For An Authorized Committee
(Summary Page)

1. NAME OF COMMITTEE (in full)

Friends of Jim Maloney

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

20 E. Main Street, Suite 235

CITY, STATE and ZIP CODE — STATE/DISTRICT

Waterbury, CT 06702 — CT 05

RECEIVED
FEDERAL ELECTION
COMMISSION MAIL ROOM

2. FEC IDENTIFICATION NUMBER
C00327924

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)

☐ Twelfth day report preceding _____ (Type of Election) election on _____ in the State of _____
☐ Thirtieth day report following the General Election on _____ in the State of _____
☐ Termination Report

This Report Contains Activity For ☒ Primary Election 2000* ☒ General Election 2000 ☒ Convention 2000 ☒ General, '94, '96, '98

* for the pending redesignations

SUMMARY

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
5. Covering Period 1/1/99 through 6/30/99		
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e))	$261,523.48	$261,523.48
(b) Total Contribution Refunds (from Line20(d))	$1,500.00	$1,500.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a))	$260,023.48	$260,023.48
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	$72,367.12	$72,367.12
(b) Total Offsets to Operating Expenditures (from Line 14)	$1,940.53	$1,940.53
(c) Net Operating Expenditures (subtract Line 7(b) from 7(a))	$70,426.59	$70,426.59
8. Cash on Hand at Close of Reporting Period (from Line 27)	$195,434.28	
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)	55,199.27	

For further information contact:
Federal Election Commission
999 E Street, NW
Washington, DC 20463
Toll Free 800-424-9530
Local 202-219-3420

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: Patricia Draper, Treasurer

Signature of Treasurer: Patricia Draper — Date: 7/30/99

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

FEC FORM 3
(revised 4/87)