Only

STATEMENT OF

PAGE 1 / 4

FEC ORGANIZATION FORM 1 Office Use Only NAME OF Example: If typing, type (Check if name 12FE4M5 X COMMITTEE (in full) is changed) over the lines. My Committee COMPRESSED AIR FREE AIR FOUNDATION TUNNEL CAISSON SUBWAY WORKERS POLITICAL ACTION FUND LABORERS INTERNATIONAL UNION OF NORTH AMERA LOCAL 147 PAC FUND 4332 KATONAH AVENUE ADDRESS (number and street) (Check if address is changed) **BRONX** 10470 NY CITY A STATE A ZIP CODE A COMMITTEE'S E-MAIL ADDRESS Rfitz@liuna147.org (Check if address is changed) Optional Second E-Mail Address Chrisfitz@liuna147.org COMMITTEE'S WEB PAGE ADDRESS (URL) (Check if address is changed) DATE 2017 C00111237 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. FITZSIMMONS, RICHARD, T., Mr., Type or Print Name of Treasurer FITZSIMMONS, RICHARD, T., Mr., [Electronically Filed] 06 15 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

	FEC Fo	rm 1 (Revised 02/2009)	Page 2			
	E OF COMMITTEE					
	naidate	didate Committee:				
(a)	ш	This committee is a principal campaign committee. (Complete the candidate information below.)				
(b)	Ш	This committee is an authorized committee, and is NOT a principal campaign committee. (Complete the candidate information below.)				
	ne of didate					
	didate y Affiliatio	Office Sought: House Senate President	State			
(c)		This committee supports/opposes only one candidate, and is NOT an authorized committee.				
	ne of didate					
Par	ty Con	nmittee:				
(d)		· · ·	(Democratic, Republican, etc.) Party.			
Pol	itical A	ction 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	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.)				
Joir	nt 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			
	Committees Participating in Joint Fundraiser					
	1.	FEC ID number				
	2.	FEC ID number				
	3.	FEC ID number				
	4.					

FEC Form 1 (Revise	ed 02/2009)		Page 3
Write or Type Committee Na			. age 2
	IR FOUNDATION TUNNEL CAISSON SUBWAY WORKERS POLITICAL ACTI	ION FUND LABORERS INTERNATIONAL UNION OF	F NORTH AMERA LOCAL 147 PAC FUND
6. Name of Any Connecte	d Organization, Affiliated Committee, Joint Fun	adraising Danrasantativa, or Lea	darshin BAC Spansor
-			dership PAC Sponsor
Laborers Internation	al Union of North America Local 14	47 	
Na-West Aslands	4332 Katonah Ave		
Mailing Address			
	Bronx	NY 1047	
	CITY	STATE	ZIP CODE
Relationship: 🗶 Connec	cted Organization Affiliated Committee Joi	int Fundraising Representative	Leadership PAC Sponsor
. Custodian of Records: I books and records.	dentify by name, address (phone number optio	nal) and position of the person ir	possession of committee
	i, Robert, , ,		
Full Name	,340 North Avenue		
Mailing Address			
	Cranford	NJ 070	16
Title or Position	CITY	STATE	ZIP CODE
Accountant		Telephone number 908	
. Treasurer: List the name any designated agent (e.g.	and address (phone number optional) of the tr J., assistant treasurer).	easurer of the committee; and the	e name and address of
Full Name FITZSII of Treasurer	MMONS, RICHARD, T., Mr.,		
Mailing Address	4332 KATONAH AVE.		
	BRONX	NY 1047	70
Title or Position	CITY	STATE	ZIP CODE
Treasurer		Felephone number 718 -	994 – 6664

FEC Form	1 (Revised 02/2009)	Page 4					
Full Name of Designated Agent							
Mailing Address							
	CITY STATE ZI	IP CODE					
Title or Position	Telephone number						
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. COUNTRY BANK							
Mailing Address	200 EAST 42ND STREET						
	NEW YORK NY 10017						
	CITY STATE Z	IP CODE					
Name of Bank, Depository, etc.							
Mailing Address	Signature Bank 565 Fifth Avenue						
	New York NY 10017						
	CITY STATE Z	IP CODE					