REPORT OF RECEIPTS AND DISBURSEMENTS

06/14/2002 17 : 59

BY AN AUTHORIZED COMMITTEE OF A CANDIDATE FOR THE OFFICE OF PRESIDENT OR VICE-PRESIDENT

1. NAME OF COMMITTEE (in full)
Nader 2000 Primary Committee, Inc.

ADDRESS (number and street) ☐ Check if different than previously reported
PO Box 18002

CITY, STATE, and ZIP CODE
Washington DC 20036

2. IDENTIFICATION NUMBER
C00355222

3. IS THIS REPORT FOR :
☒ Primary election ☐ General election

4. TYPE OF REPORT (Check here ☐ if this is a Termination Report.)

☒ April 15 Quarterly Report
☐ July 15 Quarterly Report
☐ October 15 Quarterly Report
☐ January 31 Year End Report

Monthly Report Due On:

☐ February 20	☐ June 20	☐ October 20
☐ March 20	☐ July 20	☐ November 20
☐ April 20	☐ August 20	☐ December 20
☐ May 20	☐ September 20	☐ January 31

☐ Twelfth day report preceding _____ (election type)
election on _____ in the State of _____

☐ Thirtieth day report following the General Election
on _____

IS THIS REPORT AN AMENDMENT ☒ YES ☐ NO

5. COVERING PERIOD	FROM 01/01/2000	THROUGH 03/31/2000

SUMMARY	6. CASH ON HAND AT BEGINNING OF THE REPORTING PERIOD	.....	0.00
	7. TOTAL RECEIPTS THIS PERIOD (from Line 22, Column A, Page 2)	.....	198735.00
	8. SUBTOTAL (Lines 6 and 7)	.....	198735.00
	9. TOTAL DISBURSEMENTS THIS PERIOD (from Line 30, Column A, Page 2)	.....	131927.05
	10. CASH ON HAND AT CLOSE OF REPORTING PERIOD (Subtract Line 9 from 8)	.....	66807.95
	11. DEBTS AND OBLIGATIONS OWED TO THE COMMITTEE (Itemize All on Schedule C-P or Schedule D-P)	.....	0.00
	12. DEBTS AND OBLIGATIONS OWED BY THE COMMITTEE (Itemize All on Schedule C-P or Schedule D-P)	.....	0.00
	13. EXPENDITURES SUBJECT TO LIMITATION	.....	0.00
NET YEAR-TO-DATE CONTRIBUTIONS AND EXPENDITURES	14. NET CONTRIBUTIONS (other than loans) (Subtract Line 28d, Column B from 17e, Column B, Page 2)	.....	198735.00
	15. NET OPERATING EXPENDITURES (Subtract Line 29e, Columnn B from 23, Column B, Page 2)	.....	131927.05

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
Ms. Theresa Amato

Date
04/15/2000

Signature of Treasurer

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.
ALL PREVIOUS VERSIONS OF FEC FORM 3P ARE OBSOLETE AND SHOULD NO LONGER BE USED

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

FEC FORM 3P
(5/95)