REPORT OF RECEIPTS AND DISBURSEMENTS

1 / 1531
02/20/2004 18 : 44

BY AN AUTHORIZED COMMITTEE OF A CANDIDATE FOR THE OFFICE OF PRESIDENT OR VICE-PRESIDENT

1. NAME OF COMMITTEE (In full)
Edwards For President

ADDRESS (number and street) ___ Check if different than previously reported
2300 Rexwoods Drive
Suite 300

2. IDENTIFICATION NUMBER
C00384073

CITY, STATE, and ZIP CODE
Raleigh NC 27606

3. IS THIS REPORT FOR :
[X] Primary [ ] General

4. TYPE OF REPORT (Check here [ ] if this is a Termination Report.)

[ ] April 15 Quarterly Report
[ ] July 15 Quarterly Report
[ ] October 15 Quarterly Report
[ ] January 31 Year End Report

Monthly Report Due On:

[X] February 20	[ ] June 20	[ ] October 20
[ ] March 20	[ ] July 20	[ ] November 20
[ ] April 20	[ ] August 20	[ ] December 20
[ ] May 20	[ ] September 20	[ ] January 31

___ Twelfth day report preceding
(Type of Election)
election on in the State of

___ Thirtieth day report following the General Election on

on _____

IS THIS REPORT AN AMENDMENT ___ YES [X] NO

5. COVERING PERIOD	FROM 01/01/2004	THROUGH 01/31/2004

SUMMARY	6. CASH ON HAND AT BEGINNING OF THE REPORTING PERIOD	275212.15
	7. TOTAL RECEIPTS THIS PERIOD (From Line 22, Column A, Page 2)	6126284.20
	8. SUBTOTAL (Lines 6 and 7)	6401496.35
	9. TOTAL DISBURSEMENTS THIS PERIOD (From Line 30, Column A, Page 2)	5900332.77
	10. CASH ON HAND AT CLOSE OF REPORTING PERIOD (Subtract Line 9 from 8)	501163.58
	11. DEBTS AND OBLIGATIONS OWED TO THE COMMITTEE (Itemize All on Schedule C-P or Schedule D-P)	0.00
	12. DEBTS AND OBLIGATIONS OWED BY THE COMMITTEE (Itemize All on Schedule C-P or Schedule D-P)	382666.79
	13. EXPENDITURES SUBJECT TO LIMITATION	12955333.54
NET ELECTION CYCLE-TO-DATE CONTRIBUTIONS AND EXPENDITURES	14. NET CONTRIBUTIONS (Other than Loans) (Subtract Line 28d, Column B from 17e, Column B, Page 2)	15927557.10
	15. NET OPERATING EXPENDITURES (Subtract Line 20a, Columnn B from 23, Column B, Page 2)	12548818.70

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
Julius Chambers

Date
02/20/2004

Signature of Treasurer

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.
All previous versions of FEC FORM 3P are obsolete and should no longer be used.

For further information contact: Federal Election Commission
999 E Street, N.W.
Washington, DC 20463
Toll Free 800-424-9530
Local 202-694-1100

FEC FORM 3P
(01/2001)