



FEDERAL ELECTION COMMISSION  
WASHINGTON, D.C. 20463

RQ-2

William D. Harris, Treasurer  
Alliance for the West  
818 Connecticut Avenue, Suite 1100  
Washington, DC 20006

NOV 8 2000

Identification Number: C00335133

Reference: July Quarterly Report (4/01/00-6/30/00)

Dear Mr. Harris:

This letter is prompted by the Commission's preliminary review of the report(s) referenced above. The review raised questions concerning certain information contained in the report(s). An itemization follows:

-Schedule B of your report (pertinent portion(s) attached) discloses a contribution(s) which appears to exceed the limits set forth in the Act. 2 U.S.C. §441a(a) precludes a multicandidate committee and its affiliates from making a contribution to a candidate for federal office in excess of \$5,000 per election.

If the contribution(s) in question was incompletely or incorrectly disclosed, you should amend your original report with clarifying information. If you have made an excessive contribution, you should notify the recipient and request a refund of the amount in excess of \$5,000 and/or notify the recipient in writing of your redesignation of the contribution. In the best interest of your committee, all refunds and redesignations should be made within sixty days of the treasurer's receipt of the contribution(s).

Please inform the Commission of your corrective action immediately in writing and provide a photocopy of the refund request sent to the recipient committee(s). In addition, any refunds should be disclosed on Schedule A supporting Line 16 of the report covering the period during which they are received. Any redesignations should be disclosed as memo entries on Schedule B supporting Line 23 of the report covering the period during which the redesignation is made. 11 CFR §110.1(b)

Although the Commission may take further legal action regarding the excessive contribution(s), your prompt action in obtaining a refund and/or redesignating the contribution(s) will be taken into consideration.

-Your report discloses a negative ending cash balance of \$1,926.99. This suggests that you have either overdrawn your account, made a mathematical error, or incurred a debt. If your committee has incurred a debt or obligation, please show a zero balance on Line 8 of the Summary Page and reflect the amount and the nature of the debt on Schedule D and Line 10. 2 U.S.C. §434(b)(8)

-Schedule A of your report discloses contributions from political committees that fail to include a full and/or recognizable name. Reporting only the name of the connected organization, abbreviating the name of the committee so it is unrecognizable, or using an indistinguishable acronym is inadequate. The following committee names from your report need further clarification: Union Pacific Resources PAC, American Trucking PAC, American Maritime Officers PAC, REPAC and Transportation Pol. Education League

Please amend your report to include the missing information. 11 CFR §§100.12, 102.14(c) and 104.3(a)(4)(ii)

-Please amend Schedule B supporting Line 23 by providing the office sought including state and congressional district, if applicable, for each contribution made. 11 CFR §104.3(b)(3)(ii) and (v)

-Schedule B supporting Line 22 discloses a transfer of \$6,595.47 to your committee's Allocation Account to "Correct Allocation." You are advised that 11 CFR §102.5 prohibits a non-federal account from financing activity in connection with federal elections. Please provide clarifying information regarding these corrections including the date(s) when the original activity was conducted by the non-federal account if this was the case.

-Itemized disbursements must include a brief statement or description of why the disbursements were made. Please amend Schedule(s) H4 of your report to clarify the following description(s): Expenses. For further guidance regarding acceptable purposes of disbursements, please refer to 11 CFR §104.3(b)(3).

-Please amend your report by providing the address for each disbursement itemized on Schedule B supporting Line 21(b).

ALLIANCE FOR THE WEST

-On Schedule H4 supporting Line 21(a) of the Detailed Summary Page, you have not included the full name and/or mailing address for the vendor(s) listed. Please amend your report accordingly.

-On Schedule H4 supporting Line 21(a) of the Detailed Summary Page, you have failed to include the total EVENT YEAR-TO-DATE amount for a payment(s) to First Union Bank, Keith Schuetie, Townsend Group and Nctivation. Please amend your report to include the missing EVENT YEAR-TO-DATE total(s).

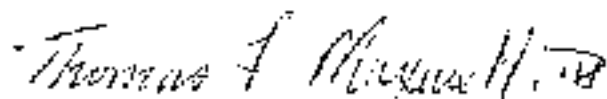
-Schedule H4 of your report discloses a disbursement to Townsend Group that is categorized as administrative and fundraising. For the Public Record, please clarify whether this event did in fact encompass more than one type of activity. All payments for fundraising must include both a unique identifying code and the purpose of the disbursement. If the activity or event should have been categorized differently, please amend your report accordingly.

-On Schedule H3 supporting Line 18 of the Detailed Summary Page, you have failed to include a DATE OF RECEIPT for the \$5,000 transfer-in from the Non-Federal (State) Account. Please amend your report to include this date. 11 CFR §104.10

-On Schedule H3 supporting Line 18 of the Detailed Summary Page, Lines i), ii)e) and iii)c) for the transfer-in from the Non-Federal (State) Account do not add up to the \$5,000 transfer-in. Please amend your report to correct this discrepancy. 11 CFR §104.10

A written response or an amendment to your original report(s) correcting the above problem(s) should be filed with the Federal Election Commission within fifteen (15) days of the date of this letter. If you need assistance, please feel free to contact me on our toll-free number, (800) 424-9530 (at the prompt press 1, then press 2 to reach the Reports Analysis Division). My local number is (202) 694-1130.

Sincerely,



Thomas F. Maxwell, III  
Reports Analyst  
Reports Analysis Division

SCHEDULE B

ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

PAGE 1 OF 1  
FOR LINE NUMBER 23

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)

ALLIANCE FOR THE WEST

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
LAZIO 2000 3 EAST MAIN ST. PO BOX 5063 BAY SHORE, NY 11706	SENATE, NY-2000 Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	5/22/00	\$2,000.-
B. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
FRANKS FOR SENATE 934 STUYVESANT AVE. UNION, NJ 07083	SENATE, NJ-2000 Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	5/25/00	\$1,500.-
C. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
CONRAD BURNS 2000 P.O. BOX 1532 BILLINGS, MT 59103	SENATE, MT-2000 Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	5/25/00	\$3,000.-
D. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
FRIENDS OF GEORGE ALLEN PO BOX 573 RICHMOND, VA 23218	SENATE, VA-2000 Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	6/2/00	\$2,500.-
E. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
LAZIO 2000 3 EAST MAIN ST. PO BOX 5063 BAY SHORE, NY 11706	SENATE, NY-2000 Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	6/14/00	\$3,000.-
F. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
LINCOLN CHAFFEE FOR SENATE 1800 POST RD. AIRPORT PLAZA #13 WARWICK, RI 02886	SENATE, RI-2000 Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	6/15/00	\$2,000.-
G. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
SLADE GORTON-SENATE 2000 PO BOX 3348 BELLUVE, WA 98004	SENATE, WA-2000 Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	6/30/00	\$2,500.-
H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
BUTCH OTTER FOR IDAHO PO. BOX 1456 BOISE, ID 83701	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	6/30/00	\$2,500.-
I. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		

SUBTOTAL of Disbursements This Page (optional)

19,000.<sup>00</sup>

TOTAL This Period (last page this the number only)

19,000.<sup>00</sup>

**SCHEDULE B**

**ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

PAGE 1 OF 1  
FOR LINE NUMBER

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NAME OF COMMITTEE (in Full)

ALLIANCE FOR THE WEST

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
ORRIN HATCH ELECTION CMTTE. 265 E. 200 SOUTH #950 SALT LAKE CITY, UT 84111	SENATE, UTAH 2000 Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	3/1/00	2,500.00
B. Full Name, Mailing Address and ZIP Code LINCOLN CHAFFEE FOR US SENATE 1800 POST RD. AIRPORT PLAZA #13 WARWICK, RI 02886	SENATE, RHODE IS. 2000 Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	3/1/00	1,000.00
C. Full Name, Mailing Address and ZIP Code FRIENDS OF GEORGE ALLEN P.O. BOX 573 RICHMOND, VA 23218	SENATE, VIRGINIA 2000 Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	3/15/00	2,500.00
D. Full Name, Mailing Address and ZIP Code FRIENDS OF GEORGE ALLEN P.O. BOX 573 RICHMOND, VA 23218	SENATE, VIRGINIA 2000 Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	3/15/00	2,500.00
E. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Date (month, day, year)	Amount of Each Disbursement This Period
F. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Date (month, day, year)	Amount of Each Disbursement This Period
G. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Date (month, day, year)	Amount of Each Disbursement This Period
H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Date (month, day, year)	Amount of Each Disbursement This Period
I. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Date (month, day, year)	Amount of Each Disbursement This Period

8,500.00

SUBTOTAL of Disbursements This Page (optional)

8,500.00

TOTAL This Period (last page this line number only)

**SCHEDULE B**

**ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

PAGE      OF       
FOR LINE NUMBER

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NAME OF COMMITTEE (in Full)

**ALLIANCE FOR THE WEST**

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
FRIENDS OF GEORGE ALLEN 801 EAST MAIN ST, # 520 RICHMOND, VA 23219	SENATE, VIRGINIA 2000 Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/25/99	\$ 2,500 <sup>00</sup>
B. Full Name, Mailing Address and ZIP Code ROD GRAMS FOR U.S. SENATE 320 E. MAIN ST. ANOKA, MN 55303	SENATE, MINNESOTA 2000 CONTRIBUTION Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	12/15/99	\$ 2,000 <sup>00</sup>
C. Full Name, Mailing Address and ZIP Code BILL MCCOLLUM FOR SENATE 600 THISTLEWOOD COURT LONGBROOK, FL 32779	SENATE, FLORIDA 2000 CONTRIBUTION Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	12/16/99	\$ 3,000
D. Full Name, Mailing Address and ZIP Code FRIENDS OF CONRAD BURNS - 2000 P.O. BOX 1532 BILLINGS, MT 59103	SENATE, MONTANA 2000 CONTRIBUTION Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	12/16/99	\$ 2,000
E. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
F. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
G. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
I. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period

SUBTOTAL of Disbursements This Page (optional)

9,500

TOTAL This Period (last page the line number only)

9,500

