24981800267

12/19/2004 20 : 17

FEC FORM 3

REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) — USE FEC MAILING LABEL OR TYPE OR PRINT ▼ — Example: If typing, type over the lines

FRIENDS OF AMATA

ADDRESS (number and street) ▼ POST OFFICE BOX 6171

Check if different than previously reported. (ACC)

PAGO PAGO | AS | 96799

2. FEC IDENTIFICATION NUMBER ▼ C00393041

CITY ▲ | STATE ▲ | ZIP CODE ▲

3. IS THIS REPORT X NEW (N) OR AMENDED (A)

STATE ▼ DISTRICT: AS | 00

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:

April 15 Quarterly Report (Q1)

July 15 Quarterly Report (Q2)

October 15 Quarterly Report (Q3)

January 31 Year-End Report (YE)

Termination Report (TER)

(b) 12-Day PRE-Election Report for the:

Primary (12P) General (12G) Runoff (12R)

Convention (12C) Special (12S)

Election on ____ in the State of ____

(c) 30-Day POST-Election Report for the:

X General (30G) Runoff (30R) Special (30S)

Election on 11 02 2004 in the State of AS

5. Covering Period 10 14 2004 through 11 22 2004

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: Mr. Michael Usle, Sr.

Signature of Treasurer: Electronically Filed by Mr. Michael Usle, Sr. Date 12 19 2004

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

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