

# REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee  
(Summary Page)

USE FEC MAILING LABEL OR PRINT TYPE OR PRINT

1. NAME OF COMMITTEE (in full)  
 C00005975                      030800                      N  
 DAN BROOK  
 FIRST CONGRESSIONAL DISTRICT R  
 REPUBLICAN COMMITTEE #  
 407 CAMPUS AVE  
 CHESTERTOWN                      ND 21420

RECEIVED  
FEDERAL ELECTION  
COMMISSION MAIL ROOM

2000 APR 17 A 11:50

2. FEC IDENTIFICATION NUMBER  
C-00005975  
 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 \_\_\_\_\_ in the State of \_\_\_\_\_
- (b) Is this Report an Amendment?     YES     NO

SUMMARY		COLUMN A This Period	COLUMN B Calendar Year-to-Date
5. Covering Period	_____ through _____		
6. (a)	Cash on Hand January 1, 2000		\$ 487.71
(b)	Cash on Hand at Beginning of Reporting Period	\$ 487.71	
(c)	Total Receipts (from Line 19)	\$ 250.00	\$ 250.00
(d)	Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	\$ 737.71	\$ 737.71
7.	Total Disbursements (from Line 30)	\$ 166.50	\$ 166.50
8.	Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	\$ 571.21	\$ 571.21
9.	Debts and Obligations Owed TO the Committee (itemize all on Schedule C and/or Schedule D)	\$ 0	For further information contact: Federal Election Commission 999 E Street, NW Washington, DC 20463 Toll Free 800-424-9530 Local 202-694-1100
10.	Debts and Obligations Owed BY the Committee (itemize all on Schedule C and/or Schedule D)	\$ 0	

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: DANIEL H. BROOK  
 Signature of Treasurer: [Handwritten Signature]                      Date: 4/15/00

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §497g.

FEC FORM 3X  
(revised 9/93)

**DETAILED SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS  
PAGE 2, FEC FORM 3X**

(revised 1/1/81)

NAME OF COMMITTEE <i>First Congressional District Republican Comm.</i>		REPORT COVERING PERIOD		
		FROM <i>1/1/00</i>	TO: <i>3/31/00</i>	
		COLUMN A Total This Period	COLUMN B Calendar Year	
<b>I. Receipts</b>				
11.	Contributions (other than loans) From:			
a.	Individuals/Persons Other Than Political Committees			11(a)(1)
i.	Itemized (use Schedule A)			11(a)(2)
ii.	Unitemized			11(a)(3)
iii.	Total (add i and ii) >			11(b)
b.	Political Party Committees	<i>50.00</i>	<i>50.00</i>	11(c)
c.	Other Political Committees (such as PACs)			11(d)
d.	Total Contributions (add a iii, b and c) >	<i>50.00</i>	<i>50.00</i>	12
12.	Transfers From Affiliated/Other Party Committees			13
13.	All Loans Received			14
14.	Loan Repayments Received			15
15.	Offsets To Operating Expenditures (Refunds, Rebates, etc.)			16
16.	Refunds of Contributions Made to Federal Candidates and Other Political Committees			17
17.	Other Federal Receipts (Dividends, Interest, etc.)			18
18.	Transfers from Nonfederal Account for Joint Activity			19
19.	Total Receipts (add 11d, 12, 13, 14, 15, 16, 17, and 18) >	<i>50.00</i>	<i>50.00</i>	20
20.	Total Federal Receipts (subtract line 16 from line 19) >	<i>50.00</i>	<i>50.00</i>	
<b>II. Disbursements</b>				
21.	Operating Expenditures:			
a.	Shared Federal/Non-Federal Activity (from Schedule H4)			21(a)(1)
i.	Federal Share			21(a)(2)
ii.	Non-Federal Share			21(b)
b.	Other Federal Operating Expenditures			21(c)
c.	Total Operating Expenditures (add a i, a ii, and b) >			22
22.	Transfers to Affiliated/Other Party Committees			23
23.	Contributions to Federal Candidates/Committees and Other Political Committees			24
24.	Independent Expenditures (use Schedule E)			25
25.	Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F)			26
26.	Loan Repayments Made			27
27.	Loans Made			
28.	Refunds of Contributions To:			
a.	Individuals/Persons Other Than Political Committees			28(a)
b.	Political Party Committees			28(b)
c.	Other Political Committees (such as PACs)			28(c)
d.	Total Contribution Refunds (add a, b and c) >			29
29.	Other Disbursements	<i>166.50</i>	<i>166.50</i>	30
30.	Total Disbursements (add 21c, 22, 23, 24, 25, 26, 27, 28d, and 29) >	<i>166.50</i>	<i>166.50</i>	31
31.	Total Federal Disbursements (subtract line 21 a ii from line 30) >	<i>166.50</i>	<i>166.50</i>	
<b>III. Net Contributions/Operating Expenditures</b>				
32.	Total Contributions (other than loans)(from line 11d)	<i>50.00</i>	<i>50.00</i>	32
33.	Total Contribution Refunds (from line 28d)	<i>0</i>	<i>0</i>	33
34.	Net Contributions (other than loans)(subtract line 33 from 32)	<i>50.00</i>	<i>50.00</i>	34
35.	Total Federal Operating Expenditures (add 21 a i and 21 b) >	<i>0</i>	<i>0</i>	35
36.	Offsets to Operating Expenditures (from line 15)	<i>0</i>	<i>0</i>	36
37.	Net Operating Expenditures (subtract line 36 from 35) >	<i>0</i>	<i>0</i>	37

SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page

PAGE 1 OF 1  
FOR LINE NUMBER 116

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

First Congressional District Republican Committee C-00005975 (State of MD)

A. Full Name, Mailing Address and ZIP Code Kent County Republican Central Comm 407 CAMPUS AVE Chester Town, MD 21620	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation	3/12/00	\$50.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Annual Contribution	Aggregate Year-to-Date > \$		

B. Full Name, Mailing Address and ZIP Code Anne Arundel County Republican 107 Boyd Dr. Central Comm Annapolis MD 21403	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation	1/13/00	200.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Contributions	Aggregate Year-to-Date > \$		

C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$		

D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$		

E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$		

F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$		

G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$		

SUBTOTAL of Receipts This Page (optional)	\$250.00
TOTAL This Period (last page this line number only)	250.00

**SCHEDULE B**

**ITEMIZED DISBURSEMENTS**

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full) *First Congressional District Republican Committee* C-00005975 (State of MD)

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
<i>US Postmaster Chester town MD 21620</i>	<i>50 Postage stamps</i> Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) <i>General mail</i>	<i>1/13/00</i>	<i>\$16.50</i>
<i>Annie's Paramount Steak House 500 N. Kent Narrows Way Grassville, MD 21638</i>	<i>Quarterly Meeting room rental</i> Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) <i>Party Meeting</i>	<i>3/11/00</i>	<i>150.00</i>
C. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
D. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
E. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
F. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
G. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
I. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period

SUBTOTAL of Disbursements This Page (optional) .....	<i>\$166.50</i>
TOTAL This Period (last page this line number only) .....	<i>\$166.50</i>

