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FEC FORM 1

STATEMENT OF ORGANIZATION

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2012 FFB -2 AM 11: 43

FORM 1	·	UNGANIZ	AIIU	4		2012 FEB - 2 ATTER
1. NAME OF COMMITTEE (in	n full)	(Check if name is changed)		ple:If typing, type he lines.	12FE4M	• -
Eric Beck 1	or Cong	ress, Inc.				
		1 1 1 1 1 1 1				
ADDRESS (number a	nd street)	O Box 34				
(Check if an is changed)	ddress M	analapan			NJ	7726
			CITY		STATE	ZIP CODE
COMMITTEE'S E-MA	address	lease provide only one illykat@opte			1 	<u> </u>
COMMITTEE'S WEB	PAGE ADDRES	S (URL)				
(Check if is change						
2. DATE 01	" ′ 27 " ′	2012 ·				
3. FEC IDENTIFIC	CATION NUMBE	ER CO	0508	754		
4. IS THIS STATE	MENT	NEW (N) OR	\boxtimes	AMENDED (A)		
I certify that I have of	ı	atement and to the be	•	•	is true, corre	ect and complete.
Signature of Treasur	K	thley	SC	Ponohue	Date Ö	1" ′ 27" ′ 2012 ΄
NOTE: Submission of		or incomplete information				t to the penalties of 2 U.S.C. §437g.
Office Use Only				For further information of Federal Election Commission Free 800-424-9530		FEC FORM 1 (Revised 02/2009)

FEC	Form 1 (Revised 02/2009) Page 2
	F COMMITTEE
. F	late Committee: This committee is a principal campaign committee (Complete the candidate information below.)
(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 Candidat	
Candidat Party Aff	
(c)	This committee supports/opposes only one candidate, and is NOT an authorized committee.
Name of Candidat	e [
Party (Committee:
(d)	(National, State (Democratic, This committee is a or subordinate) committee of the Republican, etc.) Party.
Politica	al 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 F	undraising 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.
C	Committees Participating in Joint Fundraiser
1	Littli I I I I I I I I I I I I I I I I I I I
2	FEC ID number C
3	. [FEC ID number C
4	.

EEC Form 1 (Posicod 02)	(2000)		Does 2
FEC Form 1 (Revised 02/	LUUJ		Page 3
Eric Beck for Con	aress Inc		
	ganization, Affiliäted Committee, Jo	Int Eundraigha Banracantat	ive or I coderable DAC Spensor
6. Name of Any Connected Org	janization, Anniated Committee, 90	ini runuraising nepresentat	ive, or Leadership FAC Sponsor
			<u> </u>
Mailing Address		1111111	
Mailing Address		1 1 1 1 1 1 1 1 1	
L			
L	· CITY	STATE	ZIP CODE
Relationship: Connected C	Organization Affiliated Committee	Joint Fundraising Repress	entative Leadership PAC Sponsor
 Custodian of Records: Identify books and records. 	y by name, address (phone number	optional) and position of th	e person in possession of committee
Full Name Kathlee	en Donohue		
	PO Box 34		
<u> </u>	Manalapan	ĻΝ <mark>, , , , , , , , , , , , , , , , , , , </mark>	07726
Title or Position	CITY	STATE	ZIP CODE
Treasurer		Telephone number	<u> </u> 908 7707335
8. Treasurer: List the name and a any designated agent (e.g., as:	address (phone number optional) c sistant treasurer).	of the treasurer of the commit	tee; and the name and address of
Full Name Kathlee of Treasurer	en Donohue		
Mailing Address	PO Box 34, , , , , , , , ,		
L			
•	Manalapan city	NJ STATE	07726 ZIP CODE
Title or Position Treasurer		Telephone number	908[770[7335

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Full Name of Designated			,
Agent L	 		
Mailing Address			
	СПУ	STATE	ZIP CODE
Title or Position		,	
	Tele	ephone number	
 Banks or Other Depositors safety deposit boxes or main Name of Bank, Depository, 		he committee deposits fun	ds, holds accounts, rents
ليب			
Mailing Address			
		ا ليا ليب	
	CITY	STATE	ZIP CODE
Name of Bank, Depository,	etc.		
TD B	ank, , , , , , , , , , , , , , , , , , ,	111111	
Mailing Address	1398 Highway 9		
	Old Bridge	<u> </u>	<u> </u>
	CITY	STATE	ZIP CODE

Federal Election Commiss ENVELOPE REPLACEMENT PAGE FOR INC The FEC added this page to the end of this filing to i	OMING DOCUMENTS
Hand Delivered	Date of Receipt
USPS First Class Mail	Postmarked 1/28/12
USPS Registered/Certified	Postmarked (R/C)
USPS Priority Mail	Postmarked
Delivery Confirmation™ or Signature	e Confirmation [™] Label
USPS Express Mail	Postmarked
Postmark Illegible	
No Postmark	
Overnight Delivery Service (Specify):	Shipping Date
Next	Business Day Delivery
Received from House Records & Registration Office	Date of Receipt ce
Received from Senate Public Records Office	Date of Receipt
Received from Electronic Filing Office	Date of Receipt
Other (Specify):	ate of Receipt or Postmarked
(In D	2/2/12
PREPARER (3/2005)	DATE PREPARED