22037841606

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

RECEIVED FEDERAL OPERATIONS CENTER 2002 NOV 06 P 2:19

1. NAME OF COMMITTEE (In full) — USE FEC MAILING LABEL OR TYPE OR PRINT ▼ — Example: If typing, type over the lines. 12PE4M5

MULTIPLAN, INC.

ADDRESS (number and street) ▼ 115 FIFTH AVENUE

☐ Check if different than previously reported. (ACC) 7TH FLOOR

CITY ▲ NEW YORK STATE ▲ NY ZIP CODE ▲ 10003-1004

2. FEC IDENTIFICATION NUMBER ▼ C00321810

3. IS THIS REPORT ☒ NEW (N) OR ☐ AMENDED (A)

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) Monthly Report Due On:

- ☐ Feb 20 (M2)
- ☐ Mar 20 (M3)
- ☐ Apr 20 (M4)
- ☐ May 20 (M5)
- ☐ Jun 20 (M6)
- ☐ Jul 20 (M7)
- ☐ Aug 20 (M8)
- ☐ Sep 20 (M9)
- ☐ Oct 20 (M10)
- ☐ Nov 20 (M11) (Non-Election Year Only)
- ☐ Dec 20 (M12) (Non-Election Year Only)
- ☐ Jan 31 (YE)

(c) 12-Day PRE-Election Report for the: ☐ Primary (12P) ☐ General (12G) ☐ Runoff (12R) ☐ Convention (12C) ☐ Special (12S)

Election on ___ / ___ / ___ In the State of ___

(d) 30-Day POST-Election Report for the: ☐ General (30G) ☐ Runoff (30R) ☐ Special (30S)

Election on ___ / ___ / ___ In the State of ___

5. Covering Period 07 / 01 / 2002 through 09 / 30 / 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 HARVEY SIGELBAUM

Signature of Treasurer [signature] Date 11 / 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.

Office Use Only							

FEC FORM 3X (Revised 1/01)

FE3MN148

22037841607

SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Revised 1/01)

Write or Type Committee Name

MULTIPLAN, INC. PAC

Report Covering the Period: From: 07 / 01 / 2002 To: 09 / 30 / 2002

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1. 2002		2,463.05
(b) Cash on Hand at Beginning of Reporting Period	1,923.05	
(c) Total Receipts (from Line 19)	2,260.00	5,470.00
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	4,183.05	7,933.05
7. Total Disbursements (from Line 30)	2,000.00	5,750.00
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	2,183.05	2,183.05
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	0	

☐ This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission
999 E Street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

22037841608

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3X (Revised 1/01)

Write or Type Committee Name

MULTIPLAN, INC. PAC

Report Covering the Period: From: 07 01 2002 To: 09 30 2002

1. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A)	2260.00	
(ii) Unitemized	0	
(iii) TOTAL (add Lines 11(a)(i) and (ii)) ▶	2260.00	3470.00
(b) Political Party Committees	0	0
(c) Other Political Committees (such as PACs)	0	0
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 32, page 4) ▶	2260.00	3470.00
12. Transfers From Affiliated/Other Party Committees	0	0
13. All Loans Received	0	0
14. Loan Repayments Received	0	0
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 36, page 4)	0	0
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees	0	2000.00
17. Other Federal Receipts (Dividends, Interest, etc.)	0	0
18. Transfers from Nonfederal Account for Joint Activity	0	0
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18) ▶	2260.00	5470.00
20. Total Federal Receipts (subtract Line 18 from Line 19) ▶	2260.00	5470.00

FE2AN042

DETAILED SUMMARY PAGE
of Disbursements

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0	0
(ii) Non-Federal Share	0	0
(b) Other Federal Operating Expenditures	0	0
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) ▶	0	0
22. Transfers to Affiliated/Other Party Committees	0	0
23. Contributions to Federal Candidates/Committees and Other Political Committees	2 000 00	5 500 00
24. Independent Expenditures (use Schedule E)	0	0
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. §441a(d)) (use Schedule F)	0	0
26. Loan Repayments Made	0	0
27. Loans Made	0	0
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0	0
(b) Political Party Committees	0	0
(c) Other Political Committees (such as PACs)	0	0
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)) ▶	0	0
29. Other Disbursements	0	250 00
30. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), and 29) ▶	2 000 00	5 750 00
31. Total Federal Disbursements (subtract Line 21(a)(ii) from Line 30) ▶	2 000 00	5 750 00

III. Net Contributions/Operating Expenditures		
32. Total Contributions (other than loans) (from Line 11(d), page 3)	2 260 00	3 470 00
33. Total Contribution Refunds (from Line 28(d))	0	0
34. Net Contributions (other than loans) (subtract Line 33 from Line 32)	0	0
35. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) ▶	2 260 00	3 470 00
36. Offsets to Operating Expenditures (from Line 15, page 3)	0	0
37. Net Operating Expenditures (subtract Line 36 from Line 35) ▶	0	0

22037841610

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: (check only one) [X] 11a [ ] 11b [ ] 11c [ ] 12 [ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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 committees.

NAME OF COMMITTEE (In Full)
MULTIPLAN, INC., PAC

A. Full Name (Last, First, Middle Initial): FERRANTE, MICHAEL
Mailing Address: 115 FIFTH AVENUE
City: NEW YORK State: NY Zip Code: 10003-1004
FEC ID number of contributing federal political committee: C
Name of Employer: MULTIPLAN, INC. Occupation: EVP
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 200.00
Date of Receipt: PAYROLL DEDUCTION
Amount of Each Receipt this Period: 50.00
$20 8/1
$30 8/29

B. Full Name (Last, First, Middle Initial): JANOVITZ, LEE
Mailing Address: 115 FIFTH AVENUE
City: NEW YORK State: NY Zip Code: 10003-1004
FEC ID number of contributing federal political committee: C
Name of Employer: MULTIPLAN, INC. Occupation: VP
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 360.00
Date of Receipt: PAYROLL DEDUCTION
Amount of Each Receipt this Period: 60.00
$40 8/1
$20 8/29

C. Full Name (Last, First, Middle Initial): LOVASTIK, MICHAEL
Mailing Address: 115 FIFTH AVENUE
City: NEW YORK State: NY Zip Code: 10003-1004
FEC ID number of contributing federal political committee: C
Name of Employer: MULTIPLAN, INC. Occupation: VP
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 200.00
Date of Receipt: PAYROLL DEDUCTION
Amount of Each Receipt this Period: 50.00
$20 8/1
$30 8/29

SUBTOTAL of Receipts This Page (optional) ▶ 160.00

TOTAL This Period (last page this line number only) ▶

FCSA4042

22037841611

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: (check only one) PAGE 2 OF 3

[X] 11a [ ] 11b [ ] 11c [ ] 12 [ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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NAME OF COMMITTEE (In Full)
MULTIPLAN, INC. PAC

A. Full Name (Last, First, Middle Initial)
MORAN, MARY

Mailing Address
115 FIFTH AVENUE

City: NEW YORK State: NY Zip Code: 10003-1004

FEC ID number of contributing federal political committee: C

Name of Employer: MULTIPLAN, INC.

Occupation: MARKET RESEARCHER

Receipt For: [ ] Primary [ ] General [ ] Other (specify)

Aggregate Year-to-Date: 100.00

Date of Receipt: PAYROLL DEDUCTION

Amount of Each Receipt this Period: 250.00

$10 8/1
$15 8/29

B. Full Name (Last, First, Middle Initial)
ROWE, ANDREA

Mailing Address
115 FIFTH AVENUE

City: NEW YORK State: NY Zip Code: 10003-1004

FEC ID number of contributing federal political committee: C

Name of Employer: MULTIPLAN, INC.

Occupation: SR. VP.

Receipt For: [ ] Primary [ ] General [ ] Other (specify)

Aggregate Year-to-Date: 110.00

Date of Receipt: PAYROLL DEDUCTION

Amount of Each Receipt this Period: 250.00

$10 8/1
$15 8/29

C. Full Name (Last, First, Middle Initial)
RUVO, MATT

Mailing Address
115 FIFTH AVENUE

City: NEW YORK State: NY Zip Code: 10003-1004

FEC ID number of contributing federal political committee: C

Name of Employer: MULTIPLAN, INC.

Occupation: VP

Receipt For: [ ] Primary [ ] General [ ] Other (specify)

Aggregate Year-to-Date: 200.00

Date of Receipt: PAYROLL DEDUCTION

Amount of Each Receipt this Period: 50.00

$20 8/1
$30 8/29

SUBTOTAL of Receipts This Page (optional) ▶ 100.00

TOTAL This Period (last page this line number only) ▶

22037841612

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: (check only one) PAGE 3 OF 3

[X] 11a [ ] 11b [ ] 11c [ ] 12
[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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NAME OF COMMITTEE (In Full)
MULTIPLAN, INC. PAC

A.

Full Name (Last, First, Middle Initial)
RUBIN, DONALD

Mailing Address
115 FIFTH AVENUE

City: NEW YORK
State: NY
Zip Code: 10003-1004

FEC ID number of contributing federal political committee: C

Name of Employer: MULTIPLAN, INC.
Occupation:

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 2,000.00

Date of Receipt: 09 / 05 / 2002

Amount of Each Receipt this Period: 2,000.00

B.

Full Name (Last, First, Middle Initial)

Mailing Address

City
State
Zip Code

FEC ID number of contributing federal political committee: C

Name of Employer
Occupation

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

Amount of Each Receipt this Period

C.

Full Name (Last, First, Middle Initial)

Mailing Address

City
State
Zip Code

FEC ID number of contributing federal political committee: C

Name of Employer
Occupation

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional) ▶ 2,000.00

TOTAL This Period (last page this line number only) ▶

FEC Schedule A (Form 3X) (Revised 1/01)

FE2AN042

22037841613

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: (check only one) [X] 11a [ ] 11b [ ] 11c [ ] 12 [ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

PAGE 1 OF 2

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NAME OF COMMITTEE (In Full)
MULTIPLAN, INC. PAC

A. Full Name (Last, First, Middle Initial): FERRANTE, MICHAEL
Mailing Address: 115 FIFTH AVENUE
City: NEW YORK State: NY Zip Code: 10003-1004
FEC ID number of contributing federal political committee: C
Name of Employer: MULTIPLAN, INC.
Occupation: EVP
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 150.00
Date of Receipt: PAYROLL DEDUCTION
Amount of Each Receipt this Period: 80.00
$20 4/4, 5/2, 6/6, 6/28

B. Full Name (Last, First, Middle Initial): JARAVITZ, LEE
Mailing Address: 115 FIFTH AVENUE
City: NEW YORK State: NY Zip Code: 10003-1004
FEC ID number of contributing federal political committee: C
Name of Employer: MULTIPLAN, INC.
Occupation: VP
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 300.00
Date of Receipt: PAYROLL DEDUCTION
Amount of Each Receipt this Period: 160.00
$40 4/4, 5/2, 6/6, 6/28

C. Full Name (Last, First, Middle Initial): LOVASTIK, MICHAEL
Mailing Address: 115 FIFTH AVENUE
City: NEW YORK State: NY Zip Code: 10003-1004
FEC ID number of contributing federal political committee: C
Name of Employer: MULTIPLAN, INC.
Occupation: VP
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 150.00
Date of Receipt: PAYROLL DEDUCTION
Amount of Each Receipt this Period: 80.00
$20 4/4, 5/2, 6/6, 6/28

SUBTOTAL of Receipts This Page (optional) ▶ 320.00

TOTAL This Period (last page this line number only) ▶

22037841614

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: (check only one) PAGE 2 OF 2
[X] 11a [ ] 11b [ ] 11c [ ] 12 [ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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NAME OF COMMITTEE (in Full)
MULTIPLAN, INC. PAC

A. Full Name (Last, First, Middle Initial): MORAN, MARY
Mailing Address: 155 FIFTH AVENUE
City: NEW YORK State: NY Zip Code: 10003-1004
FEC ID number of contributing federal political committee: C
Name of Employer: MULTIPLAN, INC.
Occupation: MARKET RESEARCHER
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 75.00
Date of Receipt: PAYROLL DEDUCTION
Amount of Each Receipt this Period: 40.00
$10 4/4, 5/2, 6/6, 6/28

B. Full Name (Last, First, Middle Initial): ROWE, ANDREA
Mailing Address: 115 FIFTH AVENUE
City: NEW YORK State: NY Zip Code: 10003-1004
FEC ID number of contributing federal political committee: C
Name of Employer: MULTIPLAN, INC.
Occupation: SR. VP
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 85.00
Date of Receipt: PAYROLL DEDUCTION
Amount of Each Receipt this Period: 50.00
$10 4/4, 6/6, 6/28
$20 5/2

C. Full Name (Last, First, Middle Initial): RUVO, MATT
Mailing Address: 115 FIFTH AVENUE
City: NEW YORK State: NY Zip Code: 10003-1004
FEC ID number of contributing federal political committee: C
Name of Employer: MULTIPLAN, INC.
Occupation: VP
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 150.00
Date of Receipt: PAYROLL DEDUCTION
Amount of Each Receipt this Period: 80.00
$20 4/4, 5/2, 6/6, 6/28

SUBTOTAL of Receipts This Page (optional) ▶ 170.00

TOTAL This Period (last page this line number only) ▶

FERANDO

22037841615

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)
☐ 21b ☐ 22 ☒ 23 ☐ 24 ☐ 25
☐ 26 ☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29

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NAME OF COMMITTEE (In Full)
MULTIPLAN, INC. PAC

A.
Full Name (Last, First, Middle Initial): THE REED COMMITTEE
Mailing Address: P.O. BOX 8628
City: CRANSTON State: RI Zip Code: 02920
Purpose of Disbursement: POLITICAL CONTRIBUTION
Candidate Name: JACK REED
Office Sought: ☐ House ☒ Senate ☐ President
State: RI District:
Disbursement For: ☐ Primary ☒ General ☐ Other (specify)
Category/Type:
Date of Disbursement: 03 / 20 / 2002
Amount of Each Disbursement this Period: 500.00

B.
Full Name (Last, First, Middle Initial):
Mailing Address:
City: State: Zip Code:
Purpose of Disbursement:
Candidate Name:
Office Sought: ☐ House ☐ Senate ☐ President
State: District:
Disbursement For: ☐ Primary ☐ General ☐ Other (specify)
Category/Type:
Date of Disbursement: / /
Amount of Each Disbursement this Period:

C.
Full Name (Last, First, Middle Initial):
Mailing Address:
City: State: Zip Code:
Purpose of Disbursement:
Candidate Name:
Office Sought: ☐ House ☐ Senate ☐ President
State: District:
Disbursement For: ☐ Primary ☐ General ☐ Other (specify)
Category/Type:
Date of Disbursement: / /
Amount of Each Disbursement this Period:

SUBTOTAL of Disbursements This Page (optional) ▶ 500.00

TOTAL This Period (last page this line number only) ▶

22037841616

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one) [ ] 21b [ ] 22 [X] 23 [ ] 24 [ ] 25 [ ] 26 [ ] 27 [ ] 28a [ ] 28b [ ] 28c [ ] 29

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NAME OF COMMITTEE (In Full)
MULTIPLAN, INC. PAC

A.

Full Name (Last, First, Middle Initial)
FRIENDS OF MAX BAUCUS

Mailing Address
P.O. BOX 2555

City: BILLINGS State: MT Zip Code: 59103

Purpose of Disbursement
POLITICAL CONTRIBUTION

Candidate Name
MAX BAUCUS

Office Sought: [ ] House [ ] Senate [X] President
State: MT District:

Disbursement For: [X] Primary [ ] General [ ] Other (specify)

Category/Type: 0 1 1

Date of Disbursement: 05 / 02 / 2002

Amount of Each Disbursement this Period: 10,00,00

B.

Full Name (Last, First, Middle Initial)
TORRICELLI FOR U.S. SENATE

Mailing Address
303 GEORGE STREET, 6TH FLOOR

City: NEW BRUNSWICK State: NJ Zip Code: 08901

Purpose of Disbursement
POLITICAL CONTRIBUTION

Candidate Name
ROBERT TORRICELLI

Office Sought: [ ] House [X] Senate [ ] President
State: District:

Disbursement For: [X] Primary [ ] General [ ] Other (specify)

Category/Type: 0 1 1

Date of Disbursement: 05 / 10 / 2002

Amount of Each Disbursement this Period: 1,000,00

C.

Full Name (Last, First, Middle Initial)
FRIENDS OF JONATHAN MILLER

Mailing Address
P.O. BOX 462

City: FRANKFORT State: KY Zip Code: 40602

Purpose of Disbursement
POLITICAL CONTRIBUTION

Candidate Name
JONATHAN MILLER

Office Sought: [X] House [ ] Senate [ ] President
State: KY District:

Disbursement For: [X] Primary [ ] General [ ] Other (specify)

Category/Type: 0 1 1

Date of Disbursement: 06 / 25 / 2002

Amount of Each Disbursement this Period: 1,000,00

SUBTOTAL of Disbursements This Page (optional) ▶ 30,00,00

TOTAL This Period (last page this line number only) ▶

PB2AAK42

22037841617

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)
☐ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25
☐ 26 ☐ 27 ☐ 28a ☐ 28b ☐ 28c ☒ 29

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NAME OF COMMITTEE (In Full)
MULTIPLAN, INC. PAC

A.

Full Name (Last, First, Middle Initial): SRIENS OF CORY BOOKER

Mailing Address: P.O. BOX 200334, RIVERFRONT PLAZA STATION

City: NEWARK State: NJ Zip Code: 07102

Purpose of Disbursement: POLITICAL CONTRIBUTION - NON-FEDERAL

Candidate Name: CORY BOOKER

Office Sought: ☐ House ☐ Senate ☐ President

State: NJ District:

Disbursement For: ☐ Primary ☐ General ☐ Other (specify)

Category/Type:

Date of Disbursement: 05 02 2002

Amount of Each Disbursement this Period: 250.00

STATE ELECTION - MAYOR OF NEWARK

B.

Full Name (Last, First, Middle Initial):

Mailing Address:

City: State: Zip Code:

Purpose of Disbursement:

Candidate Name:

Office Sought: ☐ House ☐ Senate ☐ President

State: District:

Disbursement For: ☐ Primary ☐ General ☐ Other (specify)

Category/Type:

Date of Disbursement:

Amount of Each Disbursement this Period:

C.

Full Name (Last, First, Middle Initial):

Mailing Address:

City: State: Zip Code:

Purpose of Disbursement:

Candidate Name:

Office Sought: ☐ House ☐ Senate ☐ President

State: District:

Disbursement For: ☐ Primary ☐ General ☐ Other (specify)

Category/Type:

Date of Disbursement:

Amount of Each Disbursement this Period:

SUBTOTAL of Disbursements This Page (optional) ▶

TOTAL This Period (last page this line number only) ▶

22037841618

Federal Election Commission

ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS

The Commission has added this page to the end of this filing to indicate how it was received.

☐	Hand Delivered	Date of Receipt
☐	First Class Mail	POSTMARKED
☑	Registered/Certified Mail	POSTMARKED (R/C) 11-5-02
☐	No Postmark	
☐	Postmark Illegible	
☐	Received from the House office of Records and Registration	Date of Receipt
☐	Received from the Senate Office of Public Records	Date of Receipt
☐	Other (Specify):	Postmarked _____ and/or Date of Receipt
☐	Electronic Filing	

PREPARER	DATE PREPARED 11-12-02

(6/2000)