



FEDERAL ELECTION COMMISSION
WASHINGTON, D.C. 20463

RQ-2

Jack Hanson, Treasurer
Pioneer Political Action Committee
499 South Capitol Street, SW, Suite 2000A
Washington, DC 20003

Identification Number: C00325357

JUL 5 2000

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

Dear Mr. Hanson:

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 supporting Line 23 of your report discloses a contribution(s) to a candidate(s) for the 2000 primary election; however, the funds were disbursed after the election date(s) (pertinent portion(s) attached). Please note that contributions may not be designated for an election which has already occurred unless the funds are to be used to reduce a candidate committee's debts incurred during that election campaign. Please clarify the contribution(s) and disclose any redesignations or refunds as necessary on the appropriate schedules.

-Your committee reports disbursements on Schedule B and Schedule H4 which appear to be identical. Please note that any activity which is financed entirely by the federal account should be reported on Schedule B supporting Line 21(b), not Schedule H4 supporting Line 21(a)(i). Likewise, any allocable expenses which are paid jointly should only be disclosed on Schedule H4 supporting Line 21(a)(i), not Schedule B supporting Line 21(b). Duplication in reporting disbursements may cause inflated disbursement totals. Please amend your report to clarify your disbursements. 11 CFR §106.5

-Itemized disbursements must include a brief statement or description of why the disbursements were made. Please amend Schedule(s) B and H4 of

your report to clarify the following description(s): "Consultant", "Consulting", and "Professional Services". For further guidance regarding acceptable purposes of disbursements, please refer to 11 CFR §104.3(b)(3).

-On Schedule H2, you disclose the ratio for March 2, 2000 Dinner to be new; however, Schedule H2 of your Amended March Monthly Report disclosed a ratio for this activity/event which is identical to the one given in this report. Please amend your report to clarify this discrepancy. 11 CFR §104.10(a)(1)

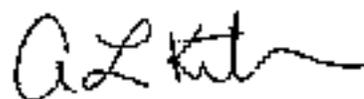
-On Schedule H4 supporting Line 21(a) of the Detailed Summary Page, you have failed to check the appropriate CATEGORY box for the payment(s) made to Nancy L. Bocskor. Please amend your report to disclose the appropriate category.

-On Schedule H4 supporting Line 21(a) of the Detailed Summary Page, you have failed to include the total EVENT YEAR-TO-DATE amount for a payment(s) to Nancy L. Bocskor. Please amend your report to include the missing EVENT YEAR-TO-DATE total(s).

-You have opted to file your reports electronically; however, you have failed to do so for the above referenced reporting period(s). Please be advised that if a committee chooses to file its reports electronically, it must continue to file all reports electronically for that calendar year. 11 CFR §104.18 Please file the April Monthly Report(s) electronically.

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,



Antoinette Kitchen
Reports Analyst
Reports Analysis Division

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)

Pioneer Political Action Committee

AK

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Next Day Signs 6403 Nicholas Drive Columbus, OH 43235	Pat Tiberi, Ohio 12th Cong. Dist. In-kind Signs Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 2000 OH(P) was 3/7/00	03/13/00	1,803.60
Apparel Xpress 1184 Bonham Avenue Columbus, OH 43211	Pat Tiberi, Ohio 12th Dist. In-Kind Apparel Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 2000 OH(P) was 3/1/00	03/17/00	793.76
REM Communications 2782 Groveport Road Columbus, OH 43207	Pat Tiberi, Ohio 12th Dist. In-Kind Radio Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 2000 OH(P) was 3/7/00	03/17/00	180.35
Found & Company 5505 Connecticut Ave. N.W. #270 Washington, DC 20015	Steve Chabot, U.S. HOUSE, 1st OH, In-Kind Mailing Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 2000 OH(P) was 3/7/00	03/24/00	1,980.98
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

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SUBTOTAL of Disbursements This Page (optional)	4,868.56
TOTAL This Period (last page this line number only)	4,868.56

