

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee
(Summary Page)

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FEDERAL ELECTION
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JUL 18 12 26 PM '96

USE FEC MAILING LABEL
OR
TYPE OR PRINT

1. NAME OF COMMITTEE (in full) I.F.P.T.R. LEAP-PAC		2. FEC IDENTIFICATION NUMBER CC0164509
ADDRESS (number and street) <input checked="" type="checkbox"/> Check if different than previously reported 8630 FENTON STREET #400		
CITY, STATE and ZIP CODE SILVER SPRING, MD 20910		
3. <input checked="" 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:

- February 20 June 20 October 20
 March 20 July 20 November 20
 April 20 August 20 December 20
 May 20 September 20 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>4/1/96</u> through <u>6/30/96</u>			
6. (a)	Cash on Hand January 1, 1996		\$ 4545.67
(b)	Cash on Hand at Beginning of Reporting Period	\$ 8666.17	
(c)	Total Receipts (from Line 1B)	\$ 2974.50	\$ 8515.00
(d)	Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	\$ 11640.67	\$ 13060.67
7.	Total Disbursements (from Line 3D)	\$ 4190.00	\$ 5610.00
8.	Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	\$ 7450.67	\$ 7450.67
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 999 E Street, NW Washington, DC 20483 Toll Free 800-424-9530 Local 202-219-3420
10.	Debts and Obligations Owed BY the Committee (itemize all on Schedule C 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		GREGORY J. JUNEMANN	
Signature of Treasurer		Date	
		7/15/96	

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

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

(revised 1/1/81)

NAME OF COMMITTEE I.F.P.T.E. LEAP-PAC		REPORT COVERING PERIOD FROM 4/1/96 TO 6/30/96	
		COLUMN A Total This Period	COLUMN B Calendar Year
I. Receipts			
11. Contributions (other than loans) From:			
a. Individual/Persons Other Than Political Committees			
i. Itemized (use Schedule A)			11(a)(i)
ii. Unitemized			11(a)(ii)
iii. Total (add i and ii) >			11(a)(iii)
b. Political Party Committees			11(b)
c. Other Political Committees (such as PACs)		2974.50	8515.00
d. Total Contributions (add a iii, b and c) >			11(d)
12. Transfers From Affiliated/Other Party Committees			12
13. All Loans Received			13
14. Loan Repayments Received			14
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.)			15
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees			16
17. Other Federal Receipts (Dividends, Interest, etc.)			17
18. Transfers from Nonfederal Account for Joint Activity			18
19. Total Receipts (add 11d, 12, 13, 14, 15, 16, 17, and 18) >		2974.50	8515.00
20. Total Federal Receipts (subtract line 18 from line 19) >			20
II. Disbursements			
21. Operating Expenditures:			
a. Shared Federal/Non-Federal Activity (from Schedule H4)			
i. Federal Share			21(a)(i)
ii. Non-Federal Share			21(a)(ii)
b. Other Federal Operating Expenditures			21(b)
c. Total Operating Expenditures (add a i, a ii, and b) >			21(c)
22. Transfers to Affiliated/Other Party Committees			22
23. Contributions to Federal Candidates/Committees and Other Political Committees		4190.00	5610.00
24. Independent Expenditures (use Schedule E)			24
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F)			25
26. Loan Repayments Made			26
27. Loans Made			27
28. Refunds of Contributions To:			
a. Individual/Persons Other Than Political Committees			28(a)
b. Political Party Committees			28(b)
c. Other Political Committees (such as PACs)			28(c)
d. Total Contribution Refunds (add a, b and c) >			28(d)
29. Other Disbursements			29
30. Total Disbursements (add 21c, 22, 23, 24, 25, 26, 27, 28d, and 29) >		4190.00	5610.00
31. Total Federal Disbursements (subtract line 21 a ii from line 30) >			31
III. Net Contributions/Operating Expenditures			
32. Total Contributions (other than loans)(from line 11d)		2974.50	8515.00
33. Total Contribution Refunds (from line 28d)		0	0
34. Net Contributions (other than loans)(subtract line 33 from 32)		2974.50	8515.00
35. Total Federal Operating Expenditures (add 21 a i and 21 b) >		0	0
36. Offsets to Operating Expenditures (from line 15)		0	0
37. Net Operating Expenditures (subtract line 36 from 35) >		0	0

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 1 OF 1
FOR LINE NUMBER 11C

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)

I.F.P.T.E. LEAP-PAC

<p>A. Full Name, Mailing Address and ZIP Code IFPTE LOCAL 195 49 WEST PROSPECT ST. EAST BRUNSWICK, NJ 08816</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): VOL P/R DED.</p>	<p>Name of Employer STATE OF NJ</p> <p>Occupation</p> <p>Aggregate Year-to-Date > \$ 4295.00</p>	<p>Date (month, day, year)</p>	<p>Amount of Each Receipt this Period 2954.50</p>
<p>B. Full Name, Mailing Address and ZIP Code IFPTE AFL-CIO 8630 FENTON ST. #100 SILVER SPRING, MD 20910</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): VOL P/R DED.</p>	<p>Name of Employer I.F.P.T.E. AFL-CIO</p> <p>Occupation</p> <p>Aggregate Year-to-Date > \$ 20.00</p>	<p>Date (month, day, year)</p>	<p>Amount of Each Receipt this Period 20.00</p>
<p>C. Full Name, Mailing Address and ZIP Code</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer</p> <p>Occupation</p> <p>Aggregate Year-to-Date > \$</p>	<p>Date (month, day, year)</p>	<p>Amount of Each Receipt this Period</p>
<p>D. Full Name, Mailing Address and ZIP Code</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer</p> <p>Occupation</p> <p>Aggregate Year-to-Date > \$</p>	<p>Date (month, day, year)</p>	<p>Amount of Each Receipt this Period</p>
<p>E. Full Name, Mailing Address and ZIP Code</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer</p> <p>Occupation</p> <p>Aggregate Year-to-Date > \$</p>	<p>Date (month, day, year)</p>	<p>Amount of Each Receipt this Period</p>
<p>F. Full Name, Mailing Address and ZIP Code</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer</p> <p>Occupation</p> <p>Aggregate Year-to-Date > \$</p>	<p>Date (month, day, year)</p>	<p>Amount of Each Receipt this Period</p>
<p>G. Full Name, Mailing Address and ZIP Code</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer</p> <p>Occupation</p> <p>Aggregate Year-to-Date > \$</p>	<p>Date (month, day, year)</p>	<p>Amount of Each Receipt this Period</p>

<p>SUBTOTAL of Receipts This Page (optional)</p>	<p>2974.50</p>
<p>TOTAL This Period (last page this line number only)</p>	<p>2974.50</p>

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

PAGE 1 OF 3
FOR LINE NUMBER 23

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NAME OF COMMITTEE (In Full)

I.F.P.T.E. LEAP-PAC

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
ASSEMBLY REPUBLICAN MAJORITY 29 EMMONS DR BLDG F #4 PRINCETON, NJ 08540	FUNDRAISER Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	4/5/96	500.00
B. Full Name, Mailing Address and ZIP Code CITIZENS FOR BASSANO BOX 1011 UNION, NJ 07083	FUNDRAISER Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	4/19/96	250.00
C. Full Name, Mailing Address and ZIP Code NATIONAL DEMO. COMM. 430 SOUTH CAPITOL ST. SE BOX 96585 WASHINGTON, DC 20090	CONTRIBUTION Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	4/19/96	100.00
D. Full Name, Mailing Address and ZIP Code DON PAYNE FOR CONGRESS P.O. BOX 2406 NEWARK, NJ 07114	FUNDRAISER Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	4/19/96	120.00
E. Full Name, Mailing Address and ZIP Code PALLONE FOR CONGRESS P.O. BOX 3176 LONG BRANCH, NJ 07740	FUNDRAISER Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	4/19/96	200.00
F. Full Name, Mailing Address and ZIP Code NJ DEMOCRATIC VICTORY FUND 1977 NORTH OLDEN AVENUE BOX 1992 TRENTON, NJ 08618	CONTRIBUTION Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	5/7/96	100.00
G. Full Name, Mailing Address and ZIP Code COOPERSMITH FOR CONGRESS P.O. BOX 356 LYNWOOD, WA 98046	CONTRIBUTION Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	5/7/96	500.00
H. Full Name, Mailing Address and ZIP Code COMMITTEE TO RE-ELECT VERA AMES 264 HARRISON ST. PATERSON, NJ 07509	CONTRIBUTION Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	5/9/96	100.00
I. Full Name, Mailing Address and ZIP Code ANTHONY IMPREVEDUTO ELECTION FUND 1066 FLORAL TERRACE SECAUCUS, NJ 07094	FUNDRAISER Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	5/9/96	250.00

SUBTOTAL of Disbursements This Page (optional)

2120.00

TOTAL This Period (last page this line number only)

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

PAGE 2 OF 3
FOR LINE NUMBER 23

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NAME OF COMMITTEE (in Full)

I.F.P.T.E. LEAP-PAC

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
DEMOCRATIC NATIONAL COMMITTEE 430 SOUTH CAPITOL ST. SE WASHINGTON, DC 20003	CONTRIBUTION Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	5/15/96	50.00
B. Full Name, Mailing Address and ZIP Code ESSEX COUNTY COPY 30 CLINTON STREET NEWARK, NJ 07102	FUNDRAISER Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	5/15/96	100.00
C. Full Name, Mailing Address and ZIP Code DEL VECCHIO FOR CONGRESS BOX 670 LABERTVILLE, NJ 08530	FUNDRAISER Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	5/16/96	200.00
D. Full Name, Mailing Address and ZIP Code ELECTION FUND OF WYNONA LIPMAN BOX 248 NEWARK, NJ 07101	FUNDRAISER Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	6/3/96	120.00
E. Full Name, Mailing Address and ZIP Code ELECTION FUND OF SENATOR KENNY 409 WASHINGTON ST. #287 HOBOKEN, NJ 07030	FUNDRAISER Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	6/3/96	250.00
F. Full Name, Mailing Address and ZIP Code ELECTION FUND OF TONY F. MACK 938 BERKELEY AVENUE TRENTON, NJ 08616	FUNDRAISER Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	6/21/96	100.00
G. Full Name, Mailing Address and ZIP Code CLINTON/GORE '96 GELAC P.O. BOX 19827 WASHINGTON, DC 20036	CONTRIBUTION Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	6/21/96	50.00
H. Full Name, Mailing Address and ZIP Code ELECTION FUND OF KOSCO 17 FAIRVIEW TERRACE PARAMUS, NJ 07652	FUNDRAISER Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	6/21/96	250.00
I. Full Name, Mailing Address and ZIP Code COMMITTEE TO ELECT NEARY, BRAUTMAN, KLEMP 15 KENTISBURY CIRCLE EAST BRUNSWICK, NJ 08816	FUNDRAISER Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	6/21/96	125.00

SUBTOTAL of Disbursements This Page (optional)

1245.00

TOTAL This Period (last page this line number only)

SCHEDULE B

ITEMIZED DISBURSEMENTS

Use separate schedule(s)
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PAGE 3 OF 3
FOR LINE NUMBER 23

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NAME OF COMMITTEE (in Full)

I.F.P.T.E. LEAP-PAC

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
QUINN FOR CONGRESS 1212 NORTH VERNON ST. ARLINGTON, VA 22201	FUNDRAISER Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	6/21/96	200.00
ADAM SMITH FOR CONGRESS 27030 47TH AVENUE S. #104 KENT, WA 98032	CONTRIBUTION Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	6/21/96	500.00
EDISON DEMOCRATIC ORG. 87 GATEHOUSE LANE EDISON, NJ 08820	FUNDRAISER Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	6/25/96	125.00
D. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
E. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
F. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
G. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
I. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period

SUBTOTAL of Disbursements This Page (optional) 825.00

TOTAL This Period (last page this line number only) 4190.00

