REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee
(Summary Page)

RECEIVED
FEC MAIL ROOM
2000 JUL 12 A 11:12

1. NAME OF COMMITTEE (In full)
Cynthia McKinney For Congress

ADDRESS (number and street) ☐ Check if different than previously reported.
Post Office Box 371125

2. FEC IDENTIFICATION NUMBER
C00256354

CITY, STATE and ZIP CODE
Decatur, GA 30037

STATE/DISTRICT
GA 4

3. IS THIS REPORT AN AMENDMENT?
☒ YES ☐ NO

4. TYPE OF REPORT

☐ April 15 Quarterly Report
☐ July 15 Quarterly Report
☐ October 15 Quarterly Report
☒ January 31 Year End Report
☐ July 31 Mid-Year Report (Non-election Year Only)

☐ Twelfth day report preceding _____ (Type of Election) election on _____ in the State of _____
☐ Thirtieth day report following the General Election on _____ in the State of _____
☐ Termination Report

This report contains activity for ☒ Primary Election ☐ General Election ☐ Special Election ☐ Runoff Election

SUMMARY

5. Covering Period 07/01/1999 through 12/31/1999

	COLUMN A This Period	COLUMN B Calendar Year-to-date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e))	$47199.01	$112170.38
(b) Total Contribution Refunds (From Line 20(d))	$0.00	$0.00
(c) Net Contributions (other than loans)(subtract Line 6(b) from 6(a))	$47199.01	$112170.38
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	$31352.91	$76090.40
(b) Total Offsets to Operating Expenditures (from Line 14)	$152.89	$152.89
(c) Net Operating Expenditures (Subtract Line 7(b) from 7(a))	$31200.02	$75937.51
8. Cash on Hand at Close of Reporting Period (from Line 27)	$137541.86	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	$0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	$0.00	

For further information:
Federal Election Commission
999 E Street, NW
Washington, DC 20463
Toll Free 800-424-9530
Local 202-219-3420

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer
Elyria Mackie

Signature of Treasurer *Elyria L. Mackie* Date 7/8/2000

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to penalties of 2 U.S.C. §437g.

FEC FORM 3
(Revised 4/87)