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## Citizens for Scott Vanderhoef

P.O. Box 472  
New City, New York 10956  
845-620-1005

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Wednesday, July 10, 2002

Federal Election Commission  
999 East Street, North West  
Washington, D.C. 20463

Dear Sir or Madam:

Enclosed please find FEC Form 1, Statement of Organization, and FEC Form 2, Statement of Candidacy, for C. Scott Vanderhoef of 51 Leber Road, Blauvelt, New York 10913. Please note that I am simultaneously sending copies of these forms to the New York State Board of Elections.

Please do not hesitate to contact me if you have any questions or require any additional information.

Very truly yours,



John T. Dillon  
Deputy Treasurer  
Citizens for Scott Vanderhoef

cc: C. Scott Vanderhoef  
Robert J. Winzinger

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FEC  
FORM 1

# STATEMENT OF ORGANIZATION

(See instructions)

Office Use Only

1. NAME OF COMMITTEE (In full)  (Check if name is changed) Example: If typing, type over the lines. 12FE4MS

CITIZENS FOR SCOTT VANDERHOEF

ADDRESS (number and street) P.O. BOX 472

(Check if address is changed) NEW CITY N.Y. 10956-

CITY ▲ STATE ▲ ZIP CODE ▲

COMMITTEE'S E-MAIL ADDRESS

COMMITTEE'S WEB PAGE ADDRESS (URL)

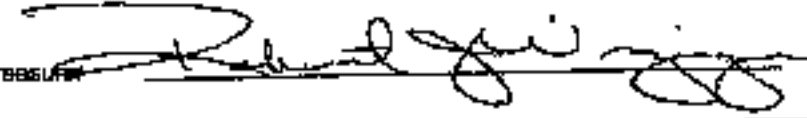
2. DATE 07 10 2002

3. FEC IDENTIFICATION NUMBER ▶ C

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 ROBERT J. WINZINGER

Signature of Treasurer  Date 07 10 2002

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.

FR1AND48.PDF

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 C. SCOTT VANDERHOEF

Candidate Party Affiliation

REP

Office Sought:

House

Senate

President

State

NY

District

17

- (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

\_\_\_\_\_  
\_\_\_\_\_

Mailing Address

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

CITY ▲

STATE ▲

ZIP CODE ▲

Relationship

\_\_\_\_\_

Type of Connected Organization:

Corporation

Corporation w/ro 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 GABER, NYMAN AND COMPANY  
 Mailing Address 715 ROUTE 304  
BARBONIA NY 10954  
 Title or Position ACCOUNTANTS CITY STATE ZIP CODE  
 Telephone number 845-623-4500

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 ROBERT J. WINZINGER  
 Mailing Address 3 WILDWOOD ROAD  
CONGERS NY 10920  
 Title or Position CITY STATE ZIP CODE  
TREASURER Telephone number 845-268-7709

Full Name of Designated Agent JOHN DILLON JR  
 Mailing Address 39 GRANNEY COURT  
PEARL RIVER NY 10965  
 Title or Position CITY STATE ZIP CODE  
DEPUTY TREASURER Telephone number 845-620-1005

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.

PROVIDENT SAVINGS BANK

Mailing Address

715 ROUTE 304

BARDONIA NY 11095-41

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 Commission has added this page to the end of this filing to indicate how it was received.

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<input type="checkbox"/> Received from the House office of Records and Registration	Date of Receipt
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