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Drug Policy Reform Fund  
FEC #: C00461236  
70 West 36<sup>th</sup> Street, 16<sup>th</sup> Floor  
New York, NY 10018

April 6, 2010

Allen Norfleet  
Senior Campaign Finance Analyst  
Reports Analysis Division  
Federal Election Commission  
999 E Street N.W.  
Washington, DC 20463

Identification Number: C00461236

Dear Mr. Allen:

Enclosed please find the amended Year End Report (7/1/09 – 12/31/09) for the above referenced committee.

Sincerely,



Ryan Chavez  
Drug Policy Reform Fund Treasurer  
(212) 613-8040

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FEDERAL ELECTION COMMISSION  
WASHINGTON, D.C. 20463

RQ-2

April 2, 2010

Ryan Chavez, Treasurer  
Drug Policy Reform Fund  
70 West 36<sup>th</sup> Street, 16<sup>th</sup> Floor  
New York, NY 10018

**Response Due Date:**  
**May 7, 2010**

Identification Number: C00461236

Reference: Year End Report (7/1/09 – 12/31/09)

Dear Treasurer:

This letter is prompted by the Commission's preliminary review of the report(s) referenced above. This notice requests information essential to full public disclosure of your federal election campaign finances. **Failure to adequately respond by the response date noted above could result in an audit or enforcement action.** Additional information is needed for the following 2 items:

1. Your calculations for Line 6(d), Column A appears to be incorrect. FEC calculations disclose this amount(s) to be \$19,499.60. Please provide the corrected total(s) on the Summary Page.
2. Please provide the total(s) for Line 11(a)(iii), Column A and B of the Detailed Summary Page. Note that changes in your figures may affect your Column B totals on this report and/or on subsequent reports.

**Please note, you will not receive an additional notice from the Commission on this matter.** Adequate responses must be received by the Commission on or before the due date noted above to be taken into consideration in determining whether audit action will be initiated. Failure to comply with the provisions of the Act may also result in an enforcement action against the committee. Any response submitted by your committee will be placed on the public record and will be considered by the Commission prior to taking enforcement action. **Requests for extensions of time in which to respond will not be considered.**

Electronic filers must file amendments (to include statements, designations and reports) in an electronic format and must submit an amended report in its entirety, rather than just those portions of the report that are being amended. If you should have any questions regarding this matter or wish to verify the adequacy of your response, please

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contact me on our toll-free number (800) 424-9530 (at the prompt press 5 to reach the Reports Analysis Division) or my local number (202) 694-1159.

Sincerely,



Allen Norfleet  
Senior Campaign Finance Analyst  
Reports Analysis Division

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**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

**DRUG POLICY REFORM FUND**

Report Covering the Period: From: **07 01 2009** To: **12 31 2009**

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1,	[ ]	[ ] 0.00
(b) Cash on Hand at Beginning of Reporting Period.....	[ ] 4,499.60	
(c) Total Receipts (from Line 19) .....	[ ] 15,000.00	[ ] 20,000.00
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	[ ] 19,499.60	[ ] 20,000.00
7. Total Disbursements (from Line 31) .....	[ ] 1,559.20	[ ] 2,059.60
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	[ ] 17,940.40	[ ] 17,940.40
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D) .....	[ ]	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D) .....	[ ]	

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

**For further information contact:**  
  
 Federal Election Commission  
 999 E Street, NW  
 Washington, DC 20463  
  
 Toll Free 800-424-9530  
 Local 202-694-1100

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**DETAILED SUMMARY PAGE  
of Receipts**

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

**DRUG POLICY REFORM FUND**

Report Covering the Period: From:

**07' 01' 2009**

To:

**12' 31' 2009**

**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).....

**1500000**

**2000000**

(ii) Unitemized .....

(iii) TOTAL (add  
Lines 11(a)(i) and (ii)).....▶

**1500000**

**2000000**

(b) Political Party Committees .....

(c) Other Political Committees  
(such as PACs).....

(d) Total Contributions (add Lines  
11(a)(iii), (b), and (c)) (Carry  
Totals to Line 33, page 5).....▶

**1500000**

**2000000**

**12. Transfers From Affiliated/Other  
Party Committees.....**

**13. All Loans Received .....**

**14. Loan Repayments Received.....**

**15. Offsets To Operating Expenditures  
(Refunds, Rebates, etc.)  
(Carry Totals to Line 37, page 5).....**

**16. Refunds of Contributions Made  
to Federal Candidates and Other  
Political Committees.....**

**17. Other Federal Receipts  
(Dividends, Interest, etc.).....**

**18. Transfers from Non-Federal and Levin Funds**

(a) Non-Federal Account  
(from Schedule H3).....

(b) Levin Funds (from Schedule H5) .....

(c) Total Transfers (add 18(a) and 18(b))..

**19. Total Receipts (add Lines 11(d),  
12, 13, 14, 15, 16, 17, and 18(c)).....▶**

**1500000**

**2000000**

**20. Total Federal Receipts  
(subtract Line 18(c) from Line 19).....▶**

**1500000**

**2000000**

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**DETAILED SUMMARY PAGE  
of Disbursements**

FEC Form 3X (Rev. 02/2003)

Page 4

<b>II. Disbursements</b>		<b>COLUMN A Total This Period</b>	<b>COLUMN B Calendar Year-to-Date</b>
21. Operating Expenditures:			
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)			
(i) Federal Share .....			
(ii) Non-Federal Share .....			
(b) Other Federal Operating Expenditures .....			
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	▶	5920	5960
22. Transfers to Affiliated/Other Party Committees .....			
23. Contributions to Federal Candidates/Committees and Other Political Committees .....		1,500.00	20,000.00
24. Independent Expenditures (use Schedule E) .....			
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F) .....			
26. Loan Repayments Made .....			
27. Loans Made .....			
28. Refunds of Contributions To:			
(a) Individuals/Persons Other Than Political Committees .....			
(b) Political Party Committees .....			
(c) Other Political Committees (such as PACs) .....			
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)) .....	▶		
29. Other Disbursements .....			
30. Federal Election Activity (2 U.S.C. §431(20))			
(a) Allocated Federal Election Activity (from Schedule H6)			
(i) Federal Share .....			
(ii) "Levin" Share .....			
(b) Federal Election Activity Paid Entirely With Federal Funds .....			
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b)) .....	▶		
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..		1,559.20	20,596.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31) .....	▶	1,559.20	20,596.00

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**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3) .....		
34. Total Contribution Refunds (from Line 28(d)) .....		
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....		
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	5920	5960
37. Offsets to Operating Expenditures (from Line 15, page 3) .....		
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	5920	5960

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**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE / OF /	
	<input checked="" type="checkbox"/> 11a 13	<input type="checkbox"/> 11b 14	<input type="checkbox"/> 11c 15	<input type="checkbox"/> 12 16

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) **DRUG POLICY REFORM FUND**

**A.** Full Name (Last, First, Middle Initial)  
**HARVEY, PHIL**

Mailing Address  
**2400 OUTRIDER TRACE**

City **CHAPEL HILL** State **NC** Zip Code **27516**

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

Name of Employer **DKT INT'L.** Occupation **EXECUTIVE**

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt  
**09' 16' 2009**

Amount of Each Receipt this Period  
**500.00**

**B.** Full Name (Last, First, Middle Initial)  
**BENNINGSON, THOMAS**

Mailing Address  
**400 REDWOOD ROAD**

City **OAKLAND** State **CA** Zip Code **94619**

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

Name of Employer **SELF-EMPLOYED** Occupation **ATTORNEY**

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt  
**12' 03' 2009**

Amount of Each Receipt this Period  
**5000.00**

**C.** Full Name (Last, First, Middle Initial)  
**VAN AMERINGEN, HENRY**

Mailing Address  
**37 W. 12<sup>th</sup> STREET**

City **NEW YORK** State **NY** Zip Code

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

Name of Employer **N/A** Occupation **RETIRED**

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt  
**12' 29' 2009**

Amount of Each Receipt this Period  
**5000.00**

SUBTOTAL of Receipts This Page (optional)..... ▶ **15000.00**

TOTAL This Period (last page this line number only)..... ▶ **15000.00**

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**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 27	<input type="checkbox"/> 22 28a	<input checked="" type="checkbox"/> 23 28b	<input type="checkbox"/> 24 28c	<input type="checkbox"/> 25 29	<input type="checkbox"/> 26 30b	

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) **DRUG POLICY REFORM FUND**

**A.** Full Name (Last, First, Middle Initial) **CONYERS FOR CONGRESS** Date of Disbursement **09/29/2009**

Mailing Address **5 ROSECROFT DRIVE**

City **FREDERICKSBURG** State **VA** Zip Code **22407**

Purpose of Disbursement **POLITICAL CONTRIBUTION** Amount of Each Disbursement this Period **500.00**

Candidate Name **JOHN CONYERS, JR.** Category/Type **011**

Office Sought:  House  Senate  President Disbursement For:  Primary  General  Other (specify) **2010**

State: **MI** District: **14**

**B.** Full Name (Last, First, Middle Initial) **ONE VOICE** Date of Disbursement **10/24/2009**

Mailing Address **P.O. BOX 8768**

City **EMERYVILLE** State **CA** Zip Code **94662**

Purpose of Disbursement **POLITICAL CONTRIBUTION** Amount of Each Disbursement this Period **1000.00**

Candidate Name **POLITICAL CONTRIBUTION** Category/Type **011**

Office Sought:  House  Senate  President Disbursement For:  Primary  General  Other (specify) **2010**

State: District:

**C.** Full Name (Last, First, Middle Initial) Date of Disbursement

Mailing Address

City State Zip Code

Purpose of Disbursement Amount of Each Disbursement this Period

Candidate Name Category/Type

Office Sought:  House  Senate  President Disbursement For:  Primary  General  Other (specify)

State: District:

SUBTOTAL of Disbursements This Page (optional) **1500.00**

TOTAL This Period (last page this line number only) **1500.00**

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Federal Election Commission  
**ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS**  
 The FEC added this page to the end of this filing to indicate how it was received.

Hand Delivered Date of Receipt

USPS First Class Mail Postmarked  
4/6/10

USPS Registered/Certified Postmarked (R/C)

USPS Priority Mail Postmarked  
 Delivery Confirmation™ or Signature Confirmation™ Label

USPS Express Mail Postmarked

Postmark Illegible

No Postmark

Overnight Delivery Service (Specify): Shipping Date  
 Next Business Day Delivery

Received from House Records & Registration Office Date of Receipt

Received from Senate Public Records Office Date of Receipt

Received from Electronic Filing Office Date of Receipt

Other (Specify): Date of Receipt or Postmarked

*JW*  
 PREPARER

4/15/10  
 DATE PREPARED

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