# REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee
(Summary Page)

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FEC MAIL ROOM
2000 JUL 13 P 2:07

USE FEC MAILING LABEL OR TYPE OR PRINT

1. NAME OF COMMITTEE (in full)
Committee to Elect McHugh

ADDRESS (number and street) [ ] Check if different than previously reported.
PO Box 6161

CITY, STATE and ZIP CODE: Watertown, NY 13601
STATE/DISTRICT: NY/24

2. FEC IDENTIFICATION NUMBER
C00272153

3. IS THIS REPORT AN AMENDMENT?
[ ] YES [X] NO

## 4. TYPE OF REPORT

[ ] April 15 Quarterly Report
[X] July 15 Quarterly Report
[ ] October 15 Quarterly Report
[ ] January 31 Year End Report
[ ] July 31 Mid-Year Report (Non-election Year Only)
[ ] 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 _____
[ ] Termination Report

This report contains activity for [X] Primary Election [X] General Election [ ] Special Election [ ] Runoff Election

## SUMMARY

| | COLUMN A This Period | COLUMN B Calendar Year-to-Date |
|---|---|---|
| 5. Covering Period 4/1/00 through 6/30/00 | | |
| 6. Net Contributions (other than loans) | | |
| (a) Total Contributions (other than loans) (from Line 11(e)) | 28962.60 | 30212.60 |
| (b) Total Contribution Refunds (from Line 20(d)) | 0.00 | 0.00 |
| (c) Net Contributions (other than loans) (subtract Line 6(b) from 6(a)) | 28962.60 | 30212.60 |
| 7. Net Operating Expenditures | | |
| (a) Total Operating Expenditures (from Line 17) | 9381.94 | 18453.64 |
| (b) Total Offsets to Operating Expenditures (from Line 14) | 0.00 | 0.00 |
| (c) Net Operating Expenditures (subtract Line 7(b) from 7(a)) | 9381.94 | 18453.64 |
| 8. Cash on Hand at Close of Reporting Period (from Line 27) | 288941.65 | |
| 9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D) | 0.00 | |
| 10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D) | 0.00 | |

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: Cary R. Brick, Treasurer

Signature of Treasurer: [signature]

Date: 7-10-00

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 3
(revised 4/87)

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