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FEC FORM 3

REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) — TYPE OR PRINT ▼ — Example: If typing, type over the lines. — C12FB4M5

COMMITTEE TO REELECT TOM FOLEY

ADDRESS (number and street) ▼ — 1253 C ST SE

Check if different than previously reported. (ACC)

CITY ▲ — WASHINGTON — STATE ▲ — DC — ZIP CODE ▲ — 20003-2202

2. FEC IDENTIFICATION NUMBER ▼ — C00002642

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

STATE ▼ DISTRICT — VA 5th

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)
- 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 2003 through 03 31 2003

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 — Heather S. Foley

Signature of Treasurer — Heather S. Foley — Date 04 15 2003

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

Office Use Only							

FEC FORM 3 (Revised 02/2003)