

FEC FORM 1

STATEMENT OF ORGANIZATION

RECEIVED SECRETARY OF THE SENATE 13 MAR 20 12 20 PM 2:19

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

12FE4M5

Sweeney For NJ

ADDRESS (number and street) 27 South Broad St

(Check if address is changed)

Woodbury NJ 08096-1

COMMITTEE'S E-MAIL ADDRESS

(Check if address is changed)

thmreed@yahoo.com

Optional Second E-Mail Address: thdemocrat@gmail.com

COMMITTEE'S WEB PAGE ADDRESS (URL)

(Check if address is changed)

2. DATE 8/3/12/2013

3. FEC IDENTIFICATION NUMBER C00540773

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 Thomas Reed

Signature of Treasurer [Signature] Date 8/3/12/2013

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.

13020141043

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: Steve M. Sweeney

Candidate Party Affiliation: D.E.M. Office Sought: House Senate President State: N.J. 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	<input type="checkbox"/> C _____
2.	_____	FEC ID number	<input type="checkbox"/> C _____
3.	_____	FEC ID number	<input type="checkbox"/> C _____
4.	_____	FEC ID number	<input type="checkbox"/> C _____

13020141044

Write or Type Committee Name

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

[Empty grid lines for organization name]

Mailing Address

[Empty grid lines for mailing address]

CITY

STATE

ZIP CODE

Relationship: 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

Thomas Reed

Mailing Address

27 South Broad St

Woodbury

NJ

08096-1

Title or Position

CITY

STATE

ZIP CODE

Telephone number

856-845-5390

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

Thomas Reed

Mailing Address

27 South Broad St

Woodbury

NJ

08096-1

Title or Position

CITY

STATE

ZIP CODE

Telephone number

856-845-5390

13020141045

Full Name of Designated Agent

Michelle Conyell

Mailing Address

350 North Marion Ave

Wendinah

CITY

WI

STATE

108090

ZIP CODE

Title or Position

Telephone number

856-1845-5390

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.

T.D. Bank

Mailing Address

490 Mantua Pike

Wendinburg

CITY

WI

STATE

108096

ZIP CODE

Name of Bank, Depository, etc.

Mailing Address

CITY

STATE

ZIP CODE

13020141048

United States Senate

OFFICE OF THE SECRETARY
OFFICE OF PUBLIC RECORDS

THE PRECEDING DOCUMENT WAS:

HAND DELIVERED _____

Date of Receipt

USPS FIRST CLASS MAIL _____

3-12-13

Postmark

USPS REGISTERED/CERTIFIED _____

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DELIVERY CONFIRMATION OR SIGNATURE CONFIRMATION LABEL

USPS EXPRESS MAIL _____

Postmark

OVERNIGHT DELIVERY SERVICE:

SHIPPING DATE

NEXT BUSINESS DAY DELIVERY

FEDERAL EXPRESS _____

UPS _____

DHL _____

AIRBORNE EXPRESS _____

RECEIVED FROM FEDERAL ELECTION COMMISSION _____
Date of Receipt

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NO POSTMARK

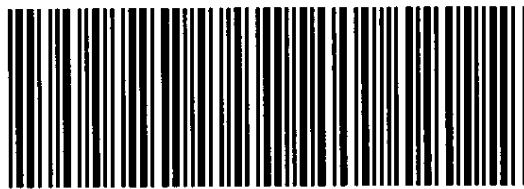
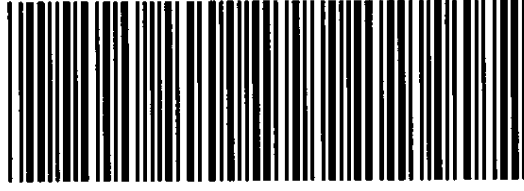
FAX _____
Date of Receipt

OTHER _____
Date of Receipt or Postmark

PREPARER **DH**

DATE PREPARED **3-20-13**

13020141048



13020141049