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FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full)

USE FEC MAILING LABEL OR TYPE OR PRINT

Example: If typing, type over the lines.

12FE4MS

Friends of the Arts

ADDRESS (number and street)

12600 Two Hammer Square

Check if different than previously reported. (ACC)

Raleigh

NC

27601

2. FEC IDENTIFICATION NUMBER

CITY

STATE

ZIP CODE

000378091

3. IS THIS REPORT

NEW (N)

OR

AMENDED (A)

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:

- April 15 Quarterly Report (Q1)
- July 15 Quarterly Report (Q2)
- October 15 Quarterly Report (Q3)
- January 31 Year-End Report (YE)
- July 31 Mid-Year Report (Non-election Year Only) (MY)
- Termination Report (TER)

(b) Monthly Reports Due On:

- Feb 20 (M2)
- Mar 20 (M3)
- Apr 20 (M4)
- May 20 (M5)
- Jun 20 (M6)
- Jul 20 (M7)
- Aug 20 (M8)
- Sep 20 (M9)
- Oct 20 (M10)
- Nov 20 (M11) (Non-Election Year Only)
- Dec 20 (M12) (Non-Election Year Only)
- Jan 31 (YE)

(c) 18-Day PRE-Election Report for the:

- Primary (12P)
- General (12G)
- Runoff (12R)
- Conventions (12C)
- Special (12S)

Election on

in the State of

(d) 90-Day POST-Election Report for the:

- General (30G)
- Runoff (30R)
- Special (30S)

Election on

in the State of

5. Covering Period

04 01 2002

through

06 30 2002

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

Mack Paul

Signature of Treasurer

Mack Paul

Date

07 15 2002

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 3X
(Revised 1/01)

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Revised 1/01)

Page 2

Write or Type Committee Name

Friends of the Arts

Report Covering the Period: From: **04** **01** **2002**

To: **06** **30** **2002**

**COLUMN A
This Period**

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

B. (a) Cash on Hand January 1. **0**

(b) Cash on Hand at Beginning of Reporting Period **0**

(c) Total Receipts (from Line 19) **300000**

300000

(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) **300000**

300000

7. Total Disbursements (from Line 30) **200000**

200000

8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) **100000**

100000

9. Debts and Obligations Owed TO the Committee (itemize all on Schedule C and/or Schedule D) **0**

10. Debts and Obligations Owed BY the Committee (itemize all on Schedule C and/or Schedule D) **0**

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

For further information contact:

Federal Election Commission
990 E Street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE
of Receipts

FEC Form 5X (Revised 1/01)

Page 3

Write or Type Committee Name

Report Covering the Period: From:

04 01 2002

To:

06 30 2002

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 (use Schedule A)	0	0
(ii) Unitemized	3 000 00	0
(iii) TOTAL (add	3 000 00	0
Lines 11(a)(i) and (ii)	0	0
(b) Political Party Committees	0	0
(c) Other Political Committees	0	0
(such as PACs)	0	0
(d) Total Contributions (add Lines	3 000 00	3 000 00
11(a)(ii), (b), and (c)) (Carry	0	0
Totals to Line 32, page 4)	0	0
12. Transfers From Affiliated/Other	0	0
Party Committees	0	0
13. All Loans Received	0	0
14. Loan Repayments Received	0	0
15. Offsets To Operating Expenditures	0	0
(Refunds, Rebates, etc.)	0	0
(Carry Totals to Line 36, page 4)	0	0
16. Refunds of Contributions Made	0	0
to Federal Candidates and Other	0	0
Political Committees	0	0
17. Other Federal Receipts	0	0
(Dividends, interest, etc.)	0	0
18. Transfers from Nonfederal	0	0
Account for Joint Activity	0	0
19. Total Receipts (add Lines 11(d),	3 000 00	3 000 00
12, 13, 14, 15, 16, 17, and 18)	0	0
20. Total Federal Receipts	3 000 00	3 000 00
(subtract Line 18 from Line 19)	0	0

DETAILED SUMMARY PAGE
of Disbursements

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4) (i) Federal Share	0	0
(ii) Non-Federal Share	0	0
(b) Other Federal Operating Expenditures	0	0
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	0	0
22. Transfers to Affiliate/Other Party Committees	0	0
23. Contributions to Federal Candidates/Committees and Other Political Committees	2,000.00	2,000.00
24. Independent Expenditures (use Schedule E)	0	0
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. §447a(d)) (use Schedule F)	0	0
26. Loan Repayments Made	0	0
27. Loans Made	0	0
28. Refunds of Contributions To: (a) Individuals/Persons Other Than Political Committees	0	0
(b) Political Party Committees	0	0
(c) Other Political Committees (such as PACs)	0	0
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))	0	0
29. Other Disbursements	0	0
30. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), and 29)	2,000.00	2,000.00
31. Total Federal Disbursements (subtract Line 21(a)(i) from Line 30)	2,000.00	2,000.00
III. Net Contributions/Operating Expenditures		
32. Total Contributions (other than loans) (from Line 11(d), page 3)	3,000.00	3,000.00
33. Total Contribution Refunds (from Line 28(d))	0	0
34. Net Contributions (other than loans) (subtract Line 33 from Line 32)	3,000.00	3,000.00
35. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	0	0
36. Offsets to Operating Expenditures (from Line 15, page 3)	0	0
37. Net Operating Expenditures (subtract Line 36 from Line 35)	0	0

**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 type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be exact 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)
Friends of the Arts

A. Full Name (Last, First, Middle Initial)
Medane, G. Allen

Mailing Address
P.O. Box 339

City **Mocksville, NC** State **NC** Zip Code **27028**

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

Name of Employer: **Medane Charitable Foundation** Occupation: **President**

Receipt For:
 Primary General
 Other (specify) **▼**

Aggregate Year-to-Date **1,000.00**

Date of Receipt
05 06 2002

Amount of Each Receipt this Period
1,000.00

B. Full Name (Last, First, Middle Initial)
Medane, Marianne

Mailing Address
828 Woodward P.O.

City **Mocksville** State **NC** Zip Code **27028**

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

Name of Employer: **none** Occupation: **civic volunteer**

Receipt For:
 Primary General
 Other (specify) **▼**

Aggregate Year-to-Date **1,000.00**

Date of Receipt
05 06 2002

Amount of Each Receipt this Period
1,000.00

C. Full Name (Last, First, Middle Initial)
Daniels, Julia

Mailing Address
1515 Glenwood Ave.

City **Raleigh** State **NC** Zip Code **27608**

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

Name of Employer: **none** Occupation: **civic volunteer**

Receipt For:
 Primary General
 Other (specify) **▼**

Aggregate Year-to-Date **1,000.00**

Date of Receipt
05 24 2002

Amount of Each Receipt this Period
1,000.00

SUBTOTAL of Receipts This Page (optional) **3,000.00**

TOTAL This Period (last page this line number only) **3,000.00**

**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 type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 26	<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (in Full)
Friends of the Arts

A. Full Name (Last, First, Middle Initial) **Price for Congress**

Mailing Address **PO Box 1286**

City **Raleigh** State **NC** Zip Code **27602**

Purpose of Disbursement **Campaign contribution**

Candidate Name **David Price**

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: **NC** District: **21**

Date of Disbursement: **05/12/2002**

Amount of Each Disbursement this Period: **1,000.00**

B. Full Name (Last, First, Middle Initial) **Congressman Richard Burr**

Mailing Address **P.O. Box 5928**

City **Winston-Salem, NC** State **NC** Zip Code **27113-5928**

Purpose of Disbursement **campaign contribution**

Candidate Name **Richard Burr**

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: **NC** District: **5**

Date of Disbursement: **05/22/2002**

Amount of Each Disbursement this Period: **1,000.00**

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

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement

Amount of Each Disbursement this Period

SUBTOTAL of Disbursements This Page (see line 12b) **2,000.00**

TOTAL This Period (last page this line number only) **2,000.00**

Federal Election Commission

ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS

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

<input checked="" type="checkbox"/> Hand Delivered	Date of Receipt 7-11-02
<input type="checkbox"/> First Class Mail	POSTMARKED
<input type="checkbox"/> Registered/Certified Mail	POSTMARKED (R/C)
<input type="checkbox"/> No Postmark	
<input type="checkbox"/> Postmark Illegible	
<input type="checkbox"/> Received from the House office of Records and Registration	Date of Receipt
<input type="checkbox"/> Received from the Senate Office of Public Records	Date of Receipt
<input type="checkbox"/> Other (Specify):	Postmarked and/or Date of Receipt
<input type="checkbox"/> Electronic Filing	
<i>SL</i> PREPARER	7-11-02 DATE PREPARED