RECEIVED
FEC MAIL ROOM
P 12 32

TATE AHLERT & CO.
A Professional Corporation. Business Advisors and CPAs.

January 3, 2000

Dominick Ciaraldi
Reports Analysis Division
Federal Election Commission
Washington, D.C. 20463

Reference: April Quarterly Report (1/1/00-3/31/00)

Dear Mr. Ciaraldi:

Please find enclosed a copy of your letter dated December 20, 2000. Also attached is an amended copy of the Report of Receipts and Disbursements covering the period January 1, 2000 to March 31, 20000.

Thank you again for the information you gave me in our phone conversation earlier today. Please contact me if you need any additional information or have any additional questions.

Sincerely,

Mary Sue Ahlert

Mary Sue Ahlert, C.P.A.

Two Ravinia Drive • Suite 370 • Atlanta, GA 30346
Tel. 770.395.5300 • Fax. 770.395.5155 • www.tate-ahlert.com

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee
(Summary Page)

RECEIVED
FEC MAIL ROOM
2000 JAN -9 P 12:32

USE FEC MAILING LABEL OR TYPE OR PRINT

1. NAME OF COMMITTEE (in full)
International Association of Holiday INN

ADDRESS (number and street) ☐ Check if different than previously reported
3 Ravinia Drive Suite 2000

CITY, STATE and ZIP CODE
Atlanta, GA 30346

AmeNDED

2. FEC IDENTIFICATION NUMBER
C-00084822

3. ☐ This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

4. TYPE OF REPORT

(a) ☒ April 15 Quarterly Report
☐ July 15 Quarterly Report
☐ October 15 Quarterly Report
☐ January 31 Year End Report
☐ July 31 Mid Year Report (Non-election Year Only)
☐ Termination Report

Monthly Report Due On:
☐ February 20 ☐ June 20 ☐ October 20
☐ March 20 ☐ July 20 ☐ November 20
☐ April 20 ☐ August 20 ☐ December 20
☐ May 20 ☐ September 20 ☐ January 31

☐ 12-Day Pre-Election Report for the _____ (Type of Election) election on _____ in the State of _____

☐ 30-Day Post-Election Report following the General Election on _____ in the State of _____

(b) Is this Report an Amendment? ☒ YES ☐ NO

SUMMARY	COLUMN A This Period	COLUMN B Calendar Year-to-Date
5. Covering Period 01/01/00 through 03/31/00		
6. (a) Cash on Hand January 1, 19____		$ 2,284.95
(b) Cash on Hand at Beginning of Reporting Period	$ 2,284.95	
(c) Total Receipts (from Line 19)	$16,480.25	$16,480.25
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	$18,765.52	$18,765.52
7. Total Disbursements (from Line 30)	$ 7,683.92	$ 7,683.92
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	$11,081.28	$11,081.28
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	$ 0-	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	$ 0-	

For further information contact:
Federal Election Commission
999 E Street, NW
Washington, DC 20463
Toll Free 800-424-9530
Local 202-694-1100

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer: Eva Ferguson

Signature of Treasurer: Eva Ferguson

Date

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

FEC FORM 3X
(revised 9/93)

FEGAN088

DETAILED SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS
PAGE 2, FEC FORM 3X

Amended (revised 1/1/91)

NAME OF COMMITTEE: International Association of Holiday INN

REPORT COVERING PERIOD FROM 01/01/00 TO 03/31/00

	COLUMN A Total This Period	COLUMN B Calendar Year	
I. Receipts			
11. Contributions (other than loans) From:			
a. Individual/Persons Other Than Political Committees			
i. Itemized (use Schedule A)	9,250.00	9,250.00	11(a)
ii. Unitemized	7,200.00	7,200.00	11(a)
iii. Total (add i and ii) ➤	16,450.00	16,450.00	11(a)
b. Political Party Committees	0	0	11(b)
c. Other Political Committees (such as PACs)	0	0	11(c)
d. Total Contributions (add a iii, b and c) ➤	16,450.00	16,450.00	11(d)
12. Transfers From Affiliated/Other Party Committees	0	0	12
13. All Loans Received	0	0	13
14. Loan Repayments Received	0	0	14
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.)	0	0	15
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees	0	0	16
17. Other Federal Receipts (Dividends, Interest, etc.)	30.25	30.25	17
18. Transfers from Nonfederal Account for Joint Activity	0	0	18
19. Total Receipts (add 11d, 12, 13, 14, 15, 16, 17, and 18) ➤	16,480.25	16,480.25	19
20. Total Federal Receipts (subtract line 18 from line 19) ➤	16,480.25	16,480.25	20
II. Disbursements			
21. Operating Expenditures:			
a. Shared Federal/Non-Federal Activity (from Schedule H4)			
i. Federal Share	0	0	21(a
ii. Non-Federal Share	0	0	21(a
b. Other Federal Operating Expenditures	0	0	21(b
c. Total Operating Expenditures (add a i, a ii, and b) ➤	0	0	21(c
22. Transfers to Affiliated/Other Party Committees	0	0	22
23. Contributions to Federal Candidates/Committees and Other Political Committees	7,500.00	7,500.00	23
24. Independent Expenditures (use Schedule E)	0	0	24
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F)	0	0	25
26. Loan Repayments Made	0	0	26
27. Loans Made	0	0	27
28. Refunds of Contributions To:			
a. Individuals/Persons Other Than Political Committees	0	0	28(a
b. Political Party Committees	0	0	28(b
c. Other Political Committees (such as PACs)	0	0	28(c
d. Total Contribution Refunds (add a, b and c) ➤	0	0	28(d
29. Other Disbursements	183.92	183.92	29
30. Total Disbursements (add 21c, 22, 23, 24, 25, 26, 27, 28d, and 29) ➤	7,683.92	7,683.92	30
31. Total Federal Disbursements (subtract line 21 a ii from line 30) ➤	7,683.92	7,683.92	31
III. Net Contributions/Operating Expenditures			
32. Total Contributions (other than loans)(from line 11d)			32
33. Total Contribution Refunds (from line 28d)			33
34. Net Contributions (other than loans)(subtract line 33 from 32)			34
35. Total Federal Operating Expenditures (add 21 a i and 21 b) ➤			35
36. Offsets to Operating Expenditures (from line 15)			36
37. Net Operating Expenditures (subtract line 36 from 35) ➤			37

FEC4Nose

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 1 OF 3

FOR LINE NUMBER 11(a)(i)

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)

International Association of Holiday INN

Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
A. Larry Blumberg 3002 foxridge Rd Dothan, AL 36303 Receipt For: [ ] Primary [X] General [ ] Other (specify):	Aggregate Year-to-Date $ 450.00	01/29/00	450.00
B. Raymond Carr 400 Gordon Dr Ste 502 Exton, PA 19341-1249 Receipt For: [ ] Primary [X] General [ ] Other (specify):	Aggregate Year-to-Date $ 300.00	02/14/00	300.00
C. Walter Duncan Jr P.O. Box 9012 Stuart, FL 34995 Receipt For: [ ] Primary [X] General [ ] Other (specify):	Aggregate Year-to-Date $ 300.00	02/01/00	300.00
D. Sam Friedman P.O. Box 7100 Natchitoches, LA 71458 Receipt For: [ ] Primary [X] General [ ] Other (specify):	Aggregate Year-to-Date $ 1,200.00	02/01/00	1,200.00
E. Charles Hilton P.O. Box 59462 Panama City, FL 32412-0462 Receipt For: [ ] Primary [X] General [ ] Other (specify):	Aggregate Year-to-Date $ 300.00	01/31/00	300.00
F. Charles Johnson 4314 Pablo Oaks Ct Jacksonville, FL 32224 Receipt For: [ ] Primary [X] General [ ] Other (specify):	Aggregate Year-to-Date $ 750.00	02/07/00	750.00
G. Renee Logan 29 S. LaSalle St Chicago, IL 60603 Receipt For: [ ] Primary [X] General [ ] Other (specify):	Aggregate Year-to-Date $ 600.00	02/04/00	600.00

SUBTOTAL of Receipts This Page (optional) 3,900.00

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

FE9AN103

amended

SCHEDULE A **ITEMIZED RECEIPTS**

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

PAGE 2 OF 3

FOR LINE NUMBER 11(a)(i)

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)

International Association of Holiday INN

Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
A. J & M Fishman 29 S. LaSalle St Chicago, IL 60603 Receipt For: [ ] Primary [X] General [ ] Other (specify):	Aggregate Year-to-Date $ 600.00	02/04/00	600.00
B. Robert Slater Jr 7002 Nichols Rd Oklahoma City, OK 73116 Receipt For: [ ] Primary [X] General [ ] Other (specify):	Aggregate Year-to-Date $ 450.00	02/01/00	450.00
C. Daniel J. Vosotas 2537 Rocherster Ct Troy, MI 48083 Receipt For: [ ] Primary [X] General [ ] Other (specify):	Aggregate Year-to-Date $ 300.00	02/08/00	300.00
D. Fredrick Q. Blair 10 Dale Dr Cody, WY 82414 Receipt For: [ ] Primary [X] General [ ] Other (specify):	Aggregate Year-to-Date $ 300.00	01/14/00	300.00
E. John Q. Hammon 4243 Hunt Rd Cincinnati, OH 45242 Receipt For: [ ] Primary [X] General [ ] Other (specify):	Aggregate Year-to-Date $ 300.00	01/25/00	300.00
F. Dean Henderson P.O. Box 1104 St. Cloud, MN 56302 Receipt For: [ ] Primary [X] General [ ] Other (specify):	Aggregate Year-to-Date $ 300.00	01/12/00	300.00
G. G. LeRoy Lail 2258 Hwy 70 Hickory, NC 28602 Receipt For: [ ] Primary [X] General [ ] Other (specify):	Aggregate Year-to-Date $ 450.00	01/25/00	450.00

SUBTOTAL of Receipts This Page (optional) 2,700.00

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

FE8AN103

Amended

SCHEDULE A **ITEMIZED RECEIPTS**

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

FOR LINE NUMBER 11(a)(i)

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)

International Association of Holiday INN

Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
A. Douglas Owings 5798 Mt Moriah Rd Memphis, TN 38115 Receipt For: [ ] Primary [X] General [ ] Other (specify):	Aggregate Year-to-Date > $300.00	01/21/00	300.00
B. Gary Schohet 9333 N. Meridan St Indianapolis, IN 46260 Receipt For: [ ] Primary [X] General [ ] Other (specify):	Aggregate Year-to-Date > $ 300.00	01/21/00	300.00
C. David Shamoian 2 Windy Hill Lane Wayland, MA 01778 Receipt For: [ ] Primary [X] General [ ] Other (specify):	Aggregate Year-to-Date > $ 450.00	01/20/00	450.00
D. Thomas Shoemaker 781 Plum Ridge Tr Sidnay, OH 45365 Receipt For: [ ] Primary [X] General [ ] Other (specify):	Aggregate Year-to-Date > $ 450.00	01/01/00	450.00
E. James Wold P.O. BOx 9555 Fargo, ND 58108 Receipt For: [ ] Primary [X] General [ ] Other (specify):	Aggregate Year-to-Date > $ 600.00	01/24/00	600.00
F. Robert Atter P.O. BOx 4240 San Clemente, CA 92674 Receipt For: [ ] Primary [X] General [ ] Other (specify):	Aggregate Year-to-Date > $ 300.00	02/13/00	300.00
G. David Nordstrom 3400 High Ridge Dr SE Cedar Rapids, IA 52403 Receipt For: [ ] Primary [X] General [ ] Other (specify):	Aggregate Year-to-Date > $ 250.00	02/03/00	250.00

SUBTOTAL of Receipts This Page (optional) 2,650.00

TOTAL This Period (last page this line number only) 9,250.00

FEMAN 103

Amended

SCHEDULE A **ITEMIZED RECEIPTS**

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

PAGE 1 OF 1

FOR LINE NUMBER 17

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)

International Association of Holiday INN

Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
A. Suntrust Atlanta, GA Receipt For: [ ] Primary [ ] General [X] Other (specify): Interest Income	Aggregate Year-to-Date > $ 10.25	03/31/00	10.25
B. Suntrust Atlanta, GA Receipt For: [ ] Primary [ ] General [X] Other (specify) Misc Credit	Aggregate Year-to-Date > $ 20.00	01/14/00	20.00
C. Full Name, Mailing Address and ZIP Code Receipt For: [ ] Primary [ ] General [ ] Other (specify):	Aggregate Year-to-Date > $		
D. Full Name, Mailing Address and ZIP Code Receipt For: [ ] Primary [ ] General [ ] Other (specify):	Aggregate Year-to-Date > $		
E. Full Name, Mailing Address and ZIP Code Receipt For: [ ] Primary [ ] General [ ] Other (specify):	Aggregate Year-to-Date > $		
F. Full Name, Mailing Address and ZIP Code Receipt For: [ ] Primary [ ] General [ ] Other (specify):	Aggregate Year-to-Date > $		
G. Full Name, Mailing Address and ZIP Code Receipt For: [ ] Primary [ ] General [ ] Other (specify):	Aggregate Year-to-Date > $		

SUBTOTAL of Receipts This Page (optional) 30.25

TOTAL This Period (last page this line number only) 30.25

FEMN103

Amended

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER 23

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)

International Association Of Holiday INN

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Ensign for Senate P.O. BOx 26568 Las Vegas, NV 89126	Contribution Disbursement for: [ ] Primary [X] General [ ] Other (specify)	3/24/00	1,000.00
B. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Lieberman 2000 236 Massachusetts Ave NE STE 202 Washington, DC 20002	Contribution Disbursement for: [ ] Primary [X] General [ ] Other (specify)	3/24/00	1,000.00
C. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
The Weygand Committee P.O. Box 7818 Worwick, RI 02887	Contribution Disbursement for: [ ] Primary [X] General [ ] Other (specify)	3/24/00	1,000.00
D. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Jeffonds For Vermont P.O. Box 246 Mont Pelier, VT 05601	Contribution Disbursement for: [ ] Primary [X] General [ ] Other (specify)	3/24/00	1,000.00
E. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Oxley for Congress P.O. Box 1998 Findley, OH 45839	Contribution Disbursement for: [ ] Primary [X] General [ ] Other (specify)	3/24/00	500.00
F. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Re-Elect Mary Johnson to Congress P.O. Box 1986 New Betain, CT 06050	Contribution Disbursement for: [ ] Primary [X] General [ ] Other (specify)	3/24/00	500.00
G. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Friends for Cliff Stearns P.O. Box 308 Silver Springs, FL 32688	Contribution Disbursement for: [ ] Primary [X] General [ ] Other (specify)	3/24/00	500.00
H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Friends of Clay Show 2600 NE 142 St Causeway Pompono Beach, FL 33062	Contribution Disbursement for: [ ] Primary [X] General [ ] Other (specify)	3/24/00	500.00
I. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Anne Northup for Congress P.O. Box 7313 Louisville, KY 40257	Contribution Disbursement for: [ ] Primary [X] General [ ] Other (specify)	3/24/00	500.00

SUBTOTAL of Disbursements This Page (optional)	6,500.00
TOTAL This Period (last page this line number only)	

FESAN1C3

Amended

SCHEDULE B **ITEMIZED DISBURSEMENTS**

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

PAGE 2 OF 2

FOR LINE NUMBER 23

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)

International Association of Holiday INN

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Stenholm for congress committee P.O. Box 1032 Stamford, TX 79553	Contribution Disbursement for: [ ] Primary [X] General [ ] Other (specify)	3/24/00	500.00
B. Full Name, Mailing Address and ZIP Code	**Purpose of Disbursement**	**Date (month, day, year)**	**Amount of Each Disbursement This Period**
Gekas for Congress 4800 Lingleston Rd Ste 203 Harrisburg, PA 17112	Contribution Disbursement for: [ ] Primary [X] General [ ] Other (specify)	3/24/00	500.00
C. Full Name, Mailing Address and ZIP Code	**Purpose of Disbursement**	**Date (month, day, year)**	**Amount of Each Disbursement This Period**
	Disbursement for: [ ] Primary [ ] General [ ] Other (specify)		
D. Full Name, Mailing Address and ZIP Code	**Purpose of Disbursement**	**Date (month, day, year)**	**Amount of Each Disbursement This Period**
	Disbursement for: [ ] Primary [ ] General [ ] Other (specify)		
E. Full Name, Mailing Address and ZIP Code	**Purpose of Disbursement**	**Date (month, day, year)**	**Amount of Each Disbursement This Period**
	Disbursement for: [ ] Primary [ ] General [ ] Other (specify)		
F. Full Name, Mailing Address and ZIP Code	**Purpose of Disbursement**	**Date (month, day, year)**	**Amount of Each Disbursement This Period**
	Disbursement for: [ ] Primary [ ] General [ ] Other (specify)		
G. Full Name, Mailing Address and ZIP Code	**Purpose of Disbursement**	**Date (month, day, year)**	**Amount of Each Disbursement This Period**
	Disbursement for: [ ] Primary [ ] General [ ] Other (specify)		
H. Full Name, Mailing Address and ZIP Code	**Purpose of Disbursement**	**Date (month, day, year)**	**Amount of Each Disbursement This Period**
	Disbursement for: [ ] Primary [ ] General [ ] Other (specify)		
I. Full Name, Mailing Address and ZIP Code	**Purpose of Disbursement**	**Date (month, day, year)**	**Amount of Each Disbursement This Period**
	Disbursement for: [ ] Primary [ ] General [ ] Other (specify)		

SUBTOTAL of Disbursements This Page (optional)	1,000.00
TOTAL This Period (last page this line number only)	7,500.00

FESAN100

Amended

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER 29

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)

International Association of Holiday INN

	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
A. Full Name, Mailing Address and ZIP Code Suntrust Bank Atlanta, GAS	Bank Service Charge Disbursement for: [ ] Primary [ ] General [X] Other (specify) Service Chg	1/00	86.11
B. Full Name, Mailing Address and ZIP Code Suntrust Bank Atlanta, GA	Bank Service Charge Disbursement for: [ ] Primary [ ] General [X] Other (specify) Service Chg	2/00	54.63
C. Full Name, Mailing Address and ZIP Code Suntrust Bank Atlanta, GA	Bank Service Charge Disbursement for: [ ] Primary [ ] General [X] Other (specify) Service Chg	3/00	43.18
D. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: [ ] Primary [ ] General [ ] 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: [ ] Primary [ ] General [ ] 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: [ ] Primary [ ] General [ ] 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: [ ] Primary [ ] General [ ] 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: [ ] Primary [ ] General [ ] 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: [ ] Primary [ ] General [ ] Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period

SUBTOTAL of Disbursements This Page (optional)	183.92
TOTAL This Period (last page this line number only)	183.92

FESAN1(3)

Amended

FEDERAL ELECTION COMMISSION
WASHINGTON, D.C. 20463

RQ-2

James P. McCauley, Treasurer
INN/PAC International Association of
Holiday Inns Inc. Political Action
Committee
Three Ravinia Drive, Suite 2000
Atlanta, GA 30346

DEC 20 2000

Identification Number: C00084822

Reference: April Quarterly Report (1/1/00-3/31/00)

Dear Mr. McCauley:

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:

(*) -Commission Regulations require that a committee disclose the identification of all individuals who contribute in excess of $200 in a calendar year. (11 CFR §104.3(a)(4)(i)) Identification for an individual is defined as the full name, mailing address, occupation and name of employer. (11 CFR §100.12) Your report discloses contributions from individuals for which the identification is not complete.

You must provide the missing information, or if you are unable to do so, you must demonstrate that "best efforts" have been used to obtain the information. To establish "best efforts," you must provide the Commission with a detailed description of your procedures for requesting the information. Establishing "best efforts" is a three-fold process.

First, your original solicitation must include a clear and conspicuous request for the contributor information and must inform the contributor of the requirements of federal law for the reporting of such information. (11 CFR §104.7(b)(1))

Second, if the information is not provided, you must make one follow-up, stand alone effort to obtain this information, regardless of whether the

contribution(s) was solicited or not. This effort must occur no later than 30 days after receipt of the contribution and may be in the form of a written request or an oral request documented in writing. (11 CFR § 104.7(b)(2)) The request must:

- clearly ask for the missing information, without soliciting a contribution;
- inform the contributor of the requirements of federal law for the reporting of such information, and
- if the request is written, include a pre-addressed post card or return envelope.

Third, if you receive contributor information after the contribution(s) has been reported, you shall either a) file with your next regularly scheduled report, an amended memo Schedule A listing all the contributions for which additional information was received; or b) file on or before your next regularly scheduled reporting date, amendments to the report(s) originally disclosing the contribution(s). (11 CFR §104.7(b)(4))

Please provide the missing information or a detailed description of your procedures for requesting the information. For more information on demonstrating "best efforts," please refer to the Campaign Guide.

-On Schedule A supporting Line 11(a)(i) of the Detailed Summary Page, your report disclosed contributions from individuals that omit the DATE OF RECEIPT and AGGREGATE YEAR-TO-DATE TOTALS. Please amend your report by supplying the information. 11 CFR §104.3(a)(4)(i) First expenditure NO YTD

-Schedule A of your report (pertinent portion(s) attached) discloses an apparent prohibited contribution. 2 U.S.C. §441b(a) prohibits the receipt of contributions from corporations and national banks unless made from separate segregated funds established by the corporations and national banks.

8K reconsider

If the contributions in question were incompletely or incorrectly disclosed, you should amend your original report with clarifying information. If you have received prohibited contributions, you must transfer-out the impermissible funds to an account not used to influence federal elections or refund the full amount to the donors in accordance with 11 CFR §103.3(b). In the best interest of your committee, all transfers-out and refunds should be made within thirty days of the treasurer's receipt of the impermissible funds. In order to protect the donor's interests, the Commission

recommends that you inform the contributors 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. In addition, any transfers-out or refunds should be disclosed on 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 to transfer-out or refund the amount will be taken into consideration.

-Please provide the dates for the receipts disclosed on Schedule A from Suntrust.

-Please amend Schedule B supporting Line 23 by providing the office sought (House/Senate/President) including state and congressional district, if applicable, for each contribution made. 11 CFR §104.3(b)(3)(ii) and (v)

-Schedule B supporting Line 23 discloses contributions to federal candidates for which no election designation has been provided. Please note that if no designation is included in your report, the contributions will be attributed to the next upcoming election for the recipient candidate. Thus, for future reporting purposes, it is in your committee's interest to designate the appropriate election in order to avoid the appearance of excessive contributions made to federal candidates by your committee.

-2 U.S.C. §434(b)(3) requires itemization of contributions from individuals and persons other than political committees, where the aggregate total from the contributor exceeds $200 in a calendar year. In addition, 11 CFR §104.3(a)(2)(i)(B) requires a committee to report the total amount of unitemized contributions (see Line 11(a)(ii) of the Detailed Summary Page). If a committee wishes to disclose contributions regardless of the amount contributed, the committee must separate (on separate receipt schedules) those contributors requiring itemization from those who are not required to be itemized. 11 CFR §104.3(a)(4)(i) For future filings, please submit your reports in this order.

-For your information, each category on the Detailed Summary Page for

which your committee discloses activity must have a separate schedule. Please note this for future filings.

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,

Dominick Ciaraldi
Reports Analyst
Reports Analysis Division

279

Federal Election Commission

ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS

The Commission has added this page to the end of this filing to indicate how it was received.

☐	Hand Delivered	Date of Receipt
☐	First Class Mail	POSTMARKED
☑	Registered/Certified Mail	POSTMARKED (R/C) 1-5-01
☐	No Postmark	
☐	Postmark Illegible	
☐	Received from the House office of Records and Registration	Date of Receipt
☐	Received from the Senate Office of Public Records	Date of Receipt
☐	Other (Specify):	Postmarked _____ and/or Date of Receipt
☐	Electronic Filing	

PREPARER	1-9-01 DATE PREPARED

(6/2000)