23038170670

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

RECEIVED
FEC MAIL
OPERATIONS CENTER
2003 Aug 7 A 9:52

Office Use Only

1. NAME OF COMMITTEE (in full) — TYPE OR PRINT ▼ — Example: If typing, type over the lines. 12FE4M5

GOP5 COMMITTEE

J.R. PERAGALLO

ADDRESS (number and street) ▼ 93 HAMPTON CT

Check if different than previously reported. (ACC)

SOUTHBURY CT 06488-

2. FEC IDENTIFICATION NUMBER ▼ — CITY ▲ — STATE ▲ — ZIP CODE ▲

C00181230

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

Covering Period 01 01 2003 through 06 30 2003

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 J.R. Peragallo

Signature of Treasurer J.R. Peragallo Date 07 24 2003

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 (Rev. 02/2002)

23038170671

SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name

GOPS Committee

Report Covering the Period: From: 01 01 2003 To: 06 30 2003

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, 2003		777.08
(b) Cash on Hand at Beginning of Reporting Period	777.08	
(c) Total Receipts (from Line 19)	755.00	755.00
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	1,532.08	1,532.08
7. Total Disbursements (from Line 31)	526.34	
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	1,005.74	1,532.08
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)		

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

23038170672

GOP5

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name: GOP 5 Committee

Report Covering the Period: From: 01 01 2003 To: 06 30 2003

I. 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)		
(ii) Unitemized	30.00	
(iii) TOTAL (add Lines 11(a)(i) and (ii)) ▶		30.00
(b) Political Party Committees		725.00
(c) Other Political Committees (such as PACs)		
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) ▶	30.00	755.00
12. Transfers From Affiliated/Other Party Committees	725.00	
13. All Loans Received		
14. Loan Repayments Received		
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)		
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees		
17. Other Federal Receipts (Dividends, Interest, etc.)		
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3)		
(b) Levin Funds (from Schedule H5)	~~725~~	
(c) Total Transfers (add 18(a) and 18(b)).		
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)) ▶	755.00	755.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19) ▶	755.00	755.00

23038170673

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 ☐ 30b

PAGE ___ OF ___

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): GOPS Committee

A.
Full Name (Last, First, Middle Initial): Quad City Bank Card
Mailing Address: 3551 7th ST L101
City: Moline State: IL Zip Code: 61265
Purpose of Disbursement: Credit Card Serv. Chg (Direct With)
Candidate Name:
Category/Type: 001
Date of Disbursement: __/__/____
Amount of Each Disbursement this Period: 210.00
Office Sought: ☐ House ☐ Senate ☐ President
State: District:
Disbursement For: ☐ Primary ☐ General ☐ Other (specify)

B.
Full Name (Last, First, Middle Initial): Chi Lease Fin Ser Group
Mailing Address: 233 No. Michigan Ave.
City: Chicago State: Ill. Zip Code: 60601
Purpose of Disbursement: CC Equip (Direct Withdrawl)
Candidate Name:
Category/Type: 001
Date of Disbursement: __/__/____
Amount of Each Disbursement this Period: 205.50
Office Sought: ☐ House ☐ Senate ☐ President
State: District:
Disbursement For: ☐ Primary ☐ General ☐ Other (specify)

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

SUBTOTAL of Disbursements This Page (optional) ▶ 415.50

TOTAL This Period (last page this line number only) ▶ 526.34

23038170674

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 ☐ 30b

PAGE OF

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NAME OF COMMITTEE (In Full): GOP5 Committee

A.
Full Name (Last, First, Middle Initial): Webster Bank
Mailing Address: Webster Plaza P.O. Box 199
City: Waterbury State: CT Zip Code: 06720
Purpose of Disbursement: Bank fees (Jan - June)
Candidate Name:
Category/Type: 001
Office Sought: ☐ House ☐ Senate ☐ President
State: District:
Disbursement For: ☐ Primary ☐ General ☐ Other (specify)
Date of Disbursement: M M / D D / Y Y Y Y
Amount of Each Disbursement this Period: 21.14

B.
Full Name (Last, First, Middle Initial): American Express
Mailing Address: P.O. Box 53852
City: Phoenix State: AR Zip Code: 85072
Purpose of Disbursement: CC Fee (Direct Withdrawal)
Candidate Name:
Category/Type: 001
Office Sought: ☐ House ☐ Senate ☐ President
State: District:
Disbursement For: ☐ Primary ☐ General ☐ Other (specify)
Date of Disbursement: M M / D D / Y Y Y Y
Amount of Each Disbursement this Period: 30.00

C.
Full Name (Last, First, Middle Initial): Merchant Service
Mailing Address: 218 Middle Rd
City: Bettendorf State: IL Zip Code: 52722
Purpose of Disbursement: Credit card Fee (Direct Withd)
Candidate Name:
Category/Type: 001
Office Sought: ☐ House ☐ Senate ☐ President
State: District:
Disbursement For: ☐ Primary ☐ General ☐ Other (specify)
Date of Disbursement: M M / D D / Y Y Y Y
Amount of Each Disbursement this Period: 59.70

SUBTOTAL of Disbursements This Page (optional) ▶ 110.84

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

23038170675

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)
☐	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	

JA — PREPARER

8/1/03 — DATE PREPARED

(6/2000)