



FEDERAL ELECTION COMMISSION
WASHINGTON, D.C. 20461

RQ-2

FEB 9 1994

William E. Cumberland, Treasurer
Mortgage Bankers Association of
America Political Action
Committee
1125 15th St. NW, Suite 700
Washington, DC 20005

Identification Number: C00004812

Reference: December Monthly Report (11/1/93-11/30/93)

Dear Mr. Cumberland:

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:

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

-Your report discloses a total of \$3,900.00 in disbursements to Mortgage Bankers Association for deposit made in error (pertinent portion(s) attached).
2 U.S.C. §441b prohibits a corporation or labor organization from contributing or expending funds for the purpose of influencing any federal election, except that the connected organization may pay for the solicitation and administrative costs of its separate segregated fund.

Please provide the original date of deposit and an explanation of the aforementioned transaction. Although the Commission may take further legal steps concerning this matter, your prompt action will be taken into consideration.

-Please identify the name and address of the recipient candidate or committee for the in-kind contribution(s) disclosed on Schedule B for Line 23.

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,



Robyn Jameson
Reports Analyst
Reports Analysis Division

2 4 0 3 8 3 3 5 3 3 4

SCHEDULE B

ITEMIZED DISBURSEMENTS

Continuation of Schedule B
for each copy of the
Detailed Summary Page

FOR LINE 12B

23

Any amount reported on this Schedule B must be supported by a receipt or other document for the purpose of identifying each disbursement or for substantiating purposes. Also, it is the responsibility of the donor to ensure that each disbursement is properly substantiated from each contributor.

NAME OF COMMITTEE: **Full**

Yorkegate Lawyers Association of America Political Action Committee

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Friends of Howell Heflin Committee P.O. Box 77733 Washington, DC 20013	Contribution Disbursement for ☐ Primary ☐ General ☐ Other (specify):	11/29/93	1000.00
Marlboro Bankers Association 1125 15th Street, NW Washington, DC 20005	Deposit Made in Error Disbursement for ☐ Primary ☐ General ☐ Other (specify):	9/26/93	3900.00
C. Full Name, Mailing Address and ZIP Code The May-Adams Hotel One Lafayette Square Washington, DC 20006	IN-KIND CONTRIBUTION Disbursement for ☐ Primary ☐ General ☐ Other (specify):	11/23/93	3,628.11
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 (addition)

1000.00

TOTAL This Page (addition) (line number only)

94,528.11

34,338,323,195

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