REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee
(Summary Page)

RECEIVED
FEDERAL ELECTION
COMMISSION MAIL ROOM

Oct 25 9 37 AM '96

1. NAME OF COMMITTEE (in full): Friends of Bennie Thompson

ADDRESS (number and street): P.O. Box 100 ☐ Check if different than previously reported.

CITY, STATE and ZIP CODE: Bolton, MS 39041

STATE/DISTRICT: MS/2

2. FEC IDENTIFICATION NUMBER: C00279851

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 11/5/96 in the State of MS
☐ 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

5. Covering Period 10/01/96 through 10/15/96

	COLUMN A This Period	COLUMN B Calendar Year-to-date
6. Net Contributions (other than loans)		
(a) Total Contributions(other than loans) (from Line 11(e))	$29885.00	$240555.00
(b) Total Contribution Refunds (From Line 20(d))	$0.00	$5075.00
(c) Net Contributions (other than loans)(subtract Line 6(b) from 6(a))	$29885.00	$235480.00
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	$20041.79	$109183.96
(b) Total Offsets to Operating Expenditures (from Line 14)	$0.00	$1804.72
(c) Net Operating Expenditures (Subtract Line 7(b) from 7(a))	$20041.79	$107379.24
8. Cash on Hand at Close of Reporting Period (from Line 27)	$209673.83	
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: Reuben V. Anderson

Signature of Treasurer: Reuben V. Anderson by [illegible]

Date: 10/24/96

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)