

**FEC FORM 3P** **REPORT OF RECEIPTS AND DISBURSEMENTS**  
 BY AN AUTHORIZED COMMITTEE OF A CANDIDATE FOR THE OFFICE OF PRESIDENT OR VICE PRESIDENT

Office Use Only

1. **NAME OF COMMITTEE** (in full, type or print) Example: If typing, type over the lines.

ADDRESS (number and street)

Check if different than previously reported. (ACC)

CITY  STATE  ZIP CODE

2. **FEC IDENTIFICATION NUMBER**  3. **THIS REPORT IS FOR** Primary  or General

4. **TYPE OF REPORT** (Choose One) Check here if this is a Termination Report (TER)

Quarterly Reports:

Monthly Reports:

- April 15 (Q1)  October 15 (Q3)
- July 15 (Q2)  January 31 Year-End Report (YE)
- Feb 20 (M2)  May 20 (M5)  Aug 20 (M8)  Nov 20 (M11)
- Mar 20 (M3)  Jun 20 (M6)  Sep 20 (M9)  Dec 20 (M12)
- Apr 20 (M4)  Jul 20 (M7)  Oct 20 (M10)  Jan 31 (YE)

Thirtieth day report following the General Election on

Twelfth day report preceding  election on  in the State of

Is this Report an Amendment?  yes  no

5. **Covering Period**  through

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

Signature of Treasurer  [Electronically Filed] Date

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g. All previous versions of this form are obsolete and should no longer be used.

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