02/22/2002 13 : 20

FEC FORM 3

REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee

Office Use Only

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

CLAY JR. FOR CONGRESS

ADDRESS (number and street) ▼ 625 N. EUCLID AVE

Check if different than previously reported. (ACC) SUITE 300

ST. LOUIS | MO | 63108

2. **FEC IDENTIFICATION NUMBER** ▼ C00346080

CITY ▲ STATE ▲ ZIP CODE ▲

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

STATE ▼ DISTRICT: MO | 01

4. **TYPE OF REPORT** (Choose One)

(a) Quarterly Reports:

April 15 Quarterly Report (Q1)

July 15 Quarterly Report (Q2)

October 15 Quarterly Report (Q3)

X 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 07 01 2001 through 12 31 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 AARON JACKSON

Signature of Treasurer Electronically Filed by AARON JACKSON Date 01 31 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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(Revised 1/2001)