mary Page)

NAME OF COMMITTEE (in full)

Laborers' Political League

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

905 16th St., N.W.

CITY, STATE and ZIP CODE

Wash., DC 20006

USE FEC M TYPE

RECEIVED
FEDERAL ELECTION
COMMISSION MAIL ROOM

2. FEC IDENTIFICATION NUMBER

C00007922 20 P 3:22

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 9/01/99 through 9/30/99 | | |
| 6. (a) Cash on Hand January 1, 19 99 | | $ 497,076.46 |
| (b) Cash on Hand at Beginning of Reporting Period | $ 554,830.40 | |
| (c) Total Receipts (from Line 19) | $ 126,996.16 | $ 641,341.70 |
| (d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) | $ 681,826.56 | $ 1,138,418.16 |
| 7. Total Disbursements (from Line 30) | $ 82,532.40 | $ 539,124.00 |
| 8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) | $ 599,294.16 | $ 599,294.16 |
| 9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D) | $ | |
| 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

Carl E. Booker, Treasurer

Signature of Treasurer

Carl E. Booker

Date

10/20/99

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 2/93)