Image# 202010029285002813				10/02/2020 17 : 05
		1		PAGE 1 / 4
FEC FORM 1	STATEMEN ORGANIZA			
			C	ffice Use Only
1. NAME OF COMMITTEE (in full)	(Check if name is changed)	Example: If typing, type over the lines.	12FE4M5	
UA UNION PLUMBERS & PIPEFITTERS VOTE! PA	C (UNITED ASSOCIATION OF JOURNEYMEN A	ND APPRENTICES OF THE PLUMBING & PIP	EFITTING INDUSTRY OF 1	THE UNITED STATES AND CANADA) PAC
ADDRESS (number and street)	20210 SW TETON AVENUE			
(Check if address				
is changed)		· · · · · · · · · · · · · · · · · · ·	OR 97	D62
			STATE ▲	
COMMITTEE'S E-MAIL ADDRES	S			
(Check if address	LOUC@UA290.ORG			
is changed)				
	Optional Second E-Mail Addre	EMS.COM		
COMMITTEE'S WEB PAGE ADD	RESS (URL)			1
is changed)				
2. DATE 10 02	2020			
	1020			
3. FEC IDENTIFICATION NU	MBER ► C COO	331918		
4. IS THIS STATEMENT	NEW (N) OR	× AMENDED (A)		
I certify that I have examined thi	s Statement and to the best of	my knowledge and belief it is	s true correct and	d complete
		my knowledge and belief it is		
Type or Print Name of Treasurer	Christian, Lou, , ,			
Signature of Treasurer	an, Lou, , ,	[Electronically Filed]	Date 10	02 / Y Y Y Y 2020
NOTE: Submission of false, erroned	ous, or incomplete information mathematics of the second sec			penalties of 2 U.S.C. §437g.
Office Use Only		For further information cor Federal Election Commission Toll Free 800-424-9530		FEC FORM 1 (Revised 06/2012)

	FEC Fo	rm 1 (Revised 02/2009)	Page <b>2</b>	
TYP	E OF C	OMMITTEE		
Can	ndidate	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. (Compleinformation below.)	ete the candidate	
Nam Cano	e of didate			
	didate y Affiliati	on Office Sought: House Senate President	State	
(c)		This committee supports/opposes only one candidate, and is NOT an authorized committee.		
Nam Cano	e of didate			
Par	ty Con	nmittee:		
(d)			emocratic, publican, etc.) Party.	
Poli	itical A	ction Committee (PAC):		
(e)	×	This committee is a separate segregated fund. (Identify connected organization on line 6.) Its conne	cted organization is a	
		Corporation Corporation w/o Capital Stock	abor 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.)			
Join	t Func	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.	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.	or more political	
	Com	mittees Participating in Joint Fundraiser		
	1.	FEC ID number		
	2.	FEC ID number		
	3.	FEC ID number		
	4.	FEC ID number		

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Write or Type Committee Name

UA UNION PLUMBERS & PIPEFITTERS VOTE! PAC (UNITED ASSOCIATION OF JOURNEYMEN AND APPRENTICES OF THE PLUMBING & PIPEFITTING INDUSTRY OF THE UNITED STATES AND CANADA) PAC

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

	<b>ITTERS VOTE! PAC (UNITED ASSOCIATION OF JO</b>	URNEYMEN AND APP	RENTICES OF THE
PLUMBING & PIPEFITTING IND	USTRY OF THE UNITED STATES AND CANADA)		
Mailing Address	THREE PARK PLACE		
5			
		MD	21401
	CITY	STATE	ZIP CODE
Relationship: Connected	d Organization 🗴 Affiliated Committee 🚺 Joint Fu	ndraising Representativ	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.

Christian,	Lou, , ,
Full Name	
Mailing Address	20210 SW Teton Avenue
	Tualatin     OR     97062       -     -     -
Title or Position	CITY STATE ZIP CODE
Business Manager	Telephone number 503 - 691 - 5700

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	hristian, Lou, , ,	
Mailing Address	20210 SW Teton Avenue	
	Tualatin     OR     97062	
	CITY STATE ZIP CODE	
Title or Position Business Manage	Telephone number 503 - 691 - 5700	

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Full Name of Designated Agent	Green, Jefri, , ,	
Mailing Address	PO Box 42307	
	Portland     OR     97242       Image: Image in the imag	
	CITY STATE ZIP CODE	
Title or Position	er Telephone number 295 1851	

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.

	Umpqua Bank		
Mailing Address	PO Box 1820		
	Roseburg		R 97470
	CITY	STAT	E ZIP CODE
Name of Bank, [	epository, etc.		
Mailing Address			
	CITY	STAT	E ZIP CODE