

REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee

(Summary Page)

1 / 7
03/02/2000 10 : 11

1. NAME OF COMMITTEE (in full) Friends of Melinda Katz		2. FEC IDENTIFICATION NUMBER C00331793
ADDRESS (number and street) P.O. Box 831	<input type="checkbox"/> Check if different than previously reported	
CITY, STATE, and ZIP CODE Forest Hills NY 11375	STATE / DISTRICT NY / 9	3. IS THIS REPORT AN AMENDMENT? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO

4. TYPE OF REPORT

- April 15 Quarterly Report Twelfth day report preceding _____ (election type) _____ election on _____ in the State of _____.
- July 15 Quarterly Report Thirtieth day report following the General Election
- October 15 Quarterly Report Termination report
- January 31 Year End Report on _____ in the State of _____.
- July 31 Mid-Year Report (Non-election Year Only)

This report contains activity for Primary election General election Runoff election Special election

SUMMARY

5. Covering period	COLUMN A This Period	COLUMN B Calendar Year-to-Date
07/01/1999 through 12/31/1999		
6. Net contributions (other than loans)		
(a) Total Contributions (other than loans) (from line 11(a))	0.00	1192.63
(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))	0.00	1192.63
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from line 17)	5495.70	11750.36
(b) Total Offsets to Operating Expenditures (from line 14)	0.00	3078.04
(c) Net Operating Expenditures (subtract Line 7(b) from 7(a))	5495.70	8672.32
8. Cash on Hand at Close of Reporting Period (from line 27)	40762.80	For further information contact: Federal Election Commission 999 E Street, NW Washington, DC 20463 Toll Free 800-424-9530 Local 202-219-3420
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	6000.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	

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

Electronically Filed by Ronald A. Kaye

Signature of Treasurer

Date

01/31/2000

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

--	--	--	--	--	--	--	--	--	--

FEC FORM 3
(revised 4/87)

DETAILED SUMMARY PAGE
of Receipts and Disbursements
 (Page 2, FEG Form 3)

Name of Committee (In Full) Friends of Melinda Katz	Report Covering the Period From: 07/01/1998 To: 12/31/1998	
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)	0.00	
(ii) Unitemized	0.00	
(iii) Total of contributions from individuals	0.00	980.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	212.63
(d) The Candidate	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add 11(a)(iii), (b), (c) and (d))	0.00	1192.63
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES	0.00	0.00
13. LOANS:		
(a) Made or Guaranteed by the Candidate	0.00	0.00
(b) All Other Loans	0.00	0.00
(c) TOTAL LOANS (add 13(a) and (b))	0.00	0.00
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.)	0.00	3078.04
15. OTHER RECEIPTS (Dividends, Interest, etc.)	410.77	688.43
16. TOTAL RECEIPTS (add 11(e), 12, 13(c), 14 and 15)	410.77	5160.10
II. DISBURSEMENTS		
17. OPERATING EXPENDITURES	5495.70	11750.36
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate	0.00	0.00
(b) Of All Other Loans	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add 19(a) and (b))	0.00	0.00
20. 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 20(a), (b) and (c))	0.00	0.00
21. OTHER DISBURSEMENTS	6000.00	6000.00
22. TOTAL DISBURSEMENTS (add 17, 18, 19(c), 20(d) and 21)	11495.70	17750.36
III. CASH SUMMARY		
23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD		51867.73
24. TOTAL RECEIPTS THIS PERIOD (from Line 16)		410.77
25. SUBTOTAL (add Line 23 and Line 24)		52278.50
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22)		11495.70
27. CASH ON HAND AT CLOSE OF THE REPORTING PERIOD (subtract Line 26 from 25)		40782.80

SCHEDULE A		ITEMIZED RECEIPTS		3 / 7
			Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER 15
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) Friends of Melinda Katz				
Full Name, Mailing Address, and ZIP Code Chase Manhattan Bank 107-36 71st Avenue Forest Hills NY 11375	Name of Employer Occupation	Date (month, day, year) 07/15/1999	Amount of Each Receipt this Period 80.75 INTEREST INCOME	
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Aggregate Year-to-Date > \$ 559.41			
Full Name, Mailing Address, and ZIP Code Chase Manhattan Bank 107-36 71st Avenue Forest Hills NY 11375	Name of Employer Occupation	Date (month, day, year) 08/13/1999	Amount of Each Receipt this Period 62.50 INTEREST INCOME	
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Aggregate Year-to-Date > \$ 621.91			
Full Name, Mailing Address, and ZIP Code Chase Manhattan Bank 107-36 71st Avenue Forest Hills NY 11375	Name of Employer Occupation	Date (month, day, year) 09/15/1999	Amount of Each Receipt this Period 71.24 INTEREST INCOME	
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Aggregate Year-to-Date > \$ 693.15			
Full Name, Mailing Address, and ZIP Code Chase Manhattan Bank 107-36 71st Avenue Forest Hills NY 11375	Name of Employer Occupation	Date (month, day, year) 10/15/1999	Amount of Each Receipt this Period 64.87 INTEREST INCOME	
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Aggregate Year-to-Date > \$ 758.02			
Full Name, Mailing Address, and ZIP Code Chase Manhattan Bank 107-36 71st Avenue Forest Hills NY 11375	Name of Employer Occupation	Date (month, day, year) 11/15/1999	Amount of Each Receipt this Period 67.14 INTEREST INCOME	
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Aggregate Year-to-Date > \$ 825.16			
Full Name, Mailing Address, and ZIP Code Chase Manhattan Bank 107-36 71st Avenue Forest Hills NY 11375	Name of Employer Occupation	Date (month, day, year) 12/14/1999	Amount of Each Receipt this Period 64.27 INTEREST INCOME	
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Aggregate Year-to-Date > \$ 889.43			
SUBTOTALS of Receipts This Page (Optional)				
TOTALS This Period (last page this line number only)				410.77

SCHEDULE B		ITEMIZED DISBURSEMENTS		4 / 7
		Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER 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) Friends of Melinda Katz				
Full Name, Mailing Address, and ZIP Code Mail Handlers 46 West 25th Street New York NY 10010	Purpose of Disbursement PRINTING Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Date (month, day, year) 07/06/1998	Amount of Each Disbursement This Period 649.50	
Full Name, Mailing Address, and ZIP Code Chase Manhattan Bank 107-36 71st Avenue Forest Hills NY 11375	Purpose of Disbursement Bank Fees Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Date (month, day, year) 07/09/1998	Amount of Each Disbursement This Period 25.00	
Full Name, Mailing Address, and ZIP Code Greentree Vendor Services 3601 Minnesota Drive 9th Floor Bloomington MN 55435	Purpose of Disbursement Computer Lease Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Date (month, day, year) 07/09/1998	Amount of Each Disbursement This Period 438.78	
Full Name, Mailing Address, and ZIP Code Hon. Melinda Katz 67-42 Ingram Street Forest Hills NY 11375	Purpose of Disbursement (House - NY - 9) Reimb. of library committee donation Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Date (month, day, year) 07/13/1998	Amount of Each Disbursement This Period 45.00	
Full Name, Mailing Address, and ZIP Code NYU Women's O.W.N. One Gustave L. Levy Place Box 1223 New York NY 10029	Purpose of Disbursement Dinner Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Date (month, day, year) 07/13/1998	Amount of Each Disbursement This Period 500.00	
Full Name, Mailing Address, and ZIP Code Greentree Vendor Services 3601 Minnesota Drive 9th Floor Bloomington MN 55435	Purpose of Disbursement Computer Lease Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Date (month, day, year) 08/03/1998	Amount of Each Disbursement This Period 210.36	
Full Name, Mailing Address, and ZIP Code Integrated Professional Services 215-12 74th Avenue Bayside NY 11364	Purpose of Disbursement Accounting Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Date (month, day, year) 08/16/1998	Amount of Each Disbursement This Period 400.00	
Full Name, Mailing Address, and ZIP Code NYS Office of Court Admin GPO Box 29327 New York NY 10087	Purpose of Disbursement Dues Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Date (month, day, year) 08/19/1998	Amount of Each Disbursement This Period 300.00	
Full Name, Mailing Address, and ZIP Code Greentree Vendor Services 3601 Minnesota Drive 9th Floor Bloomington MN 55435	Purpose of Disbursement Computer Lease Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Date (month, day, year) 08/26/1998	Amount of Each Disbursement This Period 210.36	
SUBTOTALS of Disbursements This Page (Optional)				
TOTALS This Period (last page this line number only)				

SCHEDULE B		ITEMIZED DISBURSEMENTS		5 / 7
		Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER 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) Friends of Melinda Katz				
Full Name, Mailing Address, and ZIP Code Integrated Professional Services 215-12 74th Avenue Bayside NY 11364	Purpose of Disbursement Accounting Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Date (month, day, year) 09/02/1998	Amount of Each Disbursement This Period 200.00	
Full Name, Mailing Address, and ZIP Code Greentree Vendor Services 3601 Minnesota Drive 9th Floor Bloomington MN 55435	Purpose of Disbursement Computer Lease Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Date (month, day, year) 09/27/1998	Amount of Each Disbursement This Period 210.36	
Full Name, Mailing Address, and ZIP Code Integrated Professional Services 215-12 74th Avenue Bayside NY 11364	Purpose of Disbursement Accounting Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Date (month, day, year) 10/18/1998	Amount of Each Disbursement This Period 200.00	
Full Name, Mailing Address, and ZIP Code Integrated Professional Services 215-12 74th Avenue Bayside NY 11364	Purpose of Disbursement Accounting Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Date (month, day, year) 11/01/1998	Amount of Each Disbursement This Period 200.00	
Full Name, Mailing Address, and ZIP Code Integrated Professional Services 215-12 74th Avenue Bayside NY 11364	Purpose of Disbursement Accounting Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Date (month, day, year) 11/01/1998	Amount of Each Disbursement This Period 210.36	
Full Name, Mailing Address, and ZIP Code Greentree Vendor Services 3601 Minnesota Drive 9th Floor Bloomington MN 55435	Purpose of Disbursement Accounting Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Date (month, day, year) 11/29/1998	Amount of Each Disbursement This Period 210.36	
Full Name, Mailing Address, and ZIP Code Integrated Professional Services 215-12 74th Avenue Bayside NY 11364	Purpose of Disbursement Accounting Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Date (month, day, year) 12/02/1998	Amount of Each Disbursement This Period 200.00	
Full Name, Mailing Address, and ZIP Code Emily's List 805 15th Street NW Suite 400 Washington DC 20005	Purpose of Disbursement Donation Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Date (month, day, year) 12/21/1998	Amount of Each Disbursement This Period 1000.00	
SUBTOTALS of Disbursements This Page (Optional)				
TOTALS This Period (last page this line number only)			5210.08	

SCHEDULE B	ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the Detailed Summary Page	6 / 7
			FOR LINE NUMBER 21
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) Friends of Melinda Katz			
Full Name, Mailing Address, and ZIP Code RFK Democratic Organization 96-21 89th Avenue Forest Hills NY 11375	Purpose of Disbursement Loan	Date (month, day, year) 07/06/1998	Amount of Each Disbursement This Period 6000.00
Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General			
<input type="checkbox"/> Other (specify) :			
SUBTOTALS of Disbursements This Page (Optional)			
TOTALS This Period (last page this line number only)			6000.00

SCHEDULE C (Revised 3/80)	LOANS	Use separate schedule(s) for each numbered line	717 FOR LINE NUMBER 8
NAME OF COMMITTEE (in Full) Friends of Melinda Katz			
Full Name, Mailing Address, and ZIP Code of Loan Source RFK Democratic Organization 96-21 69th Avenue Forest Hills NY 11375	Original Amount of Loan 6000.00	Cumulative Payment to Date 0.00	Balance Outstanding at Close of This Period 6000.00
Election: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :		REF-ID: SC/9.5952	
TERMS: Date incurred: 07/06/1999 Date Due: Interest Rate(%) = <input type="checkbox"/> Secured			
Empty space for detailed loan information			
SUBTOTALS This Period This Page (Optional)			
TOTALS This Period (last page this line number only)			6000.00
Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary			