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FEC FORM 3

REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee

SECRETARY OF THE SENATE
04 MAR 16 AM 9:31
Office Use Only

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

Carper for Senate

ADDRESS (number and street) ▼ 19 East Commons Blvd, 2nd Flr.

Check if different than previously reported. (ACC)

CITY ▲ New Castle — STATE ▲ DE — ZIP CODE ▲ 19720

2. FEC IDENTIFICATION NUMBER ▼ C00349217

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

STATE ▼ DISTRICT: DE 00

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:

- April 15 Quarterly Report (Q1)
- X July 15 Quarterly Report (Q2)
- October 15 Quarterly Report (Q3)
- January 31 Year-End Report (YE)
- Termination Report (TER)

(b) 12-Day PRE-Election Report for the:

Primary (12P) General (12G) Runoff (12R)

Convention (12C) Special (12S)

Election on ____ In the State of ____

(c) 30-Day POST-Election Report for the:

General (30G) Runoff (30R) Special (30S)

Election on ____ In the State of ____

5. Covering Period 04 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 Patricia P. McGonigle

Signature of Treasurer ____ Date 03 11 2004

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							

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(Revised 02/2003)