## 1403115158

## STATEMENT OF

RECEIVED 7

FORM 1	ORGANIZ	ATION		JAN 13 AM 8: 21
NAME OF COMMITTEE (in fi	(Check if name is changed)	Example:If typing, type over the lines.	12FE4M5	
MILLVILLE RE	GULAR REPUBLICAN OF	RGANIZATION A NJ	NONPROFIT	CORPORATION
ADDDESS (washer and	712 GLENSI	DE RD.		
ADDRESS (number and  (Check if addlise is changed)	1		NJ 8	332
	·	CITY	STATE	ZIP CODE
COMMITTEE'S E-MAIL  (Check if ac is changed)	ADDRESS (Please provide only one electronic order on the latest states and the latest states of the latest states	e-mail address) VILLEGOP.GON	<b>yl</b>	
COMMITTEE'S WEB P  (Check if ad is changed)	AGE ADDRESS (URL)  MILLVILLEG  dress	OP.COM		
2. DATE 1.2 <sup>™</sup>		en en grand de la companya de la co Sentra de la companya		
3. FEC IDENTIFICA	TION NI IMPED	er og okkriste i <del>de</del> okkriste i det fig. Migleta og tillet alleg <u>t</u> agget og till og sig		
4. IS THIS STATEME	NEW (N) OR	AMENDED (A)		
Type or Print Name of Signature of Treasurer	Lahvary 6	WHEATON	Date 12"	′ 31° ′ 2013
NOTE: Submission of fal	se, erroneous, or incomplete information ANY CHANGE IN INFORMAT	may subject the person signing ION SHOULD BE REPORTED W		penalties of 2 U.S.C. §437g.
Office Use Only		For further information of Federal Election Commiss Toll Free 800-424-9530 Local 202-694-1100		FEC FORM 1 (Revised 02/2009)
	in the state of th	S LOW		· · · · · · · · · · · · · · · · · · ·

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Marie A

	FEC Fo	rm 1 (Revised 02/2009)	Page 2
		OMMITTEE	
Car	Ididate	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. (Cominformation below.)	nplete the candidate
Nam Cand	e of didate		
	didate / Affiliati	Office Sought: House Senate President	State  District
(c)		This committee supports/opposes only one candidate, and is NOT an authorized committee.	
Nam Cand	e of lidate		
Par	ty Con	nmittee:	(D)
(d)	X	This committee is a Sus (National, State or subordinate) committee of the REP	(Democratic, Republican, etc.) Party.
Poli	tical A	ction Committee (PAC):	
(e)	. :	This committee is a separate segregated fund. (Identify connected organization on line 6.) Its con-	nnected organization is a
		Corporation Wo Capital Stock	Labor Organization
		Membership Organization Trade Association	Cooperative
		In addition, this committee is a Lobbyist/Registrant PAC.	Cooperative
(f)	. ]	This committee supports/opposes more than one Federal candidate, and is NOT a separate so committee. (i.e., nonconnected committee)	egregated 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.)	
Join	t Fund	raising Representative:	
(g)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for to 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 to committees/organizations, none of which is an authorized committee of a federal candidate.	wo or more political
	Com	mittees Participating in Joint Fundraiser	
	1.	FEC ID number C	in the state of th
	2.		
	3.		recessive the order of central armore the central of the
		$\begin{array}{cccccccccccccccccccccccccccccccccccc$	Section of Association Distance of Section (
	4.	FEC ID number C	na na ma an ar a

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	T CO POINT (Nevised	02/2003)			i age o
Write or Type Committee Name					
MILLVILLE REGULAR REPUBLICAN ORGANIZATION A NJ NONPROFIT CORPORATION					
6.	5. Name of Any Connected Organization, Affiliated Committee, Joint Fundralsing Representative, or Leadership PAC Sponsor				
٥	umberland Co	oպոty Regular Repul	blican  Organ	ization <sub>I</sub>	
L	1 1 1 1 1 1 1 1				
	Mailing Address	1101 Wheaton Avenu	e		
		Suite 710			
		- [ <b>M                                    </b>		801 I L'N	332,  - 2003,
		CITY		STATE	ZIP CODE
	Relationship: Connecte	ed Organization Affiliated Committee	Joint Fundraising Re	epresentative	Leadership PAC Sponsor
7.	Custodian of Records: Idea books and records.	entify by name, address (phone number	optional) and position	of the person in	possession of committee
	Full Name	ARD S. WHEATON			
	Mailing Address	87 SUNSET DR,			
		<u> MILLVILLE, , , , , , , , , , , , , , , , , , ,</u>	[	N) [08:	332   -   -
	Title or Position	CITY	S.	TATE	ZIP CODE
	TREASURER		Telephone numbe	r [856 <sub>]</sub> _	327 - 4443
8.	Treasurer: List the name at any designated agent (e.g.,	nd address (phone number optional) o assistant treasurer).	of the treasurer of the co	ommittee; and the	name and address of
	Full Name of Treasurer	ARD S. WHEATON	1 1 1 1 1 1		
	Mailing Address	87 SUNSET DR.		1 1 1 1	
			.   .   .   .   .   .   .   .		
		MILLVILLE	· 	NJ [08:	332
	Title or Position	CITY	ST	TATE	ZIP CODE
	TREASURER		Telephone numbe	, <b>[856</b> ]_	327 _ 4443

		·		
Full Name of Designated Agent				
Mailing Address				
	1,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			
٠.	1		1	
	CITY	STATE	ZIP CODE	
Title or Position				
		Telephone number	<u> </u>	
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.			
IMILLVILLE SAVINGS				
Mailing Address	ONE SAVINGS PLACE			
	[P <sub>i</sub> O <sub>i</sub> BOX <sub>i</sub> 1,90 , , , , , , ,	<del>                                      </del>		
	[MILLVILLE , , , , , , , ,	INJ	08332   -	
	CITY	STATE	ZIP CODE	
Name of Bank, Depository,	etc.			
Mailing Address				
			<u> </u>	
	CITY	STATE	ZIP CODE	

MRRO 87 Sunset Dr Millville, NJ 08332

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Federal Election Commission 999 E Street, NW Washington, DC 20463

Federal Election Com- ENVELOPE REPLACEMENT PAGE FOR The FEC added this page to the end of this filing	INCOMING DOCUMENTS
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No Postmark	
Overnight Delivery Service (Specify):	Shipping Date
, N	lext Business Day Delivery
Received from House Records & Registration	Date of Receipt Office
Received from Senate Public Records Office	Date of Receipt
Received from Electronic Filing Office	Date of Receipt
Other (Specify):	Date of Receipt or Postmarked
PREPARER (8/2013)	1/13/14 DATE PREPARED