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Roger O. Parent
917 Whitehall Drive
South Bend, Indiana 46615

To: Federal Election Commission
999 E Street, N.W.
Washington, D.C. 20463

From: Pamela J. Chipman, Treasurer
Roger Parent for Congress Committee

Roger Parent, Congressional Candidate

Date: May 15, 2001

Re: FEC Form 1 and FEC Form 2 Amendments

The State of Indiana recently completed its Congressional redistricting and it is necessary to amend FEC Form 1 and Form 2. The **ONLY** thing that has changed on the amended forms is the Congressional District number. The original filing was for Indiana Congressional District 3. The amended filings are for Indiana Congressional District 2. To repeat, the Congressional District number is all that has changed on each of these forms.

Enclosed please find:

1. Original Form 1 filed 4/12/01
2. Amended Form 1
3. Original Form 2 filed 4/2/01
4. Amended Form 2

Thank you

FEC
FORM 1

STATEMENT OF
ORGANIZATION

(See instructions)

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Office Use Only

1. NAME OF
COMMITTEE (in full)



(Check if name
is changed)

Example: If typing, type
over the lines.

12FE4M5

ROGER PARENT FOR CONGRESS COMMITTEE

ADDRESS (number and street)

132 N. LAFAYETTE BLVD



(Check if address
is changed)

SOUTH BEND

IN

46601

CITY ▲

STATE ▲

ZIP CODE ▲

COMMITTEE'S E-MAIL ADDRESS

parentcommittee@msn.com

COMMITTEE'S WEB PAGE ADDRESS (URL)

2. DATE

05 17 2001

3. FEC IDENTIFICATION NUMBER ►

C00365809

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

PAMELA J. CHIPMAN

Signature of Treasurer

Pamela J. Chipman

Date

05 17 2001

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 1/01)

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

ROGER PARENT

Candidate Party Affiliation

DEM

Office Sought

☒

House

☐

Senate

☐

President

State

1N

District

02

- (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

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

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 PAMELA J. CHIPMAN

Mailing Address 11208 LEEPER AVE
SOUTH BEND IN 46617

Title or Position ▼ CITY ▲ STATE ▲ ZIP CODE ▲

TREASURER 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 PAMELA J. CHIPMAN

Mailing Address 11208 LEEPER AVE
SOUTH BEND IN 46617

Title or Position ▼ CITY ▲ STATE ▲ ZIP CODE ▲

TREASURER Telephone number - -

Full Name of Designated Agent BRIGID D. DUTILE

Mailing Address 18277 WESTON VILL DR
SOUTH BEND IN 46637

Title or Position ▼ CITY ▲ STATE ▲ ZIP CODE ▲

ASSISTANT TREASURER 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.

1297 SOURCE BANK

Mailing Address

P.O. BOX 11602

SOUTH BEND IN 46634

CITY ▲

STATE ▲

ZIP CODE ▲

Name of Bank, Depository, etc.

Mailing Address

CITY ▲

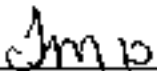
STATE ▲

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
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 PREPARER 5-30-01 DATE PREPARED	