FEDERAL ELECTION COMMISSION
WASHINGTON, D.C. 20463

RQ-2

Roy O. Wyse, Treasurer
UAW - V- CAP (UAW Voluntary
Community Action Program)
8000 East Jefferson
Detroit, MI 48214

MAY 14 1997

Identification Number: C00002840

Reference: 30 Day Post-General Report (10/17/96-11/25/96)

Dear Mr. Wyse:

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 committee from making contributions to another political committee and its affiliates 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 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.

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.

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.

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

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96031584324

TEXAS ONLY

Use separate schedule(s) for each category of the Detailed Summary Page	PAGE 31 OF 36
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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)

UAW V-CAP

	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
A. Full Name, Mailing Address and ZIP Code Ken Bentsen for Congress Committee 5615 Morningside, #301 Houston, TX 77005	Ken Bentsen 25th C.D.--Texas Disbursement for: ☐ Primary ☐ General ☒ Other (specify) special runoff	11/13/96	5,000.00
B. Full Name, Mailing Address and ZIP Code Lampson for Congress Committee 5696 East Texas Freeway Beaumont, TX 77706	Purpose of Disbursement Nick Lampson 9th C.D.--Texas Disbursement for: ☐ Primary ☐ General ☒ Other (specify) special runoff	11/13/96	5,000.00
C. Full Name, Mailing Address and ZIP Code Galveston County Democratic Party-Federal Acct. 912 Oak Vista Court Friendswood, TX 77546-2106	Purpose of Disbursement Contribution Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	11/19/96	5,000.00
D. Full Name, Mailing Address and ZIP Code Hugh Parmer for Congress P.O. Box 1629 Ft. North, TX 76101	Purpose of Disbursement Hugh Parmer 12th C.D.--Texas Disbursement for: ☐ Primary ☐ General ☒ Other (specify) special	10/31/96 Void Ck. #15239 dated 10/10/96	(5,000.00)
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)

TOTAL This Period (last page this line number only)

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SCHEDULE B **ITEMIZED DISBURSEMENTS**

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

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FOR LINE NUMBER 23(b)

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NAME OF COMMITTEE (In Full)

MM V-CRP

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Tejeda for Congress 3010 30th St., N.W., F 270 Washington, D.C. 20016	Frank Tejeda 26th C.D.--Texas Disbursement for: ☐ Primary ☒ General ☐ Other (specify)	10/1/96	500.00
B. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Harris County Democratic Party 811 Westheimer, Suite 208 Houston, TX 77006	Contribution Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	10/7/96	5,000.00
C. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Dallas County Democratic Party 6440 N. Central Exp., Suite 416 Box 18 Dallas,TX 75206	Contribution Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	10/7/96	5,000.00
D. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
	Disbursement for: ☐ Primary ☐ General ☐ Other (specify)		
E. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
	Disbursement for: ☐ Primary ☐ General ☐ Other (specify)		
F. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
	Disbursement for: ☐ Primary ☐ General ☐ Other (specify)		
G. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
	Disbursement for: ☐ Primary ☐ General ☐ Other (specify)		
H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
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	Disbursement for: ☐ Primary ☐ General ☐ Other (specify)		

SUBTOTAL of Disbursements This Page (optional) _____

TOTAL This Period (last page this line number only) _____

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