Image# 29	933780530
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FEC FORM 1	STATEMENT OF ORGANIZATION (See instructions)	Office use only
1. NAME OF COMMITTEE (in t	iull) (Check if name Example: If typying, type over the lines	12FE4M5
Friends of Jim	Saxton	
ADDRESS (number and s	PO BOX 795	
(Check if address is changed)	Mount Holly	 NJ08060
	CITY	STATE ZIP CODE
COMMITTEE'S E-MAI	L ADDRESS (Please provide only one e-mail address)  Friends09@verizon.net	
COMMITTEE'S WEB (Check if address is changed)		
<ol> <li>2. DATE 1.2</li> <li>3. FEC IDENTIFICA</li> <li>4. IS THIS STATEM</li> </ol>	1 5         2 0 0 3           TION NUMBER         C C00197699	
I certify that I have exami	ned this Statement and to the best of my knowledge and belief it is true, correct and Treasurer Patricia M. Walker	d complete
Signature of Treasurer	Electronically Filed by Patricia M. Walker	Date 05 / 20 / Y Y Y Y 2009
	se, erroneous, or incomplete information may subject the person signing this State ANY CHANGE IN INFORMATION SHOULD BE REPORTED W	
Office Use Only	For further information c Federal Election Commissi Toll Free 800-424-9530	

Federal Election Commission	
Toll Free 800-424-9530	(Revised 02/2009)
Local 202-694-1100	

## Image# 29933780531

FE	EC Form 1 (Revised 02/2009)	Page <b>2</b>
TYPE C	OF COMMITTEE (Check One)	
Candida	ate Committee:	
(a)	X 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 information below.)	the candidate
Name o Candida	JIII JAKOI	
Candida Party Af		State NJ District 03
(c)	This committee supports/opposes only one candidate, and is NOT an authorized committee.	
N	,	
Name o Candida		
Party C	ommittee:	
(d)	This committee is a       (National, State (or subordinate) committee of the	(Democratic, Republican,etc.) Party.
Politica	I Action Committee (PAC):	
(e)	This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connect	ted organization is a:
	Corporation Corporation w/o Capital Stock	abor Organization
	Membership Organization Trade Association	Cooperative
(f)	In addition, this committee is a Lobbyist/Registrant PAC.	ad fund or portu
	This committee supports/opposes more than one Federal candidate, and is NOT a separate segregat committee. (i.e., nonconnected committee)	ed fund of party
	In addition, this committee is a Lobbyist/Registrant PAC.	
	In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)	
Lating Fra		
Joint Fu	ndraising Representative:	
(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 committees/organizations, none of which is an authorized committee of a federal candidate.	or more political
	Committees Participating in Joint Fundraiser	
	1.	0 0 0 0 0
	2 FEC ID number	
	3.	

4. \_\_\_\_\_ FEC ID number C

FEC Form 1 (Revised 02/2009)	Page 3
Write or Type Committee Name	
Friends of Jim Saxton	

n: Fi of	ame and address of any ull Name	and address (phone number optiona designated agent (e.g., assistant trea a M. Walker 7 Winding Way Mt. Holly		omittee; and the 08060
n: Fi of	ame and address of any ull Name f Treasurer <b>Patricia</b>	designated agent (e.g., assistant trea a M. Walker		nmittee; and the
na Fi	ame and address of any	designated agent (e.g., assistant trea		nmittee; and the
				nmittee; and the
	Treasurer		Telephone number609	
Tit	tle or Position ¥	Mt. Holly	<u>NJ_</u>	08060
M	ailing Address			
	ull Name	7 Winding way		
	ossession of Committee	ntify by name, address, (phone numb books and records. M. Walker	er optional), and position c	of the person in
Re	elationship: Connected Organization	Affiliated Committee Jo	oint Fundraising Representative	Leadership PAC Sponso
_		СІТУ	STATE 🛦	ZIP CODE 🔺
M	ailing Address	1		

Telephone number

## Image# 29933780533

FEC Form 1 (Revi	sed 02/2009)		Page 4
Full Name of Designated Agent			
Mailing Address			
			0 –
Title or Position ▼	CITY	STATE 🛦	ZIP CODE 🛦
		Telephone number	
Banks or Other Deposi safety deposit boxes or n Name of Bank, Depositor	naintains funds. ry, etc.	the committee deposits funds, h	olds accounts, rents
safety deposit boxes or n Name of Bank, Depositor	naintains funds.	the committee deposits funds, h	olds accounts, rents
safety deposit boxes or n Name of Bank, Deposito	naintains funds. ry, etc. ank of America	the committee deposits funds, h	olds accounts, rents
safety deposit boxes or n Name of Bank, Depositor	naintains funds. ry, etc. ank of America	the committee deposits funds, h	olds accounts, rents
safety deposit boxes or n Name of Bank, Depositor	naintains funds. ry, etc. ank of America 10 Rancocas Road		
safety deposit boxes or n Name of Bank, Depositor	naintains funds. ry, etc. ank of America 10 Rancocas Road Mount Holly CITY A		 
safety deposit boxes or n Name of Bank, Depositor Mailing Address	naintains funds. ry, etc. ank of America 10 Rancocas Road Mount Holly CITY A		 
safety deposit boxes or n Name of Bank, Depositor Mailing Address	naintains funds. ry, etc. ank of America 10 Rancocas Road Mount Holly CITY A		 
safety deposit boxes or n Name of Bank, Depositor Mailing Address	naintains funds. ry, etc. <b>ank of America</b> <b>10 Rancocas Road</b> <b>10 Mount Holly</b> <b>CITY A</b> ry, etc.		
safety deposit boxes or n Name of Bank, Depositor Mailing Address	naintains funds. ry, etc. <b>ank of America</b> <b>10 Rancocas Road</b> <b>10 Rancocas Road</b>		