REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee
(Summary Page)

RECEIVED
FEC MAIL ROOM
2001 JUN 22 A 9:47

1. NAME OF COMMITTEE (in full)

Friends of Corrine Brown

ADDRESS (number and street) [ ] Check if different than previously reported.

3109 River Bend Court, D-102

CITY, STATE and ZIP CODE: Laurel, MD 20724

STATE/DISTRICT: FL 03

2. FEC IDENTIFICATION NUMBER: C00272732

3. IS THIS REPORT AN AMENDMENT? [X] YES [ ] NO

4. TYPE OF REPORT

- [ ] April 15 Quarterly Report
- [ ] July 15 Quarterly Report
- [ ] October 15 Quarterly Report
- [ ] January 31 Year End Report
- [X] 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 [X] Primary Election [X] General Election [ ] Special Election [ ] Runoff Election

SUMMARY

		COLUMN A This Period	COLUMN B Calendar Year-to-date
5.	Covering Period 01/01/1999 through 06/30/1999		
6.	Net Contributions (other than loans)		
	(a) Total Contributions(other than loans) (from Line 11(a))	$69,025.00	$69,025.00
	(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))	$69,025.00	$69,025.00
7.	Net Operating Expenditures		
	(a) Total Operating Expenditures (from Line 17)	$44,852.13	$44,852.13
	(b) Total Offsets to Operating Expenditures (from Line 14)	$569.13	$569.13
	(c) Net Operating Expenditures (Subtract Line 7(b) from 7(a))	$44,283.00	$44,283.00
8.	Cash on Hand at Close of Reporting Period (from Line 27)	$85,257.71	
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)	$15,279.00	

For further information:
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: Gloria Spinnes

Signature of Treasurer: Gloria Spinnes

Date: 6/23/01

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

FEC FORM 3
(Revised 4/87)