FEC FORM 1

STATEMENT OF ORGANIZATION

(See Instructions)

RECEIVED
FEC MAIL ROOM
2001 JUN -8 A 11:25

Office Use Only

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

Caspersen for Congress

ADDRESS (number and street) 240 Main Street, PO Box 620

☐ (Check if address is changed)

Gladstone | NJ | 07934 -

CITY ▲ STATE ▲ ZIP CODE ▲

COMMITTEE'S E-MAIL ADDRESS

None at current time

COMMITTEE'S WEB PAGE ADDRESS (URL)

None at current time

2. DATE 05 / 31 / 2001

3. FEC IDENTIFICATION NUMBER ▶ C to be assigned

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 Belinda Peccoralo

Signature of Treasurer Belinda Peccoralo Date 06 / 04 / 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)

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5. TYPE OF COMMITTEE (Check One)

(a) [X] 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: Finn Caspersen

Candidate Party Affiliation: REP.

Office Sought: [X] House [ ] Senate [ ] President

State: NJ

District: 12

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

Name of Candidate: Finn Caspersen

(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

None at current time

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

Caspersen for Congress

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: Belinda Peccoralo

Mailing Address: 268 Main Street, PO Box 617

Gladstone | NJ | 07934

Title or Position ▼ | CITY ▲ | STATE ▲ | ZIP CODE ▲

Treasurer

Telephone number: 908 - 719 - 7998

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: Belinda Peccoralo

Mailing Address: 268 Main Street, PO Box 617

Gladstone | NJ | 07934

Title or Position ▼ | CITY ▲ | STATE ▲ | ZIP CODE ▲

Treasurer

Telephone number: 908 - 719 - 7998

Full Name of Designated Agent: Mary Ann Blough

Mailing Address: 268 Main Street, PO Box 617

Gladstone | NJ | 07934

Title or Position ▼ | CITY ▲ | STATE ▲ | ZIP CODE ▲

Assistant Treasurer

Telephone number: 908 - 719 - 4729

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.

Peapack Gladstone Bank

Mailing Address PO Box 178

Gladstone | NJ | 07934 - 0178

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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PREPARER

6/8/01
DATE PREPARED

(6/2000)