

**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 12FE4M5

The Committee to Re-Elect Congresswoman Marge Roukema

ADDRESS (Home or street) P.O. Box 625

(Check if address is changed) Ridgewood NJ 07451

CITY STATE ZIP CODE

COMMITTEE'S E-MAIL ADDRESS

margeroukema.org

COMMITTEE'S WEB PAGE ADDRESS (URL)

margeroukema.org

2. DATE 06 / 08 / 2002

3. FEC IDENTIFICATION NUMBER C00091298

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 Jaye L. Parsons

Signature of Treasurer Electronically Filed by Jaye L. Parsons Date 07 / 31 / 2001

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to the penalties of 2 U.S.C. 5437g.

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 202-694-1110

**FEC FORM 1**  
(Revised 1/2001)

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 Marge Roukema

Candidate Party Affiliation	REP	Office Sought:	<input checked="" type="checkbox"/> House	<input type="checkbox"/> Senate	<input type="checkbox"/> President	State	NJ
						District	5

- (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

The Committee to Re-Elect Congresswoman Marge Roukema

Mailing Address P.O. Box 625

\_\_\_\_\_

Ridgewood NJ 07451

CITY ▲

STATE ▲

ZIP CODE ▲

Relationship \_\_\_\_\_

Type of Connected Organization:

- |  |  |   |
|--|--|---|
| <input type="checkbox"/> Corporation             | <input type="checkbox"/> Corporation w/o Capital Stock | <input type="checkbox"/> Labor Organization |
| <input type="checkbox"/> Membership Organization | <input type="checkbox"/> Trade Association             | <input type="checkbox"/> Cooperative        |

Write or Type Committee Name

The Committee to Re-Elect Congresswoman Marge Roukema

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 \_\_\_\_\_

Mailing Address \_\_\_\_\_

Title or Position ▼ CITY ▲ STATE ▲ ZIP CODE ▲

\_\_\_\_\_ Telephone number \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

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 Jaye L. Parsons

Mailing Address 49 Reynen Court

\_\_\_\_\_ Ridgewood NJ 07450 - \_\_\_\_\_

Title or Position ▼ CITY ▲ STATE ▲ ZIP CODE ▲

Treasurer Telephone number 201 - 447 - 1086

Full Name of Designated Agent \_\_\_\_\_

Mailing Address \_\_\_\_\_

Title or Position ▼ CITY ▲ STATE ▲ ZIP CODE ▲

\_\_\_\_\_ Telephone number \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

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.

**Fleet**

Mailing Address

25 N. Maple Avenue

Ridgewood

NJ

07450 -

CITY Δ

STATE Δ

ZIP CODE Δ