FEC FORM 3

REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee

Office Use Only

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

Capri S. Cafaro for Congress

ADDRESS (number and street) ▼ 7448 Mentor Ave.

Check if different than previously reported. (ACC)

Mentor | OH | 44060

2. FEC IDENTIFICATION NUMBER ▼ C00394973

CITY ▲ STATE ▲ ZIP CODE ▲

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

STATE ▼ DISTRICT: OH 14

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)

Termination Report (TER)

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

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

Convention (12C) Special (12S)

Election on 03 02 2004 in the State of OH

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

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

Election on in the State of

5. Covering Period 01 01 2004 through 02 11 2004

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 Mr. Ronald Silvestri

Signature of Treasurer Electronically Filed by Mr. Ronald Silvestri Date 02 19 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.

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