REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee
(Summary Page)

RECEIVED
FEDERAL ELECTION
COMMISSION MAIL ROOM

FEB 2 12 17 PM '99

1. NAME OF COMMITTEE (in full): FATTAH FOR CONGRESS

ADDRESS (number and street): 7473 Rhoads Street
☐ Check if different than previously reported.

2. FEC IDENTIFICATION NUMBER: C00025441

CITY, STATE and ZIP CODE: PHILADELPHIA, PA 19151

STATE/DISTRICT: 2

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

		COLUMN A This Period	COLUMN B Calendar Year-to-date
5.	Covering Period 07/01/98 through 09/30/98		
6.	Net Contributions (other than loans)		
	(a) Total Contributions (other than loans) (from Line 11(e))	$31074.25	$249029.67
	(b) Total Contribution Refunds (From Line 20(d))	$1600.00	$1600.00
	(c) Net Contributions (other than loans)(subtract Line 6(b) from 6(a))	$29474.25	$247429.67
7.	Net Operating Expenditures		
	(a) Total Operating Expenditures (from Line 17)	$36870.94	$203662.02
	(b) Total Offsets to Operating Expenditures (from Line 14)	$0.00	$2412.93
	(c) Net Operating Expenditures (Subtract Line 7(b) from 7(a))	$36870.94	$201249.09
8.	Cash on Hand at Close of Reporting Period (from Line 27)	$46300.15	
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:
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: JEANICE M. SALTER, CPA

Signature of Treasurer: Jeanice M. Salter

Date: 1/25/99

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)