FEDERAL ELECTION COMMISSION
WASHINGTON, D.C. 20463

RQ-2

Ann Fishman, Treasurer
Association of State Democratic Chairs
Federal Operating Account
430 South Capitol Street SE
Washington, DC 20003

OCT 17 2001

Identification Number: C00259481

Reference: Year End Report (11/28/00-12/31/00)

Dear Ms. Fishman:

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:

-A review of the reports filed by your committee (pertinent portion(s) attached) indicates that your committee received a transfer(s) from New Jersey Democratic State Committee, Democratic State Central Committee of California - Federal, Nevada State Democratic Party, New Hampshire Democratic State Committee, and Connecticut Democratic State Central Committee which has not been disclosed on their report(s) of receipts and disbursements. Please provide clarifying information regarding the source of the transfer(s) received 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 (at the prompt press 1, then press 2 to reach the Reports Analysis Division). My local number is (202) 694-1130.

Sincerely,

Scott Walker
Reports Analyst
Report Analysis Division

21036804442

SCHEDULE A **ITEMIZED RECEIPTS**

Transfers from Affiliated/Other Party Committees (A - Line 12)

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

PAGE 1 OF 2

FOR LINE NUMBER 12

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) Association of State Democratic Chairs-Federal Operating C00259481

A. Full name, Mailing Address and ZIP code California Democratic Party 911 20th Street, Suite 100 Sacramento, CA 95814 Receipt for: ☐ Primary ☐ General ☐ Other (specify)	Name of Employer Occupation Aggregate Year-to-Date	Date (month, day, year) 12/08/2000 $5,000	Amount of Each Receipt This Period $2,000.00
B. Full name, Mailing Address and ZIP code Connecticut Democratic Party 380 Franklin Avenue Hartford, CT 06114 Receipt for: ☐ Primary ☐ General ☐ Other (specify)	Name of Employer Occupation Aggregate Year-to-Date	Date (month, day, year) 12/08/2000 $2190.	Amount of Each Receipt This Period $700.00
C. Full name, Mailing Address and ZIP code Indiana Democratic Party 1 North Capitol, Suite 200 Indianapolis, IN 46204 Receipt for: ☐ Primary ☐ General ☐ Other (specify)	Name of Employer Occupation Aggregate Year-to-Date	Date (month, day, year) 12/08/2000 $4,600	Amount of Each Receipt This Period $1,200.00
D. Full name, Mailing Address and ZIP code Maryland Democratic Party 188 Main Street, Ste. 1 Annapolis, MD 21401 Receipt for: ☐ Primary ☐ General ☐ Other (specify)	Name of Employer Occupation Aggregate Year-to-Date	Date (month, day, year) 12/19/2000 $2,100	Amount of Each Receipt This Period $1,400.00
E. Full name, Mailing Address and ZIP code Massachusetts Democratic Party 133 Portland St., 5th Floor Boston, MA 02114 Receipt for: ☐ Primary ☐ General ☐ Other (specify)	Name of Employer Occupation Aggregate Year-to-Date	Date (month, day, year) 12/08/2000 $3,500	Amount of Each Receipt This Period $1,200.00
F. Full name, Mailing Address and ZIP code Nevada Democratic Party 3790 S. Paradise Rd. Ste. 110 Las Vegas, NV 89104 Receipt for: ☐ Primary ☐ General ☐ Other (specify)	Name of Employer Occupation Aggregate Year-to-Date	Date (month, day, year) 12/08/2000 $750	Amount of Each Receipt This Period $250.00
G. Full name, Mailing Address and ZIP code New Hampshire Democratic Party 150 N. Main Street Concord, NH 03301 Receipt for: ☐ Primary ☐ General ☐ Other (specify)	Name of Employer Occupation Aggregate Year-to-Date	Date (month, day, year) 12/08/2000 $750	Amount of Each Receipt This Period $250.00

SUBTOTAL of Receipts This page (Optional) ---------- $7,000.00

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

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SCHEDULE A **ITEMIZED RECEIPTS**

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

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FOR LINE NUMBER 12

Transfers from Affiliated/Other Party Committees (A - Line 12)

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NAME OF COMMITTEE (In Full) Association of State Democratic Chairs-Federal Operating C00259481

A. Full name, Mailing Address and ZIP code New Jersey Democratic Party 150 West State Street Trenton, NJ 08608 Receipt for: ☐ Primary ☐ General ☐ Other (specify)	Name of Employer Occupation Aggregate Year-to-Date $7,550	Date (month, day, year) 12/08/2000	Amount of Each Receipt This Period $1,500.00
B. Full name, Mailing Address and ZIP code Utah Democratic Party 455 South 100 East, Ste. 102 Salt Lake City, UT 84111 Receipt for: ☐ Primary ☐ General ☐ Other (specify)	Name of Employer Occupation Aggregate Year-to-Date $1050	Date (month, day, year) 12/08/2000	Amount of Each Receipt This Period $350.00
C. Full name, Mailing Address and ZIP code Receipt for: ☐ Primary ☐ General ☐ Other (specify)	Name of Employer Occupation Aggregate Year-to-Date	Date (month, day, year)	Amount of Each Receipt This Period
D. Full name, Mailing Address and ZIP code Receipt for: ☐ Primary ☐ General ☐ Other (specify)	Name of Employer Occupation Aggregate Year-to-Date	Date (month, day, year)	Amount of Each Receipt This Period
E. Full name, Mailing Address and ZIP code Receipt for: ☐ Primary ☐ General ☐ Other (specify)	Name of Employer Occupation Aggregate Year-to-Date	Date (month, day, year)	Amount of Each Receipt This Period
F. Full name, Mailing Address and ZIP code Receipt for: ☐ Primary ☐ General ☐ Other (specify)	Name of Employer Occupation Aggregate Year-to-Date	Date (month, day, year)	Amount of Each Receipt This Period
G. Full name, Mailing Address and ZIP code Receipt for: ☐ Primary ☐ General ☐ Other (specify)	Name of Employer Occupation Aggregate Year-to-Date	Date (month, day, year)	Amount of Each Receipt This Period

SUBTOTAL of Receipts This page (Optional) ----------

TOTAL This Period (last page this line number only) ---------- $8,850.00