

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS For Other Than An Authorized Committee

RECEIVED FEC MAIL OPERATIONS CENTER JUN JUL 17 A 9 14 Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT Example: If typing, type over the lines. 13FEAMS

ROBINSON & COLE FEDERAL POLITICAL ACTION COMMITTEE

ADDRESS (number and street) 2900 T. RUMBOLD STREET

CITY STATE ZIP CODE HARTFORD CT 06103

2. FEC IDENTIFICATION NUMBER CITY STATE ZIP CODE

00341321

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

4. TYPE OF REPORT (Choose One) (a) Quarterly Reports: April 15, July 15, October 15, January 31, July 31, Termination Report. (b) Monthly Report Due On: Feb 20, Mar 20, Apr 20, May 20, Jun 20, Jul 20, Aug 20, Sep 20, Oct 20, Nov 20, Dec 20, Jan 31. (c) 12-Day PRE-Election Report for this Election on: Primary, General, Runoff, Convention, Special. (d) 30-Day POST-Election Report for this Election on: General, Runoff, Special.

5. Covering Period 09 01 2004 through 06 30 2004

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 S. FRANK D'ERCOLE

Signature of Treasurer [Signature] Date 07 12 2004

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

**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name

ROBINSON & COLE FEDERAL POLITICAL ACTION COMMITTEE

Report Covering the Period: From: 01 01 2004 To: 06 30 2004

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <u>2004</u>		<u>607821</u>
(b) Cash on Hand at Beginning of Reporting Period	<u>557821</u>	
(c) Total Receipts (from Line 1B)	<u>000</u>	<u>000</u>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	<u>557821</u>	<u>607821</u>
7. Total Disbursements (from Line 31)	<u>000</u>	<u>50000</u>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	<u>557821</u>	<u>557821</u>
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	<u>000</u>	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	<u>000</u>	

This committee has qualified as a independent committee. (see FEC FORM 1M)

**For further information contact:**

Federal Election Commission  
999 E Street, NW  
Washington, DC 20463  
Toll Free 800-424-9590  
Local 202-694-1100

DETAILED SUMMARY PAGE

of Receipts

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name

ROBINSON G. COLE FEDERAL POLITICAL ACTION COMMITTEE

Report Covering the Period

From:

04, 01, 2004

To:

06, 30, 2004

I. Receipts

COLUMN A  
Total This Period

COLUMN B  
Calendar Year-to-Date

11. Contributions (other than loans) From:

(a) Individuals/Persons Other Than Political Committees

(i) Itemized (see Schedule A)

(ii) Unitemized

(iii) TOTAL (add

Lines 11(a)(i) and (ii)

Lines 11(a)(i) and (ii)

(b) Political Party Committees

(c) Other Political Committees (such as PACs)

(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry

Totals to Line 33, page 5)

12. Transfers From Affiliated/Other Party Committees

13. All Loans Received

14. Loan Repayments Received

15. Offsets To Operating Expenditures (Refunds, Rebates, etc.)

(Carry Totals to Line 37, page 5)

16. Refunds of Contributions Made to Federal Candidates and Other Political Committees

17. Other Federal Receipts (Dividends, Interest, etc.)

18. Transfers from Non-Federal and Levin Funds

(a) Non-Federal Account (from Schedule H3)

(b) Levin Funds (from Schedule H5)

(c) Total Transfers (add 18(a) and 18(b))

19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))

12, 13, 14, 15, 16, 17, and 18(c))

20. Total Federal Receipts (subtract Line 18(c) from Line 19)

(subtract Line 18(c) from Line 19)

0.00

0.00

0.00

0.00

0.00

0.00

0.00

0.00

0.00

0.00

0.00

0.00

0.00

0.00

0.00

0.00

0.00

0.00

0.00

0.00

0.00

0.00

0.00

0.00

0.00

0.00

0.00

0.00

0.00

0.00

0.00

0.00

0.00

0.00

0.00

0.00

0.00

0.00

0.00

0.00

2004-06-30 15:00:00

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 02/2008)

**II. Disbursements**

**COLUMN A**  
Total This Period

**COLUMN B**  
Calendar Year-to-Date

21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)	0.00	0.00
(i) Federal Share .....		
(ii) Non-Federal Share .....	0.00	0.00
(b) Other Federal Operating Expenditures .....	0.00	0.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	0.00	0.00
22. Transfers to Affiliated/Other Party Committees .....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees .....	0.00	500.00
24. Independent Expenditures (use Schedule E) .....	0.00	0.00
25. Coordinated Party Expenditures (2 U.S.C. §418(d)) (use Schedule F) .....	0.00	0.00
26. Loan Repayments Made .....	0.00	0.00
27. Loans Made .....		
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	0.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs) .....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)) .....	0.00	0.00
29. Other Disbursements .....	0.00	0.00
30. Federal Election Activity (2 U.S.C. §4312(a))		
(a) Allocated Federal Election Activity (from Schedule H4)	0.00	0.00
(i) Federal Share .....		
(ii) "Lavin" Share .....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b)) .....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) .....	0.00	500.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31) .....	0.00	500.00

2008-03-08 10:00:00 AM

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 02/2003)

**III. Net Contributions/Operating Expenditures**

**COLUMN A**  
Total This Period

**COLUMN B**  
Calendar Year-to-Date

- 33. Total Contributions (other than loans)  
(from Line 11(d), page 3) .....
- 34. Total Contribution Refunds  
(from Line 28(d)) .....
- 35. Net Contributions (other than loans)  
(subtract Line 34 from Line 33) .....
- 36. Total Federal Operating Expenditures  
(add Line 21(a)(1) and Line 21(b)) .....
- 37. Offsets to Operating Expenditures  
(from Line 15, page 3) .....
- 38. Net Operating Expenditures  
(subtract Line 37 from Line 36) .....

300
000
000
000
000
000

000
000
000
000
000
000

112 113 114 115 116 117 118 119 120 121 122 123 124 125 126 127 128 129 130 131 132 133 134 135 136 137 138 139 140 141 142 143 144 145 146 147 148 149 150 151 152 153 154 155 156 157 158 159 160 161 162 163 164 165 166 167 168 169 170 171 172 173 174 175 176 177 178 179 180 181 182 183 184 185 186 187 188 189 190 191 192 193 194 195 196 197 198 199 200 201 202 203 204 205 206 207 208 209 210 211 212 213 214 215 216 217 218 219 220 221 222 223 224 225 226 227 228 229 230 231 232 233 234 235 236 237 238 239 240 241 242 243 244 245 246 247 248 249 250 251 252 253 254 255 256 257 258 259 260 261 262 263 264 265 266 267 268 269 270 271 272 273 274 275 276 277 278 279 280 281 282 283 284 285 286 287 288 289 290 291 292 293 294 295 296 297 298 299 300 301 302 303 304 305 306 307 308 309 310 311 312 313 314 315 316 317 318 319 320 321 322 323 324 325 326 327 328 329 330 331 332 333 334 335 336 337 338 339 340 341 342 343 344 345 346 347 348 349 350 351 352 353 354 355 356 357 358 359 360 361 362 363 364 365 366 367 368 369 370 371 372 373 374 375 376 377 378 379 380 381 382 383 384 385 386 387 388 389 390 391 392 393 394 395 396 397 398 399 400 401 402 403 404 405 406 407 408 409 410 411 412 413 414 415 416 417 418 419 420 421 422 423 424 425 426 427 428 429 430 431 432 433 434 435 436 437 438 439 440 441 442 443 444 445 446 447 448 449 450 451 452 453 454 455 456 457 458 459 460 461 462 463 464 465 466 467 468 469 470 471 472 473 474 475 476 477 478 479 480 481 482 483 484 485 486 487 488 489 490 491 492 493 494 495 496 497 498 499 500 501 502 503 504 505 506 507 508 509 510 511 512 513 514 515 516 517 518 519 520 521 522 523 524 525 526 527 528 529 530 531 532 533 534 535 536 537 538 539 540 541 542 543 544 545 546 547 548 549 550 551 552 553 554 555 556 557 558 559 560 561 562 563 564 565 566 567 568 569 570 571 572 573 574 575 576 577 578 579 580 581 582 583 584 585 586 587 588 589 590 591 592 593 594 595 596 597 598 599 600 601 602 603 604 605 606 607 608 609 610 611 612 613 614 615 616 617 618 619 620 621 622 623 624 625 626 627 628 629 630 631 632 633 634 635 636 637 638 639 640 641 642 643 644 645 646 647 648 649 650 651 652 653 654 655 656 657 658 659 660 661 662 663 664 665 666 667 668 669 670 671 672 673 674 675 676 677 678 679 680 681 682 683 684 685 686 687 688 689 690 691 692 693 694 695 696 697 698 699 700 701 702 703 704 705 706 707 708 709 710 711 712 713 714 715 716 717 718 719 720 721 722 723 724 725 726 727 728 729 730 731 732 733 734 735 736 737 738 739 740 741 742 743 744 745 746 747 748 749 750 751 752 753 754 755 756 757 758 759 760 761 762 763 764 765 766 767 768 769 770 771 772 773 774 775 776 777 778 779 780 781 782 783 784 785 786 787 788 789 790 791 792 793 794 795 796 797 798 799 800 801 802 803 804 805 806 807 808 809 810 811 812 813 814 815 816 817 818 819 820 821 822 823 824 825 826 827 828 829 830 831 832 833 834 835 836 837 838 839 840 841 842 843 844 845 846 847 848 849 850 851 852 853 854 855 856 857 858 859 860 861 862 863 864 865 866 867 868 869 870 871 872 873 874 875 876 877 878 879 880 881 882 883 884 885 886 887 888 889 890 891 892 893 894 895 896 897 898 899 900 901 902 903 904 905 906 907 908 909 910 911 912 913 914 915 916 917 918 919 920 921 922 923 924 925 926 927 928 929 930 931 932 933 934 935 936 937 938 939 940 941 942 943 944 945 946 947 948 949 950 951 952 953 954 955 956 957 958 959 960 961 962 963 964 965 966 967 968 969 970 971 972 973 974 975 976 977 978 979 980 981 982 983 984 985 986 987 988 989 990 991 992 993 994 995 996 997 998 999 1000

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:			PAGE	OF
	<input checked="" type="checkbox"/> 11a 13	<input type="checkbox"/> 11b 14	<input type="checkbox"/> 11c 15	<input type="checkbox"/> 12 16	<input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (in full)  
**ROBINSON L. COLE FEDERAL POLITICAL ACTION COMMITTEE**

**A.**

Full Name (Last, First, Middle Initial)  
Mailing Address  
City State Zip Code

FEC ID number of contributing federal political committee: **C**

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt  
 /  /

Amount of Each Receipt this Period

**B.**

Full Name (Last, First, Middle Initial)  
Mailing Address  
City State Zip Code

FEC ID number of contributing federal political committee: **C**

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt  
 /  /

Amount of Each Receipt this Period

**C.**

Full Name (Last, First, Middle Initial)  
Mailing Address  
City State Zip Code

FEC ID number of contributing federal political committee: **C**

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt  
 /  /

Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional) ▶

TOTAL This Period (last page this line number only) ▶

000

000

2025 RELEASE UNDER E.O. 14176

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE OF

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (in Full)

**ROBINSON R. COLE FEDERAL POLITICAL ACTION COMMITTEE**

Full Name (Last, First, Middle Initial)

Date of Disbursement

MM	DD	YYYY
----	----	------

Mailing Address

City

State Zip Code

Purpose of Disbursement

Candidate Name

Category/Type

Amount of Each Disbursement this Period

Office Sought:

House  
 Senate  
 President

Disbursement For:

Primary  General  
 Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

Date of Disbursement

MM	DD	YYYY
----	----	------

Mailing Address

City

State Zip Code

Purpose of Disbursement

Candidate Name

Category/Type

Amount of Each Disbursement this Period

Office Sought:

House  
 Senate  
 President

Disbursement For:

Primary  General  
 Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

Date of Disbursement

MM	DD	YYYY
----	----	------

Mailing Address

City

State Zip Code

Purpose of Disbursement

Candidate Name

Category/Type

Amount of Each Disbursement this Period

Office Sought:

House  
 Senate  
 President

Disbursement For:

Primary  General  
 Other (specify) ▼

State: District:

SUBTOTAL of Disbursements This Page (optional)

TOTAL This Period (last page this line number only)

0.00
0.00

SCHEDULE C (FEC Form 3X)  
LOANS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

PAGE 1 OF 1  
FOR LINE 18 OF FORM 3X

NAME OF COMMITTEE (in full)

ROBINSON & COLE FEDERAL POLITICAL ACTION COMMITTEE

LOAN SOURCE Full Name (Last, First, Middle Initial)

Election:  
 Primary  
 General  
 Other (specify) ▼

Mailing Address

City State ZIP Code

Original Amount of Loan

Aggregate Payment To Date

Balance Outstanding at Close of This Period

TERMS

Date Incurred

Date Due

Interest Rate

Secured:

% (ap)  Yes  No

Yes  No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount Guaranteed Outstanding:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount Guaranteed Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount Guaranteed Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount Guaranteed Outstanding:

SUBTOTALS This Period This Page (optional)

TOTALS This Period (last page in this line only)

000  
 000

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.



# SCHEDULE C-1 (FEC Form 3X) LOANS AND LINES OF CREDIT FROM LENDING INSTITUTIONS

Supplementary for  
Information found on  
Page \_\_\_\_\_ of Schedule C

Federal Election Commission, Washington, D.C. 20463

NAME OF COMMITTEE (in Full) <b>ROBINSON &amp; COLE FEDERAL POLITICAL ACTION COMMITTEE</b>	FEC IDENTIFICATION NUMBER <b>000341321</b>
--	---

LENDING INSTITUTION (LENDER) Full Name	Amount of Loan	Interest Rate (APR)
		%
Mailing Address	Date incurred or Established	
City State Zip Code	Date Due	

A. Has loan been restructured?  No  Yes *If yes, date originally incurred*

B. If line of credit, Amount of this Draw:  Total Outstanding Balance:

C. Are other parties secondarily liable for the debt incurred?  
 No  Yes (Endorsers and guarantors must be reported on Schedule C.)

D. Are any of the following pledged as collateral for the loan: real estate, personal property, goods, negotiable instruments, certificates of deposit, chattel papers, stocks, accounts receivable, cash on deposit, or other similar traditional collateral?  
 No  Yes If yes, specify: \_\_\_\_\_

What is the value of this collateral?

Does the lender have a perfected security interest in it?  No  Yes

E. Are any future contributions or future receipts of interest income, pledged as collateral for the loan?  No  Yes If yes, specify: \_\_\_\_\_

What is the estimated value?

A depository account must be established pursuant to 11 CFR 100.82(e)(2) and 100.142(a)(2).

Date account established:  Location of account: \_\_\_\_\_  
Address: \_\_\_\_\_  
City, State, Zip: \_\_\_\_\_

F. If neither of the types of collateral described above was pledged for this loan, or if the amount pledged does not equal or exceed the loan amount, state the basis upon which this loan was made and the basis on which it assures repayment.

G. COMMITTEE TREASURER  
Typed Name \_\_\_\_\_ DATE   
Signature \_\_\_\_\_

H. Attach a signed copy of the loan agreement.

I. TO BE SIGNED BY THE LENDING INSTITUTION:

- To the best of this institution's knowledge, the terms of the loan and other information regarding the extension of the loan are accurate as stated above.
- The loan was made on terms and conditions (including interest rate) no more favorable at the time than those imposed for similar extensions of credit to other borrowers of comparable credit worthiness.
- This institution is aware of the requirement that a loan must be made on a basis which assures repayment, and has complied with the requirements set forth at 11 CFR 100.82 and 100.142 in making this loan.

AUTHORIZED REPRESENTATIVE  
Typed Name \_\_\_\_\_ DATE   
Signature \_\_\_\_\_ Title \_\_\_\_\_

2003-03-25 10:05 AM

**SCHEDULE D (FEC Form 3X)  
DEBTS AND OBLIGATIONS**  
Excluding Loans

(Use separate  
schedule(s)  
for each  
numbered line)

PAGE 1 OF 1

FOR LINE NUMBER  
(check only one)

10

NAME OF COMMITTEE (In Full)

ROBINSON & COLE FEDERAL POLITICAL ACTION COMMITTEE

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor  
  
Mailing Address  
  
City State Zip Code

Nature of Debt (Purpose):

Outstanding Balance Beginning This Period

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Nature of Debt (Purpose):

Mailing Address  
  
City State Zip Code

Outstanding Balance Beginning This Period

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Nature of Debt (Purpose):

Mailing Address  
  
City State Zip Code

Outstanding Balance Beginning This Period

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period

1) SUBTOTALS This Period This Page (optional) .....

2) TOTALS This Period (last page this line number only) .....

3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) .....

4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) .....

0.00  
0.00  
0.00  
0.00

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

PAGE 1 OF 1  
FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <u>ROBINSON B. GILE FEDERAL POLITICAL ACTION COMMITTEE</u>	FEC IDENTIFICATION NUMBER <u>C 0 0 3 4 1 3 2 1</u>
---	---

Check if  24-hour notice  48-hour notice

Full Name (Last, First, Middle Initial) of Payee	Date Month: <input type="text" value="12"/> Day: <input type="text" value="31"/> Year: <input type="text" value="2007"/>
Mailing Address	
City	State <input type="text" value="MD"/> Zip Code <input type="text" value="20711"/>

Amount

Purpose of Expenditure	Category/Type <input type="text"/>
Name of Federal Candidate Supported or Opposed by Expenditure:	
Calendar Year-To-Date Per Election or Office Sought <input style="width: 150px;" type="text"/>	

Office Sought:  House State: \_\_\_\_\_  
 Senate District: \_\_\_\_\_  
 President

Check One:  Support  Oppose

Disbursement For:  Primary  General  
 Other (specify) \_\_\_\_\_

Full Name (Last, First, Middle Initial) of Payee	Date Month: <input type="text" value="12"/> Day: <input type="text" value="31"/> Year: <input type="text" value="2007"/>
Mailing Address	
City	State <input type="text" value="MD"/> Zip Code <input type="text" value="20711"/>

Amount

Purpose of Expenditure	Category/Type <input type="text"/>
Name of Federal Candidate Supported or Opposed by Expenditure:	
Calendar Year-To-Date Per Election or Office Sought <input style="width: 150px;" type="text"/>	

Office Sought:  House State: \_\_\_\_\_  
 Senate District: \_\_\_\_\_  
 President

Check One:  Support  Oppose

Disbursement For:  Primary  General  
 Other (specify) \_\_\_\_\_

(a) SUBTOTAL of Itemized Independent Expenditures	
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	<u>6 00</u>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Signature \_\_\_\_\_ Date

Federal Election Commission  
**ENVELOPE REPLACEMENT PAGE  
 FOR INCOMING DOCUMENTS**

The FEC added this page to the end of this filing to indicate how it was received.

<input type="checkbox"/> Hand Delivered	Date of Receipt
<input type="checkbox"/> USPS First Class Mail	Postmarked
<input checked="" type="checkbox"/> USPS Registered/Certified	Postmarked (R/C) 7-13-04
<input type="checkbox"/> USPS Priority Mail	Postmarked
Delivery Confirmation™ Label <input type="checkbox"/>	
<input type="checkbox"/> USPS Express Mail	Postmarked
<input type="checkbox"/> Postmark Illegible	
<input type="checkbox"/> No Postmark	
<input type="checkbox"/> Overnight Delivery Service (Specify):	Shipping Date
<input type="checkbox"/> Received from House Records & Registration Office	Date of Receipt
<input type="checkbox"/> Received from Senate Public Records Office	Date of Receipt
<input type="checkbox"/> Received from Electronic Filing Office	Date of Receipt
<input type="checkbox"/> Other (Specify):	Date of Receipt or Postmarked
JMP PREPARER (5/2004)	7-17-04 DATE PREPARED