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SECRETARY OF THE SENATE
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# FEC FORM 3X

# REPORT OF RECEIPTS AND DISBURSEMENTS

**For Other Than An Authorized Committee**

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

Democratic Senatorial Campaign Committee

ADDRESS (number and street) ▼ 430 South Capitol Street, SE

☐ Check if different than previously reported. (ACC)

Washington | DC | 20003 -

2. FEC IDENTIFICATION NUMBER ▼ C00042366

CITY ▲ STATE ▲ ZIPCODE ▲

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

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 Quarterly Report(YE)
- [ ] July 31 Mid-Year Report(Non-election Year Only) (MY)
- [ ] Termination Report (TER)

(b) Monthly Report Due On:

| | | | |
|---|---|---|---|
| [ ] Feb 20 (M2) | [ ] May 20 (M5) | [ ] Aug 20 (M8) | [ ] Nov 20 (M11) (Non Election Year Only) |
| [ ] Mar 20 (M3) | [ ] Jun 20 (M6) | [ ] Sep 20 (M9) | [ ] Dec 20 (M12) (Non-Election Year Only) |
| [ ] Apr 20 (M4) | [ ] Jul 20 (M7) | [X] Oct 20 (M10) | [ ] Jan 31 (M13) |

(c) 12-Day PRE-Election Report for the: [ ] Primary (12P) [ ] General (12G) [ ] Runoff (12R) [ ] Convention (12C) [ ] Special (12G)

Election on ____ in the State of ____

(d) 30-Day Post-Election Report for the: [ ] General (30G) [ ] Runoff (30R) [ ] Special (30S)

Election on ____ in the State of ____

5. Covering Period 09 01 2002 through 09 30 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 James M Jordan

Signature of Treasurer [signature] Date 10 20 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 3X (Revised 1/2001)