

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee
(Summary Page)

RECEIVED
FEC MAIL ROOM

2002 JAN -7 A 9 46

USE FEC MAILING LABEL
OR
TYPE OR PRINT

1. NAME OF COMMITTEE (In Full)
 C00073627 091900 P 284
 THOMAS F LEE
 AMERICAN FEDERATION OF MUSICIA
 NS - TEMP POLITICAL CONTRIBUT
 1501 BROADWAY SUITE 600
 PARAMOUNT BUILDING
 NEW YORK NY 10036

2. FEC IDENTIFICATION NUMBER

3. This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

4. TYPE OF REPORT

- (a) 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)
 Termination Report
- Monthly Report Due On:
 February 20 June 20 October 20
 March 20 July 20 November 20
 April 20 August 20 December 20
 May 20 September 20 January 31
- 12-Day Pre-Election Report for the GENERAL
 (Type of Election)
 election on 11.07.00 in the State of _____
- 30-Day Post-Election Report following the General Election
 on _____ in the State of _____

(b) Is this Report an Amendment? YES NO

SUMMARY	COLUMN A This Period	COLUMN B Calendar Year-to-Date
5. Covering Period <u>07-1-2000</u> through <u>07-15-2000</u>		
6. (a) Cash on Hand January 1, 19____		\$ 4,124.30
(b) Cash on Hand at Beginning of Reporting Period	\$ 1,823.55	
(c) Total Receipts (from Line 1B)	\$ 1,113.62	\$ 40,496.29
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	\$ 2,937.00	\$ 44,620.59
7. Total Disbursements (from Line 3C)	\$ 1,015.00	\$ 42,698.59
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	\$ 1,922.00	\$ 1,922.00
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	\$	For further information contact: Federal Election Commission 888 E Street, NW Washington, DC 20483 Toll Free 800-424-9530 Local 202-694-1100
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	\$	

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: THOMAS F. LEE

Signature of Treasurer: Thomas F. Lee Date: 11.04.02

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 9/83)

**DETAILED SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS
PAGE 2, FEC FORM 3X**

(revised 1/1/91)

NAME OF COMMITTEE
AFM - TEMPO POLITICAL CONTRIBUTIONS COMMITTEE

REPORT COVERING PERIOD
FROM **10.01.00** TO: **10.18.00**

		COLUMN A Total This Period	COLUMN B Calendar Year	
I. Receipts				
11.	Contributions (other than loans) From:			
a.	Individual/Persons Other Than Political Committees			11(a)(i)
i.	Itemized (use Schedule A)			11(a)(i)
ii.	Unitemized	1,113.62	40,496.29	11(a)(i)
iii.	Total (add i and ii) >	1,113.62	40,496.29	11(b)
b.	Political Party Committees			11(c)
c.	Other Political Committees (such as PACs)			11(d)
d.	Total Contributions (add a iii, b and c) >	1,113.62	40,496.29	12
12.	Transfers From Affiliated/Other Party Committees			13
13.	All Loans Received			14
14.	Loan Repayments Received			15
15.	Offsets To Operating Expenditures (Refunds, Rebates, etc.)			16
16.	Refunds of Contributions Made to Federal Candidates and Other Political Committees			17
17.	Other Federal Receipts (Dividends, Interest, etc.)			18
18.	Transfers from Nonfederal Account for Joint Activity			19
19.	Total Receipts (add 11d, 12, 13, 14, 15, 16, 17, and 18) >	1,113.62	40,496.29	20
20.	Total Federal Receipts (subtract line 16 from line 19) >			
II. Disbursements				
21.	Operating Expenditures:			21(a)(i)
a.	Shared Federal/Non-Federal Activity (from Schedule H4)			21(a)(i)
i.	Federal Share			21(b)
ii.	Non-Federal Share	-	4,916.60	21(c)
b.	Other Federal Operating Expenditures	-	-	22
c.	Total Operating Expenditures (add a i, a ii, and b) >			23
22.	Transfers to Affiliated/Other Party Committees			24
23.	Contributions to Federal Candidates/Committees and Other Political Committees	400.00	37,772.99	25
24.	Independent Expenditures (use Schedule E)			26
25.	Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F)			27
26.	Loan Repayments Made			28(a)
27.	Loans Made			28(b)
28.	Refunds of Contributions To:			28(c)
a.	Individuals/Persons Other Than Political Committees			28(d)
b.	Political Party Committees			29
c.	Other Political Committees (such as PACs)			30
d.	Total Contribution Refunds (add a, b and c) >	615.00	615.00	31
29.	Other Disbursements			
30.	Total Disbursements (add 21c, 22, 23, 24, 25, 26, 27, 28d, and 29) >	1,015.00	42,698.59	
31.	Total Federal Disbursements (subtract line 21 a ii from line 30) >	1,015.00	42,698.59	
III. Net Contributions/Operating Expenditures				
32.	Total Contributions (other than loans)(from line 11d)			32
33.	Total Contribution Refunds (from line 28d)			33
34.	Net Contributions (other than loans)(subtract line 33 from 32)			34
35.	Total Federal Operating Expenditures (add 21 a i and 21 b) >			35
36.	Offsets to Operating Expenditures (from line 15)			36
37.	Net Operating Expenditures (subtract line 36 from 35) >			37

SCHEDULE B

ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

PAGE 1 OF 1
FOR LINE NUMBER 29

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (in Full)

AFM - TEMPO POLITICAL CONTRIBUTIONS COMMITTEE

C00073627

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
REP. MICHAEL CAPRIGLIONE CAPRIGLIONE FOR CONGRESS COMM. P.O. BOX 440305 SCITOVILLE MA 02144	HOUSE MA-8 Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	10.11.00	\$ 100.00
REP. DENNIS KUCIENIUK ELECT KUCIENIUK TO CONGRESS COMM. 3884 W. HIGHLAND ST. CLEVELAND OH 43214	HOUSE OH-10 Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	10.11.00	\$ 100.00
REP. ROBERT FILLER REP. FILLER FOR CONGRESS P.O. BOX 127868 SAN DIEGO CA 92133	HOUSE - CA-50 Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	10.11.00	\$ 100.00
REP. JIM HULSE HULSE FOR CONGRESS P.O. BOX 33027 SEATTLE WA 98133	HOUSE WA 1 Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	10.11.00	\$ 100.00
E. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
F. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
G. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
I. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		

SUBTOTAL of Disbursements This Page (optional)

\$ 400.00

TOTAL This Period (last page this line number only)

\$ 400.00

SCHEDULE B

ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of this Detailed Summary Page

PAGE 1 OF 1
FOR LINE NUMBER 29

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NAME OF COMMITTEE (In Full)

AFM - TEMPO POLITICAL CONTRIBUTIONS COMMITTEE

C00073627

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
MISCELLANEOUS TRADING AGENCY 13111 FARMHAR BLVD. NW # 306 WASHINGTON DC 20007	DNC FUNDRAISING Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) IN-KIND	10.11.00	\$ 615.00
B. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
C. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
D. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
E. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
F. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
G. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
I. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period

SUBTOTAL of Disbursements This Page (optional)

\$ 615.00

TOTAL This Period (last page this line number only)

\$ 615.00

Federal Election Commission

**ENVELOPE REPLACEMENT PAGE
FOR INCOMING DOCUMENTS**

The Commission has added this page to the end of this filing to indicate how it was received.

<input checked="" type="checkbox"/> Hand Delivered	Date of Receipt <i>1-7-02</i>
<input type="checkbox"/> First Class Mail	POSTMARKED
<input type="checkbox"/> Registered/Certified Mail	POSTMARKED (R/C)
<input type="checkbox"/> No Postmark	
<input type="checkbox"/> Postmark Illegible	
<input type="checkbox"/> Received from the House office of Records and Registration	Date of Receipt
<input type="checkbox"/> Received from the Senate Office of Public Records	Date of Receipt
<input type="checkbox"/> Other (Specify):	Postmarked and/or Date of Receipt
<input type="checkbox"/> Electronic Filing	
<i>DMW</i> PREPARER	<i>1-7-02</i> DATE PREPARED