FEDERAL ELECTION COMMISSION
WASHINGTON, D.C. 20463

RQ-3

June 22, 1995

Rose M. Willard, Treasurer
Outback Steakhouse Inc. Political
Action Committee
550 North Reo Street, Suite 204
Tampa, FL 33609

Identification Number: C00253153

Reference: July Monthly (6/1/94-6/30/94), October Monthly (9/1/94-9/30/94) and Amended 12 Day Pre-General (10/1/94-10/19/94 dated 10/27/94) Reports

Dear Ms. Willard:

This letter is to inform you that as of June 21, 1995, the Commission has not received your response to our requests for additional information dated May 31, 1995. These notices request information essential to full public disclosure of your federal election campaign finances. To ensure compliance with the provisions of the Federal Election Campaign Act (the Act), please respond to these requests (copies enclosed).

If no response is received 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 regarding this matter, please contact Ken Davis on our toll-free number (800) 424-9530 or our local number (202) 219-3580.

Sincerely,

John D. Gibson
Assistant Staff Director
Reports Analysis Division

Enclosures

FEDERAL ELECTION COMMISSION
WASHINGTON, D.C. 20463

RQ-2

Rose M. Willard, Treasurer
Outback Steakhouse Inc.
Political Action Committee
550 North Reo Street
Suite 204
Tampa, FL 33609

MAY 31 1995

Identification Number: C00253153

Reference: Amended 12 Day Pre-General Report (10/1/94-10/19/94) dated 10/27/94

Dear Ms. Willard:

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 of your report (pertinent portion(s) attached) discloses a contribution(s) which appears to exceed the limits set forth in the Act. 2 U.S.C. §441a(a) precludes a multicandidate committee from making a contribution to a candidate for federal office in excess of $5,000 per election.

If the contribution(s) in question was incompletely or incorrectly disclosed, you should amend your original report with clarifying information. If you have made an excessive contribution, you should notify the recipient and request a refund of the amount in excess of $5,000 and/or notify the recipient in writing of your redesignation of the contribution. In the best interest of your committee, all refunds and redesignations should be made within sixty days of the treasurer's receipt of the contribution(s).

Please inform the Commission of your corrective action immediately in writing and provide a photocopy of the refund request sent to the contributor. In addition, any refunds should be disclosed on Schedule A supporting Line 16 of the report covering the period during which they are received. Any redesignations should be disclosed as memo entries on Schedule B supporting Line 23 of the report covering the period during which the redesignation is made. 11 CFR §110.1(b)

Although the Commission may take further legal action regarding the excessive contribution(s), your prompt action in obtaining a refund and/or redesignating the contribution(s) will be taken into consideration.

-Line 23 of the Detailed Summary Page of your report discloses a total of $97,250 in contributions to federal candidates/committees and other political committees. The sum of the entries itemized on Schedule B, however, indicates the total to be $100,350. Please amend your report to clarify the discrepancy.

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,

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

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SCHEDULE B

ITEMIZED DISBURSEMENTS

[illegible]

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

NAME OF COMMITTEE (in Full)

OUTBACK STEAKHOUSE, INC., POLITICAL ACTION COMMITTEE

A. Full Name, Mailing Address and ZIP Code Ace Catering 550 North Eno Street, Suite 204 Tampa, Florida 33609	Purpose of Disbursement: In kind contribution. Sharpe fundraiser catering Disbursement for: ☐ Primary ☒ General ☐ Other (specify)	Date (month, day, year) 10/4/94	Amount of Each Disbursement This Period $2,600.00
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 B — **IN KIND STRAIGHT DISBURSEMENTS**

Use separate schedule for each category of the Detailed Summary Page	PAGE 1 OF 1
	FOR LINE NUMBER

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)

OUTBACK STEAKHOUSE INC., POLITICAL ACTION COMMITTEE

A. Full Name, Mailing Address and ZIP Code VIP Valet, Inc. Post Office Box 10538 Tampa, Florida 33679	Purpose of Disbursement: In kind contribution, Sharpe fundraiser valet pkg. Disbursement for: ☐ Primary ☒ General ☐ Other (specify)	Date (month, day, year) 9/22/94	Amount of Each Disbursement This Period $400.00
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)	$400.00

94 0 4 4 3 9

SCHEDULE B — ITEMIZED DISBURSEMENTS

Use page one (unlimited) for each category in the Statutory Summary Page

PAGE 1 OF 1

FOR LINE NUMBER

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NAME OF COMMITTEE (In Full)

OUTBACK STEAKHOUSE, INC. POLITICAL ACTION COMMITTEE

Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
A. Texans for Henry Bonilla Post Office Box 1034 San Antonio, TX 78294-1034	Disbursement for: [ ] Primary [X] General [ ] Other (specify)	6/8/94	1,500.00
B. Hatch Election Commission 265 East 100 South Salt Lake City, UT 84111	Disbursement for: [ ] Primary [X] General [ ] Other (specify)	6/28/94	1,000.00
C. Gary Franks for Congress Post Office Box 2743 Waterbury, CT 06723	Disbursement for: [ ] Primary [X] General [ ] Other (specify)	6/28/94	1,000.00
D. Santorum for '94 Committee 340 East Main Street Carnegie, PA 15106	Disbursement for: [ ] Primary [X] General [ ] Other (specify)	6/30/94	2,500.00
E. Mark Sharpe for Congress 1111 N. Westshore Blvd. Tampa, FL 33607	Disbursement for: [ ] Primary [X] General [ ] Other (specify)	6/30/94	5,000.00
F.	Disbursement for: [ ] Primary [ ] General [ ] Other (specify)		
G.	Disbursement for: [ ] Primary [ ] General [ ] Other (specify)		
H.	Disbursement for: [ ] Primary [ ] General [ ] Other (specify)		
I.	Disbursement for: [ ] Primary [ ] General [ ] Other (specify)		

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SUBTOTAL of Disbursements This Page (optional)	
TOTAL This Period (last page this line number only)	11,000.00

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SCHEDULE B — ITEMIZED DISBURSEMENTS

Use separate schedule for each category of the Detailed Summary Page

PAGE 1 OF 1

FOR LINE NUMBER

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)

Outback Steakhouse, Inc., Political Action Committee

Full Name, Mailing Address and ZIP Code	Purpose of Disbursement / Disbursement for:	Date (month, day, year)	Amount of Each Disbursement This Period
A. Mack Sharpe P.O. Box 26284 Tampa, FL 33623	Congress Disbursement for: [ ] Primary [X] General [ ] Other (specify)	12/24/93	1,000.00
B. Bill McDiabo General Mills Restaurants, Inc. 5900 Lake Ellenor Drive Orlando, FL 32809	Congress Disbursement for: [ ] Primary [X] General [ ] Other (specify)	12/24/93	500.00
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) 1,500.00

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