REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee
(Summary Page)

RECEIVED FEDERAL ELECTION COMMISSION

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

		COLUMN A This Period	COLUMN B Calendar Year-to-date
5.	Covering Period 07/02/98 through 09/30/98		
6.	Net Contributions (other than loans)		
	(a) Total Contributions(other than loans) (from Line 11(e))	$75213.24	$164579.82
	(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))	$75213.24	$164579.82
7.	Net Operating Expenditures		
	(a) Total Operating Expenditures (from Line 17)	$149810.46	$204869.72
	(b) Total Offsets to Operating Expenditures (from Line 14)	$448.86	$642.87
	(c) Net Operating Expenditures (Subtract Line 7(b) from 7(a))	$149361.60	$204226.85
8.	Cash on Hand at Close of Reporting Period (from Line 27)	$102229.39	
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: 10/14/98

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)