REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee
(Summary Page)

RECEIVED
FEDERAL ELECTION
COMMISSION
PUBLIC DISCLOSURE
DIVISION

JUN 14 9 57 AM '01

1. NAME OF COMMITTEE (in full)

BOB BRADY FOR CONGRESS

ADDRESS (number and street) ☐ Check if different than previously reported.

ONE LOGAN SQUARE, SUITE 2929

CITY, STATE and ZIP CODE STATE/DISTRICT

PHILADELPHIA, PA 19103

2. FEC IDENTIFICATION NUMBER

C00333740

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

		COLUMN A This Period	COLUMN B Calendar Year-to-date
5.	Covering Period 03/16/2000 through 03/31/2000		
6.	Net Contributions (other than loans)		
	(a) Total Contributions(other than loans) (from Line 11(e))	$67425.00	$233700.00
	(b) Total Contribution Refunds (From Line 20(d))	$1000.00	$1000.00
	(c) Net Contributions (other than loans)(subtract Line 6(b) from 6(a))	$66425.00	$232700.00
7.	Net Operating Expenditures		
	(a) Total Operating Expenditures (from Line 17)	$97349.51	$144480.46
	(b) Total Offsets to Operating Expenditures (from Line 14)	$0.00	$0.00
	(c) Net Operating Expenditures (Subtract Line 7(b) from 7(a))	$97349.51	$144480.46
8.	Cash on Hand at Close of Reporting Period (from Line 27)	$257829.39	
9.	Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	$5000.00	
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

Signature of Treasurer Michael S. [illegible] Date 6/14/01

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)