07/31/2001 10 : 21

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

FRIENDS OF CLIFF STEARNS

ADDRESS (number and street) ▼ PO BOX 308

Check if different than previously reported. (ACC)

SILVER SPRINGS | FL | 34489

2. **FEC IDENTIFICATION NUMBER** ▼ C00229377

CITY ▲ STATE ▲ ZIP CODE ▲

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

STATE ▼ DISTRICT: FL 6

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)

X 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 2001 through 06 30 2001

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 OWEN MALCOLM

Signature of Treasurer Electronically Filed by OWEN MALCOLM Date 07 31 2001

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)