

**FEC
FORM 1**

**STATEMENT OF
ORGANIZATION**

(See Instructions)

RECEIVED
FEC MAIL ROOM

2002 MAY 28 P 12:25

Office Use Only

1. NAME OF
COMMITTEE (In full)



(Check if name
is changed)

Example: If typing, type
over the lines

12FE4M5

Join Our Efforts PAC (JOE PAC)

ADDRESS (number and street)

1748 Old York Road



(Check if address
is changed)

Arlington

PA

19001

CITY ▲

STATE ▲

ZIP CODE ▲

COMMITTEE'S E-MAIL ADDRESS

COMMITTEE'S WEB PAGE ADDRESS (URL)

2. DATE

04

15

2002

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

Jeffrey B. Albert

Signature of Treasurer

Jeffrey B. Albert

Date

04

15

2002

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to the penalties of 2 U.S.C. 9437g.

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
CandidateCandidate
Party AffiliationOffice
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

NONE

Mailing Address

CITY ▲

STATE ▲

ZIP CODE ▲

Relationship

Type of Connected Organization:

☐

Corporation

☐

Corporation w/o Capital Stock

☐

Labor Organization

☐

Membership Organization

☐

Trade Association

☐

Cooperative

Write or Type Committee Name

Join Our Efforts PAC (JOE PAC)

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 Jeffrey B. Albert
 Mailing Address 48 Oakwood Drive
Dresher PA 19025
 CITY STATE ZIP CODE
215 659 7200
 Telephone number

Title or Position

Treasurer

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 Jeffrey B. Albert
 Mailing Address 48 Oakwood Drive
Dresher PA 19025
 CITY STATE ZIP CODE
215 659 7200
 Telephone number

Title or Position

Treasurer

Full Name of Designated Agent
 Mailing Address
 CITY STATE ZIP CODE
 Telephone number

Title or Position

FEC Form 1 (Revised 1/2001)

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.

Mailing Address

Hudson United Bank

580 West Germantown Pike

Plymouth Meeting,

PA

19462

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.

☐ Hand Delivered	Date of Receipt
☒ First Class Mail	POSTMARKED 5-14-02
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  PREPARER	 5-28-02 DATE PREPARED

(6/2000)