# REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee
(Summary Page)

RECEIVED
FEC MAIL ROOM
2000 OCT 26 P 12: 05

1. NAME OF COMMITTEE (In full)

Citizens for Tom Petri

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

P.O. Box 270

CITY, STATE and ZIP CODE STATE/DISTRICT

Fond du Lac, WI 549360270

2. FEC IDENTIFICATION NUMBER

084689

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 General (Type of Election) election on 11/07/2000 in the State of WI

☐ 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 10/01/2000 through 10/18/2000 | | |
| 6. | Net Contributions (other than loans) | | |
| | (a) Total Contributions(other than loans) (from Line 11(e)) | 47,810.00 | 340,198.50 |
| | (b) Total Contribution Refunds (From Line 20(d)) | | |
| | (c) Net Contributions (other than loans)(subtract Line 6(b) from 6(a)) | 47,810.00 | 340,198.50 |
| 7. | Net Operating Expenditures | | |
| | (a) Total Operating Expenditures (from Line 17) | 169,703.23 | 475,212.44 |
| | (b) Total Offsets to Operating Expenditures (from Line 14) | | |
| | (c) Net Operating Expenditures (Subtract Line 7(b) from 7(a)) | 169,703.23 | 475,212.44 |
| 8. | Cash on Hand at Close of Reporting Period (from Line 27) | 574,394.67 | |
| 9. | Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D) | | |
| 10. | Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D) | | |

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: Barbara Hatch Assistant Treasurer

Signature of Treasurer: Barbara Hatch

Date: 10-23-00

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)