (Pavisad 02/2000)	Page 2
		m 1 (Revised 02/2009) DMMITTEE	raye Z
Can	didate	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. (Compinformation below.)	plete the candidate
Name Cand			
Cand Party	lidate Affiliatio	Office Sought: House Senate President	State District
(c)		This committee supports/opposes only one candidate, and is NOT an authorized committee.	
Name Cand			
Part	y Com	mittee:	
(d)			Democratic, Republican, etc.) Party
Poli	tical A	ction Committee (PAC):	
(e)	×	This committee is a separate segregated fund. (Identify connected organization on line 6.) Its con-	nected organization is
. ,		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 secommittee. (i.e., nonconnected committee)	gregated 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.)	
Join	t Fund	raising Representative:	
(g)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for two committees/organizations, at least one of which is an authorized committee of a federal candidate.	o or more political
(h)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for two committees/organizations, none of which is an authorized committee of a federal candidate.	o or more political
	Comi	mittees Participating in Joint Fundraiser	
	1.	FEC ID number	
	2.	FEC ID number	
	3.	FEC ID number	
	4.		

FEC Form 1 (Revised (22/2000)		Page 3
Write or Type Committee Name			i age 3
		Local 158 Volunt	tary Political Action Fund
	Organization, Affiliated Committee, Jo		·
•			auve, or Leadership i No Sponsor
international Union Op	perating Engineers Local 15	8	
Mailing Address	44 Hannay Lane		
	Glenmont	NY	7 12077
	CITY	STA	TE ZIP CODE
Relationship: x Connected	d Organization Affiliated Committee	Joint Fundraising Repre	esentative Leadership PAC Sponsor
 Custodian of Records: Ider books and records. 	ntify by name, address (phone number	optional) and position of	the person in possession of committee
Full Name			
Mailing Address			
Title or Position	CITY	STAT	E ZIP CODE
		Telephone number	
Treasurer: List the name and any designated agent (e.g., a	d address (phone number optional) o assistant treasurer).	of the treasurer of the comn	nittee; and the name and address of
Full Name McGraw, D	Paniel, J, ,		ı
of Treasurer	44 Hannay Lane		
Mailing Address	ramay cano		
	Glenmont	NY	
Title or Position _I Treasurer	CITY	STATI	E ZIP CODE
		Telephone number	

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Full Name of Designated Agent		
Mailing Address		
	CITY STATE Z	ZIP CODE
Title or Position		1 1
	Telephone number =	
safety deposit boxes Name of Bank, Depo	ository, etc.	accounts, rents
safety deposit boxes Name of Bank, Depo	s or maintains funds.	accounts, rents
safety deposit boxes Name of Bank, Depo	Sor maintains funds. ository, etc. Citizens Bank Rt 9W Glenmont NY 12077	
safety deposit boxes Name of Bank, Depo	Sor maintains funds. ository, etc. Citizens Bank Rt 9W Glenmont NY 12077	ZIP CODE
safety deposit boxes Name of Bank, Depo	Sor maintains funds. ository, etc. Citizens Bank Rt 9W Glenmont NY 12077	
safety deposit boxes Name of Bank, Depo	Sor maintains funds. ository, etc. Citizens Bank Rt 9W Glenmont CITY STATE Ository, etc.	
Safety deposit boxes Name of Bank, Depo	Sor maintains funds. ository, etc. Citizens Bank Rt 9W Glenmont CITY STATE Ository, etc.	
Safety deposit boxes Name of Bank, Depo	Sor maintains funds. ository, etc. Citizens Bank Rt 9W Glenmont CITY STATE Ository, etc.	

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

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h). Joint Fundraisi	ng Participant:		
1.		FEC ID number	С
2.		FEC ID number	С
3.		FEC ID number	С
4.		FEC ID number	С
•	l Organization, Affiliated Committee, Joint Fun	• .	•
ENGINEERS POLITIC.	AL EDUCATION COMMITTEE (EPEC)/INTERNA	ATIONAL UNION OF OF	PERATING ENGINEERS
Mailing Address	1125 17th St, NW		
	Washington	DC	20036
Relationship:	CITY A	STATE A	ZIP CODE ▲
Connecte	ed Organization X Affiliated Committee Jo	int Fundraising Represent	tative Leadership PAC Sp
esignated Agent: Identi	ed Organization Affiliated Committee Jo fy by name, address (phone number – optional)	int Fundraising Represent	Leadership PAC Sp
esignated Agent: Identi		int Fundraising Represent	Leadership PAC Sp
esignated Agent: Identi		int Fundraising Represent	Leadership PAC Sp
esignated Agent: Identi		int Fundraising Represent	Leadership PAC Sp
esignated Agent: Identi		int Fundraising Represent	Leadership PAC Sp
esignated Agent: Identi	fy by name, address (phone number – optional)	int Fundraising Represent	
esignated Agent: Identi Full Name Mailing Address	fy by name, address (phone number – optional)		
esignated Agent: Identi Full Name Mailing Address	fy by name, address (phone number – optional)	STATE A	
esignated Agent: Identi Full Name Mailing Address TITLE OR POSITION	fy by name, address (phone number – optional) CITY CITY Ories: List all banks or other depositories in which	STATE A Telephone Number	ZIP CODE A
esignated Agent: Identi Full Name Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or mail to the content of the conte	fy by name, address (phone number – optional) CITY CITY Ories: List all banks or other depositories in which	STATE A Telephone Number	ZIP CODE A
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