

Senator Don Nickles
Republican Majority Fund

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COMMISSION
REPORTS ANALYSIS
DIVISION

Nov 9 5 01 PM '95

November 9, 1995

Federal Election Commission
Attn: Wendy Barkley
Reports Analysis Division
Washington, D.C. 20463

RE: Mid-Year Report (1/1/95-6/30/95), Identification Number C00296640

Dear Sirs:

This letter is in response to the Commission's October 25, 1995, letter seeking clarification of administrative expenses and multicandidate committee status for the Republican Majority Fund.

Your letter suggests the Republican Majority Fund report discloses limited payments for administrative expenses for the January 1 - June 30, 1995 mid-year reporting period. Although the administrative expenses for the Republican Majority Fund may be frugal by some standards, all such expenses are fully disclosed and reflected on Line 21(b) of the Detailed Summary Page.

The Republican Majority Fund's administrative expenses primarily consist of payments to a consultant in exchange for administrative services and facilities. Schedule B from the mid-year report, enclosed, reflects \$7,000 in fundraising and administrative fees. Additional expenses are disclosed for telephone expenses and office supplies.

Please find enclosed a completed FEC Form 1M to disclose information for the public record regarding the Republican Majority Fund's multicandidate status.

Sincerely,



Linda Daniel, Treasurer

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SCHEDULE B

ITEMIZED DISBURSEMENTS

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)			
Republican Majority Fund			
A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Linda Daniel 128 Columbus Alexandria, VA 22314	Traveling and Administrative fees	1/5/95	2000.00
	Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		
B. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Linda Daniel see above	Telephone reimbursement	1/5/95	11.96
	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		
C. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Linda Daniel see above	General Administrative Expenses	4/12/95	89.42
	Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		
D. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Linda Daniel see above	Traveling and Administrative fees	5/8/95	76.86
	Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		
E. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Linda Daniel see above	Traveling and Administrative fees	5/8/95	2500.00
	Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		
F. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Linda Daniel see above	Traveling and Administrative fees	5/22/95	20.32
	Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		
G. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Linda Daniel see above	Traveling and Administrative fees	5/22/95	2500.00
	Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		
H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Becky Handll and Co. 1433 Foxhall Road, NW Washington, DC 20007	catering expense	6/27/95	4371.66
	Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		
I. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Kennedy Center 2700 New Hampshire Ave., NW Washington, DC 20566	tickets	4/5/95	3236.00
	Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		
SUBTOTAL of Disbursements This Page (optional)			14806.22
TOTAL This Period (see page this line number only)			

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SCHEDULE B

ITEMIZED DISBURSEMENTS

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)
 Republican Majority Fund

A. Full Name, Mailing Address and ZIP Code National Republican Senatorial Committee 425 Second Street, NE Washington, DC 20002	Purpose of Disbursement Postage	Date (month, day, year)	Amount of Each Disbursement This Period
	Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	5/16/95	230.08

B. Full Name, Mailing Address and ZIP Code New England Press, Inc. 1200 Wake Forest Drive Alexandria, VA 22307	Purpose of Disbursement Printing Expense	Date (month, day, year)	Amount of Each Disbursement This Period
	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	5/8/95	729.41

C. Full Name, Mailing Address and ZIP Code Williamsburg Inn PO Box 1776 Williamsburg, VA 23187-1776	Purpose of Disbursement lodging	Date (month, day, year)	Amount of Each Disbursement This Period
	Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	6/11/95	352.78

D. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> 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: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> 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: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> 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: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> 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: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> 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: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		

SUBTOTAL of Disbursements This Page (optional)			1312.27
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TOTAL This Period (last page this line number only)			16118.49
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FEDERAL ELECTION COMMISSION

WASHINGTON, D.C. 20463

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OCT 25 1995

Linda Daniel, Treasurer
Republican Majority Fund
P.O. Box 19897
Alexandria, VA 22320

Identification Number: C00296640

Reference: Mid-Year Report (1/1/95-6/30/95)

Dear Ms. Daniel:

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:

-Your report discloses limited payments for administrative expenses. Administrative expenses are payments made for the purpose of operating a political committee including, but not limited to, rent, utilities, salaries, telephone service, office equipment and supplies. Any such payments to a person aggregating in excess of \$200 in a calendar year must be disclosed on Schedule B, supporting Line 21(b) of the Detailed Summary Page. 2 U.S.C. §434(b)(5) If these expenses are being paid by a connected organization, your Statement of Organization must be amended to reflect this relationship. 2 U.S.C. §433(b)(2) In addition, if expenses have been incurred but not paid in a reporting period, the activity should be disclosed as a debt on Schedule D, if the obligation is \$500 or more, or outstanding for sixty days or more. 11 CFR §104.11

Any goods or services provided to your committee by a person, except volunteer activity (i.e., a person's time), would be considered an in-kind contribution from that person, and would be subject to the disclosure requirements of 2 U.S.C. §434(b)(3) and 11 CFR §104.13, and the limitations and prohibitions of 2 U.S.C. §§441a and 441b.

Clarification regarding administrative expenses should be disclosed during each two year election cycle beginning with the first report filed in the non-election year. Please provide the necessary information regarding administrative expenses incurred by your


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committee and/or amend your report to disclose such expenses according to the referenced provisions of the Act and Commission Regulations.

-The Summary Page of your report discloses that your committee recently became a multicandidate committee on 7/31/95; however, the Commission has no record of a FORM 1M filed by your committee. Please note that as of January 1, 1994, all political committees who attain multicandidate status must file a Notification of Multicandidate Status within ten (10) days of meeting the qualifications. For further guidance on the multicandidate qualifications and requirements, please see 11 CFR §102.2(a)(3) and §110.2(a)(2). Please submit a FORM 1M (enclosed) to disclose the required information for the public record.

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,



Wendy Barkley
Reports Analyst
Reports Analysis Division

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