



FEDERAL ELECTION COMMISSION  
WASHINGTON, D.C. 20463

RQ-5

Duane Neal, Treasurer  
Asa Hutchinson for Congress  
P.O. Box 2222  
Fort Smith, AR 72902

JUL 31 1998

Identification Number: C00320168

Reference: July Quarterly Report (5/1/98-6/30/98)

Dear Mr. Neal:

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 attached) discloses a contribution(s) which appears to exceed the limit set forth in the Act. The Act precludes an individual or a political committee, other than a qualified multicandidate committee, from making a contribution to a candidate for federal office in excess of \$1,000 per election. (2 U.S.C. §441a(a))

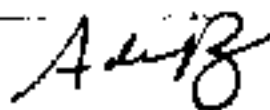
Please note that contributions designated in writing by the contributor for a particular election must be attributed to that election. Contributions not designated in writing by the contributor will be considered made for the next election for that Federal Office (11 CFR §110.1(b)(2)(i) and (ii)).

If the contribution(s) in question was not completely or correctly reported, you should amend your original report using the correct information. If the contribution made was excessive, you should notify the recipient and request a refund of the amount in excess of \$1,000. You should inform the Commission in writing of such a refund and provide a copy of the refund request sent to the recipient committee. The refund should appear on Line 15 of the Detailed Summary Page and on a supporting Schedule A of the report covering the period in which the refund is received.

Although the Commission may take further legal action, prompt action by you to obtain a refund of the excessive amount(s) will be considered.

Any amendment or clarification should be filed with the Federal Election Commission. 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,

A handwritten signature in dark ink, appearing to read 'A. Ragan'.

Adam Ragan  
Reports Analyst  
Reports Analysis Division

## SCHEDULE B

## ITEMIZED DISBURSEMENTS

Use separate schedule(s)  
for each category of the  
Detailed Summary PagePAGE 2 OF 2  
FOR LINE NUMBER 15

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)

Asa Hutchinson for Congress Committee

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Jay Williams for Congress 454 Commonwealth Blvd. Elainger, KY 41018	Contributions-Political Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	5/11/98	1000.00
B. Full Name, Mailing Address and ZIP Code Heather Wilson for Congress 5400 San Mateo, NE, Suite 6 Albuquerque, NM 87109 <i>AR</i>	Contributions - Political Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	6/1/98	1000.00
C. Full Name, Mailing Address and ZIP Code Heather Wilson for Congress 5400 San Mateo NE, Suite 6 Albuquerque, NM 87109 <i>AR</i>	Contributions-Political Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	6/8/98	500.00
D. 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
E. 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
F. 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
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)

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