FEDERAL ELECTION COMMISSION
WASHINGTON, D.C. 20463

RQ-2

Joe Hansen, Treasurer
Democratic Senatorial Campaign Committee
430 South Capitol Street, SE
Washington, DC 20003

APR 14 1999

Identification Number: C00042366

Reference: 30 Day Post-General Report (10/15/98-11/23/98)

Dear Mr. Hansen:

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:

-A review of the reports filed by your committee (pertinent portion(s) attached) indicates that your committee received a transfer(s) from Florida Democratic Party and Victory in New York which has not been disclosed on their report(s) of receipts and disbursements. Please provide clarifying information regarding the source of the transfer(s) received by your committee.

-A review of the reports filed by Democratic National Committee (pertinent portion(s) attached) indicates that the committee participated in an in-kind generic media activity with your committee which has not been disclosed on your report(s) of receipts and disbursements. Please amend your report(s) to reflect this in-kind transfer(s).

-Schedule E of your report lists the purpose of expenditure as "media" (pertinent portion attached). The Instructions for Preparing Schedule E state that examples of adequate purpose of expenditures are "radio," "television" and "newspaper." Please amend your report accordingly.

-Schedule E of your report discloses independent expenditures that do not include the breakdown of their support/opposition per candidate (pertinent

portions attached). For each independent expenditure, a committee must disclose one candidate that is supported/opposed. Please amend your Schedule E accordingly

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,

Kenneth A. Davis, Jr.
Reports Analyst
Reports Analysis Division

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SCHEDULE A **ITEMIZED RECEIPTS**

Use separate schedule for each category of the Detailed Summary Page

PAGE 4 OF 15

FOR LINE NUMBER 12

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Democratic Senatorial Campaign Committee

FEC ID No. C00042366

Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
A. Florida Democratic Party P.O. Box 1758 Tallahassee, FL 32302 Receipt for: ☐ Primary ☐ General ☐ Other (specify):	Transfer Occupation Aggregate Year-To-Date > $	10/30/98	50,000.00
B. Victory in New York 430 S. Capitol St., S.E. Washington, D.C. 20003 Receipt for: ☐ Primary ☐ General ☐ Other (specify):	Transfer Occupation Aggregate Year-To-Date > $	10/31/98	127,000.00
C. Victory in New York 430 S. Capitol St., S.E. Washington, D.C. 20003 Receipt for: ☐ Primary ☐ General ☐ Other (specify):	Transfer Occupation Aggregate Year-To-Date > $	10/28/98	40,000.00
D. Victory in New York 430 S. Capitol St., S.E. Washington, D.C. 20003 Receipt for: ☐ Primary ☐ General ☐ Other (specify):	Transfer Occupation Aggregate Year-To-Date > $	10/23/98	45,000.00
E. Victory in New York 430 S. Capitol St., S.E. Washington, D.C. 20003 Receipt for: ☐ Primary ☐ General ☐ Other (specify):	Transfer Occupation Aggregate Year-To-Date > $	10/30/98	40,000.00
F. Democratic State Central Committee 380 Franklin Ave. Hartford, CT 06114 Receipt for: ☐ Primary ☐ General ☐ Other (specify):	Transfer Occupation Aggregate Year-To-Date > $	11/19/98	100,000.00
G. Democratic Party of Illinois P.O. Box 518 Springfield, IL 62705 Receipt for: ☐ Primary ☐ General ☐ Other (specify):	Transfer Occupation Aggregate Year-To-Date > $	11/03/98	15,000.00

SUBTOTAL of Receipts This Page (optional)	417,000.00
TOTAL This Period (last page this line number only)	

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SCHEDULE A **ITEMIZED RECEIPTS**

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

PAGE OF

FOR LINE NUMBER 12

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)
DNC Services Corp. / Democratic National COmmittee

A. Full Name, Mailing Address and ZIP Code Democratic Senatorial Campaign COmmittee 430 S. Capitol Street, SE Washington, DC 20003 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > $	Date (month, day, year) 10/28/98	Amount of Each Receipt this Period 200,000.00 (In-Kind)
B. Full Name, Mailing Address and ZIP Code Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > $	Date (month, day, year)	Amount of Each Receipt this Period
C. Full Name, Mailing Address and ZIP Code Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > $	Date (month, day, year)	Amount of Each Receipt this Period
D. Full Name, Mailing Address and ZIP Code Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > $	Date (month, day, year)	Amount of Each Receipt this Period
E. Full Name, Mailing Address and ZIP Code Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > $	Date (month, day, year)	Amount of Each Receipt this Period
F. Full Name, Mailing Address and ZIP Code Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > $	Date (month, day, year)	Amount of Each Receipt this Period
G. Full Name, Mailing Address and ZIP Code Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > $	Date (month, day, year)	Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional) .....

TOTAL This Period (last page this line number only) 200,000.00

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CHEDULE B **ITEMIZED DISBURSEMENTS**

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

PAGE OF

FOR LINE NUMBER 22

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)

DNC Services Corp./ Democratic National Committee

A. Full Name, Mailing Address and ZIP Code Democratic Senatorial Campaign Committee 430 S. Capitol Street, SE Washington, DC 20003	Purpose of Disbursement In-Kind received Generic Media Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 10/28/98	Amount of Each Disbursement This Period 200,000.00 (In-Kind)
B. 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
C. 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
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) .....

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

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SCHEDULE E

ITEMIZED INDEPENDENT EXPENDITURES

(See Reverse Side for Instructions)

Page 1 of 1 Pages

Name of Committee (in Full)

Democratic Senatorial Campaign Committee

Full Name, Mailing Address & ZIP Code of Each Payee	Purpose of Expenditure	Date (month, day, year)	Amount	Name of Federal Candidate supported or opposed by the expenditure & office sought
Greer, Margolis, Mitchell, Burns & Associates, Inc. 1010 Wisconsin Avenue, #800 Washington, DC 20007	[Media]	10/20/98	150,000.00	Scotty Baesler Kentucky U.S. Senate ☒ Support ☐ Oppose
				Jim Bunning Kentucky U.S. Senate ☐ Support ☒ Oppose
				☐ Support ☐ Oppose
Greer, Margolis, Mitchell Burns & Associates, Inc. 1010 Wisconsin Avenue, #800 Washington, DC 20007	[Media]	10/20/98	425,000.00	Mark Neumann Wisconsin U.S. Senate ☐ Support ☒ Oppose
				☐ Support ☐ Oppose
				☐ Support ☐ Oppose

(a) SUBTOTAL of Itemized Independent Expenditures ..... $

(b) SUBTOTAL of Unitemized Independent Expenditures ..... $

(c) TOTAL Independent Expenditures ..... $ 575,000.00

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, concern with, or at the request or suggestion of any candidate or any authorized committee or agent of such candidate or authorized committee. Furthermore, these expenditures did not involve the financing of dissemination, distribution, or republication in whole or in part of any campaign materials prepared by the candidate, his campaign committee, or their agent.

Signature

10/20/98
Date

Subscribed and sworn to before me this 21st day of October, 19 98

My Commission expires: Oct. 31, 2002

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SCHEDULE E

ITEMIZED INDEPENDENT EXPENDITURES

(See Reverse Side for Instructions)

Name of Committee (in Full)

Democratic Sanatorial Campaign Committee

Full Name, Mailing Address & ZIP Code of Each Payee	Purpose of Expenditure	Date (month, day, year)	Amount	Name of Federal Candidate supported or opposed by the expenditure & office sought
Grear, Margolis Mitchell, Burns & Associates, Inc. 1010 Wisconsin Avenue, #800 Washington, DC 20007	Media	10/16/98	$54,000.00	Scotty Baesler Kentucky U.S. Senate ☒ Support ☐ Oppose
				Jim Bunning Kentucky U.S. Senate ☐ Support ☒ Oppose
				☐ Support ☐ Oppose
				☐ Support ☐ Oppose
				☐ Support ☐ Oppose
				☐ Support ☐ Oppose

(a) SUBTOTAL of Itemized Independent Expenditures ..... $

(b) SUBTOTAL of Unitemized Independent Expenditures ..... $

(c) TOTAL Independent Expenditures ..... $

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, contact with, or at the request or suggestion of any candidate or any authorized committee or agent of such candidate or authorized committee. Furthermore, these expenditures did not involve the financing of dissemination, distribution, or republication in whole or in part of any campaign materials prepared by the candidate, his campaign committee, or their agent.

Signature: [signature] Date: 10/16/98

Subscribed and sworn to before me this 16th day of October, 1998

My Commission expires: Oct 31 2002

NOTARY PUBLIC [signature]

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SCHEDULE E

ITEMIZED INDEPENDENT EXPENDITURES

(See Reverse Side for Instructions)

Page 1 of 1 Pages

Name of Committee (in Full)
Democratic Senatorial Campaign Committee

Full Name, Mailing Address & ZIP Code of Each Payee	Purpose of Expenditure	Date (month, day, year)	Amount	Name of Federal Candidate supported or opposed by the expenditure & office sought
Greer, Margolis, Mitchell, Burns & Associates, Inc. 1010 Wisconsin Ave. #800 Washington, DC 20007	[Media]	10/23/98	$150,000.00	Scotty Baesler Kentucky U.S. Senate ☒ Support ☐ Oppose
				Jim Bunning Kentucky U.S. Senate ☐ Support ☒ Oppose
Greer, Margolis, Mitchell Burns & Associates, Inc. 1010 Wisconsin Ave. #800 Washington, DC 20007	[Media]	10/23/98	$200,000.00	Mark Neumann Wisconsin U.S. Senate ☐ Support ☒ Oppose
				☐ Support ☐ Oppose
				☐ Support ☐ Oppose
				☐ Support ☐ Oppose

(a) SUBTOTAL of Itemized Independent Expenditures $350,000.00

(b) SUBTOTAL of Unitemized Independent Expenditures ..... $ _____

(c) TOTAL Independent Expenditures ..... $ 350,000.00

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, consent with, or at the request or suggestion of any candidate to any authorized committee or agent of such candidate or authorized committee. Furthermore, these expenditures did not involve the financing of dissemination, distribution, or republication in whole or in part of any campaign materials prepared by the candidate, his campaign committee, or their agent.

Signature _____ Date 11/23/98

Subscribed and sworn to before me this 23rd day of October, 1998

My Commission expires: Oct. 31 2002

NOTARY PUBLIC

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