REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee
(Summary Page)

SECRETARY OF THE SENATE
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H.D.

USE FEC MAILING LABEL OR TYPE OR PRINT

1. NAME OF COMMITTEE (in full): Maria Cantwell for US Senate

ADDRESS (number and street): P.O. Box 12740 — [ ] Check if different than previously reported.

CITY, STATE and ZIP CODE: Seattle, WA 98111 — STATE/DISTRICT: Washington

2. FEC IDENTIFICATION NUMBER: C00349506

3. IS THIS REPORT AN AMENDMENT? [ ] YES [X] NO

4. TYPE OF REPORT

[X] 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)
[ ] 12-Day Pre-Election Report for the _____ (Type of Election) election on _____ in the State of _____
[ ] 30-Day Post-Election Report following the General Election on _____ in the State of _____
[ ] Termination Report

This report contains activity for: [X] Primary Election [ ] General Election [ ] Special Election [ ] Runoff Election

SUMMARY

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
5. Covering Period 01/01/00 through 03/31/00		
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(a))	$1,261,330.00	$1,261,330.00
(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))	$1,261,330.00	$1,261,330.00
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	$80,742.84	$80,742.84
(b) Total Offsets to Operating Expenditures (from Line 14)	$0.00	$0.00
(c) Net Operating Expenditures (subtract Line 7(b) from 7(a))	$80,742.84	$80,742.84
8. Cash on Hand at Close of Reporting Period (from Line 27)	$1,180,807.77	
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)	$7,325.87	

For further information contact:
Federal Election Commission
999 E Street, NW
Washington, DC 20463
Toll Free 800-424-9530
Local 202-694-1100

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: Keith Grinstein

Signature of Treasurer: [signature] — Date: 4/14/00

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

FEC FORM 3 (revised 4/87)