REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee
(Summary Page)

RECEIVED
FEC MAIL ROOM
2000 OCT 29 A 10: 12

USE FEC MAILING LABEL OR TYPE OR PRINT

1. NAME OF COMMITTEE (In full)
BOB STUMP ELECTION COMMITTEE

ADDRESS (number and street) ☐ Check if different than previously reported.
P. O. BOX 130

CITY, STATE and ZIP CODE: TOLLESON, AZ 85353
STATE/DISTRICT: AZ/03

2. FEC IDENTIFICATION NUMBER
C00109140

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)
- ☒ 12-Day Pre-Election Report for the General Election (Type of Election) election on 11/7/00 in the State of Arizona
- ☐ 30-Day Post-Election 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 10/1/00 through 10/18/00

	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))	$62,455.00	$293,692.00
(b) Total Contribution Refunds (from Line 20(d))	---	---
(c) Net Contributions (other than loans) (subtract Line 6(b) from 6(a))	$62,455.00	$293,692.00
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	$17,760.33	$ 97,287.86
(b) Total Offsets to Operating Expenditures (from Line 14)	---	---
(c) Net Operating Expenditures (subtract Line 7(b) from 7(a))	$17,760.33	$ 97,287.86
8. Cash on Hand at Close of Reporting Period (from Line 27)	$63,394.01	
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 contact:
Federal Election Commission
999 E Street, NW
Washington, DC 20463
Toll Free 800-424-9530
Local 202-694-1100

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: John D. Atkins

Signature of Treasurer: [signature]

Date: 10-23-00

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

FEC FORM 3
(revised 4/87)

FEBAN109