# REPORT OF RECEIPTS AND DISBURSEMENTS

**For An Authorized Committee**
(Summary Page)

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1. NAME OF COMMITTEE (In full)
Friends of Chris Dodd, 2004

ADDRESS (number and street) ☐ Check if different than previously reported.
P.O. Box 270701

CITY, STATE and ZIP CODE STATE/DISTRICT
West Hartford, CT 06127

2. FEC IDENTIFICATION NUMBER
C00347310

3. IS THIS REPORT AN AMENDMENT?
☐ YES ☒ NO

## 4. TYPE OF REPORT

☐ 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)

☐ Twelfth day report preceding _____ (Type of Election) election on _____ in the State of _____
☐ Thirtieth day report following the General Election on _____ in the State of _____
☐ Termination Report

This report contains activity for ☒ Primary Election ☒ General Election ☐ Special Election ☐ Runoff Election

## SUMMARY

| 5. Covering Period 07/01/2000 through 12/31/2000 | COLUMN A This Period | COLUMN B Calendar Year-to-date |
|---|---|---|
| 6. Net Contributions (other than loans) | | |
| (a) Total Contributions(other than loans) (from Line 11(e)) | $105902.14 | $767987.14 |
| (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)) | $105902.14 | $767987.14 |
| 7. Net Operating Expenditures | | |
| (a) Total Operating Expenditures (from Line 17) | $257375.95 | $481669.97 |
| (b) Total Offsets to Operating Expenditures (from Line 14) | $115.88 | $130.89 |
| (c) Net Operating Expenditures (Subtract Line 7(b) from 7(a)) | $257260.07 | $481538.08 |
| 8. Cash on Hand at Close of Reporting Period (from Line 27) | $980763.86 | |
| 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:
Federal Election Commission
999 E Street, NW
Washington, DC 20463
Toll Free 800-424-9530
Local 202-219-3420

*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
Kathryn J. Damato, Assistant Treasurer

Signature of Treasurer: Kathryn J. Damato
Date: 1/31/01

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

**FEC FORM 3**
(Revised 4/87)