REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee
(Summary Page)

RECEIVED
FEC MAIL ROOM
2001 FEB -6 A 10: 50

1. NAME OF COMMITTEE (in full)
DeFazio for Congress

ADDRESS (number and street) ☐ Check if different than previously reported.
PO Box 1316

CITY, STATE and ZIP CODE
Springfield, OR 97477

STATE/DISTRICT
OR 4

2. FEC IDENTIFICATION NUMBER
122998

3. IS THIS REPORT AN AMENDMENT?
☐ YES ☒ NO

4. TYPE OF REPORT

☐ 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)

☐ 12-Day Pre-Election Report for the _____ (Type of Election) election on _____ in the State of _____

☐ 30-Day Post-Election Report following the General Election on _____ in the State of _____

☐ Termination Report

This report contains activity for ☐ Primary Election ☒ General Election ☐ Special Election ☐ Runoff Election

SUMMARY

5. Covering Period 11/28/2000 through 12/31/2000	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e))	$ 2,221.00	$ 257,467.40
(b) Total Contribution Refunds (from Line 20(d))	$ 0.00	$ 0.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from 6(a))	$ 2,221.00	$ 257,467.40
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	$ 10,369.13	$ 192,700.21
(b) Total Offsets to Operating Expenditures (from Line 14)	$ 136.42	$ 3,485.82
(c) Net Operating Expenditures (subtract Line 7(b) from 7(a))	$ 10,232.71	$ 189,214.39
8. Cash on Hand at Close of Reporting Period (from Line 27)	$ 216,768.04	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	$ 0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	$ 0.00	

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

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
Robert Ackerman

Signature of Treasurer
[signature]

Date 1-26-01

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

FEC FORM 3
(revised 4/87)

FEBAND7.PDF