

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee
(Summary Page)

RECEIVED
FEDERAL ELECTION
COMMISSION
REPORTS ANALYSIS
DIVISION

JAN 31 3 40 PM '95

USE FEC MAILING LABEL
OR
TYPE OR PRINT

1. NAME OF COMMITTEE (in full)
Italian American Democratic Leadership Council

ADDRESS (number and street) Check if different than previously reported
1828 L Street, NW, Suite 1010

CITY, STATE and ZIP CODE
Washington, D.C. 20036

2. FEC IDENTIFICATION NUMBER
000299396

3. 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

5. Covering Period	COLUMN A This Period	COLUMN B Calendar Year-to-Date
April 1, 1994 through June 30, 1994		
6. (a) Cash on Hand January 1, 1994	\$ 9,637.90	\$ 0
(b) Cash on Hand at Beginning of Reporting Period	\$ 9,287.98	
(c) Total Receipts (from Line 19)	\$ 1,100.00	\$ 1,750.78
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	\$ 10,387.98	\$ 10,887.98
7. Total Disbursements (from Line 30)	\$ 1,084.00	\$ 1,584.00
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	\$ 9,303.98	\$ 9,303.98
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	\$ -	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	\$ -	

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: **Charles A. Gueli**

Signature of Treasurer: *Charles A. Gueli*

Date: **1/30/95**

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

--	--	--	--	--	--	--	--	--	--

95039620113

DETAILED SUMMARY PAGE

OF RECEIPTS AND DISBURSEMENTS

PAGE 2, FEC FORM 28

(revised 1/1/91)

NAME OF COMMITTEE	REPORT COVERING PERIOD	FROM	TO
Italian American Democratic Leadership Council	APRIL 1994	APRIL 1994	JUNE 30, 1994
I. Receipts		COLUMN A	COLUMN B
		Total This Period	Calendar Year
11. Contributions (other than loans) From:			
a. Individual/Persons Other Than Political Committee:			
i. Itemized (see Schedule A)		1000.00	1000.00
ii. Unitemized		150.00	150.78
iii. Total	(add i and ii) >	1150.00	1150.78
b. Political Party Committee		0	0
c. Other Political Committee (such as PACs)		0	0
d. Total Contributions	(add a ii, b and c) >	1150.00	1150.78
12. Transfers From Affiliated/Other Party Committee		0	0
13. All Loans Received		0	0
14. Loan Repayments Received		0	0
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.)		0	0
16. Refunds of Contributions Made to Federal Candidates and Other Political Committee		0	0
17. Other Federal Receipts (Dividends, Interest, etc.)		0	0
18. Transfers from Nonfederal Account for Joint Activity		0	0
19. Total Receipts	(add 11d, 12, 13, 14, 15, 16, 17, and 18) >	1150.00	1150.78
20. Total Federal Receipts	(subtract line 18 from line 19) >	1150.00	1150.78
II. Disbursements			
21. Operating Expenditures:			
a. Shared Federal/Non-Federal Activity (from Schedule H4):			
i. Federal Share		0	0
ii. Non-Federal Share		0	0
b. Other Federal Operating Expenditures		0	0
c. Total Operating Expenditures	(add a i, a ii, and b) >	0	0
22. Transfers to Affiliated/Other Party Committee		1000.00	1500.00
23. Contributions to Federal Candidates/Committees and Other Political Committee		0	0
24. Independent Expenditures (see Schedule E)		0	0
25. Coordinated Expenditure Made by Party Committee (2 U.S.C. 441a(d)) (see Schedule F)		0	0
26. Loan Repayments Made		0	0
27. Loans Made		0	0
28. Refunds of Contributions To:			
a. Individual/Persons Other Than Political Committee		0	0
b. Political Party Committee		0	0
c. Other Political Committee (such as PACs)		0	0
d. Total Contribution Refunds	(add a, b and c) >	0	0
29. Other Disbursements		87.00	87.00
30. Total Disbursements	(add 21 c, 22, 23, 24, 25, 26, 27, 28d, and 29) >	1087.00	1587.00
31. Total Federal Disbursements	(subtract line 21 a i from line 30) >	1087.00	1587.00
III. Net Contributions/Operating Expenditures			
32. Total Contributions (other than loans) (from line 11d)		1150.00	1150.78
33. Total Contribution Refunds (from line 28d)		0	0
34. Net Contributions (other than loans) (subtract line 33 from line 32)		1150.00	1150.78
35. Total Federal Operating Expenditures	(add 21 a i and 21 b) >	1087.00	1587.00
36. Offsets to Operating Expenditures (from line 15)		0	0
37. Net Operating Expenditures	(subtract line 36 from line 35) >	1087.00	1587.00

9503962014

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 1 OF 1
FOR LINE NUMBER 111A

Contributions From Persons Other Than Political Committees.

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)

Italian American Democratic Leadership Council

000299396

95039620115

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
M.J. DeGiudice 7 East 95th Street Penthouse F New York, NY 10016 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation: Attorney at law Aggregate Year-to-Date: \$ 1,000.00	Date (month, day, year) 5/19/94	Amount of Each Receipt this Period \$ 1,000.00
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional)	\$ 1,000.00
TOTAL This Period (last page this line number only)	\$ 1,000.00

SCHEDULE B

ITEMIZED DISBURSEMENTS

Contributions To Federal Candidates

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

PAGE 1 OF 1

FOR LINE NUMBER 23

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 contributors.

NAME OF COMMITTEE (in Full)

Italian American Democratic Leadership Council

A. Full Name, Mailing Address and ZIP Code

ROSA DELAURO for Congress
49 Huntington Street
New Haven CT 06511

Contribution to Delauro
House Candidate

Date (month, day, year)

5/18/94

Amount of Each Disbursement This Period

\$500.00

Disbursement for: Primary General

Other (specify)

B. Full Name, Mailing Address and ZIP Code

Barce for Congress
512 56th Street
Kenosha WI 53140

Contribution to Barce
House Candidate

Date (month, day, year)

5/18/94

Amount of Each Disbursement This Period

\$500.00

Disbursement for: Primary General

Other (specify)

C. Full Name, Mailing Address and ZIP Code

Purpose of Disbursement

Date (month, day, year)

Amount of Each Disbursement This Period

Disbursement for: Primary General

Other (specify)

D. Full Name, Mailing Address and ZIP Code

Purpose of Disbursement

Date (month, day, year)

Amount of Each Disbursement This Period

Disbursement for: Primary General

Other (specify)

E. Full Name, Mailing Address and ZIP Code

Purpose of Disbursement

Date (month, day, year)

Amount of Each Disbursement This Period

Disbursement for: Primary General

Other (specify)

F. Full Name, Mailing Address and ZIP Code

Purpose of Disbursement

Date (month, day, year)

Amount of Each Disbursement This Period

Disbursement for: Primary General

Other (specify)

G. Full Name, Mailing Address and ZIP Code

Purpose of Disbursement

Date (month, day, year)

Amount of Each Disbursement This Period

Disbursement for: Primary General

Other (specify)

H. Full Name, Mailing Address and ZIP Code

Purpose of Disbursement

Date (month, day, year)

Amount of Each Disbursement This Period

Disbursement for: Primary General

Other (specify)

I. Full Name, Mailing Address and ZIP Code

Purpose of Disbursement

Date (month, day, year)

Amount of Each Disbursement This Period

Disbursement for: Primary General

Other (specify)

SUBTOTAL of Disbursements This Page (optional)

\$1000.00

TOTAL This Period (last page this line number only)

\$1000.00

95039620116

SCHEDULE B

ITEMIZED DISBURSEMENTS
Other Disbursements:

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)
Italian American Democratic Leadership Council

95039620117

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Rosemary J. Spinos 1828 U Street, NW Suite 1010 Washington DC 20036	Reimbursement for Printing Costs Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	5/15/94	\$ 84.00
B. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
C. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
D. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> 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: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> 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: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> 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: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> 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: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> 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: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period

SUBTOTAL of Disbursements This Page (optional)	\$ 84.00
TOTAL This Period (last page this line number only)	\$ 84.00

Federal Election Commission
ENVELOPE REPLACEMENT PAGE
FOR INCOMING DOCUMENTS

The Commission has added this page to the end of this filing to indicate how it was received.

Hand Delivered DATE OF RECEIPT
1-31-75

First Class Mail POSTMARKED

Registered/Certified Mail POSTMARKED

No Postmark

Postmark Illegible

Received from the House Office of Records and Registration DATE OF RECEIPT

Received from the Senate Office of Public Records DATE OF RECEIPT

Other (Specify): POSTMARKED
and/or DATE OF RECEIPT

SES
 PREPARER

2-1-75
 DATE PREPARED

95039620118