



RECEIVED
FEC MAIL
OPERATIONS CENTER

2006 DEC 15 A 8:55

hillpac.com

December 11, 2006

Ms. Rosa G. Lewis
Campaign Finance Analyst
Reports Analysis Division
Federal Election Commission
999 E Street, NW
Washington, DC 20463

Re: HillPAC, FEC Id. No.C00363994, Amended August Monthly Report (7/1/06 – 7/31/06)

Dear Ms. Lewis:

This letter is in response to your request for additional information concerning HillPAC's (the "Committee's") Amended August Monthly Report of receipts and disbursements, covering 7/1/06-7/31/06.

The contribution noted by you was refunded by the Committee. A copy of the refund chargeback will be submitted via regular mail. The refund was reported on the Committee's Pre-General Report, which was timely filed on the day after the date that the Amended August Monthly Report was filed.

The Committee wishes to note that the information that it originally received indicated that the contribution in question was made by the spouse of this particular contributor. Upon receiving later information that this was incorrect, the Committee instructed its credit card processor to issue the refund and then filed an Amended Report.

If you have any additional questions regarding this response, please contact us at your convenience.

Sincerely,

Janice Enright
Treasurer

Enc.

This letter was
filed electronically
on 12/11/06.
Filing ID
FEC-265297

Lauren Fitterman

From: FEC Filing Server [http_db@sdrdc.com]
Sent: Monday, December 11, 2006 12:59 PM
To: Lauren S. Fitterman
Subject: FEC Electronic Filing Results

DISCLOSE -- FEC Financial Disclosure Filing Acknowledgement

This is to acknowledge the receipt and acceptance of your electronic filing via the DISCLOSE protocol.

Your filing was received and accepted by our system at 12/11/2006 - 12:59:03, and was assigned the Filing ID of: FEC-265297

Please make a note of this, as it will be necessary to refer to this information in the future.

Thank you for using DISCLOSE.

Do not reply to this notice. It is sent from an unattended account that cannot receive email.

For your reference, the output of the validation check was as follows:

FEC File Validator Version 5.3.1.1
Developed for the Federal Election Commission by NIC Technologies, Inc. 1996-2006

=== Identification Section =====

Committee ID: C00363994
Committee Name: Hill PAC
Filing Type: F99

Software/Ver#: NGP Campaign Office(R) / Ver# 1.0e

=== Results Section =====

>>>----> FEC data file PASSED validation! <----<<<
MD5 checksum:
810d55db37b62ea59309d514f2ff42b3

20061211 17:51

American Express
Travel Related Services Company, Inc.
Service Center at Ft. Lauderdale
PO Box 297812
Ft. Lauderdale, FL 33329-7812



August 29, 2006

S/E a/c #: [REDACTED]
C/M a/c #: [REDACTED]

VERA BLINKEN
435 E. 52ND STREET
NEW YORK NY 10022-6445

Reply must be received
by: September 28, 2006

SERVICE ESTABLISHMENT CLAIM FORM

Enclosure:NO

Cm Name: Vera Blinken
Disputed Amount: \$5,000.00
1st Charge Date: July 25, 2006
1st Charge Amount: \$5,000.00
Folio/Ref: KW00007B2
Inv/ROC Number:
Store Number:
Charge Incurred at: Washington DC

Cm Account: [REDACTED]
Foreign Amount:
2nd Charge Date: July 25, 2006
2nd Charge Amount: \$5,000.00
Folio/Ref: KW00007B3
Inv/ROC Number:

Dispute: Our mutual customer does not recognize the additional charge(s) and requests credit or support for all charges.

IF YOU ACCEPT THE CLAIM, fill in one circle below:

- I have issued credit for the disputed amount on ___/___/___
- I have issued partial credit for \$_____ on ___/___/___.
Reason for partial credit: _____
- I request that American Express deduct the disputed amount from my account to settle the dispute.

If you dispute the claim, you must complete steps 1 through 5.

1. State why credit is not due by filling in one circle below:

- Customer made additional purchase(s)
- Billing is a monthly installment.
- Other, please explain: _____
(attach additional sheets, if needed)

****STEPS 2-5 ARE ON THE REVERSE SIDE OF THIS CLAIM FORM****

FAX YOUR RESPONSE TO (954-503-6462)



E [REDACTED] 24101 SPEA714 SGLMA90 [REDACTED] 2676C BRE

26039511752

American Express
Travel Related Services Company, Inc.
Service Center at Ft. Lauderdale
PO Box 297812
Ft. Lauderdale, FL 33329-7812



October 5, 2006

01438



HILL PAC
1717 K ST NW STE 309B
WASHINGTON, DC 20036-5346



Account Number: [REDACTED]

Dear Service Establishment:

We have received your authorization and are debiting the amount(s) shown below back to your Establishment's account.

Charge Incurred By:	Vera Blinken
Charge Incurred On:	[REDACTED]
Charge Amount(s):	\$5,000.00 and \$5,000.00
Date of Charge(s):	072506 072506
Folio/RA/Reference:	KW00007B2 KW00007B3
Invoice Number(s):	
Adjusted Amount(s):	\$5,000.00
Adjustment Number(s)*:	438807

(*Note: These number(s) will be reflected on a future check stub in the Invoice Number Column.)

For future reference, when responding to any inquiry or chargeback notification you must include the claim/chargeback form with your response and note the complete, un-truncated Cardmember account number on each page of any supporting documentation.

We appreciate your help and cooperation [REDACTED]

Sincerely,

B. Pettinato
Supervisor, Customer Service



E [REDACTED] 4101 SGLM834 SGLMB90 [REDACTED] 1990K

N

26039211753

Federal Election Commission
ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS
 The FEC 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"/> USPS First Class Mail	Postmarked <i>12/11/06</i>
<input type="checkbox"/> USPS Registered/Certified	Postmarked (R/C)
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Delivery Confirmation™ or Signature Confirmation™ Label <input type="checkbox"/>	
<input type="checkbox"/> USPS Express Mail	Postmarked
<input type="checkbox"/> Postmark Illegible	
<input type="checkbox"/> No Postmark	
<input type="checkbox"/> Overnight Delivery Service (Specify):	Shipping Date
Next Business Day Delivery <input type="checkbox"/>	
<input type="checkbox"/> Received from House Records & Registration Office	Date of Receipt
<input type="checkbox"/> Received from Senate Public Records Office	Date of Receipt
<input type="checkbox"/> Received from Electronic Filing Office	Date of Receipt
<input type="checkbox"/> Other (Specify):	Date of Receipt or Postmarked

fer
 PREPARER *12/15/06*
DATE PREPARED

26039311754