



FEDERAL ELECTION COMMISSION  
WASHINGTON, D.C. 20463

RQ-2

John Gianulis, Treasurer  
Illinois Democratic Party  
489 Merchandise Mart  
Chicago, IL 60654

APR 9 1997

Identification Number: C00167015

Reference: 12 Day Pre-General Report (10/1/96-10/16/96)

Dear Mr. Gianulis:

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 H4 discloses a disbursement(s) which is categorized as a fundraising expense(s); however, a Schedule H2 has not been filed to disclose the allocation ratio. All committees are required to allocate the direct costs of each fundraising event in which the committee collects both federal and non-federal funds. The costs are allocated according to the funds received ratio and reported on Schedule H2. 11 CFR §§106.5(f) and 106.6(d). Please file a Schedule H2 to disclose the ratio for the fundraising event(s).

-On Schedule H3, 111: IRISH FUNDRAISER, has been categorized as both fundraising and administrative. Please amend your report to clarify this apparent discrepancy.

-Schedule H4 discloses a disbursement(s) for the 109: ASIAN PACIFIC event(s) which appears to be using a ratio(s) inconsistent with those disclosed on Schedule H2. Please amend your report to clarify this apparent discrepancy.

-Schedule H4 discloses a \$759.91 disbursement to JIM GERTSEN as 100% nonfederal. By definition, this is not a shared expense and must be reported

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on Schedule B for Line 21(b). Any transfers from the non-federal account for this expense must be returned to the non-federal account.

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

-On Schedule H4 supporting Line 21(a) of the Detailed Summary Page, you have failed to include a unique identifying title or code for the payment made to all vendors for fundraising expenses. 11 CFR §104.10. Please amend this report (including all affected schedules) to provide a unique identifying title or code for each PURPOSE/EVENT.

-Please delete the duplicate Schedule H4 Page 1 of 37.

-Schedule H4 discloses payments to ADP and STORMIE ASHLEY which are 100% federal. These payments must be disclosed on Schedule B for Line 21(b) because they are not shared expenses.

-You must make an attempt to obtain the full name, mailing address, occupation and name of employer for all individuals who contribute more than \$200 in a calendar year. Please amend your report to include the omitted information.

A committee may demonstrate "best efforts" to obtain the required information by providing the Commission with a description of its procedures for requesting the information and may also supply a copy of a solicitation: the committee must request the contributor information in initial solicitations; make follow-up requests (if necessary); report the information; and file amendments to disclose previously unreported information. Each solicitation must include a clear and conspicuous request for the information. If a committee receives a contribution that exceeds the \$200 threshold but lacks contributor information, the committee must, within 30 days, make an additional written or oral request for the

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information. Please note that a written request may not include an additional solicitation or material on any other subject, other than thanking the contributor for the donation and must include a pre-addressed return post card or envelope for the contributor's response. An oral request must be documented in writing. Committees must also disclose information that was not provided by the contributor, but is available in any of the committee's records for that current election cycle. Furthermore, if a committee receives contributor information after the contributions have been reported, it must submit, with its next report, an amended memo Schedule A listing all the contributions for which additional information was received or file, on or before the next reporting date, amendments to the previous reports on which the contributions were originally disclosed. See 11 CFR §104.3(a)(4)(i) and 11 CFR §104.7.

-Schedule A for Line 11(c) of the Detailed Summary Page discloses receipts from AMERICAN FED. MUNICIPAL EMP. ALF-CIO and AMERICAN SOC. AUTHORS & PUBLISHERS. These committees do not disclose these contributions to your committee. Please verify the source of the contributions, ensuring that the contributions were received from the federal accounts of federally registered committees.

-Schedule A of your report (pertinent portion(s) attached) discloses a contribution(s) from an organization(s) which is not a political committee registered with the Commission. In order for your committee to accept contributions from unregistered organizations into accounts used to influence federal elections, your committee should take steps to insure that the contributor(s) used permissible funds to make the contribution(s) to avoid violating 2 U.S.C. §§441a(f) and 441b or 11 CFR §102.5(b). Under 11 CFR §102.5(b), organizations which are not political committees under the Act and choose to contribute to federal committees must either: 1) establish a separate account which contains only those funds permitted under the Act, or 2) demonstrate through a reasonable accounting method that the organization has received sufficient funds subject to the limitations and prohibitions in order to make the contribution.

If the contribution(s) in question was incompletely or incorrectly disclosed, you should amend your original report with clarifying information. In

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addition, please clarify whether the contribution(s) received from the referenced organization(s) is permissible. To the extent that your committee has received impermissible funds, the Commission recommends that you transfer the impermissible funds to an account not used to influence federal elections or refund the impermissible amount(s) to the donor(s) in accordance with 11 CFR §103.3(b). In order to protect the donor's interests, the Commission recommends that you inform the contributor(s) in writing to provide the donor(s) with the option of receiving a refund or granting written authorization for a transfer to another account.

Please inform the Commission of your corrective action immediately in writing and provide a photocopy of your check for the transfer-out or refund. Should you choose to transfer-out or refund the contribution(s), the Commission will presume the funds were impermissible if no statement from your committee provides information to the contrary. Transfers-out and refunds should be disclosed on a Schedule B supporting Line 22 or 28 of the report covering the period during which the transaction was made.

Although the Commission may take further legal action concerning the acceptance of prohibited contributions, prompt action by your committee in transferring-out or refunding the amounts will be taken into consideration.

-Schedule A 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(f) and 11 CFR §110.1(d) preclude a committee from receiving contributions from another political committee or person in excess of \$5,000 per calendar year.

If the contribution(s) in question was incompletely or incorrectly disclosed, you should amend your original report with the clarifying information. If the contribution(s) you received exceeded the limits, you must seek reattribution of the contribution pursuant to 11 CFR §110.1(k), transfer-out the amount in excess of \$5,000 to an account not used to influence federal elections or refund the excessive amount to the donor(s) in accordance with 11 CFR §103.3(b). In the best interest of your committee, all reattributions, transfers-out, and refunds should be made within sixty days of the treasurer's receipt of the contribution(s). In order to protect the donor's

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interests, the Commission recommends that you inform the contributor(s) in writing to provide the donor(s) with the option of granting written authorization for a reattribution or transfer-out to another account or receiving a refund.

Please inform the Commission of your corrective action immediately in writing and provide a photocopy of your check for the transfer-out or refund. In addition, any reattributions should be reported as memo entries on Schedule A of the report covering the period during which the authorization for the reattribution is received. Any transfers-out or refunds should be disclosed on Schedule B supporting Line 22 or 28 of the report during which the transaction was made.

Although the Commission may take further legal action regarding the acceptance of an excessive contribution(s), prompt action by your committee to seek reattribution, transfer-out or refund the excessive amount will be taken into consideration.

-Please amend the aggregate Year-to-Date on Schedule A for Joseph Sullivan to be \$5,500.

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. My local number is (202) 219-3580.

Sincerely,



Neil Evans  
Reports Analyst  
Reports Analysis Division

## SCHEDULE A

## ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary PagePAGE OF  
1 1  
FOR LINE NUMBER  
11c

Any information copied from such Reports and Statements may not be used in any manner for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political candidate to solicit contributions from such contributors.

NAME OF COMMITTEE (in Full)

DEMOCRATIC PARTY OF ILLINOIS

C00167015

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
44TH WARD REGULAR DEMOCRATIC ORGAN 1057 W. BELMONT CHICAGO IL 60657	Occupation	10/10/96	120.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$	120.00	120.00
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
AMERICAN FED. MUNICIPAL EMP. ALF-CIO 1625 L STREET NW WASHINGTON DC 20036	Occupation	10/02/96	5,000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$	5,000.00	5,000.00
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
AMERICAN SOC. AUTHORS & PUBLISHERS ONE LINCOLN PLAZA NEW YORK NY 10023	Occupation	10/01/96	1,500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$	1,500.00	1,500.00
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
ATLA PAC 1050 31ST STREET WASHINGTON DC 20007	Occupation	10/09/96	5,000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$	5,000.00	5,000.00
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
EMILY'S LIST 815 16TH STREET WASHINGTON DC 20006	Occupation	10/15/96	5,000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$	5,000.00	5,000.00
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
POL EDUCATION COMMITTEE 815 16TH STREET NW WASHINGTON DC 20006	Occupation	10/10/96	5,000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$	5,000.00	5,000.00
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
SANGAMON DEMOCRATIC COMMITTEE 405 E. WASHINGTON SPRINGFIELD IL 62701	LOCAL PAC Occupation	10/02/96	250.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$	250.00	250.00

SUBTOTAL of Receipts This Page (optional)

21,870.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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) **DEMOCRATIC PARTY OF ILLINOIS** **C00167015**

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A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
<b>MELVIN KATTEN</b> 525 W. MONROE CHICAGO IL 60613	INFO. REQ.	10/04/96	500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$	500.00
<b>JOSEPH SULLIVAN</b> 175 E. DELEWARE NO. 6805 CHICAGO IL 60611	INFO. REQ.	10/04/96	500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$	500.00
<b>WILLIAM DALEY</b> 190 S. LASALLE ST. CHICAGO IL 60603	INFO. REQ.	10/04/96	1,000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$	1,000.00
<b>FRANCIS LEHMAN</b> 1420 SHERIDAN ROAD, APT. 9A WILMETTE IL 60091	INFO. REQ.	10/11/96	250.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$	250.00
<b>LUCY LEHMAN</b> 2715 SHERIDAN RD. EVANSTON IL 60201	INFO. REQ.	10/11/96	350.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$	350.00
<b>RUTH GOLDMAN</b> 953 WILDWOOD LANE HIGHLAND PARK IL 60035	INFO. REQ.	10/11/96	250.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$	250.00
<b>PETER LONDON</b> 1920 N. ORCHARD AVE. CHICAGO IL 60614	INFO. REQ.	10/11/96	250.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$	250.00

SUBTOTAL of Receipts This Page (optional) **3,100.00**

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

Any information omitted from each Report and Statement may not be available to any person for the purpose of soliciting contributions or for any other purpose, other than using the name and address of any person named in an itemized receipt for such purposes.

NAME OF COMMITTEE (in Full) **DEMOCRATIC PARTY OF ILLINOIS** **C00167015**

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A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
<b>JOHN M. BURKE</b> 20 S. CLARK CHICAGO IL 606 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	<b>BURKE AND BURKE</b>  Occupation <b>ATTORNEY</b>	  <b>09/18/96</b>	  <b>5,000.00</b>
<b>JOHN OR PATRICIA KIRBY</b> P.O. BOX 566 EFFINGHAM 62401 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	 <b>NONE</b>  Occupation <b>RETIRED</b>	  <b>09/30/96</b>	  <b>1,000.00</b>
<b>JOSEPH P. SULLIVAN</b> 175 E. DELEWARE PL. CHICAGO IL 60611 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	<b>THE VIPER CORP.</b>  Occupation <b>CEO</b>	  <b>09/11/96</b>	  <b>5,000.00</b>
<b>JUDITH TULLMAN</b> 1118 DRUMHAND CHICAGO IL 60614 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	 <b>NONE</b>  Occupation <b>HOUSEWIFE</b>	  <b>07/11/96</b>	  <b>1,000.00</b>
<b>KAREN BROWN</b> 2411 LYNNHAVEN ROAD SPRINGFIELD IL 62704 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	<b>IL. VOCATIONAL ASSOCIATION</b>  Occupation <b>EX. DIRECTOR</b>	  <b>09/24/96</b>	  <b>250.00</b>
<b>KATHLEEN BURGESS</b> 4N 656 KNOLL CREEK DR. ST. CHARLES IL 60175 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	<b>IBM</b>  Occupation <b>STAFF</b>	  <b>09/09/96</b>	  <b>500.00</b>
<b>KEVIN FORDE</b> 111 W. WASHINGTON CHICAGO IL 60610 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	<b>KEVIN FORDE</b>  Occupation <b>ATTORNEY</b>	  <b>09/10/96</b>	  <b>500.00</b>

SUBTOTAL of Receipts This Page (optional)	<b>13,250.00</b>
TOTAL This Period (post page this line number only)	

