



FEDERAL ELECTION COMMISSION

WASHINGTON, D.C. 20463

RQ-2

H. Robert Bartell III, Treasurer
1996 Federal Independent Campaign
Committee
201 N. Wells Street, Suite 706
Chicago, IL 60606

JUL 24 1996

Identification Number: C00262923

Reference: April Quarterly Report (1/1/96-3/31/96)

Dear Mr. Bartell:

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) which appears to exceed the limits set forth in the Act. 2 U.S.C. §441a(f) and 11 CFR §110.1(d) preclude a committee from receiving contributions from another political committee or person 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 the clarifying information. If the contribution(s) you received exceeded the limits, you must seek reattribution of the contribution pursuant to 11 CFR §110.1(k), transfer-out the amount in excess of \$5,000 to an account not used to influence federal elections or refund the excessive amount to the donor(s) in accordance with 11 CFR §103.3(b). In the best interest of your committee, all reattributions, transfers-out, and refunds should be made within sixty days of the treasurer's receipt of the contribution(s). 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 granting written authorization for a reattribution or transfer-out to another account or receiving a refund.

Please inform the Commission of your corrective action immediately in writing and provide a photocopy of your check for the transfer-out or refund. In addition, any reattributions should be reported as memo entries on Schedule A of the report covering the period during

which the authorization for the reattribution is received. Any transfers-out or refunds should be disclosed on Schedule B supporting Line 22 or 28 of the report during which the transaction was made.

Although the Commission may take further legal action regarding the acceptance of an excessive contribution(s), prompt action by your committee to seek reattribution, transfer-out or refund the excessive amount will be taken into consideration.

-Line 21(a)(i) of the Detailed Summary Page of your report discloses a total of \$3,925.35 in the federal share of allocable activity. The sum of the entries itemized on Schedule H4, however, indicates the total to be \$769.75. Please amend your report to clarify the discrepancy.

-Line 21(a)(ii) of the Detailed Summary Page of your report discloses a total of \$35,328.15 in the non-federal share of allocable activity. The sum of the entries itemized on Schedule H4, however, indicates the total to be \$6,927.75. Please amend your report to clarify the discrepancy.

-On Schedule H4 supporting Line 21(a) of the Detailed Summary Page, you have checked the category DIRECT CANDIDATE SUPPORT for the payment to Des Plaines Publishing. You have disclosed the FEDERAL SHARE as \$769.75. Be advised that any FEDERAL SHARE in-kind payments for DIRECT CANDIDATE SUPPORT must also be itemized on Schedule B supporting Line 23 of the Detailed Summary Page and not included in the total for this page. Please amend your report to correct this apparent discrepancy.

-Schedule H2 of your report indicates that your committee participated in direct candidate support activities or events during the reporting period. However, there are no corresponding disbursements reflected on your Schedule H4. If any disbursements were incorrectly reported, you should file an amended Schedule H4 with the correct unique identifying code or title.

Note that you need not include activities on Schedule H2 if there are no corresponding payments made for the activity during the reporting period.

1996 FEDERAL INDEPENDENT CAMPAIGN COMMITTEE
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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,

Debbie Manzano

Debbie Manzano
Reports Analyst
Reports Analysis Division

250

SCHEDULE A

ITEMIZED RECEIPTS

For each category of line
Detailed Summary Page

FOR LINE NUMBER

Contributions From Political Committees

112215

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)

1996 Federal Independent Campaign Committee

9
5
0
3
0
4
4
3
4
4
0

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Blagojevich For Congress 3657 North Kedzie Chicago IL 60618		2/21/96	3,000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$ 3,000.00	
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Friends of Dick Durbin Committee P.O. Box 1949 Springfield IL 62705		2/27/96 3/1/96	5,000.00 1,250.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$ 6,250.00	
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$	
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$	
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$	
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$	
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$	

SUBTOTAL of Receipts This Page (optional)

9,250.00

TOTAL This Period (last page this line number only)

9,250.00

96030854,994

96030854,994