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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.

12FE4MS

MONMOUTH COUNTY DEMOCRATS VICTORY 2004

ADDRESS (number and street)

473 BROADWAY

(Check if address
is changed)

PO BOX 3032

LDON BRANCH

ND

10110

CITY ▲

STATE ▲

ZIP CODE ▲

COMMITTEE'S E-MAIL ADDRESS

COMMITTEE'S WEB PAGE ADDRESS (URL)

http://www.monmouthcountymd.com

COMMITTEE'S FAX NUMBER

732-571-4488

2. DATE

10 29 2004

3. FEC IDENTIFICATION NUMBER

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

WALLEN GOODE

Signature of Treasurer

Wallen Goode

Date

10 29 2004

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.

Office
Use
Only

For further information contact:
Federal Election Commission
Toll Free 800-424-9550
Local 202-693-1100

FEC FORM 1
(Revised 02/2003)

5. TYPE OF COMMITTEE (Check One)

- (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 _____

- (d) This committee is a (National, State or subordinate) committee of the (Democratic, Republican, etc.) Party.

- (e) This committee is a separate segregated fund.

- (f) This committee supports/opposes more than one Federal candidate, and is NOT a separate segregated fund or party committee.

6. Name of Any Connected Organization or Affiliated Committee

New Jersey Democratic State Committee

Mailing Address 194-116 West State Street

Trenton NJ 08611

CITY STATE ZIP CODE

Relationship Affiliated Political Committee

Type of Connected Organization:

- Corporation
- Corporation w/o Capital Stock
- Labor Organization
- Membership Organization
- Trade Association
- Cooperative

Write or Type Committee Name

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 Robin Pantea

Mailing Address 473 Broadway
Long Beach, NJ 07740

Title or Position Executive Director CITY ▲ STATE ▲ ZIP CODE ▲

Telephone number 732-571-1411

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 Walter J. Jander

Mailing Address 1025 Highway 35
Ocean, NJ 08842

Title or Position Treasurer CITY ▲ STATE ▲ ZIP CODE ▲

Telephone number 732-531-1400

Full Name of Designated Agent Robin Pantea

Mailing Address 473 Broadway
Long Beach, NJ 07740

Title or Position Executive Director CITY ▲ STATE ▲ ZIP CODE ▲

Telephone number 732-571-1411

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.

Commerce Bank

Mailing Address

1101 Parker Road

West Long Beach MS 101244

CITY ▲

STATE ▲

ZIP CODE ▲

Name of Bank, Depository, etc.

Mailing Address

CITY ▲

STATE ▲

ZIP CODE ▲

Federal Election Commission
**ENVELOPE REPLACEMENT PAGE
 FOR INCOMING DOCUMENTS**

The FEC added this page to the end of this filing to indicate how it was received.

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