



FEDERAL ELECTION COMMISSION

WASHINGTON, D.C. 20461

RQ-3

October 6, 1994

Michael Davenport, Treasurer
Florida Association of Mortgage
Brokers (FAMB) Federal PAC
1274 Paul Russell Road
Tallahassee, FL 32301

Identification Number: C00293498

Reference: July Quarterly Report (4/1/94-6/30/94)

Dear Mr. Davenport:

This letter is to inform you that as of October 5, 1994, the Commission has not received your response to our request for additional information, dated September 14, 1994. This notice request information essential to full public disclosure of your federal election campaign finances. To ensure compliance with provisions of the Federal Election Campaign Act (the Act), please respond to this request (copy enclosed).

If no response is received within fifteen (15) days from the date of this notice, the Commission may choose to initiate audit or legal enforcement action.

If you should have any questions related to this matter, please contact Stephen Cohen on our toll-free number (800) 424-9530 or our local number (202) 219-3580.

Sincerely,

A handwritten signature in cursive script that reads "John D. Gibson".

John D. Gibson
Assistant Staff Director
Reports Analysis Division

Enclosure



FEDERAL ELECTION COMMISSION

WASHINGTON, D.C. 20461

RQ-2

Michael Davenport, Treasurer
Florida Association of Mortgage Brokers (FAMB)
Federal PAC
1274 Paul Russell Road
Tallahassee, FL 32301

SEP 14 1994

Identification Number: C00293498

Reference: July Quarterly Report (4/1/94-6/30/94)

Dear Mr. Davenport:

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 A of your report (pertinent portion(s) attached) discloses receipts from organizations that are not registered with the Commission. 2 U.S.C. §441b prohibits the receipt of funds from national banks, corporations, and labor organizations. Under 11 CFR §102.6, however, certain entities may serve as collecting agents for the purpose of transmitting contributions to a separate segregated fund. A collecting agent may be, but is not limited to, a committee which is affiliated with the separate segregated fund; the connected organization; or a local, national, or international union.

Funds received from a collecting agent are to be attributed to the original contributors and should be disclosed according to the requirements of 11 CFR §104.3(a). If the amounts in question were contributed by individuals and transmitted to your committee by a collecting agent, the activity should be included on Line 11(a)(i) of the Detailed Summary Page. Any contribution from an individual exceeding \$200 in the aggregate during the calendar year should be itemized on a supporting Schedule A. Collecting agents need not be identified on your report.

If the contributions in question were incompletely or incorrectly disclosed, you should amend your original report with clarifying information. If you have received funds from entities which were not serving as collecting agents, you must transfer-out the

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impermissible funds to an account not used to influence federal elections or refund the full amount to the donors in accordance with 11 CFR §103.3(b). In the best interest of your committee, all transfers-out and refunds should be made within thirty days of the treasurer's receipt of the impermissible funds. The Commission recommends that you inform the possible involuntary contributors in writing to provide the donors 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. In addition, any transfers-out or refunds should be disclosed on 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 portions attached) discloses an apparent contribution(s) from a corporation(s). 2 U.S.C. §441b(a)) prohibits the receipt of contributions from corporations unless made from a separate segregated fund established by the corporation.

If the contribution(s) in question was incompletely or incorrectly disclosed, you should amend your original report with clarifying information. If you have received a corporate contribution(s), you must transfer-out the impermissible funds to an account not used to influence federal elections or refund the full amount to the donor(s) in accordance with 11 CFR §103.3(b). In the best interest of your committee, all transfers-out and refunds should be made within thirty days of the treasurer's receipt of the impermissible funds. 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. In addition, any transfers-out or refunds should be disclosed on Schedule B supporting Line 22 or 28 of the report covering the

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period during which the transaction was made.

Although the Commission may take further legal action concerning the acceptance of a prohibited contribution, prompt action by your committee to transfer-out or refund the amount will be taken into consideration.

-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 political committee, other than a multicandidate committee, from making a contribution to a candidate for federal office in excess of \$1,000 per election. Please refer to the Campaign Guide for information on how a committee qualifies for multicandidate status.

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 \$1,000 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 contributor. 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.

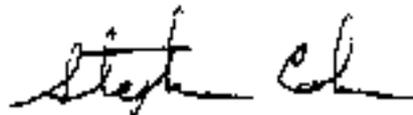
-Please provide the totals for Lines 19 and 30, Columns A and B, of the Detailed Summary Page.

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

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Federal PAC

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,



Stephen Cohen
Reports Analyst
Reports Analysis Division

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SCHEDULE A

Any information reported here must be true and correct. If you are not the donor, you must be authorized by the donor to provide information on his behalf. Do not use the name and address of any person or organization to obtain information from such sources.

NAME OF COMMITTEE (in Full)

240390815306

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Cash Received This Period
Southwest Chapter of FAMB 3380 Tamed Trail # C Fort Charlotte, FL 33952	Chapter Affiliation Chapter	6/11/94	750.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 750.00		
Gulf Coast Chapter of FAMB P O Box 7123 St. Petersburg, FL 33734	Chapter Affiliation Chapter	5/25/94	2,000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 2,000.00		
Miami Chapter of FAMB 350 Flagler St # 114 Miami, FL 33130-1513	Chapter Affiliation Chapter	5/13/94	2,000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 2,000		
Jacksonville Chapter of FAMB 8160 Baymeadows Way W # 130 Jacksonville, FL 32256	Chapter Affiliation Chapter		1,500.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 1,500		
Hink, Inc. c/o Dave Hinkes 8306 Mills Dr # 116 Miami, FL 33183	Hink, Inc. Broker	6/11/94	10.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 10.00		
Linda M. Pociano 9456-12 Gardens Circle Sarasota, FL 34243	Self Employed Broker	6/11/94	10.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 10.00		
Beth Fedoruk P O Box 1455 Seffner, FL 33584	Self Employed Broker	6/11/94	10.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$		

SUBTOTAL of Receipts This Page (optional)

TOTAL This Period (last page the line number only)

SCHEDULE B

FINANCIAL STATEMENTS

This document is subject to audit by the Internal Revenue Service.	Page 1 of 1
PER LAST PAGE	

Any statement signed from each Report and Statement may not be used by any person for the purpose of obtaining contributions or for any other purpose, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF CONTRIBUTOR (in Full)

KAMB FEDERAL PAC

A. Full Name, Mailing Address and ZIP Code

Bill McCallum
65 E Robinson Street, Ste 650
Orlando, FL 32801

Purpose of Disbursement

Campaign Contrib.
Cong. House/Dist 8

Disbursement for Primary General
 Other (specify)

Date (month, day, year)

6/14/94

Amount of Each Disbursement This Period

2,000.00

B. Full Name, Mailing Address and ZIP Code

Lincoln Diaz-Balart
8525 53rd Terrace NW Ste 102
Miami, FL 33166

Purpose of Disbursement

Campaign Contrib.
House - Dist. 21

Disbursement for Primary General
 Other (specify)

Date (month, day, year)

6/14/94

Amount of Each Disbursement This Period

500.00

C. Full Name, Mailing Address and ZIP Code

Ileana Ros-Lehtinen
5757 Blue Lagoon Dr, Ste 240
Miami, FL 33126

Purpose of Disbursement

Campaign Contrib.
Cong. House/Dist 18

Disbursement for Primary General
 Other (specify)

Date (month, day, year)

6/14/94

Amount of Each Disbursement This Period

500.00

D. Full Name, Mailing Address and ZIP Code

Peter Deutsch
10100 Pines Blvd.
Pembroke Pines, FL 33025

Purpose of Disbursement

Campaign Contrib.
Cong. House - Dist 20

Disbursement for Primary General
 Other (specify)

Date (month, day, year)

6/14/94

Amount of Each Disbursement This Period

500.00

E. Full Name, Mailing Address and ZIP Code

Purpose of Disbursement

Disbursement for Primary General
 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 Primary General
 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 Primary General
 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 Primary General
 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 Primary General
 Other (specify)

Date (month, day, year)

Amount of Each Disbursement This Period

SUBTOTAL of Disbursements This Page (optional)

1340

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