REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee
(Summary Page)

RECEIVED
FEC MAIL ROOM
2000 JUL 15 A 9:40

USE FEC MAILING LABEL OR TYPE OR PRINT

1. NAME OF COMMITTEE (in full)

C00345033 060500 N 224
JOHN L PRITCHARD
UNITED IN FREEDOM
PO BOX 3365
SARATOGA SPRINGS NY 12866

2. FEC IDENTIFICATION NUMBER

3. ☐ This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

4. TYPE OF REPORT

(a) ☐ April 15 Quarterly Report

☒ July 15 Quarterly Report

☐ October 15 Quarterly Report

☐ January 31 Year End Report

☐ July 31 Mid Year Report (Non-election Year Only)

☐ Termination Report

Monthly Report Due On:

☐ February 20 ☐ June 20 ☐ October 20
☐ March 20 ☐ July 20 ☐ November 20
☐ April 20 ☐ August 20 ☐ December 20
☐ May 20 ☐ September 20 ☐ January 31

☐ 12-Day Pre-Election Report for the _____ _____ (Type of Election) election on _____ in the State of _____

☐ 30-Day Post-Election Report following the General Election on _____ in the State of _____.

(b) Is this Report an Amendment? ☐ YES ☐ NO

SUMMARY	COLUMN A This Period	COLUMN B Calendar Year-to-Date
5. Covering Period 4/1/00 through 6/30/00		
6. (a) Cash on Hand January 1, 2000		$ 8610.83
(b) Cash on Hand at Beginning of Reporting Period	$ 5579.87	
(c) Total Receipts (from Line 19)	$ 7000.00	$ 9000.00
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	$ 12,579.87	$ 17610.83
7. Total Disbursements (from Line 30)	$ 3470.19	$ 8501.15
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	$ 9109.68	$ 9109.68
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)	$ —	

For further information contact:
Federal Election Commission
999 E Street, NW
Washington, DC 20463
Toll Free 800-424-9530
Local 202-694-1100

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 JOHN L PRITCHARD

Signature of Treasurer [signature] Date 7/14/00

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

FEC FORM 3X
(revised 8/93)

FE3AN103

DETAILED SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS
PAGE 2, FEC FORM 3X

(revised 1/1/91)

NAME OF COMMITTEE

REPORT COVERING PERIOD
FROM TO:

	COLUMN A Total This Period	COLUMN B Calendar Year	
I. Receipts			
11. Contributions (other than loans) From:			
a. Individual/Persons Other Than Political Committees			
i. Itemized (use Schedule A)	6000	8000	11(a)(i)
ii. Unitemized			11(a)(ii)
iii. Total ... (add i and ii) ➤	6000	8000	11(a)(iii)
b. Political Party Committees	1000	1000	11(b)
c. Other Political Committees (such as PACs)			11(c)
d. Total Contributions ... (add a iii, b and c) ➤	7000	9000	11(d)
12. Transfers From Affiliated/Other Party Committees			12
13. All Loans Received			13
14. Loan Repayments Received			14
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.)			15
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees			16
17. Other Federal Receipts (Dividends, Interest, etc.)			17
18. Transfers from Nonfederal Account for Joint Activity			18
19. Total Receipts ... (add 11d, 12, 13, 14, 15, 16, 17, and 18) ➤	7000	9000	19
20. Total Federal Receipts ... (subtract line 18 from line 19) ➤	7000	9000	20
II. Disbursements			
21. Operating Expenditures:			
a. Shared Federal/Non-Federal Activity (from Schedule H4)			
i. Federal Share			21(a)(i)
ii. Non-Federal Share			21(a)(ii)
b. Other Federal Operating Expenditures	1470.19	3501.15	21(b)
c. Total Operating Expenditures ... (add a i, a ii, and b) ➤	1470.19	3501.15	21(c)
22. Transfers to Affiliated/Other Party Committees			22
23. Contributions to Federal Candidates/Committees and Other Political Committees	2000	5000.00	23
24. Independent Expenditures (use Schedule E)			24
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F)			25
26. Loan Repayments Made			26
27. Loans Made			27
28. Refunds of Contributions To:			
a. Individuals/Persons Other Than Political Committees			28(a)
b. Political Party Committees			28(b)
c. Other Political Committees (such as PACs)			28(c)
d. Total Contribution Refunds ... (add a, b and c) ➤			28(d)
29. Other Disbursements			29
30. Total Disbursements ... (add 21c, 22, 23, 24, 25, 26, 27, 28d, and 29) ➤	3470.19	8501.15	30
31. Total Federal Disbursements ... (subtract line 21 a ii from line 30) ➤	3470.19	8501.15	31
III. Net Contributions/Operating Expenditures			
32. Total Contributions (other than loans)(from line 11d)	7000	9000	32
33. Total Contribution Refunds (from line 28d)	—	—	33
34. Net Contributions (other than loans)(subtract line 33 from 32)	7000	9000	34
35. Total Federal Operating Expenditures ... (add 21 a i and 21 b) ➤	1470.19	3501.15	35
36. Offsets to Operating Expenditures (from line 15)	—	—	36
37. Net Operating Expenditures ... (subtract line 36 from 35) ➤	1470.19	3501.15	37

FEBAN100

SCHEDULE A **ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

PAGE 1 OF 1

FOR LINE NUMBER 11ae

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): United in Freedom

Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
A. Michael C. Segnare, 591-A Sand Creek Dr., Albany NY 12205 — Receipt For: [X] Primary [ ] General [ ] Other (specify):	Name of Employer: / Occupation: / Aggregate Year-to-Date: $ 3000 –	6/30/00	3000 –
B. Francesco Galesi, PO Box 98, Guilderland NY 12085 — Receipt For: [X] Primary [ ] General [ ] Other (specify):	Name of Employer: Galesi Group, Guilderland Ctr NY / Occupation: self / Aggregate Year-to-Date: $ 1000 –	6/30/00	1000 –
C. Glenn N Phelps, 1687 Duanesburg Rd., Duanesburg NY 12056 — Receipt For: [X] Primary [ ] General [ ] Other (specify):	Name of Employer: Schenectady Steel Co., Schenectady NY / Occupation: Self Pres. / Aggregate Year-to-Date: $ 1000 –	6/30/00	1000 –
D. Michael Tucker, 115 Huntersfield Rd, Delmar NY 12054 — Receipt For: [X] Primary [ ] General [ ] Other (specify):	Name of Employer: Mercer Industries, 3E-Comm Sq, Albany NY 12207 / Occupation: Self Pres. / Aggregate Year-to-Date: $ 1000 –	4/1/00	1000 –
E. Full Name, Mailing Address and ZIP Code — Receipt For: [ ] Primary [ ] General [ ] Other (specify):	Name of Employer: / Occupation: / Aggregate Year-to-Date: $	Date (month, day, year)	Amount of Each Receipt this Period
F. Full Name, Mailing Address and ZIP Code — Receipt For: [ ] Primary [ ] General [ ] Other (specify):	Name of Employer: / Occupation: / Aggregate Year-to-Date: $	Date (month, day, year)	Amount of Each Receipt this Period
G. Full Name, Mailing Address and ZIP Code — Receipt For: [ ] Primary [ ] General [ ] Other (specify):	Name of Employer: / Occupation: / Aggregate Year-to-Date: $	Date (month, day, year)	Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional)	6000 –
TOTAL This Period (last page this line number only)	6000

FE7AN049

SCHEDULE A **ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

PAGE 1 OF 1

FOR LINE NUMBER 11 B

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NAME OF COMMITTEE (In Full)

United in Freedom

A. Full Name, Mailing Address and ZIP Code Town of Colonie Republican Comm. 39 No Pearl St Albany NY 12207 Receipt For: [X] Primary [ ] General [ ] Other (specify):	Name of Employer Political Party Comm. Occupation Aggregate Year-to-Date $ 1000 –	Date (month, day, year) 6/30/00	Amount of Each Receipt this Period 1000 –
B. Full Name, Mailing Address and ZIP Code Receipt For: [ ] Primary [ ] General [ ] Other (specify):	Name of Employer Occupation Aggregate Year-to-Date $	Date (month, day, year)	Amount of Each Receipt this Period
C. Full Name, Mailing Address and ZIP Code Receipt For: [ ] Primary [ ] General [ ] Other (specify):	Name of Employer Occupation Aggregate Year-to-Date $	Date (month, day, year)	Amount of Each Receipt this Period
D. Full Name, Mailing Address and ZIP Code Receipt For: [ ] Primary [ ] General [ ] Other (specify):	Name of Employer Occupation Aggregate Year-to-Date $	Date (month, day, year)	Amount of Each Receipt this Period
E. Full Name, Mailing Address and ZIP Code Receipt For: [ ] Primary [ ] General [ ] Other (specify):	Name of Employer Occupation Aggregate Year-to-Date $	Date (month, day, year)	Amount of Each Receipt this Period
F. Full Name, Mailing Address and ZIP Code Receipt For: [ ] Primary [ ] General [ ] Other (specify):	Name of Employer Occupation Aggregate Year-to-Date $	Date (month, day, year)	Amount of Each Receipt this Period
G. Full Name, Mailing Address and ZIP Code Receipt For: [ ] Primary [ ] General [ ] Other (specify):	Name of Employer Occupation Aggregate Year-to-Date $	Date (month, day, year)	Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional)	1000 –
TOTAL This Period (last page this line number only)	1000

FETAN049

SCHEDULE B **ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	PAGE 1 OF
	FOR LINE NUMBER 23

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NAME OF COMMITTEE (In Full)
United in Freedom

A. Full Name, Mailing Address and ZIP Code Grucci for Congress 2884 Unit 12 Ste 112 Melford NJ 11763	Purpose of Disbursement Disbursement for: [X] Primary [ ] General [ ] Other (specify)	Date (month, day, year) 5/22/00	Amount of Each Disbursement This Period 1000 -
B. Full Name, Mailing Address and ZIP Code Bob Frank for U S Senate PO Box 497 N Providence NJ 07974	Purpose of Disbursement Disbursement for: [X] Primary [ ] General [ ] Other (specify)	Date (month, day, year) 5/22/00	Amount of Each Disbursement This Period 1000 -
C. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: [ ] Primary [ ] General [ ] Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
D. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: [ ] Primary [ ] General [ ] Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
E. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: [ ] Primary [ ] General [ ] Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
F. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: [ ] Primary [ ] General [ ] Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
G. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: [ ] Primary [ ] General [ ] Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: [ ] Primary [ ] General [ ] Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
I. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: [ ] Primary [ ] General [ ] Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period

SUBTOTAL of Disbursements This Page (optional)	2000 —
TOTAL This Period (last page this line number only)	2000

FE8AN121

SCHEDULE B **ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

PAGE 1 OF

FOR LINE NUMBER 21B

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)
United in Freedom

Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
A. United States Postmaster Broadway Saratoga Springs NY 12866	Postage Postal Disbursement for: [X] Primary [ ] General [ ] Other (specify)	4/8/00 4/14/00	320 57.00
B. Staples Rt 50 Saratoga Springs NY 12866	Stamps (Ink) Disbursement for: [X] Primary [ ] General [ ] Other (specify)	5/1/00	9.99
C. Martin Garry PO Box 13 E Chatham NY	Consulting Disbursement for: [X] Primary [ ] General [ ] Other (specify)	4/26/00	1000.—
D. Independent Travel Services 168 Wilmot Rd. Deerfield IL 60015	Travel Reservations DLP Nat Convention Disbursement for: [ ] Primary [ ] General [ ] Other (specify)	6/14/00	400.—
E. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: [ ] Primary [ ] General [ ] Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
F. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: [ ] Primary [ ] General [ ] Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
G. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: [ ] Primary [ ] General [ ] Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: [ ] Primary [ ] General [ ] Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
I. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: [ ] Primary [ ] General [ ] Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period

SUBTOTAL of Disbursements This Page (optional) 1470.19

TOTAL This Period (last page this line number only) 1470.19

FE8AN1Z1

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): Express Mail	Postmarked 7-14-00 and/or Date of Receipt
☐	Electronic Filing	

PREPARER

7-15-00
DATE PREPARED

(6/2000)