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

Friends of Carolyn McCarthy

ADDRESS (number and street) ▼ 151 Linden Road

Check if different than previously reported. (ACC)

Mineola | NY | 11501

2. **FEC IDENTIFICATION NUMBER** ▼ C00318931

CITY ▲ | STATE ▲ | ZIP CODE ▲

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

STATE ▼ NY | DISTRICT 04

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

(a) Quarterly Reports:

April 15 Quarterly Report (Q1)

July 15 Quarterly Report (Q2)

October 15 Quarterly Report (Q3)

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:

X General (30G) Runoff (30R) Special (30S)

Election on 11 05 2002 in the State of NY

5. Covering Period 10 17 2002 through 11 25 2002

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 Margaret May

Signature of Treasurer Electronically Filed by Margaret May Date 12 05 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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