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

Nita Lowey for Congress

ADDRESS (number and street) ▼ PO Box 271

Check if different than previously reported. (ACC)

White Plains | NY | 10605

2. **FEC IDENTIFICATION NUMBER** ▼ C00219881

CITY ▲ STATE ▲ ZIP CODE ▲

STATE ▼ DISTRICT NY 18

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

4. **TYPE OF REPORT** (Choose One)

(a) Quarterly Reports:

X April 15 Quaterly Report (Q1)

July 15 Quaterly Report (Q2)

October 15 Quaterly Report (Q3)

January 31 Year-End Report (YE)

July 31 Mid-Year Report (Non-election Year Only) (MY)

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:

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

Election on in the State of

5. Covering Period 01 01 2002 through 03 31 2002

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 Eidelman Aaron

Signature of Treasurer Electronically Filed by Eidelman Aaron Date 04 15 2002

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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(Revised 1/2001)