Only

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STATEMENT OF **FEC ORGANIZATION** FORM 1 Office Use Only NAME OF (Check if name Example: If typing, type 12FE4M5 COMMITTEE (in full) is changed) over the lines. COMPOSITION ROOFERS LOCAL UNION #30 POLITICAL ACTION & EDUCATION FUND 6447 TORRESDALE AVENUE ADDRESS (number and street) (Check if address is changed) **PHILADELPHIA** 19135 PA CITY A STATE A ZIP CODE A COMMITTEE'S E-MAIL ADDRESS smroofer30@yahoo.com (Check if address is changed) Optional Second E-Mail Address COMMITTEE'S WEB PAGE ADDRESS (URL) (Check if address is changed) DATE 06 2019 C00125534 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. McCullough, Shawn, , , Type or Print Name of Treasurer McCullough, Shawn, , , [Electronically Filed] 05 06 2019 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

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	COMMITTEE te Committee:				
(a)	This committee is a principal campaign committee. (Complete the candidate information below	2.)			
(b)	This committee is an authorized committee, and is NOT a principal campaign committee. (Complete the candidate information below.)				
Name of Candidate					
Candidate Party Affilia	tion Office Sought: House Senate President	State			
(c)	This committee supports/opposes only one candidate, and is NOT an authorized committee.				
Name of Candidate					
Party Co	mmittee:	(Domocratic			
(d)	This committee is a (National, State or subordinate) committee of the	(Democratic, Republican, etc.) Party			
Political	Action Committee (PAC):				
(e) <b>x</b>	This committee is a separate segregated fund. (Identify connected organization on line 6.) Its co	nnected 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 s committee. (i.e., nonconnected committee)	segregated 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.)				
Joint Fun	draising Representative:				
(g)	This committee collects contributions, pays fundraising expenses and disburses net proceeds for t 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 t committees/organizations, none of which is an authorized committee of a federal candidate.				
Сог	nmittees Participating in Joint Fundraiser				
1.	FEC ID number				
2.	FEC ID number				
3.	FEC ID number				
4					

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Write or Type Committee Name		DOLITION A	OTION 0	
	OFERS LOCAL UNION			
6. Name of Any Connected C	Organization, Affiliated Committe	ee, Joint Fundraising Repre	esentative, or	Leadership PAC Sponsor
COMPOSITION ROOF	FERS LOCAL UNION #	30 POLITICAL ACT	TION & ED	DUCATION FUND
Mailing Address	6447 TORRESDALE AVENUE			
Mailing Address				
	PHILADELPHIA		PA	19135
	CITY		STATE	ZIP CODE
Relationship: x Connected	d Organization Affiliated Comm	nittee Joint Fundraising	Representative	Leadership PAC Sponsor
<ol> <li>Custodian of Records: Identification</li> <li>books and records.</li> </ol>	ntify by name, address (phone nu	mber optional) and position	on of the perso	on in possession of committee
McCulloug	h, Shawn, , ,			
Full Name	6447 Torresdale Ave			
Mailing Address				
	Philadelphia		PA	19135
Title or Position	CITY		STATE	ZIP CODE
Treasurer		Telephone num	ber 215	331 8770
8. <b>Treasurer:</b> List the name and any designated agent (e.g., a	d address (phone number optionssistant treasurer).	onal) of the treasurer of the	committee; an	d the name and address of
Full Name McCullough of Treasurer L	h, Shawn, , ,			
Mailing Address	6447 Torresdale Ave			
	Philadelphia CITY		PA L	19135 ZIP CODE
Title or Position Treasurer		Telephone numl	. 215	

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Full Name of Designated Agent	McCullough, Shawn, , ,						
Mailing Address	6447 Torresdale Ave						
	Philadelphia CITY	PA STATE	19135 ZIP CODE				
Title or Position Treasurer	Telepho	ne 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.							
	PNC Bank ,1600 Market Street						
Mailing Address	L L						
	Philadelphia	PA	19103				
	CITY	STATE	ZIP CODE				
Name of Bank, D	epository, etc.						
Mailing Address							