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2001 MAY 15 A 8:53



FEDERAL ELECTION COMMISSION  
WASHINGTON, D.C. 20463

RQ-2

Jahan Ahmad, Treasurer  
General Aviation Manufacturers  
Association Political Action  
Committee (GAMAPAC)  
1400 K Street, NW, Suite 801  
Washington, DC 20005

MAY 12 2001

Identification Number: C00014878

Reference: 12 Day Pre-General Report (10/1/00-10/18/00)

Dear Mr. Ahmad:

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 and its affiliates 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 or redesignation request sent to the recipient committee(s). 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

*July 15, 1995  
report is  
being amended*

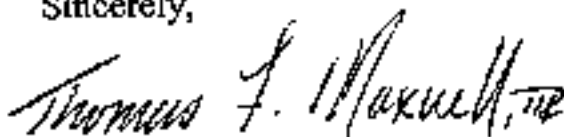
entries on Schedule B supporting Line 23 of the report covering the period during which the redesignation is made. 11 CFR §110.1(b)

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.

-Please provide the total(s) for Line 30, Column B of the Detailed Summary Page. Note that changes in your figures may affect your Column B totals on this report and/or on subsequent reports.

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,



Thomas F. Maxwell, III  
Reports Analyst  
Reports Analysis Division

# REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee  
(Summary Page)

RECEIVED  
FEC MAIL ROOM  
2001 MAY 15 A 8:53

USE FEC MAILING LABEL  
OR  
TYPE OR PRINT

1. NAME OF COMMITTEE (in full) General Aviation Manufacturers Association Political Action Committee		2. FEC IDENTIFICATION NUMBER C-00014878
ADDRESS (number and street) <input type="checkbox"/> Check if different than previously reported 1400 K Street NW, Suite 801		
CITY, STATE and ZIP CODE Washington, DC 20005		3. <input type="checkbox"/> This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

## 4. TYPE OF REPORT

- (a)  April 15 Quarterly Report
- July 15 Quarterly Report
- October 15 Quarterly Report
- January 31 Year-End Report
- July 31 Mid Year Report (Non-election Year Only)
- Termination Report
- Monthly Report Due On:
- |                                      |                                       |                                      |
|--------------------------------------|---------------------------------------|--------------------------------------|
| <input type="checkbox"/> February 20 | <input type="checkbox"/> June 20      | <input type="checkbox"/> October 20  |
| <input type="checkbox"/> March 20    | <input type="checkbox"/> July 20      | <input type="checkbox"/> November 20 |
| <input type="checkbox"/> April 20    | <input type="checkbox"/> August 20    | <input type="checkbox"/> December 20 |
| <input type="checkbox"/> May 20      | <input type="checkbox"/> September 20 | <input type="checkbox"/> January 31  |
- Twelfth day report preceding \_\_\_\_\_ (Type of Election)  
election on \_\_\_\_\_ in the State of \_\_\_\_\_
- Thirtieth day report following the General Election on \_\_\_\_\_  
\_\_\_\_\_ in the State of \_\_\_\_\_
- (b) Is this Report an Amendment?  YES  NO

SUMMARY	COLUMN A This Period	COLUMN B Calendar Year-to-Date
5. Covering Period <u>April 1, 1995</u> through <u>June 30, 1995</u>		
6. (a) Cash on Hand January 1, 1995		\$ 25,971.34
(b) Cash on Hand at Beginning of Reporting Period	\$ 19,376.53	
(c) Total Receipts (from Line 18)	\$ 10,545.66	\$ 10,950.85
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	\$ 29,922.19	\$ 37,922.19
7. Total Disbursements (from Line 30)	\$ 3,965.00	\$ 11,965.00
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	\$ 25,957.19	\$ 25,957.19
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	\$ -0-	For further information contact: Federal Election Commission 889 E Street, NW Washington, DC 20463 Toll Free 800-424-9530 Local 202-215-3420
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule G and/or Schedule D)	\$ -0-	

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer  
Jahan Ahmad

Signature of Treasurer: *Jahan Ahmad* Date: 05-11-01

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

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FEC FORM 3X  
(revised 9/93)

**DETAILED SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS  
PAGE 2, FEC FORM 3X**

(revised 1/1/91)

NAME OF COMMITTEE General Aviation Manufacturers Association Political Action Committee		REPORT COVERING PERIOD FROM 04-01-95 to 06-30-95	
		COLUMN A Total This Period	COLUMN B Calendar Year
<b>I. Receipts</b>			
11. Contributions (other than loans) From:			
a. Individual/Persons Other Than Political Committees			
i. Itemized (use Schedule A)		3,500.00	3,500.00
ii. Unitemized			
iii. Total (add i and ii) >			
b. Political Party Committees			
c. Other Political Committees (such as PACs)		6,934.00	7,210.00
d. Total Contributions (add a ii, b and c) >		10,434.00	10,710.00
12. Transfers From Affiliated/Other Party Committees			
13. All Loans Received			
14. Loan Repayments Received			
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.)			
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees			
17. Other Federal Receipts (Dividends, Interest, etc.)		111.66	240.85
18. Transfers from Nonfederal Account for Joint Activity			
19. Total Receipts (add 11d, 12, 13, 14, 15, 16, 17, and 18) >		10,545.66	10,950.85
20. Total Federal Receipts (subtract line 18 from line 19) >		10,545.66	10,950.85
<b>II. Disbursements</b>			
21. Operating Expenditures:			
a. Shared Federal/Non-Federal Activity (from Schedule H4)			
i. Federal Share			
ii. Non-Federal Share			
b. Other Federal Operating Expenditures			
c. Total Operating Expenditures (add a i, a ii, and b) >			
22. Transfers to Affiliated/Other Party Committees		3,000.00	11,000.00
23. Contributions to Federal Candidates/Committees and Other Political Committees			
24. Independent Expenditures (use Schedule E)			
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F)			
26. Loan Repayments Made			
27. Loans Made			
28. Refunds of Contributions To:			
a. Individual/Persons Other Than Political Committees			
b. Political Party Committees			
c. Other Political Committees (such as PACs)			
d. Total Contribution Refunds (add a, b and c) >		965.00	965.00
29. Other Disbursements			
30. Total Disbursements (add 21c, 22, 23, 24, 25, 26, 27, 28d, and 29) >		3,965.00	11,965.00
31. Total Federal Disbursements (subtract line 21 a ii from line 30) >		3,965.00	11,965.00
<b>III. Net Contributions/Operating Expenditures</b>			
32. Total Contributions (other than loans)(from line 11d)		10,434.00	10,710.00
33. Total Contribution Refunds (from line 28d)		10,434.00	10,710.00
34. Net Contributions (other than loans)(subtract line 33 from 32)		-0-	-0-
35. Total Federal Operating Expenditures (add 21 a i and 21 b) >			
36. Offsets to Operating Expenditures (from line 15)		-0-	-0-
37. Net Operating Expenditures (subtract line 36 from 35) >			

**SCHEDULE A**

**ITEMIZED RECEIPTS**

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)**  
 General Aviation Manufacturers Association Political Action Committee

<p><b>A. Full Name, Mailing Address and ZIP Code</b>                  Frederick Sontag                  7575 Baymeadows Way                  Jacksonville, FL 32256</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General  <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer                  Unison Industries</p> <p>Occupation                  President</p> <p>Aggregate Year-to-Date &gt; \$ 1,000.00</p>	<p>Date (month, day, year)                  05/31/95</p>	<p>Amount of Each Receipt this Period                  1,000.00</p>
<p><b>B. Full Name, Mailing Address and ZIP Code</b>                  Russell W. Meyer, Jr.                  P.O. Box 7706                  Wichita, KS 67277-7706</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General  <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer                  Cessna Aircraft Co.</p> <p>Occupation                  CEO</p> <p>Aggregate Year-to-Date &gt; \$ 1,000.00</p>	<p>Date (month, day, year)                  5/31/95</p>	<p>Amount of Each Receipt this Period                  1,000.00</p>
<p><b>C. Full Name, Mailing Address and ZIP Code</b>                  A.L. Ueltschi                  Marine Air Terminal                  LaGuardia Airport                  New York, NY 11371</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General  <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer                  FlightSafety International</p> <p>Occupation                  Chairman</p> <p>Aggregate Year-to-Date &gt; \$ 1,000.00</p>	<p>Date (month, day, year)                  5/31/95</p>	<p>Amount of Each Receipt this Period                  1,000.00</p>
<p><b>D. Full Name, Mailing Address and ZIP Code</b>                  Rockwell Good Govt. Cmte.                  625 Liberty Avenue                  Pittsburgh, PA 15222</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General  <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer                  N/A</p> <p>Occupation                  PAC</p> <p>Aggregate Year-to-Date &gt; \$ 368.00</p>	<p>Date (month, day, year)                  5/31/95                  4/12/95</p>	<p>Amount of Each Receipt this Period                  92.00                  92.00</p>
<p><b>E. Full Name, Mailing Address and ZIP Code</b>                  Raytheon Political Action Cmte                  141 Spring Street                  Lexington, MA 02173-7899</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General  <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer                  N/A</p> <p>Occupation                  PAC</p> <p>Aggregate Year-to-Date &gt; \$ 5,000.00</p>	<p>Date (month, day, year)                  05/16/95</p>	<p>Amount of Each Receipt this Period                  5,000.00</p>
<p><b>F. Full Name, Mailing Address and ZIP Code</b>                  F. Holmes Lambreux                  777 Forsyth Boulevard                  St. Louis, MO 63105-1821</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General  <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer                  Sabreliner Corp</p> <p>Occupation                  CEO &amp; President</p> <p>Aggregate Year-to-Date &gt; \$ 500.00</p>	<p>Date (month, day, year)                  6/9/95</p>	<p>Amount of Each Receipt this Period                  500.00</p>
<p><b>G. Full Name, Mailing Address and ZIP Code</b>                  SABREPAC, Sabreliner Corp                  6161 Aviation Drive                  St. Louis, MO 63134</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General  <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer                  N/A</p> <p>Occupation                  PAC</p> <p>Aggregate Year-to-Date &gt; \$ 500.00</p>	<p>Date (month, day, year)                  5/26/95</p>	<p>Amount of Each Receipt this Period                  500.00</p>

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

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

**SCHEDULE A**

**ITEMIZED RECEIPTS**

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

PAGE 2 OF 2  
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)

General Aviation Manufacturers Association Political Action Committee

<p>A. Full Name, Mailing Address and ZIP Code Learjet PAC P.O. Box 7707 Wichita, KS 67277-0707</p>	<p>Name of Employer N/A</p>	<p>Date (month, day, year) 6/5/95</p>	<p>Amount of Each Receipt this Period 1,250.00</p>
<p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Occupation PAC</p>		<p>Aggregate Year-to-Date &gt; \$</p>
<p>B. Full Name, Mailing Address and ZIP Code</p>	<p>Name of Employer</p>	<p>Date (month, day, year)</p>	<p>Amount of Each Receipt this Period</p>
<p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Occupation</p>		<p>Aggregate Year-to-Date &gt; \$</p>
<p>C. Full Name, Mailing Address and ZIP Code</p>	<p>Name of Employer</p>	<p>Date (month, day, year)</p>	<p>Amount of Each Receipt this Period</p>
<p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Occupation</p>		<p>Aggregate Year-to-Date &gt; \$</p>
<p>D. Full Name, Mailing Address and ZIP Code</p>	<p>Name of Employer</p>	<p>Date (month, day, year)</p>	<p>Amount of Each Receipt this Period</p>
<p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Occupation</p>		<p>Aggregate Year-to-Date &gt; \$</p>
<p>E. Full Name, Mailing Address and ZIP Code</p>	<p>Name of Employer</p>	<p>Date (month, day, year)</p>	<p>Amount of Each Receipt this Period</p>
<p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Occupation</p>		<p>Aggregate Year-to-Date &gt; \$</p>
<p>F. Full Name, Mailing Address and ZIP Code</p>	<p>Name of Employer</p>	<p>Date (month, day, year)</p>	<p>Amount of Each Receipt this Period</p>
<p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Occupation</p>		<p>Aggregate Year-to-Date &gt; \$</p>
<p>G. Full Name, Mailing Address and ZIP Code</p>	<p>Name of Employer</p>	<p>Date (month, day, year)</p>	<p>Amount of Each Receipt this Period</p>
<p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Occupation</p>		<p>Aggregate Year-to-Date &gt; \$</p>

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

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

10,434.00

**SCHEDULE B**

**ITEMIZED DISBURSEMENTS**

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

PAGE 1 OF 1  
FOR LINE NUMBER

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**NAME OF COMMITTEE (in Full)**

General Aviation Manufacturers Association Political Action Committee

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Campaign Contribution	Date (month, day, year)	Amount of Each Disbursement This Period
Friends of Jim Oberstar P.O. Box 465 Duluth, MN 55802	Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	5/9/95	500.00
B. Full Name, Mailing Address and ZIP Code Friends of Slade Gorton 15610 21st Avenue, SW Seattle, WA 98116	Purpose of Disbursement Campaign Contribution Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	5/17/95	1,000.00
C. Full Name, Mailing Address and ZIP Code Randy Tate for Congress 1212 N. Vernon Street Arlington, VA 22201	Purpose of Disbursement Campaign Contribution Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	6/13/95	500.00
D. Full Name, Mailing Address and ZIP Code Jim Hansen Committee 5803 Oak Moss Terr. Burke, VA 22015	Purpose of Disbursement Campaign Contribution Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	6/20/95	500.00
E. Full Name, Mailing Address and ZIP Code People for Lightfoot 2059 Huntington Avenue, #101 Alexandria, VA 22303	Purpose of Disbursement Campaign Contribution Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	6/22/95	500.00
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

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


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

3,000.00

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.

<input type="checkbox"/> Hand Delivered	Date of Receipt
<input checked="" type="checkbox"/> First Class Mail	POSTMARKED 5-11-01
<input type="checkbox"/> Registered/Certified Mail	POSTMARKED (R/C)
<input type="checkbox"/> No Postmark	
<input type="checkbox"/> Postmark Illegible	
<input type="checkbox"/> Received from the House office of Records and Registration	Date of Receipt
<input type="checkbox"/> Received from the Senate Office of Public Records	Date of Receipt
<input type="checkbox"/> Other ( Specify):	Postmarked _____ end/or Date of Receipt
<input type="checkbox"/> Electronic Filing	
 PREPARER	5-15-01 DATE PREPARED