SECRETARY OF THE SENATE

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M.D.

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FEC FORM 3

REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee

1. NAME OF COMMITTEE (in full) — USE FEC MAILING LABEL OR TYPE OR PRINT ▼ — Example: If typing, type over the lines. — 12FE4M5

Friends of Hillary

ADDRESS (number and street) ▼ 509 2nd Street, NE

☐ Check if different than previously reported. (ACC)

Washington | DC | 20002

2. FEC IDENTIFICATION NUMBER ▼ — CITY ▲ — STATE ▲ — ZIP CODE ▲

C 00358895

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

STATE ▼ NY DISTRICT 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)
- ☒ 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 / 2001 through 06 / 30 / 2001

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: Shelly R. Moskwa, Assistant Treasurer

Signature of Treasurer: Shelly R Moskwa — Date 04 / 17 / 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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FEC FORM 3 (Revised 1/01)

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