

FEC
FORM 1STATEMENT OF
ORGANIZATION

(See Instructions)

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2007 JUN 17 P 12:30

Office Use Only

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

12FB4MS

Parke for Congress Committee

ADDRESS (number and street)

92 Church Street

(Check if address
is changed)

Rutland

VT

05701

CITY ▲

STATE ▲

ZIP CODE ▲

COMMITTEE'S E-MAIL ADDRESS

treasure@voteparke.com

COMMITTEE'S WEB PAGE ADDRESS (URL)

www.voteparke.com

2. DATE

06 10 2002

3. FEC IDENTIFICATION NUMBER ▶

C

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

Sharon C. Parke

Signature of Treasurer

Sharon C. Parke

Date

06 10 2002

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to the penalties of 2 U.S.C. §457j.

ANY CHANGE IN INFORMATION SHOULD BE REPORTED WITHIN 10 DAYS.

Office
Use
OnlyFor further information contact:
Federal Election Commission
Toll Free 800-624-6522
Local 202-694-1100FEC 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

Gregory Earl Parke

Candidate

Party Affiliation

Rep

Office Sought

1

House

Senate

President

State

VT

District

A L

- (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 Sharon Celia Parke
 Mailing Address 92 Church Street
Rutland VT 05701
 Title or Position CITY STATE ZIP CODE

Treasurer Telephone number 802-786-2198

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 Sharon Celia Parke
 Mailing Address 92 Church Street
Rutland VT 05701
 Title or Position CITY STATE ZIP CODE

Treasurer Telephone number 802-786-2198

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.

Mailing Address

Factory Point National Bank

P.O. Box 1567

Manchester Center VT 05255

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.

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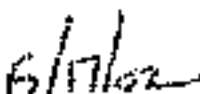
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PREPARER


DATE PREPARED

(6/2000)