



FEDERAL ELECTION COMMISSION  
WASHINGTON, D.C. 20463

RQ-2

Warren Sweeney, Treasurer  
New York State Right To Life Political Action Committee  
41 State Street Suite 611  
Albany, NY 12207

JUN 23 1999

Identification Number: C00105080

Reference: Year End Report (12/01/98-12/31/98)

Dear Mr. Sweeney:

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 supporting Line 23 of your report discloses a contribution(s) to a candidate(s) for the general election; however, the funds were disbursed after the election date(s) (pertinent portion(s) attached). Please note that contributions may not be designated for an election which has already occurred unless the funds are to be used to reduce a candidate committee's debts incurred during that election campaign. Please clarify the contribution(s) and disclose any redesignations or refunds as necessary on the appropriate schedules.

-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.

-Schedule B supporting Line 23 discloses contributions to federal candidates for which no election designation has been provided. Please note that if no designation is included in your report, the contributions will be attributed to the next upcoming election for the recipient candidate. Thus, for future reporting purposes, it is in your committee's interest to designate the appropriate election in order to avoid the appearance of excessive contributions made to federal candidates by your committee.

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) 694-1130.

Sincerely,



Edward D. Ryan  
Reports Analyst  
Reports Analysis Division

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

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FOR LINE NUMBER 23

SCHEDULE B

ITEMIZED DISBURSEMENTS

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)

New York State Right to Life Committee Political Action Committee

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Evans, Wood & Caulfield, Inc. P.O. Box 489 Valley Stream, N.Y. 11582	Postage: CD#4, G.Becker Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	12/23/98	480.00 <i>EDZ</i>
Valerie Caulfield 125 Pine Street Rockville Centre, NY 11570	reimbur for tax for rest. /G.Becker fundraiser Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ???	12/23/98	153.00 <i>EDZ</i>
Friends of Greg Becker <i>GENERAL ELECTION DATE - 11/06/98</i>	Donation: 4th CD Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	12/29/98	2,000.00 <i>EDZ</i>
D. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
E. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
F. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
G. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
I. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period

SUBTOTAL of Disbursements This Page (optional)

2,633.00

TOTAL This Period (last page this line number only)

2,633.00

## SCHEDULE B

## ITEMIZED DISBURSEMENTS

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

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## NAME OF COMMITTEE (in Full)

New York State Right to Life Committee, Inc. Political Action Committee

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
The New Yorker 925 So. Long Beach Ave. Rockville Ctr., N.Y. 11570	Restaurant chgs. for fund raise for Becker Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify)	11/1/98	2,500.00
B. Full Name, Mailing Address and ZIP Code N.Y.S. Right to Life Committee, Inc. STATE Political Action Committee 41 State St., Albany, N.Y. 12207	Purpose of Disbursement Refund \$ deposited in error in wrong account Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify)	11/24/98	199.75
C. Full Name, Mailing Address and ZIP Code N.Y.S. Right to Life Committee, Inc. 41 State Street Albany, N.Y. 12207	Purpose of Disbursement Refund \$ deposited in error in wrong account Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify)	11/24/98	552.20
D. Full Name, Mailing Address and ZIP Code MDS Communications 3005 South Ash Avenue Tempe, Arizona 85282	Purpose of Disbursement Get-out-vote phoning D'Amato for Senate Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	11/20/98	2,947.20
E. Full Name, Mailing Address and ZIP Code Royal Graphics 200 Montrose Rd. Westbury, N.Y. 11590	Purpose of Disbursement Printing: Invitations for Becker PR Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify)	10/8/98	760.00 <i>ER</i>
F. Full Name, Mailing Address and ZIP Code Peter King for Congress P.O. Box 1428 Seaford, N.Y. 11783	Purpose of Disbursement Donation. Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/98	1,000.00
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)

7,959.15

TOTAL This Period (last page this line number only)

7,959.15

