

FEC FORM 1

STATEMENT OF ORGANIZATION

(See instructions)

SECTION 501(C)(7) OF 54 USC

FORM NO. 37 APR 1999

Office Use Only

1. NAME OF COMMITTEE (in full) (Check if name is changed) Example: If typing, type over the lines. 12FB4M5

LAUTENBERG 2000

ADDRESS (number and street) 201 W. PASSAIC ST

X (Check if address is changed) ROCHELLE PARK NJ 07662

CITY STATE ZIP CODE

COMMITTEE'S E-MAIL ADDRESS

COMMITTEE'S WEB PAGE ADDRESS (URL)

2. DATE 01 01 2002

3. FEC IDENTIFICATION NUMBER C00302273

4. IS THIS STATEMENT NEW (N) OR X 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 FRANK A LAUTENBERG

Signature of Treasurer [Handwritten Signature] Date 03 22 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.

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

Candidate Party Affiliation	Office Sought	House	Senate	President	State	District
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- (c) This committee supports/opposes only one candidate, and is NOT an authorized committee.

Name of Candidate

FRANK R LAUTENBERG

- (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/o Capital Stock | Labor Organization |
| Membership Organization | Trade Association | Cooperative |

Write or Type Committee Name

LAUTENBERG 2000

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

FRANK R LAUTENBERG

Mailing Address

Title or Position

CITY

STATE

ZIP CODE

TREASURER

Telephone number

Full Name of Designated Agent

MILDRED FELDSTEIN

Mailing Address

201 W PASSAIC ST

ROCHELLE PARK

NJ 07662

Title or Position

CITY

STATE

ZIP CODE

ASST TREASURER

Telephone number

973-994-9400

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

CITY ▲

STATE ▲

ZIP CODE ▲

Name of Bank, Depository, etc.

Mailing Address

CITY ▲

STATE ▲

ZIP CODE ▲

United States Senate

OFFICE OF THE SECRETARY
OFFICE OF PUBLIC RECORDS

THE PRECEDING DOCUMENT WAS:

HAND DELIVERED _____
Date of Receipt

FAX (48-HOUR NOTICES) _____
Date of Receipt

INSIDE MAIL _____
Date of Receipt

RECEIVED FROM THE LEGISLATIVE RESOURCE
CENTER _____
Date of Receipt

RECEIVED FROM THE FEDERAL ELECTION
COMMISSION _____
Date of Receipt

FIRST CLASS MAIL _____
Postmarked

REGISTERED/CERTIFIED MAIL _____
Postmarked

NO POSTMARK POSTMARK ILLEGIBLE

OTHER (Specify): _____

AIRBORNE EXPRESS

EXPRESS MAIL

FEDERAL EXPRESS

UPS

05/30/02
Postmark and/or Date of Receipt

RD _____
Preparer
05/30/02 _____
Date Prepared