REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee
(Summary Page)

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USE FEC MAILING LABEL OR TYPE OR PRINT

1. NAME OF COMMITTEE (in full): Congressional Majority Committee

ADDRESS (number and street): 555 13th St. #500 West ☐ Check if different than previously reported

CITY, STATE and ZIP CODE: Washington D.C. 20004-1105

2. FEC IDENTIFICATION NUMBER: C00117721

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 _____ (Type of Election) election on _____ in the State of _____

☒ 30-Day Post-Election Report following the General Election on Nov 7 in the State of CA.

(b) Is this Report an Amendment? ☐ YES ☒ NO

SUMMARY	COLUMN A This Period	COLUMN B Calendar Year-to-Date
5. Covering Period 10-1-00 through 11-27-00		
6. (a) Cash on Hand January 1, 19___		$99367.63
(b) Cash on Hand at Beginning of Reporting Period	$71281.78	
(c) Total Receipts (from Line 19)	$27300.00	$204727.76
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	$98581.78	$304095.39
7. Total Disbursements (from Line 30)	$66500.12	$272013.73
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	$32081.66	$32081.66
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	$1000.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	$	

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: LaDonna J. Dodge

Signature of Treasurer: [signature] Date: 12-6-00

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 3X
(revised 9/93)

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