STATEMENT OF

RECEIVED -

FEC ORGANIZATION		2012 MAY 25 AM 9: 48		
FORM 1	tart, fra en en en	FEC MANUGERMATER		
NAME OF COMMITTEE (in full)	(Check if name Example: If typing, type is changed) ever the lines.	12FE4M5		
Wayne Smith F	or Congress			
ADDRESS (number and street)	ADDRESS (number and street) 39 Ellery Avenue			
(Check if address is changed)	Irvington	NJ 7111		
	CITY	STATE ZIP CODE		
COMMITTEE'S E-MAIL ADDR (Check if address is changed)	ESS (Please provide only one e-mail address) waynesmith4congress@gma	il.com		
COMMITTEE'S WEB PAGE A	waynessmithforcongress.com	<u></u>		
2. DATE 05 12 2012 3. FEC IDENTIFICATION NUMBER 4. IS THIS STATEMENT NEW (N) OR AMENDED (A)				
Type or Print Name of Treasurer Faheem J. Ra'Oof Signature of Treasurer 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. For further information contact: Federal Election Commission FEC FORM 1				
Use Only	Federal Election Commiss Toll Free 800-424-9530 Local 202-694-1100	(Revised 02/2009)		

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	F	EC Fo	rm 1 (Revised 02/2009)	Page 2		
5.		TYPE OF COMMITTEE Candidate Committee:				
	(a)	\times	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 Wayne Smith					
	Candi Party	idate Affiliatio	on DEM Office Sought: House Senate President	State NJ District 10		
	(c)		This committee supports/opposes only one candidate, and is NOT an authorized committee.			
	Name Candi					
	Part	y Con	nmittee:	emocratic,		
	(d)		1 1125 - 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	publican, etc.) Party.		
	Polit	ical A	ction Committee (PAC):			
	(e)		This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected organization on line 6.)	cted organization is a		
			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)			egated fund or party		
			In addition, this committee is a Lebbyist/Registrant PAC.			
	In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)					
	Joint	Fund	Iraising Representative:	A SALANDE VALLE		
	(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 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	<u> </u>		
		2.	FEC ID number			
		3.		~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~		

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FEC Form 1	(Revised 02/2009)	Page 3
Write or Type Comm		. 230 0
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6. Name of Any Co	onnected Organization, Affiliated Committee, Joint Fundralsing Representative, or Lead	ersnip PAC Sponsor
		1 1 1 1 1
A COLUMN A DELLA COLUMN A COLU		1 1 1 1 1 1 1 1
Mailing Address		
	CITY 15 STATE	ZIP CODE
Relationship:	Connected Organization Affiliated Committee Joint Fundraising Representative	Leadership PAC Sponsor
7. Custodian of Rebooks and record	cords: Identify by name, address (phone number optional) and position of the person in s.	possession of committee
Full Name	_I Faḥeem J. Ra'Oof	
Mailing Address	660 Stuyvesant Avenue	
		111111
	Irvington NJ 07	111
Title or Position	CITY STATE	ZIP CODE
Treasurer	Telephone number 973	[368, J-[9180 ,
	e name and address (phone number optional) of the treasurer of the committee; and the gent (e.g., assistant treasurer).	e name and address of
Full Name of Treasurer	Faheem J. Ra'Oof	
Mailing Address	660 Stuyvesant Avenue	
	Irvington NJ 07	111 ZIP CODE
Title or Position	and the Mark Holen.	[368] - [9180]

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FEC Form	n 1 (Revised 02/2009)		Page 4
Full Name of Designated Agent	Djanthe D Martinez		
Mailing Address	POBox 5TCB		
		1111	
	West Orange city	NJ	07052 -
Title or Position Assistant T	reasurer Telephone num	nber [97]	34773998
	Depositories: List all banks or other depositories in which the committees or maintains funds. Depository, etc. Investors Bank	ee deposits	funds, holds accounts, rents
Mailing Address	540 Sanford Avenue		
	Newark, , , , , , , , , , , , , , , , , , ,	NJ	07106
	CITY	STATE	ZIP CODE
Name of Bank, [Depository, etc.		
	Little in the second se	<u> </u>	
Mailing Address			
	CITY	STATE	ZIP CODE



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Received from Senate Public Records Office	Date of Receipt
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Other (Specify):	Date of Receipt or Postmarked
Aur?	5/25/12
PREPARER	DATE PREPARED

(3/2005)