25971396086

10/20/2005 23 : 54

FEC FORM 3

REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) — **USE FEC MAILING LABEL OR TYPE OR PRINT** ▼ — Example: If typing, type over the lines

FRIENDS OF AMATA

ADDRESS (number and street) ▼ POST OFFICE BOX 6171

Check if different than previously reported. (ACC)

PAGO PAGO | AS | 96799

2. **FEC IDENTIFICATION NUMBER** ▼ — CITY ▲ — STATE ▲ — ZIP CODE ▲

C00393041

3. IS THIS REPORT X NEW (N) OR AMENDED (A)

STATE ▼ DISTRICT: AS | 00

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:

April 15 Quarterly Report (Q1)

July 15 Quarterly Report (Q2)

X October 15 Quarterly Report (Q3)

January 31 Year-End Report (YE)

Termination Report (TER)

(b) 12-Day **PRE**-Election Report for the:

Primary (12P) General (12G) Runoff (12R)

Convention (12C) Special (12S)

Election on In the State of

(c) 30-Day **POST**-Election Report for the:

General (30G) Runoff (30R) Special (30S)

Election on in the State of

5. Covering Period 07 01 2005 through 09 30 2005

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 Mr. Michael Lawrence Usle, Sr.

Signature of Treasurer Electronically Filed by Mr. Michael Lawrence Usle, Sr. Date 10 20 2005

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

Office Use Only								FEC FORM 3 (Revised 02/2005)