REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee
(Summary Page)

RECEIVED
FEDERAL ELECTION
COMMISSION MAIL ROOM
2000 MAR 23 A 9:51

1. NAME OF COMMITTEE (in full)
Bob Brady for Congress

ADDRESS (number and street) ☐ Check if different than previously reported.
One Logan Square ,Suite 2929

CITY, STATE and ZIP CODE
Philadelphia, PA 19103

STATE/DISTRICT
P 1

2. FEC IDENTIFICATION NUMBER
C00333740

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 Primary (Type of Election) election on 04/04/2000 in the State of PA
☐ 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 01/01/2000 through 03/15/2000		
6. Net Contributions (other than loans)		
(a) Total Contributions(other than loans) (from Line 11(e))	$166275.00	$166275.00
(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))	$166275.00	$166275.00
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	$47130.95	$47130.95
(b) Total Offsets to Operating Expenditures (from Line 14)	$0.00	$0.00
(c) Net Operating Expenditures (Subtract Line 7(b) from 7(a))	$47130.95	$47130.95
8. Cash on Hand at Close of Reporting Period (from Line 27)	$329153.90	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	$5000.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	$3100.00	

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
Michael G. Horsey, CPA

Date 3/20/00

Signature of Treasurer
Michael Horsey

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)