



FEDERAL ELECTION COMMISSION  
WASHINGTON, D.C. 20463

RQ-2

APR 17 1996

Robert Borchardt, Treasurer  
Health Plan PAC of the American  
Association of Health Plans  
1129 20th Street, NW, #600  
Washington, DC 20036

Identification Number: C00106740

Reference: Year End Report (7/1/95-12/31/95)

Dear Mr. Borchardt:

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 dates of receipt and the aggregate year-to-date totals. Please amend your report by supplying the information. 11 CFR §104.3(a)(4)(i)

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

-For your information, each category on the Detailed Summary Page for which your committee discloses activity must have a separate schedule. Please note this for future filings.

-For future filings, please note that your committee need only file the pages on which you have itemized activity. Schedules with no activity may be omitted.

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,

*Debbie Manzano*

Debbie Manzano  
Reports Analyst  
Reports Analysis Division

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## Line 16. Refunds of Contributions

Itemize refunds of contributions made by the SSF on a Schedule A regardless of their amount. See Section 6 for more information on how to report them. Enter the total on Line 16.

## Line 17. Other Receipts

This category includes interest and dividends earned on investments. Itemize these receipts on a Schedule A once the committee receives more than \$200 from the same source during a calendar year. Enter the total under this category on Line 17. See Section 6 for more information on interest and dividends.

## Line 18. Transfers from Nonfederal Account for Joint Activity

If the committee maintains a non-federal account for state and local election activities and pays its own administrative expenses, the federal account (the SSF) may accept a transfer of funds from the nonfederal account for the sole purpose of covering its share of a joint federal and nonfederal expense, 106.6(e)(1)(i). Report the total amount transferred from the nonfederal account during the period (i.e., the total from Schedule H3) on Line 18.

Other rules concerning these transfers are explained in Appendix A.

## 4. Itemized Disbursements: Schedule B

### When to Itemize Disbursements

#### Regardless of Amount

Several types of disbursements must be itemized regardless of amount:

- Transfers to affiliated SSFs;
- Contributions to candidates and political committees;
- Loan repayments; and
- Loans made by the SSF.

Note that refunds of contributions (Line 26 on the Detailed Summary Page) must be itemized on Schedule B only if the incoming contribution had to be itemized on Schedule A, as explained earlier in this chapter.

## CONTRIBUTIONS TO CANDIDATES

| SCHEDULE B<br>ITEMIZED DISBURSEMENTS                                                                                                                                                                                                                                             |                                                                                                                                                                                                                    | Use space to indicate if<br>for each category of the<br>Detailed Summary Page | PAGE<br>OF                                                            | OF |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------|-----------------------------------------------------------------------|----|
| Contributions to Federal Candidates                                                                                                                                                                                                                                              |                                                                                                                                                                                                                    |                                                                               | FDR LINE NUMBER                                                       | 23 |
| Any information copied from both Receipt and Statement may not be added or used by any person for the purpose of soliciting contributions to the electoral process. After this entry, the name and address of any political committee to which contributions from such committee |                                                                                                                                                                                                                    |                                                                               |                                                                       |    |
| NAME OF COMMITTEE (in Full)<br>National Organization PAC 000000001                                                                                                                                                                                                               |                                                                                                                                                                                                                    |                                                                               |                                                                       |    |
| A. Payee's Name, Address and ZIP Code<br>Holiday Plaza Hotel<br>1100 Burlington Avenue<br>City, State ZIP                                                                                                                                                                        | Purpose of Disbursement<br>reception for Bill Jones,<br>House candidate, 6th (State) 7/16/94<br>Disbursement for: Primary <input checked="" type="checkbox"/> General <input type="checkbox"/><br>Other (specify): | Date (month, day, year)<br>7/16/94                                            | Amount of Each Disbursement (This Period)<br>\$875.00<br>(in dollars) |    |

See page 8 for information on how to determine the value of an in-kind contribution.

|                                                                                                          |                                                                                                                                                                                                        |                                    |                                                       |  |
|----------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------|-------------------------------------------------------|--|
| B. Pay Name, Address and ZIP Code<br>Citizens for Stan Smythe<br>6470 Rushmore Street<br>City, State ZIP | Purpose of Disbursement<br>Stan Smythe, House<br>candidate, 11th (State) 7/18/94<br>Disbursement for: Primary <input type="checkbox"/> General <input checked="" type="checkbox"/><br>Other (specify): | Date (month, day, year)<br>7/18/94 | Amount of Each Disbursement (This Period)<br>\$150.00 |  |
|----------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------|-------------------------------------------------------|--|

Itemize contributions to federal candidates regardless of amount.

|                                                                                               |                                                                                                                                                                                                       |                                   |                                                       |  |
|-----------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------|-------------------------------------------------------|--|
| C. Pay Name, Address and ZIP Code<br>Taylor for Congress<br>11 Main Street<br>City, State ZIP | Purpose of Disbursement<br>Mavis Taylor, House<br>candidate, 8th (State) 8/1/94<br>Disbursement for: Primary <input checked="" type="checkbox"/> General <input type="checkbox"/><br>Other (specify): | Date (month, day, year)<br>8/1/94 | Amount of Each Disbursement (This Period)<br>\$500.00 |  |
|-----------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------|-------------------------------------------------------|--|

See page 11 for information on making post-election contributions to retire a candidate's debts.

### Other Disbursements: \$200 Threshold

A disbursement that does not fall under one of the categories listed above (such as a donation to a nonfederal candidate) must be itemized if it exceeds \$200 when aggregated with other disbursements made to the same payee during the calendar year.

### How to Itemize Disbursements

#### Categorizing Disbursements

Before beginning to itemize the committee's disbursements, separate them into the different categories listed on the Detailed Summary Page ("Operating Expenditures," "Contributions to Federal Candidates," etc; an illustration of a completed Detailed Summary Page appears on page 37). The disbursements in each category must be itemized on a separate Schedule B designated for that category.

Indicate the type of disbursement itemized on a particular Schedule B by entering the corresponding line number from the Detailed Summary Page in the upper right corner of the schedule. The appropriate category of disbursement may also be written at the top of each page.

Some categories may require several pages. The total for each category should be entered on the bottom line of the last page for that category.

### Itemized Information

Itemized disbursement information includes:

- Name of payee;
- Address of payee;
- Purpose of disbursement (a brief but specific description of why the disbursement was made—see Schedule B Instructions and 104.3(b)(3)(i)(B));
- Date of payment; and
- Amount.  
104.3(b)(3); 104.9.

### Additional Information on Candidates

Further information is required when itemizing a contribution to a candidate committee on Schedule B. Include the candidate's name and the office sought (including the state and, if applicable, Congressional district). When itemizing a contribution or loan to a candidate committee, specify the election for which the payment was made by checking the appropriate category in the election designation box. 104.3(b)(3)(v). See Illustrations above.

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