04/15/2002 18 : 47

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

BOB BRADY FOR CONGRESS

ADDRESS (number and street) ▼ ONE LOGAN SQUARE, SUITE 2929

Check if different than previously reported. (ACC)

PHILADELPHIA | PA | 19103

2. **FEC IDENTIFICATION NUMBER** ▼ C00333740

CITY ▲ STATE ▲ ZIP CODE ▲

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

STATE ▼ DISTRICT PA

4. **TYPE OF REPORT** (Choose One)

(a) Quarterly Reports:

X 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) 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 01 01 2002 through 03 31 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 Michael G. Horsey CPA

Signature of Treasurer Electronically Filed by Michael G. Horsey CPA Date 04 15 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.

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(Revised 1/2001)