



FEDERAL ELECTION COMMISSION

WASHINGTON, D.C. 20463

September 9, 1999

RQ-3

RECEIVED
FEDERAL ELECTION
COMMISSION MAIL ROOM

SEP 17 2 14 PM '99

James Zanengo, Treasurer
Campaign Fund of Don DiFrancesco
P.O. Box 407
Berkely Heights, NJ 07922

Identification Number: C00338277

Reference: October Quarterly Report (7/1/98-9/30/98)

Dear Mr. Zanengo:

On August 18, 1999, you were notified that a review of the above-referenced report(s) raised questions as to specific contributions and/or expenditures, and the reporting of certain information required by the Federal Election Campaign Act.

Your September 2, 1999 response is incomplete because you have not provided all the requested information. For this response to be considered adequate, the following information is still required.

The Commission acknowledges the inclusion of contributors' addresses and aggregate year-to-date contribution totals; however, you have provided complete information only for Lewis Eisenberg. You must provide the occupation and name of employer information for all other contributors as well as the date of receipt for several other contributors.

If this information is not received by the Commission within fifteen (15) days from the date of this notice, the Commission may choose to initiate audit or legal enforcement action.

If you should have any questions related to this matter, please contact Antoinette Kitchen on our toll-free number (800) 424-9530 or our local number (202) 694-1130.

Sincerely,

John D. Gibson
Assistant Staff Director
Reports Analysis Division



FEDERAL ELECTION COMMISSION
WASHINGTON, D.C. 20463

RQ-2

James Zanengo, Treasurer
Campaign Fund of Don DiFrancesco
P.O. Box 407
Berkely Heights, NJ 07922

AUG 18 1999

Identification Number: C00338277

Reference: October Quarterly Report (7/1/98-9/30/98)

Dear Mr. Zanengo:

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:

-You must attempt to obtain the full name, mailing address, occupation and name of employer for all individuals who contribute more than \$200 in a calendar year. Please amend your report to include the omitted information.

A committee may establish "best efforts" by providing the Commission with a description of its procedures for requesting the information. It is also in the best interests of the committee to provide a copy of its solicitation. In order to establish "best efforts", the committee must demonstrate that it makes at least one request for the information after the contribution is received. This one request must be made for any solicited or unsolicited contribution that, in the aggregate, exceeds the \$200 threshold and lacks the necessary information.

Each solicitation must include a clear and conspicuous request for the information. If a committee receives a contribution that, in the aggregate, exceeds the \$200 threshold but lacks contributor information, the committee must, within 30 days, make a written or oral request for the information. Please note that a written request may not include an additional solicitation or material on any other subject, other than thanking the contributor for the donation, and must include a pre-addressed return post card or envelope for the contributor's response. An oral request must be documented in writing.

Committees must also disclose information that was not provided by the contributor, but is available in any of the committee's records for that current election cycle.

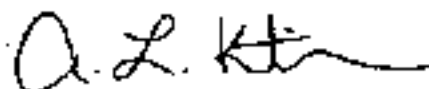
If a committee receives contributor information after the contributions have been reported, the committee shall either a) file with its next regularly scheduled report, an amended memo Schedule A listing all the contributions for which additional information was received; or b) file on or before its next regularly scheduled reporting date, amendments to the report(s) originally disclosing the contribution(s). (11 CFR §104.3(a)(4)(i) and 11 CFR § 104.7)

-On Schedule A supporting Line 11(a)(i) of the Detailed Summary Page, your report disclosed contributions from individuals that omit the dates of receipt and aggregate year-to-date totals. Please amend your report by supplying the information. 11 CFR §104.3(a)(4)(i)

-For future filings, please note that your committee need only file the pages on which you have itemized activity. Schedules with no activity may be omitted.

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,



Antoinette Kitchen
Reports Analyst
Reports Analysis Division

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)

CAMPAIGN FUND OF DON P. FRANCESCO

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
S. WATSON 194 PARK AVE MORRISTOWN NJ 07961	SELF-EMPLOYED	5/98	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation CONSULTANT		1,000.00
	Aggregate Year-to-Date > \$ 1,000.00		
B. Full Name, Mailing Address and ZIP Code J. HEZKICH 454 EAST AVE POINT PLAINANT NJ 08742	SELF-EMPLOYED	5/98	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation CONSULTANT		500.00
	Aggregate Year-to-Date > \$ 500.00		
C. Full Name, Mailing Address and ZIP Code T. TERRILL 317 GEORGE ST NEW BRUNSWICK NJ 08901	SELF-EMPLOYED	5/98	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation CONSULTANT		500.00
	Aggregate Year-to-Date > \$ 500.00		
D. Full Name, Mailing Address and ZIP Code S. FEUSTER NJ IT RAYMOND BLVD NEWARK NJ 07102	NJ INSTITUTE TECHNOLOGY NEWARK NJ	5/98	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation ADMINISTRATION		500.00
	Aggregate Year-to-Date > \$ 500.00		
E. Full Name, Mailing Address and ZIP Code M. LADDY 736 WILLOW ST CRANFORD NJ 07090	SELF-EMPLOYED	5/98	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation CONSULTANT		500.00
	Aggregate Year-to-Date > \$ 500.00		
F. Full Name, Mailing Address and ZIP Code N. SEVELL 1600 COOPER ROAD SEVENTH FLOOR NJ 07076	SEVELL AUTO BODY WESTFIELD NJ	5/98	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation AUTO SHOP		1,000.00
	Aggregate Year-to-Date > \$ 1,000.00		
G. Full Name, Mailing Address and ZIP Code D. SHAN 1105 BURTONS COURT EDISON NJ 08821	D. SHAN M.D. EDISON NJ	5/98	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation M.D.		500.00
	Aggregate Year-to-Date > \$ 500.00		

SUBTOTAL of Receipts This Page (optional) 4,500.00

TOTAL This Period (last page this line number only) 11,500.00

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)

CAMPAIN FUND OF DON D'FRANCESCO

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
LEWIS EISENBERG 82 W. IVER ROAD RUMSON NJ 07760	GRANITE CAPITAL NEW YORK NY	5/98	1,000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: INVESTMENT BANKER	Aggregate Year-to-Date > \$ 1,000.00	
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
HENK SHOTMEYER 434 RUSSELL AVE NYCROFF NJ 07601	SHOTMEYER INC NYCROFF NJ	5/98	1,000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: OIL DISTRIBUTOR	Aggregate Year-to-Date > \$ 1,000.00	
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
K. ALEXANDER 15 E. STEWART ST WASHINGTON NJ 07882	SELF-EMPLOYED	5/98	100.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: CONSULTANT	Aggregate Year-to-Date > \$ 100.00	
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
JAMES ZANENGO Box 407 BURELNEY HEIGHTS NJ 07924	SELF-EMPLOYED	5/98	3,000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: CONSULTANT	Aggregate Year-to-Date > \$ 3,000.00	
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
JOSEPH MONTUORO 16 LAKE ROAD SHORT HILLS NJ 07078	RETIRED	5/98	100.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation:	Aggregate Year-to-Date > \$ 100.00	
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
E ENLOW 3 CARDINAL DRIVE WARREN NJ 07059	RETIRED	5/98	100.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation:	Aggregate Year-to-Date > \$ 100.00	
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
H. PRALTE 29 COOPER HAVEN MANALAPAN NJ 07726	SELF-EMPLOYED	5/98	500.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: CONSULTANT	Aggregate Year-to-Date > \$ 500.00	

SUBTOTAL of Receipts This Page (optional)	7,800.00
TOTAL This Period (last page this line number only)	

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
9/14/99

Registered/Certified Mail POSTMARKED

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

EA
PREPARER

9/17/99
DATE PREPARED