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SECRETARY OF THE SENATE
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FEC
FORM 1

STATEMENT OF ORGANIZATION

Office Use Only

1. NAME OF COMMITTEE (in full) (Check if name is changed) Example: If typing, type over the lines. 12FE4M5

Andrews for Senate

ADDRESS (number and street) 215 Fourth Ave

(Check if address is changed)

Haddon Heights NJ 08035

CITY STATE ZIP CODE

COMMITTEE'S E-MAIL ADDRESS (Please provide only one e-mail address)

(Check if address is changed)

robyn.ferdinand@gmail.com

COMMITTEE'S WEB PAGE ADDRESS (URL)

(Check if address is changed)


2. DATE 03 27 2012

3. FEC IDENTIFICATION NUMBER C00448654

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 Ms. Robyn Ferdinand

Signature of Treasurer Ms. Robyn Ferdinand  Date 03 27 2012

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 02/2009)

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5. TYPE OF COMMITTEE

Candidate Committee:

- (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 Mr Robert E Andrews

Candidate Party Affiliation Office Sought: House Senate President State NJ District 00

- (c) This committee supports/opposes only one candidate, and is NOT an authorized committee.

Name of Candidate _____

Party Committee:

- (d) This committee is a (National, State or subordinate) committee of the (Democratic, Republican, etc.) Party.

Political Action Committee (PAC):

- (e) This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected organization is a:
 - Corporation Corporation w/o Capital Stock Labor Organization
 - Membership Organization Trade Association Cooperative
 - In addition, this committee is a Lobbyist/Registrant PAC.
- (f) This committee supports/opposes more than one Federal candidate, and is NOT a separate segregated fund or party committee. (i.e., nonconnected committee)
 - In addition, this committee is a Lobbyist/Registrant PAC.
 - In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)

Joint Fundraising Representative:

- (g) This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or more political committees/organizations, at least one of which is an authorized committee of a federal candidate.
- (h) This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or more political committees/organizations, none of which is an authorized committee of a federal candidate.

Committees Participating in Joint Fundraiser

1.	_____	FEC ID number	<input type="checkbox"/> C _____
2.	_____	FEC ID number	<input type="checkbox"/> C _____
3.	_____	FEC ID number	<input type="checkbox"/> C _____
4.	_____	FEC ID number	<input type="checkbox"/> C _____

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Write or Type Committee Name

Andrews for Senate

6. Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC Sponsor

Mailing Address

CITY

STATE

ZIP CODE

Relationship: Connected Organization Affiliated Committee Joint Fundraising Representative Leadership PAC Sponsor

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 Ms. Robyn Ferdinand

Mailing Address 3603 Chadbury Rd.

--

Mount Laurel NJ 08054

Title or Position

CITY

STATE

ZIP CODE

Treasurer

Telephone number 908 - 208 - 6956

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 Ms. Robyn A. Ferdinand

Mailing Address 3603 Chadbury Rd.

--

Mount Laurel NJ 08054

Title or Position

CITY

STATE

ZIP CODE

Treasurer

Telephone number 908 - 208 - 6956

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Full Name of Designated Agent: Maureen Doherty

Mailing Address: 321 Cook Ave

[Empty address line]

Scotch Plains NJ 07076

CITY

STATE

ZIP CODE

Title or Position: Asst. Treasurer

Telephone number: 908 - 490 - 0192

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.

First Colonial National Bank

Mailing Address: 1040 Haddon Ave

[Empty address line]

Collingswood NJ 08108

CITY

STATE

ZIP CODE

Name of Bank, Depository, etc.

[Empty bank name line]

Mailing Address: [Empty address line]

[Empty address line]

[Empty address line]

CITY

STATE

ZIP CODE

12020203773

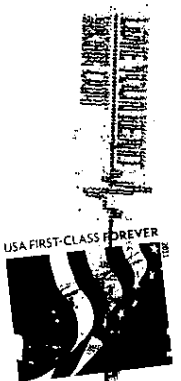
Rob Andrews
DEMOCRAT FOR U.S. SENATE
P.O. Box 295 ■ Oaklyn, NJ 08107

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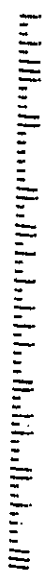
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United States Senate

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AIRBORNE EXPRESS	_____	<input type="checkbox"/>

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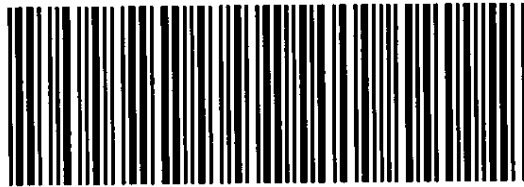
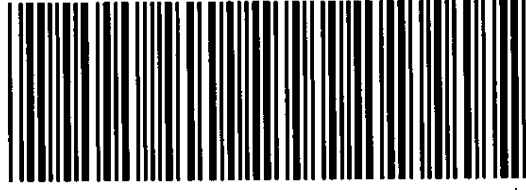
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