



FEDERAL ELECTION COMMISSION  
WASHINGTON, D.C. 20463

RQ-2

Alexander Isaac, Treasurer  
Genesee County Democratic  
Party Federal Account  
1318 W. Court St.  
Flint, MI 48503

SEP 18 1999

Identification Number: C00299339

Reference: Amended 30 Day Post-General Report (10/1/96-11/25/96, dated 5/2/1/99)

Dear Mr. Isaac:

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 A of your report (pertinent portion(s) attached) discloses a contribution(s) from an organization(s) which is not a political committee registered with the Commission. In order for your committee to accept contributions from unregistered organizations into accounts used to influence federal elections, your committee should take steps to insure that the contributor(s) used permissible funds to make the contribution(s) to avoid violating 2 U.S.C. §§441a(f) and 441b or 11 CFR §102.5(b). Under 11 CFR §102.5(b), organizations which are not political committees under the Act and choose to contribute to federal committees must either: 1) establish a separate account which contains only those funds permitted under the Act, or 2) demonstrate through a reasonable accounting method that the organization has received sufficient funds subject to the limitations and prohibitions in order to make the contribution.

If the contribution(s) in question was incompletely or incorrectly disclosed, you should amend your original report with clarifying information. In addition, please clarify whether the contribution(s) received from the referenced organization(s) is permissible. To the extent that your committee has received impermissible funds, the Commission recommends

GENESEE COUNTY DEMOCRATIC PARTY FEDERAL ACCOUNT  
PAGE 2

that you transfer the impermissible funds to an account not used to influence federal elections or refund the impermissible amount(s) to the donor(s) in accordance with 11 CFR §103.3(b). In order to protect the donor's interests, the Commission recommends that you inform the contributor(s) in writing to provide the donor(s) with the option of receiving a refund or granting written authorization for a transfer to another account.

Please inform the Commission of your corrective action immediately in writing and provide a photocopy of your check for the transfer-out or refund. Should you choose to transfer-out or refund the contribution(s), the Commission will presume the funds were impermissible if no statement from your committee provides information to the contrary. Transfers-out and refunds should be disclosed on a Schedule B supporting Line 22 or 28 of the report covering the period during which the transaction was made.

Although the Commission may take further legal action concerning the acceptance of prohibited contributions, prompt action by your committee in transferring-out or refunding the amounts will be taken into consideration.

-Schedule A of your report discloses transfers from the 9<sup>th</sup> District Democratic Committee, however these transfers were not disclosed on their report(s) of receipts and disbursements. It appears that your committee has received transfers from a non-federal account of the 9<sup>th</sup> District Democratic Committee. Schedule A further disclosed a transfer from the Fifth Congressional District Democratic Party State Account. Any transfer(s) received by your committee from these entities are prohibited by 11 CFR §102.5(a) and must be transferred to your non-federal account or returned to the donor. Please inform the Commission of your corrective action immediately in writing and provide a photocopy of your check for the transfer-out. In addition, the transfer-out should be disclosed on your next report.

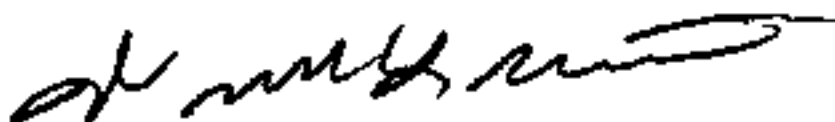
Although the Commission may take further legal action regarding the acceptance of funds from a non-federal account, your prompt transfer-out of the impermissible funds or clarification of these transactions, will be taken into consideration.

-On Schedule H4 supporting Line 21(a) of the Detailed Summary Page, you have not included the full name and/or mailing address for the vendor(s) listed. Please amend your report accordingly.

GENESEE COUNTY DEMOCRATIC PARTY FEDERAL ACCOUNT  
PAGE 3

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,



Donald L. Averett  
Reports Analyst  
Reports Analysis Division

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 1 OF 12  
FOR LINE NUMBER 11C

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 committees.

NAME OF COMMITTEE (In Full)			
<i>Genesee County Democratic Party</i>			
<p><b>A. Full Name, Mailing Address and ZIP Code</b>                      Prosecutor Supch Committee                      200 Courthouse                      Flint, MI 48502</p>			
<p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General  <input type="checkbox"/> Other (specify):</p>		<p>Name of Employer                      Date (month, day, year)                      10-11-96</p>	
<p>Amount of Each Receipt This Period                      1000.00</p>		<p>Occupation                      Aggregate Year-to-Date &gt; \$ 1000.00</p>	
<p><b>B. Full Name, Mailing Address and ZIP Code</b>                      Committee to Elect W. Lynn Hawkins                      1909 Owen Rd Flint, MI 48503</p>			
<p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General  <input type="checkbox"/> Other (specify):</p>		<p>Name of Employer                      Date (month, day, year)                      10-25-96</p>	
<p>Amount of Each Receipt This Period                      225.79</p>		<p>Occupation                      Aggregate Year-to-Date &gt; \$ 225.79</p>	
<p><b>C. Full Name, Mailing Address and ZIP Code</b>                      L.A.W. &gt;                      2140 Napoleon St                      Grand Blanc, MI 48439</p>			
<p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General  <input type="checkbox"/> Other (specify):</p>		<p>Name of Employer                      Date (month, day, year)                      10/22/96</p>	
<p>Amount of Each Receipt This Period                      500.00</p>		<p>Occupation                      Aggregate Year-to-Date &gt; \$ 500.00</p>	
<p><b>D. Full Name, Mailing Address and ZIP Code</b>                      6th District Democratic Committee                      Administration Account                      1651 Woodlawn Park Dr                      Flint, MI 48503</p>			
<p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General  <input type="checkbox"/> Other (specify):</p>		<p>Name of Employer                      Date (month, day, year)                      11-1-96</p>	
<p>Amount of Each Receipt This Period                      15000.00</p>		<p>Occupation                      Aggregate Year-to-Date &gt; \$ 15000.00</p>	
<p><b>E. Full Name, Mailing Address and ZIP Code</b>                      11</p>			
<p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General  <input type="checkbox"/> Other (specify):</p>		<p>Name of Employer                      Date (month, day, year)                      11-2-96</p>	
<p>Amount of Each Receipt This Period                      3000.00</p>		<p>Occupation                      Aggregate Year-to-Date &gt; \$ 18000.00</p>	
<p><b>F. Full Name, Mailing Address and ZIP Code</b>                      5th Congressional District Dem Party                      State A/cct. 53 River Trail                      Bay City, MI 48706</p>			
<p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General  <input type="checkbox"/> Other (specify):</p>		<p>Name of Employer                      Date (month, day, year)                      11-2-96</p>	
<p>Amount of Each Receipt This Period                      5600.00</p>		<p>Occupation                      Aggregate Year-to-Date &gt; \$ 5600.00</p>	
<p><b>G. Full Name, Mailing Address and ZIP Code</b>                      Committee to Elect Mitchell's Card                      3314 Sh Wood Dr                      Flint, MI 48503</p>			
<p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General  <input type="checkbox"/> Other (specify):</p>		<p>Name of Employer                      Date (month, day, year)                      11-7-96</p>	
<p>Amount of Each Receipt This Period                      500.00</p>		<p>Occupation                      Aggregate Year-to-Date &gt; \$ 500.00</p>	
<p><b>SUBTOTAL of Receipts This Page (optional)</b></p>			25625.79
<p><b>TOTAL This Period (last page this line number only)</b></p>			

SCHEDULE A

ITEMIZED RECEIPTS

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

11C

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)

A. Full Name, Mailing Address and ZIP Code  
Committee to Elect Tim Herrow  
3196 Birch Lane, PR  
Fisht, VT 48504

Name of Employer  
Occupation

Date (month, day, year)  
11-5-96

Amount of Each Receipt this Period  
500.00

Receipt For:  Primary  General  Other (specify):

Aggregate Year-to-Date > 3 500.00

B. Full Name, Mailing Address and ZIP Code

Name of Employer  
Occupation

Date (month, day, year)  
11-8-96

Amount of Each Receipt this Period  
200.00

Receipt For:  Primary  General  Other (specify):

Aggregate Year-to-Date > 8 700.00

C. Full Name, Mailing Address and ZIP Code

Name of Employer  
Occupation

Date (month, day, year)

Amount of Each Receipt this Period

Receipt For:  Primary  General  Other (specify):

Aggregate Year-to-Date > 8

D. Full Name, Mailing Address and ZIP Code

Name of Employer  
Occupation

Date (month, day, year)

Amount of Each Receipt this Period

Receipt For:  Primary  General  Other (specify):

Aggregate Year-to-Date > 8

E. Full Name, Mailing Address and ZIP Code

Name of Employer  
Occupation

Date (month, day, year)

Amount of Each Receipt this Period

Receipt For:  Primary  General  Other (specify):

Aggregate Year-to-Date > 8

F. Full Name, Mailing Address and ZIP Code

Name of Employer  
Occupation

Date (month, day, year)

Amount of Each Receipt this Period

Receipt For:  Primary  General  Other (specify):

Aggregate Year-to-Date > 8

G. Full Name, Mailing Address and ZIP Code

Name of Employer  
Occupation

Date (month, day, year)

Amount of Each Receipt this Period  
26525.79

Receipt For:  Primary  General  Other (specify):

Aggregate Year-to-Date > 8

SUBTOTAL of Receipts This Page (optional)

TOTAL This Period (last page use line number only)

26525.79

