

RQ-2

June 16, 2016

PAUL KILGORE, TREASURER CHESAPEAKE PAC 824 S MILLEDGE AVE STE 101 ATHENS, GA 30605

Response Due Date 07/21/2016

IDENTIFICATION NUMBER: C00492819

REFERENCE: YEAR-END REPORT (07/01/2015 - 12/31/2015)

Dear Treasurer:

This letter is prompted by the Commission's preliminary review of the report referenced above. This notice requests information essential to full public disclosure of your federal election campaign finances. Failure to adequately respond by the response date noted above could result in an audit or enforcement action. Additional information is needed for the following 1 item(s):

- A review of the reports filed by your committee indicates that your committee received one or more contributions from "FIRST COLONIES ANESTHESIA ASSOCIATES LLC POLITICAL ACTION COMMITTEE" which has been disclosed on their report(s) of receipts and disbursements as a contribution for the non-federal account (see attached). Please be advised, contributions deposited in a federal account must meet the following conditions: the contributions are designated or expressly solicited for use in connection with federal elections and contributors are informed that their contributions are subject to the limits and prohibitions of the Act. 11 CFR §102.5(a)

If any apparently misdeposited contribution in question was incompletely or incorrectly disclosed, you should amend your original report with clarifying information.

If the contribution(s) received was misdeposited into the federal account, you may have to make a refund. If within 30 days of receipt you (1) transferred the misdeposited amount to an account not used to influence federal elections, and (2) provided a written notice to the committee making the contribution of the option of receiving a refund, you may retain the contribution in an account not used to influence federal elections. Any request from a donor for a refund must be honored.

If the foregoing conditions for transfers to a non-federal account were not met

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within 30 days of receipt, the misdeposited amount must be refunded. (11 CFR §103.3(b)(1))

Please clarify if the contribution(s) received from the disclosed donor's federal account was permissible. If the contribution was intended for a non-federal account, please inform the Commission of your corrective action promptly in writing and provide a photocopy of your check for any transfer-out or refund. Although the Commission may take further legal action regarding the misdeposited funds, your prompt action will be taken into consideration.

Please note, you will not receive an additional notice from the Commission on this matter. Adequate responses must be received by the Commission on or before the due date noted above to be taken into consideration in determining whether audit action will be initiated. Failure to comply with the provisions of the Act may also result in an enforcement action against the committee. Any response submitted by your committee will be placed on the public record and will be considered by the Commission prior to taking enforcement action. Requests for extensions of time in which to respond will not be considered

Electronic filers must file amendments (to include statements, designations and reports) in an electronic format and must submit an amended report in its entirety, rather than just those portions of the report that are being amended. If you should have any questions regarding this matter or wish to verify the adequacy of your response, please contact me on our toll-free number (800) 424-9530 (at the prompt press 5 to reach the Reports Analysis Division) or my local number (202) 694-1164.

Sincerely,

Nicole Miller

Sr. Campaign Finance & Reviewing Analyst

Reports Analysis Division

Will Miller

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SCHEDULE B (FEC Form 3X)		Use separate schedule(s)	FOR LINE I	
	EMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	21b 27	22 23 24 25 26 28a 28b 28c X 29 30b
	y information copied from such Reports and Staten for commercial purposes, other than using the nam			
	NAME OF COMMITTEE (In Full) FIRST COLONIES ANESTHESIA	•		
— А.	Full Name (Last, First, Middle Initial)			Date of Disbursement
				M M / D D / Y Y Y Y
	Mailing Address 617 E Custis Avenue			12 07 2015
	City S Alexandria Purpose of Disbursement	State Zip Code VA 22301		Transaction ID : SB29.8498
	State candidate contribution			Amount of Each Disbursement this Period
	Candidate Name		Category/ Type	5000.00
	President	nent For: Primary General Other (specify)		Memo Item
_	State: District: Full Name (Last, First, Middle Initial)			
В.	Citizens for Antonio Hayes			Date of Disbursement
	Mailing Address 1050 Hull Street Suite 120			10 23 2015
	Baltimore	State Zip Code MD 21230		Transaction ID : SB29.8491
	Purpose of Disbursement State candidate contribution		· · · ·	Amount of Each Disbursement this Period
	Candidate Name		Category/ Type	250.00
		nent For: Primary General Other (specify)		Memo Item
C.	Full Name (Last, First, Middle Initial) Citizens For Dan Morhaim		Date of Disbursement	
	Mailing Address PO Box 212			10 23 2015
	Stevenson	State Zip Code MD 21153		Transaction ID : SB29.8484
	Purpose of Disbursement State candidate contribution Candidate Name		Catarany	Amount of Each Disbursement this Period
			Category/ Type	500.00
	President	nent For: Primary General Other (specify)		Memo Item
г	State: District:			
s	UBTOTAL of Disbursements This Page (optional)		<u> </u>	5750.00