

**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.

12FE4M5

ADDRESS (number and street)

☐

Check if different  
than previously  
reported. (ACC

CITY

STATE

ZIP CODE

2. **FEC IDENTIFICATION NUMBER**

C

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:

- |  |  |                                      |                                      |                                       |                                       |
|--|--|--------------------------------------|--------------------------------------|---------------------------------------|---------------------------------------|
| <input type="checkbox"/> April 15 (Q1) | <input type="checkbox"/> October 15 (Q3)                 | <input type="checkbox"/> Feb 20 (M2) | <input type="checkbox"/> May 20 (M5) | <input type="checkbox"/> Aug 20 (M8)  | <input type="checkbox"/> Nov 20 (M11) |
| <input type="checkbox"/> July 15 (Q2)  | <input type="checkbox"/> January 31 Year-End Report (YE) | <input type="checkbox"/> Mar 20 (M3) | <input type="checkbox"/> Jun 20 (M6) | <input type="checkbox"/> Sep 20 (M9)  | <input type="checkbox"/> Dec 20 (M12) |
|  |  | <input type="checkbox"/> Apr 20 (M4) | <input type="checkbox"/> Jul 20 (M7) | <input type="checkbox"/> Oct 20 (M10) | <input type="checkbox"/> 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

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.

Office  
Use  
Only

Write or Type Committee Name

Report Covering the Period:

From:

The diagram shows three rectangular boxes representing DNA sequences. The first box contains 'M' at the top left and 'M' at the top right, with a small square below the center. The second box contains 'D' at the top left and 'D' at the top right, with a small square below the center. The third box contains 'Y' at the top left, 'Y' at the top right, 'Y' at the top center, and 'Y' at the top far right, with a small square below the center. The boxes are separated by slashes.

To:

## SUMMARY

- |     |   |
|-----|---|
| 6.  | CASH ON HAND AT BEGINNING OF REPORTING PERIOD .....   |
|     | (From Line 22, Column A, Page 3) .....  |
| 7.  | TOTAL RECEIPTS THIS PERIOD<br>(From Line 22, Column A, Page 3) .....                              |
| 8.  | SUBTOTAL<br>(Lines 6 and 7) .....   |
| 9.  | TOTAL DISBURSEMENTS THIS PERIOD<br>(From Line 30, Column A, Page 2) .....                         |
| 10. | CASH ON HAND AT CLOSE OF THE REPORTING PERIOD<br>(Subtract Line 9 from 8.....)                    |
| 11. | DEBTS AND OBLIGATIONS OWED TO THE COMMITTEE<br>(Itemize All on Schedule C-P or Schedule D-P)..... |
| 12. | DEBTS AND OBLIGATIONS OWED BY THE COMMITTEE<br>(Itemize All on Schedule C-P or Schedule D-P)..... |
| 13. | EXPENDITURES SUBJECT TO LIMITATION .....  |

## NET ELECTION CYCLE-TO-DATE CONTRIBUTIONS AND EXPENDITURES

14. NET CONTRIBUTIONS (Other than Loans)  
 (Subtract Line 28d, Column B from 17e, Column B, Page 2) .....

15. NET OPERATING EXPENDITURES  
 (Subtract Line 20a, Column B from 23, Column B, Page 2).....

## Page 3

NAME OF COMMITTEE (in Full)

To:

**COLUMN B**  
**Election Cycle-to-Date**

- |   |  |  |
|---|--|--|
| 16. FEDERAL FUNDS (Itemize on Schedule A-P) .....                                       |  |  |
| 17. CONTRIBUTIONS (other than loans) FROM:  |  |  |
| (a) Individuals/Persons Other Than Political Committees                                 |  |  |
| (i) itemized .....  |  |  |
| (ii) unitemized .....   |  |  |
| (iii) Total contributions .....   |  |  |
| (b) Political Party Committees .....  |  |  |
| (c) Other Political Committees .....  |  |  |
| (d) The Candidate .....   |  |  |
| (e) TOTAL CONTRIBUTIONS (other than loans)<br>(Add 17(a), 17(b), 17(c) and 17(d)) ..... |  |  |
| 18. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES .....                                    |  |  |
| 19. LOANS RECEIVED:   |  |  |
| (a) Loans Received From or Guaranteed by Candidate .....                                |  |  |
| (b) Other Loans .....   |  |  |
| (c) TOTAL LOANS (Add 19(a) and 19(b)) .....   |  |  |
| 20. OFFSETS TO EXPENDITURES (Refunds, Rebates, etc.):                                   |  |  |
| (a) Operating .....   |  |  |
| (b) Fundraising .....   |  |  |
| (c) Legal and Accounting .....  |  |  |
| (d) TOTAL OFFSETS TO EXPENDITURES<br>(Add 20(a), 20(b) and 20(c)) .....                 |  |  |
| 21. OTHER RECEIPTS (Dividends, Interest, etc.) .....                                    |  |  |
| 22. TOTAL RECEIPTS<br>(Add 16, 17(e), 18, 19(c), 20(d) and 21) .....                    |  |  |

NAME OF COMMITTEE (in Full)

Report Covering the Period:

From:

To:

## II. DISBURSEMENTS

**COLUMN A**  
**Total This Period**

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

- |  |  |  |
|--|--|--|
| 23. OPERATING EXPENDITURES.....  |  |  |
| 24. TRANSFERS TO OTHER<br>AUTHORIZED COMMITTEES .....                      |  |  |
| 25. FUNDRAISING DISBURSEMENTS .....  |  |  |
| 26. EXEMPT LEGAL AND<br>ACCOUNTING DISBURSEMENTS.....                      |  |  |
| 27. LOAN REPAYMENTS MADE:  |  |  |
| (a) Repayments of Loans made or Guaranteed<br>by Candidate.....            |  |  |
| (b) Other Repayments .....   |  |  |
| (c) TOTAL LOAN REPAYMENTS MADE<br>(Add 27(a) and 27(b)).....               |  |  |
| 28. REFUNDS OF CONTRIBUTIONS TO:   |  |  |
| (a) Individuals/Persons Other Than Political<br>Committees.....            |  |  |
| (b) Political Party Committees.....  |  |  |
| (c) Other Political Committees .....                                       |  |  |
| (d) TOTAL CONTRIBUTION REFUNDS<br>(Add 28(a), 28(b) and 28(c)) .....       |  |  |
| 29. OTHER DISBURSEMENTS .....  |  |  |
| 30. TOTAL DISBURSEMENTS<br>(Add 23, 24, 25, 26, 27(c), 28(d) and 29) ..... |  |  |

### III. CONTRIBUTED ITEMS (Stock, Art Objects, Etc.)

31. ITEMS ON HAND TO BE LIQUIDATED  
(Attach List) .....

**ALLOCATION OF PRIMARY EXPENDITURES  
BY STATE FOR  
A PRESIDENTIAL CANDIDATE**  
(Used Only by Primary Committees Receiving  
or Expecting To Receive Federal Funds)

Office Use Only

1. NAME OF COMMITTEE (in full, type or print)

2. FEC IDENTIFICATION NUMBER

C

ADDRESS (number and street)

CITY

STATE

ZIP CODE

3. NAME OF CANDIDATE

**ALLOCATION BY STATE**

STATE	ALLOCATION This Period	TOTAL ALLOCATION To Date
Alabama		
Alaska		
Arizona		
Arkansas		
California		
Colorado		
Connecticut		
Delaware		
District of Columbia		
Florida		
Georgia		
Hawaii		
Idaho		
Illinois		

STATE	ALLOCATION This Period	TOTAL ALLOCATION To Date
Indiana	<div><div></div></div>	<div><div></div></div>
Iowa	<div><div></div></div>	<div><div></div></div>
Kansas	<div><div></div></div>	<div><div></div></div>
Kentucky	<div><div></div></div>	<div><div></div></div>
Louisiana	<div><div></div></div>	<div><div></div></div>
Maine	<div><div></div></div>	<div><div></div></div>
Maryland	<div><div></div></div>	<div><div></div></div>
Massachusetts	<div><div></div></div>	<div><div></div></div>
Michigan	<div><div></div></div>	<div><div></div></div>
Minnesota	<div><div></div></div>	<div><div></div></div>
Mississippi	<div><div></div></div>	<div><div></div></div>
Missouri	<div><div></div></div>	<div><div></div></div>
Montana	<div><div></div></div>	<div><div></div></div>
Nebraska	<div><div></div></div>	<div><div></div></div>
Nevada	<div><div></div></div>	<div><div></div></div>
New Hampshire	<div><div></div></div>	<div><div></div></div>
New Jersey	<div><div></div></div>	<div><div></div></div>
New Mexico	<div><div></div></div>	<div><div></div></div>
New York	<div><div></div></div>	<div><div></div></div>
North Carolina	<div><div></div></div>	<div><div></div></div>
North Dakota	<div><div></div></div>	<div><div></div></div>
Ohio	<div><div></div></div>	<div><div></div></div>
Oklahoma	<div><div></div></div>	<div><div></div></div>
Oregon	<div><div></div></div>	<div><div></div></div>
Pennsylvania	<div><div></div></div>	<div><div></div></div>

STATE	ALLOCATION This Period	TOTAL ALLOCATION To Date
Rhode Island		
South Carolina		
South Dakota		
Tennessee		
Texas		
Utah		
Vermont		
Virginia		
Washington		
West Virginia		
Wisconsin		
Wyoming		
Puerto Rico		
Guam		
Virgin Islands		
TOTALS		