Only

STATEMENT OF

PAGE 1 / 4

FEC ORGANIZATION FORM 1 Office Use Only NAME OF Example: If typing, type (Check if name 12FE4M5 COMMITTEE (in full) over the lines. is changed) Teamsters Local #20 PILOT - Federal 435 S. Hawley ADDRESS (number and street) (Check if address is changed) Toledo 43609 OH CITY A STATE A ZIP CODE ▲ COMMITTEE'S E-MAIL ADDRESS rklilje@cshco.com (Check if address is changed) Optional Second E-Mail Address COMMITTEE'S WEB PAGE ADDRESS (URL) (Check if address is changed) DATE 2022 C00234377 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. KONWINSKI, PAUL, , , Type or Print Name of Treasurer KONWINSKI, PAUL, , , [Electronically Filed] 02 2022 Signature of Treasurer Date 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 For further information contact: FEC FORM 1 Federal Election Commission Use (Revised 06/2012) Toll Free 800-424-9530

Local 202-694-1100

FEC Form 1 (Revised 03/2022)	Page 2					
TYPE OF COMMITTEE:						
lidate Committee:						
(a) This committee is a principal campaign committee. (Complete the candidate infor	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 co information below.)	mmittee. (Complete the candidate					
Name of Candidate						
Candidate Office Party Affiliation Sought: House Senate	State President District					
(c) This committee supports/opposes only one candidate, and is NOT an authorized	committee.					
Name of Candidate						
Party Committee:						
(d) This committee is a (National, State or subordinate) committee of the	(Democratic, Republican, etc.) Party					
Political Action Committee (PAC):						
(e) This committee is a separate segregated fund. (Identify connected organization o	n line 6.) Its connected 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 committee. (i.e., nonconnected committee)	a separate segregated fund or party					
In addition, this committee is a Lobbyist/Registrant PAC.						
In addition, this committee is a Leadership PAC. (Identify sponsor on lin	ne 6.)					
(g) 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-contributio	n accounts (Hybrid PAC).					
In addition, this committee is a Lobbyist/Registrant PAC.						
Joint Fundraising Representative:						
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 politic committees/organizations, none of which is an authorized committee of a federal candidate.						
Committees Participating in Joint Fundraiser						
1.	С					
	C					

1	FEC Form 1	(Revised 02/2009)	Page 3				
٧	Vrite or Type Comm	nittee Name	-				
	Teamste	rs Local #20 PILOT - Federal					
6.	Name of Any Co	onnected Organization, Affiliated Committee, Joint Fundraising Rep Local #20	presentative, or Leadership PAC Spon	sor			
		1435 S. Hawley					
	Mailing Address						
		Toledo	OH 43609				
		CITY A	STATE ▲ ZIP CODE ▲				
	Relationship:	Connected Organization Affiliated Organization Joint Fundraisin	ng Representative Leadership PAC	Spons			
7.		Custodian of Records: Identify by name, address (phone number optional) and position of the person in possession of committee books and records.					
		KONWINSKI, PAUL, , ,					
	Full Name						
	Mailing Address	435 S. HAWLEY					
		TOLEDO	OH 43609				
		CITY ▲	STATE ▲ ZIP CODE ▲				
	Title or Position	•					
	Treasurer		umber 419 – 243 – 88	800			
8.		ne name and address (phone number optional) of the treasurer of th	ne committee; and the name and addres	ss of			
	any designated a	gent (e.g., assistant treasurer).					
	Full Name	KONWINSKI, PAUL, , ,					
	of Treasurer						
	Mailing Address	435 S. HAWLEY					
		TOLEDO	OH 43609				
		CITY ▲	STATE ▲ ZIP CODE ▲				
	Title or Position ▼	•					
	Treasurer	Telephone nu	umber 419 - 243 - 8	800			

FEC Form 1 (Revised 0	02/2009)			Page 4			
Full Name of Designated				. 490 .			
Agent							
Mailing Address							
	С	ITY A	STATE ▲	ZIP CODE ▲			
Title or Position ▼							
		Tel	ephone number				
Banks or Other Depositorie safety deposit boxes or main		depositories in which t	ne committee deposits for	unds, holds accounts, rents			
Name of Bank, Depository, e	Name of Bank, Depository, etc.						
Premie	r Bank						
Mailing Address	P.O. Box 248						
	Defiance		OH	43512			
	Cl	ITY 🛦	STATE ▲	ZIP CODE ▲			
Name of Bank, Depository, etc.							
Mailing Address							
	CI	ITY ▲	STATE ▲	ZIP CODE ▲			