



FEDERAL ELECTION COMMISSION  
WASHINGTON, D.C. 20461

RQ-2

Michael Campbell, Treasurer  
Government Employees Insurance Company  
Political Action Committee  
One GEICO Plaza  
Washington, DC 20076

MAY 14 2003

Identification Number: C00343749

Reference: October Quarterly Report (7/1/02-9/30/02)

Dear Mr. Campbell:

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:

-The beginning cash balance of this report should equal the ending balance of your July Quarterly Report (4/1/02-6/30/02). Please clarify this discrepancy and amend any subsequent report(s) that may be affected by this correction.

-Schedule B of your report (pertinent portion(s) attached) discloses one or more contributions which appear to exceed the limits set forth in the Act. 2 U.S.C. §441a(a) prohibits a non-multicandidate political committee and its affiliates, 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 any apparently excessive contribution in question was incompletely or incorrectly disclosed, you should amend your original report with clarifying information.

If any contribution you made exceeds the limits, you must request a refund of the excessive amount or provide a written authorization for a redesignation of the contribution pursuant to 11 CFR §110.2(b) within 60 days of the treasurer's receipt.

If the foregoing conditions for redesignations were not met within 60 days of the treasurer's receipt, your committee must obtain a refund of the excessive amount.

If your committee has met the criteria for multicandidate status, please file FEC FORM 1M "Notification of Multicandidate Status" with the Commission. The treasurer must file FEC FORM 1M prior to making a contribution of more than \$1,000 per candidate per election. 11 CFR §102.2(a)(3)

Please inform the Commission of your corrective action immediately in writing and provide a photocopy of the refund or redesignation 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.

A response or 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. 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 need assistance, please feel free to contact me on our toll-free number, (800) 424-9530 (at the prompt press 1, then press 2 to reach the Reports Analysis Division). My local number is (202) 694-1130.

Sincerely,



Brandy Phillips  
Campaign Finance Analyst  
Reports Analysis Division

### SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedules for each category of line (Detailed Summary Page)

FOR LINE NUMBER: (check only one)

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<input type="checkbox"/> 21a	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 29
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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 other fundraising purposes, other than using the name and address of any person or committee to solicit contributions from such individuals.

NAME OF COMMITTEE (in full)  
GOVERNMENT EMPLOYEES INSURANCE COMPANY POLITICAL ACTION COMMITTEE

BP

Full Name (Last, First, Middle Initial) <b>A. Cantor for Congress</b>  Mailing Address PO Box 17813 City Richmond State VA Zip Code 23228  Purpose of Disbursement contribution Candidate Name Cantor for Congress Category Type		Date of Disbursement 06 " 17 " 2001  Amount of Each Disbursement this Period 250.00  Transaction ID: 86237191
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: Primary <input checked="" type="checkbox"/> General Other (specify) <input type="checkbox"/> State: VA District:		

Full Name (Last, First, Middle Initial) <b>* Friends of Phil Gramm</b>  Mailing Address 600 Second St., NE #114 City Washington State DC Zip Code 20002  Purpose of Disbursement contribution Candidate Name Friends of Phil Gramm Category Type		Date of Disbursement 06 " 06 " 2001  Amount of Each Disbursement this Period 1000.00  Transaction ID: 58337196
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: Primary <input checked="" type="checkbox"/> General Other (specify) <input type="checkbox"/> State: TX District:		

Full Name (Last, First, Middle Initial) <b>G NAIPAC</b>  Mailing Address 2800 River Road City Des Plaines State IL Zip Code 60018-3298  Purpose of Disbursement contribution Candidate Name Category Type		Date of Disbursement 03 " 16 " 2001  Amount of Each Disbursement this Period 2500.00  Transaction ID: 86237185
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: Primary <input type="checkbox"/> General Other (specify) <input type="checkbox"/> State: District:		

SUBTOTAL of Receipts This Page (detailed)	3750.00
TOTAL This Period (add page title line number only)	

### SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER

<input type="checkbox"/> 21a	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25
<input type="checkbox"/> 25	<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
GOVERNMENT EMPLOYEE INSURANCE COMPANY POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. Ashcroft for Senate</b>		Date of Disbursement 10 " 18 " 2001
Mailing Address 507 Capitol Court, NE City: Washington State: DC Zip Code: 20002		Amount of Each Disbursement This Period 500.00
Purpose of Disbursement Re-designate: Candidate Name		Category Type (MEMO ITEM)
Office Sought: House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President <input type="checkbox"/> State: MD District:	Disbursement For: 2001 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) #	Transaction ID: SB23 8028

Full Name (Last, First, Middle Initial) <b>B. Ashcroft for Senate</b>		Date of Disbursement 10 " 18 " 2001
Mailing Address 507 Capitol Court, NE City: Washington State: DC Zip Code: 20002		Amount of Each Disbursement This Period 500.00
Purpose of Disbursement Re-designate: SALT/200 Candidate Name Ashcroft for Senate		Category Type (MEMO ITEM)
Office Sought: House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President <input type="checkbox"/> State: MD District:	Disbursement For: 2001 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) #	Transaction ID: SB23 8025

Full Name (Last, First, Middle Initial) <b>C. Center for Congress</b>		Date of Disbursement 11 " 15 " 2001
Mailing Address PO Box 37613 City: Richmond State: VA Zip Code: 23228		Amount of Each Disbursement This Period 500.00
Purpose of Disbursement contribution Candidate Name Center for Congress		Category Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/> State: VA District: 07	Disbursement For: 2002 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) #	Transaction ID: SB23 8035

**SUBTOTAL** of Disbursements This Page (optional) ..... **500.00**

**TOTAL** This Period (see page this line number (only)) .....

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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page		ACR LINE NUMBER (check only one)		PAGE 18 / 17	
<input type="checkbox"/> 21a	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 29
<input type="checkbox"/> 26	<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

All information copied from this Report and Schedule may not be used or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any person connected to solicit contributions from such committee.

NAME OF COMMITTEE OR FUND  
 GOVERNMENT EMPLOYEES INSURANCE COMPANY POLITICAL ACTION COMMITTEE

**A. Attend To Senate**

Full Name (Last, First, Middle Initial)  
 Meeting Address  
 507 Capital Court, N.E., #100  
 City Washington State DC Zip Code 20002

Purpose of Disbursement  
 contribution - check #1067

Candidate Name  
 Allard for Senate

Office Sought: House  Senate  President

Disbursement For: 2002  
 Primary  General  Other (specify)

Date of Disbursement: 08 / 16 / 2002

Amount of Each Disbursement this Period: 1000.00

Transaction ID: SB23.0185

**B. Center for Congress**

Full Name (Last, First, Middle Initial)  
 Meeting Address  
 PO Box 17813  
 City Richmond State VA Zip Code 23226

Purpose of Disbursement  
 contribution - check #1068

Candidate Name  
 Center for Congress

Office Sought: House  Senate  President

Disbursement For: 2002  
 Primary  General  Other (specify)

Date of Disbursement: 07 / 31 / 2002

Amount of Each Disbursement this Period: 1000.00

Transaction ID: SB23.0056

**C. Sandy Chambliss Georgia Victory Comm.**

Full Name (Last, First, Middle Initial)  
 Meeting Address  
 PO Box 190366  
 City Atlanta State GA Zip Code 31128

Purpose of Disbursement  
 contribution - check #1066

Candidate Name  
 Sandy Chambliss Georgia Victory Comm.

Office Sought: House  Senate  President

Disbursement For: 2002  
 Primary  General  Other (specify)

Date of Disbursement: 07 / 16 / 2002

Amount of Each Disbursement this Period: 2000.00

Transaction ID: SB23.0054

SUBTOTAL of Disbursements This Page (optional) ..... 4008.00

TOTAL This Period (entire page file number only) ..... 4008.00

BP

1500

2025-01-15 10:00:00