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REPORT OF RECEIPTS AND DISBURSEMENTS

SECRETARY OF THE SENATE

03 APR -9 PM 12: 14

For An Authorized Committee
(Summary Page)

1. NAME OF COMMITTEE (in full) Friends of Schumer	
ADDRESS (number and street) [X] Check if different than previously reported. 60 Madison Ave. Suite 1026	2. FEC IDENTIFICATION NUMBER C00346312
CITY, STATE and ZIP CODE: New York, NY 10010 — STATE/DISTRICT: NY	3. IS THIS REPORT AN AMENDMENT? [X] YES [ ] NO

4. TYPE OF REPORT

[ ] April 15 Quarterly Report

[ ] July 15 Quarterly Report

[ ] October 15 Quarterly Report

[ ] January 31 Year End Report

[X] 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 [X] Primary Election [X] General Election [ ] Special Election [ ] Runoff Election

SUMMARY

5 Covering Period 01/01/00 through 6/30/00

		COLUMN A This Period	COLUMN B Calendar Year to Date
6.	Net Contribution (other than loans)		
(a)	Total Contributions (other than loans) (from Line 11 (e))	$ 1,969,008.47	$ 1,969,008.47
(b)	Total Contribution Refunds (from Line 20 (d))	15,100.00	15,100.00
(c)	Net Contributions (other than loans) (subtract Line 6 (b) from 6 (a))	1,953,908.47	1,953,908.47
7.	Net Operating Expenditures		
(a)	Total Operating Expenditures (from Line 17)	143,780.84	143,780.84
(b)	Total Offsets to Operating Expenditures (from Line 14)	283.51	283.51
(c)	Net Operating Expenditures (subtract Line 7 (b) from 7 (a))	143,497.33	143,497.33
8.	Cash on Hand at Close of Reporting Period (from Line 27)	2,720,384.18	
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 contact:
Federal Election Commission
999 E Street, NW
Washington, DC 20463
Toll Free 800-424-9530
Local 202-694-1100

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: Steven D. Goldenkranz

Signature of Treasurer: Steven D. Goldenkranz

Date

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

FEC FORM 3
(rev.6/00 4/87)