

HERMAN A. PANIGUTTI
BUSINESS MANAGER/FINANCIAL SECRETARY
DANIEL J. OWENS
BUSINESS REPRESENTATIVE

(218) 771-1572
Fax (218) 771-1572

Cement Masons' Local No. 404

"of O. P. & C. M. I. A."
1417 EAST 25th STREET
CLEVELAND, OHIO 44114

RECEIVED
FEDERAL ELECTION COMMISSION
JUL 23 7 26 AM '94

July 18, 1994

CERTIFIED MAIL

Ms. Erica Holder
Reports Analyst
Federal Election Commission
Washington, DC 20463

Dear Ms. Holder:

Per the conversation with you regarding letters we received dated June 17, 1994 and July 14, 1994, please accept this letter as our response concerning monies mailed to our International's Pac Mac Fund.

Cement Masons Local 404 is one of the many locals under the O. P. & C. M. I. A. We collect COPE money that is a result of a payroll deduction from our members pay checks. We act as a Collecting Agent and transfer some of this money to our International Pac Mac.

If you may need more information or have any further questions, please contact my office.

Sincerely,


Herman Panigutti
Business Manager/Financial Secretary

HP/jlp

Enclosures

94039142231



FEDERAL ELECTION COMMISSION
WASHINGTON, D.C. 20463

RQ-3
July 14, 1994

Treasurer
Cement Masons COPE
1414 E 26th Street
Cleveland, OH 44114

Dear Treasurer:

This letter is to inform you that as of July 13, 1994, the Commission has not received your response to our request for additional information, dated June 17, 1994. That notice requested information essential to full public disclosure of your federal election financial activity and to ensure compliance with provisions of the Federal Election Campaign Act (the Act). A copy of our original request is 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 related to this matter, please contact Erica Holder on our toll-free number (800) 424-9530 or our local number (202) 219-3580.

Sincerely,

A handwritten signature in cursive script, appearing to read "John D. Gibson".

John D. Gibson
Assistant Staff Director
Reports Analysis Division

Enclosure



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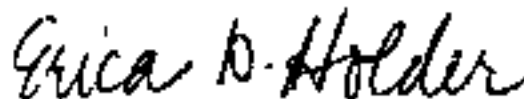
- 2) receive a full contribution refund or direct the recipient committee(s) to transfer the funds to an account not used to influence federal elections.

The second alternative noted above should be followed if your organization does not wish to register and file disclosure reports, or if the contributions or expenditures by your organization were from an account containing corporate or union funds.

If you believe that your organization is not a political committee, has not made excessive contributions to a federal candidate, or the Commission is otherwise in error, please submit documentation which will clarify this matter. Although the Commission may take further legal steps concerning this matter, your prompt action will be taken into consideration.

Please notify the Commission within fifteen (15) days from the date of this letter of your decision on this matter. If you have any questions, please contact me on the agency's toll-free number, (800) 424-9530. My local number is (202) 219-3580.

Sincerely,



Erica Holder
Reports Analyst
Reports Analysis Division

255

Enclosures

94039142984

SCHEDULE A

ITEMIZED RECEIPTS

Use separate worksheets for each category of the Detailed Summary Page

PAGE 1 OF 1
FORM LINE NUMBER 11c

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 dissemination purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (in full)
Plasterers' and Cement Masons' Action Committee

FBC ID No. C00134742

0403271429357

EX

EX

A. Full Name, Mailing Address and ZIP Code		Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Cement Masons COPE 1614 E. 26th Street Cleveland, OH 44114			5/26/93	3,500.00
Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): N/A		Occupation	Aggregate Year-To-Date > 8	3,500.00
B. Full Name, Mailing Address and ZIP Code		Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation	Aggregate Year-To-Date > 8	
C. Full Name, Mailing Address and ZIP Code		Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation	Aggregate Year-To-Date > 8	
D. Full Name, Mailing Address and ZIP Code		Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation	Aggregate Year-To-Date > 8	
E. Full Name, Mailing Address and ZIP Code		Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation	Aggregate Year-To-Date > 8	
F. Full Name, Mailing Address and ZIP Code		Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation	Aggregate Year-To-Date > 8	
G. Full Name, Mailing Address and ZIP Code		Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation	Aggregate Year-To-Date > 8	

SUBTOTAL of Receipts This Page (optional)

3,500.00

TOTAL This Period (last page this line number only)

3,500.00

SCHEDULE A

ITEMIZED RECEIPTS

Any information contained in this Report 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 sources.

NAME OF COMMITTEE (in full)
Plasterers' and Cement Masons'
Action Committee

FEC ID No. C00134742

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Cement Masons CUP 1414 E. 26th Street Cleveland, OH 44114		9/13/93	1250.00*
	Occupation	11/2/93	1250.00*
	Aggregate Year-To-Date	12/3/93	600.00*
Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): N/A	Aggregate Year-To-Date > 6		6,600.00 *Based entry
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-To-Date > 6	
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-To-Date > 6	
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-To-Date > 6	
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-To-Date > 6	
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-To-Date > 6	
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-To-Date > 6	

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SUBTOTAL of Receipts this Page (optional)	1,100.00
TOTAL This Period (last page this line number only)	1,100.00

**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

Registered/Certified Mail POSTMARKED
7-18-94

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

JCH

PREPARER

7-25-94

DATE PREPARED

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