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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.

12FE4M5

KATE WHITMAN FOR CONGRESS

ADDRESS (number and street)

P.O. BOX 241

(Check if address  
is changed)

123 WILLOW AVENUE

DEERACK NJ 07977

CITY

STATE

ZIP CODE

COMMITTEE'S E-MAIL ADDRESS

Kate@kateforcongress.com

COMMITTEE'S WEB PAGE ADDRESS (URL)

NONE

COMMITTEE'S FAX NUMBER

908-741-4555

2. DATE

07 31 2008

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

GAIL ROSEN

Signature of Treasurer

Date

08 09 2008

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 800-424-9530  
Local 202-694-1100

FEC FORM 1  
(Revised 12/2007)

28039812413

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 \_\_\_\_\_

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 \_\_\_\_\_

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
- (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 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"/>
2.	_____	FEC ID number	<input type="checkbox"/>
3.	_____	FEC ID number	<input type="checkbox"/>
4.	_____	FEC ID number	<input type="checkbox"/>
5.	_____	FEC ID number	<input type="checkbox"/>

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Write or Type Committee Name

KATE WHITMAN FOR CONGRESS

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

[Empty grid lines for organization name]

Mailing Address

[Empty grid lines for mailing address]

CITY

STATE

ZIP CODE

Relationship:

- Connected Organization
- Affiliated Committee
- Leadership PAC Sponsor
- Joint Fundraising Representative

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

CRAIG ANNIS

Mailing Address

P.O. BOX 241

23 WILLOW AVENUE

DEAPACK

NJ

07977

CITY

STATE

ZIP CODE

Title or Position

TREASURER

Telephone number

908-741-4555

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

CRAIG ANNIS

Mailing Address

P.O. BOX 241

23 WILLOW AVENUE

DEAPACK

NJ

07977

CITY

STATE

ZIP CODE

Title or Position

TREASURER

Telephone number

908-741-4555

28039812415

Full Name of Designated Agent

CRAIG ANNIS

Mailing Address

PO BOX 241

23 WILLOW AVENUE

PEARACK

CITY

NJ

STATE

07917

ZIP CODE

Title or Position

TREASURER

Telephone number

908-741-4555

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.

[Empty line for bank name]

Mailing Address

[Empty line for address]

[Empty line for address]

[Empty line for address]

CITY

STATE

ZIP CODE

Name of Bank, Depository, etc.

[Empty line for bank name]

Mailing Address

[Empty line for address]

[Empty line for address]

[Empty line for address]

CITY

STATE

ZIP CODE

28039812416

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

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No Postmark

Overnight Delivery Service (Specify): Shipping Date  
 Next Business Day Delivery

Received from House Records & Registration Office Date of Receipt

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

8/12/08  
 DATE PREPARED

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