# REPORT OF RECEIPTS AND DISBURSEMENTS



06/17/2002 09 : 41

**BY AN AUTHORIZED COMMITTEE OF A CANDIDATE FOR THE OFFICE OF PRESIDENT OR VICE-PRESIDENT**

1. NAME OF COMMITTEE (in full)
Nader 2000 Primary Committee, Inc.

ADDRESS (number and street) ☐ Check if different than previously reported
PO Box 18002

CITY, STATE, and ZIP CODE
Washington DC 20036

2. IDENTIFICATION NUMBER
C00355222

3. IS THIS REPORT FOR :
☒ Primary election ☐ General election

## 4. TYPE OF REPORT (Check here ☐ if this is a Termination Report.)

☐ April 15 Quarterly Report
☐ July 15 Quarterly Report
☐ October 15 Quarterly Report
☒ January 31 Year End 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 |

☐ Twelfth day report preceding _____ (election type)
election on _____ in the State of _____

☐ Thirtieth day report following the General Election
on _____

IS THIS REPORT AN AMENDMENT ☒ YES ☐ NO

| 5. COVERING PERIOD | FROM 11/28/2000 | THROUGH 12/31/2000 |
|---|---|---|

| | | |
|---|---|---|
| SUMMARY | 6. CASH ON HAND AT BEGINNING OF THE REPORTING PERIOD | 76642.07 |
| | 7. TOTAL RECEIPTS THIS PERIOD (from Line 22, Column A, Page 2) | 17189.08 |
| | 8. SUBTOTAL (Lines 6 and 7) | 93831.15 |
| | 9. TOTAL DISBURSEMENTS THIS PERIOD (from Line 30, Column A, Page 2) | 152860.87 |
| | 10. CASH ON HAND AT CLOSE OF REPORTING PERIOD (Subtract Line 9 from 8) | -59029.72 |
| | 11. DEBTS AND OBLIGATIONS OWED TO THE COMMITTEE (Itemize All on Schedule C-P or Schedule D-P) | 0.00 |
| | 12. DEBTS AND OBLIGATIONS OWED BY THE COMMITTEE (Itemize All on Schedule C-P or Schedule D-P) | 163522.00 |
| | 13. EXPENDITURES SUBJECT TO LIMITATION | 0.00 |
| NET YEAR-TO-DATE CONTRIBUTIONS AND EXPENDITURES | 14. NET CONTRIBUTIONS (other than loans) (Subtract Line 28d, Column B from 17e, Column B, Page 2) | 2322625.34 |
| | 15. NET OPERATING EXPENDITURES (Subtract Line 29e, Columnn B from 23, Column B, Page 2) | 3145654.42 |

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
**Ms. Theresa Amato**

Date
01/31/2001

Signature of Treasurer

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.
ALL PREVIOUS VERSIONS OF FEC FORM 3P ARE OBSOLETE AND SHOULD NO LONGER BE USED

For further information contact: Federal Election Commission
999 E Street, NW
Washington, DC 20463
Toll Free 800-424-9530
Local 202-219-3420

**FEC FORM 3P**
**(5/95)**