

# FEC FORM 1

# STATEMENT OF ORGANIZATION

Office Use Only

1. NAME OF COMMITTEE (in full)  (Check if name is changed) Example: If typing, type over the lines. 12FE4M5

**1199 SERVICE EMPLOYEES INT'L UNION FEDERAL POLITICAL ACTION FUND**

ADDRESS (number and street) 498 Seventh Avenue

(Check if address is changed)

NEW YORK NY 10018

CITY ▲ STATE ▲ ZIP CODE ▲

COMMITTEE'S E-MAIL ADDRESS

(Check if address is changed) arabb@levyratner.com

Optional Second E-Mail Address

COMMITTEE'S WEB PAGE ADDRESS (URL)

(Check if address is changed)

2. DATE 05 / 03 / 2017

3. FEC IDENTIFICATION NUMBER C C00348540

4. 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.

Type or Print Name of Treasurer FOLEY, TIMOTHY, , ,

Signature of Treasurer FOLEY, TIMOTHY, , , *[Electronically Filed]* Date 10 / 09 / 2020

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.

5. TYPE OF COMMITTEE

**Candidate 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. (Complete the candidate information below.)

Name of Candidate \_\_\_\_\_

Candidate Party Affiliation  Office Sought:  House  Senate  President State   
 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 on 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 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.)

**Joint Fundraising Representative:**

- (g)  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.
- (h)  This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or more political committees/organizations, none of which is an authorized committee of a federal candidate.

Committees Participating in Joint Fundraiser

1. \_\_\_\_\_ FEC ID number
2. \_\_\_\_\_ FEC ID number
3. \_\_\_\_\_ FEC ID number
4. \_\_\_\_\_ FEC ID number

Write or Type Committee Name

1199 SERVICE EMPLOYEES INT'L UNION FEDERAL POLITICAL ACTION FUND

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

SERVICE EMPLOYEES INT'L UNION

Mailing Address 1313 L. STREET N.W.

WASHINGTON

DC

20036

CITY

STATE

ZIP CODE

Relationship: [x] Connected Organization [ ] Affiliated Committee [ ] Joint Fundraising Representative [ ] 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.

Full Name FOLEY, TIMOTHY, , ,

Mailing Address 330 WEST 42ND STREET, 7TH FLOOR

NEW YORK

NY

10036

Title or Position

CITY

STATE

ZIP CODE

TREASURER

Telephone number 212 - 603 - 1743

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 FOLEY, TIMOTHY, , ,

Mailing Address 330 WEST 42ND STREET, 7TH FLOOR

NEW YORK

NY

10036

Title or Position TREASURER

CITY

STATE

ZIP CODE

Telephone number 212 - 603 - 1743

Full Name of Designated Agent

[Grid for Full Name of Designated Agent]

Mailing Address

[Grid for Mailing Address Line 1]

[Grid for Mailing Address Line 2]

[Grid for Mailing Address Line 3]

[Grid for Mailing Address Line 3 - State]

[Grid for Mailing Address Line 3 - ZIP Code]

[Grid for Mailing Address Line 3 - ZIP Code Extension]

CITY

STATE

ZIP CODE

Title or Position

[Grid for Title or Position]

Telephone number

[Grid for Telephone number - Area Code]

[Grid for Telephone number - Exchange]

[Grid for Telephone number - Number]

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.

TD BANK

[Grid for Name of Bank, Depository, etc.]

Mailing Address

1710 ROUTE 70 EAST

[Grid for Mailing Address Line 1]

[Grid for Mailing Address Line 2]

CHERRY HILL

[Grid for Mailing Address Line 3]

NJ

[Grid for Mailing Address Line 3 - State]

08034

[Grid for Mailing Address Line 3 - ZIP Code]

[Grid for Mailing Address Line 3 - ZIP Code Extension]

CITY

STATE

ZIP CODE

Name of Bank, Depository, etc.

[Grid for Name of Bank, Depository, etc.]

Mailing Address

[Grid for Mailing Address Line 1]

[Grid for Mailing Address Line 2]

[Grid for Mailing Address Line 3]

[Grid for Mailing Address Line 3 - State]

[Grid for Mailing Address Line 3 - ZIP Code]

[Grid for Mailing Address Line 3 - ZIP Code Extension]

CITY

STATE

ZIP CODE