REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee
(Summary Page)

RECEIVED
FEC MAIL ROOM
2000 OCT 26 P 2:56

USE FEC MAILING LABEL OR TYPE OR PRINT

1. NAME OF COMMITTEE (in full)
Committee to Elect Gary Ackerman

ADDRESS (number and street) ☐ Check if different than previously reported.
3000 Marcus Ave., Suite 1E9

CITY, STATE and ZIP CODE: Lake Success NY 11042
STATE/DISTRICT: NY / 05

2. FEC IDENTIFICATION NUMBER
C00165241

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)

☒ 12-Day Pre-Election Report for the general (Type of Election) election on 11/7/00 in the State of NY
☐ 30-Day Post-Election Report following the General Election on _____ in the State of _____
☐ Termination Report

This report contains activity for ☒ Primary Election ☒ General Election ☐ Special Election ☐ Runoff Election

SUMMARY

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
5. Covering Period 10/1/00 through 10/18/00		
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(a))	$40,741.00	$382,021.35
(b) Total Contribution Refunds (from Line 20(d))	$500.00	$8,000.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from 6(a))	$40,241.00	$374,021.35
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	$30,320.28	$204,767.16
(b) Total Offsets to Operating Expenditures (from Line 14)	$0.00	$2,096.70
(c) Net Operating Expenditures (subtract Line 7(b) from 7(a))	$30,320.28	$202,670.46
8. Cash on Hand at Close of Reporting Period (from Line 27)	$742,317.90	
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)	$10,438.05	

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: Robert Barnett

Signature of Treasurer: Robert Barnett

Date: 10/25/00

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 3
(revised 4/87)

FEBAMA/PDF