

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee
(Summary Page)

EX-100-1000000
FEDERAL ELECTION COMMISSION
P.O. BOX 10000
WASHINGTON, D.C. 20545

JUN 26 3 34 PM '95

USE FEC MAILING LABEL
OR
TYPE OR PRINT

1. NAME OF COMMITTEE (in full) Italian American Democratic Leadership Council		2. FEC IDENTIFICATION NUMBER 000299396
ADDRESS (number and street) <input type="checkbox"/> Check if different than previously reported 1828 L Street, NW, Suite 1010		
CITY, STATE and ZIP CODE Washington, D.C. 20036		
3. <input 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
11/8/94 in the State of Wash DC

(b) Is this Report an Amendment? * YES NO * 2nd Amendment

SUMMARY	COLUMN A This Period	COLUMN B Calendar Year-to-Date
5. Covering Period <u>October 1, 1994</u> through <u>November 28, 1994</u>		
6. (a) Cash on Hand January 1, 19 <u>94</u> <u>\$9637.20</u>		\$
(b) Cash on Hand at Beginning of Reporting Period	\$ <u>9930.06</u>	
(c) Total Receipts (from Line 19)	\$ <u>17,265.00</u>	\$ <u>25815.78</u>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	\$ <u>26,995.06</u>	\$ <u>35432.98</u>
7. Total Disbursements (from Line 30)	\$ <u>17,600.00</u>	\$ <u>26057.92</u>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	\$ <u>9395.06</u>	\$ <u>9395.06</u>
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	\$	For further information contact: Federal Election Commission 999 E Street, NW Washington, DC 20463 Toll Free 800-424-9630 Local 202-219-3420
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: [Signature] Date: 6/19/95

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. 5437g.

95039010100

DETAILED SUMMARY PAGE

OF RECEIPTS AND DISBURSEMENTS

PAGE 2, FEC FORM 3X

(revised 11/91)

NAME OF COMMITTEE	REPORT COVERING PERIOD	
Italian American Democratic Leadership Council	FROM 10.1.1994	TO 10.28.1994
I Receipts	COLUMN A Total This Period	COLUMN B Calendar Year
11. Contributions (other than loans) From:		
a. Individual/Persons Other Than Political Committees	\$ 59,250.00	\$ 11,925.00
i. Itemized (use Schedule A)	4340.00	4,890.78
ii. Unitemized	10,265.00	16,815.78
iii. Total (add i and ii) >	0	0
b. Political Party Committees	7,000.00	7,000.00
c. Other Political Committees (such as PACs)	17,265.00	25,815.78
d. Total Contributions (add a iii, b and c) >	0	0
12. Transfers From Affiliated/Other Party Committees	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 Committees	0	0
17. Other Federal Receipts (Dividends, Interest, etc.)	0	0
18. Transfers from Nonfederal Account for Joint Activity	17,265.00	25,815.78
19. Total Receipts (add 11d, 12, 13, 14, 15, 16, 17, and 18) >	17,265.00	25,815.78
20. Total Federal Receipts (subtract line 18 from line 19) >	17,265.00	25,815.78
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, ii, and b) >	0	0
22. Transfers to Affiliated/Other Party Committees	12,000	20,000
23. Contributions to Federal Candidates/Committees and Other Political Committees	0	0
24. Independent Expenditures (use Schedule E)	0	0
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use 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 Committees	0	0
b. Political Party Committees	0	0
c. Other Political Committees (such as PACs)	0	0
d. Total Contribution Refunds (add a, b and c) >	5,000	5,157.92
29. Other Disbursements	17,600	26,057.92
30. Total Disbursements (add 21c, 22, 23, 24, 25, 26, 27, 28d, and 29) >	17,600	26,057.92
31. Total Federal Disbursements (subtract line 21 a i from line 30) >	17,265	25,815.78
III. Net Contributions/Operating Expenditures		
32. Total Contributions (other than loans)(from line 11d)	0	0
33. Total Contribution Refunds (from line 28d)	17,265	25,815.78
34. Net Contributions (other than loans)(subtract line 33 from 32)	0	0
35. Total Federal Operating Expenditures (add 21 a i and 21 b) >	17,265	25,815.78
36. Offsets to Operating Expenditures (from line 15)	0	1,584.-
37. Net Operating Expenditures (subtract line 36 from 35) >	0	1,584.-

SCHEDULE A

ITEMIZED RECEIPTS

Contributions From Persons Other Than Political Committees

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

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

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Robert Blancato 138 N Jackson St Arlington Va 22201	White House Conference on Aging Occupation: Director	10/5/94	\$375.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 375.00		
B. Full Name, Mailing Address and ZIP Code Arthur J. Gajarsa 9408 Fiechter Ct Potomac MD 20854	Joseph Gajarsa McDonough Reiner Occupation: Attorney	10/5/94 11/3/94	\$2000.00 \$ 500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 2500.00		
C. Full Name, Mailing Address and ZIP Code Ronald Winton 2307 Commonwealth Ave Arlington Va 22201	Ron Winton & Associates Occupation: President	11/3/94	\$1000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 1000.00		
D. Full Name, Mailing Address and ZIP Code Dr. E. Casagrande 3660 Wilshire Blvd # 1136 Los Angeles, CA 90010	Self-Employed Occupation: Dentist	11/3/94	\$500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 500.00		
E. Full Name, Mailing Address and ZIP Code Jim J. Topp 8995 Kildowent Ct Vienna Va 22180	Multinational Business Services Inc Occupation: Director	11/3/94	\$ 500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 500.00		
F. Full Name, Mailing Address and ZIP Code Philip Piccigallo 4100 Bedrock Ct Alex. Va 22306	Sons of Italy Occupation: Ex. Pres	11/3/94	\$500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 500.00		
G. Full Name, Mailing Address and ZIP Code William H. Bartolone 2811 Ft South Woodrow St Arlington Va 22206	Cray Research Inc Occupation: Sr. Cost Program	11/3/95	\$ 500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 500.00		

SUBTOTAL of Receipts This Page (optional) 5675.00

TOTAL This Period (last page this line number only) 5675.00

2
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SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 2 OF 2
FOR LINE NUMBER 11(a)

Contributions From Persons Other Than Political Committees

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NAME OF COMMITTEE (In Full)

Italian American Democratic Leadership Council

000299396

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Paulette Haddock 1310 Swan Harbor Road Ft. Washington MD 20744 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Baltimore Cool Electric Co Dr. Cool Affairs Aggregate Year-to-Date > \$ 250.00	11/3/94	\$ 250.00
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Aggregate Year-to-Date > \$		
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Aggregate Year-to-Date > \$		
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Aggregate Year-to-Date > \$		
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Aggregate Year-to-Date > \$		
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Aggregate Year-to-Date > \$		
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Aggregate Year-to-Date > \$		

1303034010

SUBTOTAL of Receipts This Page (optional)

\$250.00

TOTAL This Period (last page this line number only)

\$5925.00

SCHEDULE A

ITEMIZED RECEIPTS
(Other 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

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
<i>Laborers Political League 905 16 Street NW Washington DC 20000</i>		<i>11/3/94</i>	<i>\$1000.00</i>
Receipt For: <input type="checkbox"/> Other (specify): <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	Occupation	Aggregate Year-to-Date > \$ <i>1000.00</i>	
<i>Great Western Financial Corp Good Government Committee 9700 Oakdale Ave, Chatsworth, CA 91311</i>		<i>11/3/94</i>	<i>\$1000.00</i>
Receipt For: <input type="checkbox"/> Other (specify): <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	Occupation	Aggregate Year-to-Date > \$ <i>1000.00</i>	
<i>Service Employees International Union 1331 L Street NW Washington DC 20005</i>		<i>11/3/94</i>	<i>\$5000.00</i>
Receipt For: <input type="checkbox"/> Other (specify): <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	Occupation	Aggregate Year-to-Date > \$ <i>5000.00</i>	
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Other (specify): <input type="checkbox"/> Primary <input type="checkbox"/> General	Occupation	Aggregate Year-to-Date > \$	
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Other (specify): <input type="checkbox"/> Primary <input type="checkbox"/> General	Occupation	Aggregate Year-to-Date > \$	
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Other (specify): <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	Occupation	Aggregate Year-to-Date > \$	
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Other (specify): <input type="checkbox"/> Primary <input type="checkbox"/> General	Occupation	Aggregate Year-to-Date > \$	

2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18 19 20 21 22 23 24 25 26 27 28 29 30 31 32 33 34 35 36 37 38 39 40 41 42 43 44 45 46 47 48 49 50

SUBTOTAL of Receipts This Page (optional) *7000.00*

TOTAL This Period (last page this line number only)

SCHEDULE B

ITEMIZED DISBURSEMENTS
(Contributions to Federal Candidates)

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

PAGE 1 OF 2
FOR LINE NUMBER 23

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NAME OF COMMITTEE (In Full)
Italian American Democratic Leadership Council

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Mascara for Congress P.O. Box 1109 Washington, PA 15301	Contribution to Frank Mascara House Candidate Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/3/94 10/24/94	\$500.00 \$500.00
Didonato for Congress P.O. Box 30 New Philadelphia, OH 44663	Contribution to Greg Didonato House Candidate Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/3/94 10/24/94	\$500.00 \$500.00
Baldacci for Congress 81 Main Street Bangor, Maine 04401	Contribution to John Baldacci House Candidate Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/3/94 10/24/94	\$500.00 \$500.00
Magazzu for Congress P.O. Box 817 Vineland, NJ 08360	Contribution to Lou Magazzu House Candidate Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/3/94 10/24/94	\$500.00 \$500.00
Gigliotti for Congress 523 Burnham Avenue Calumet City, IL 60409	Contribution to Frank Gigliotti House Candidate Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/3/94 10/24/94	\$500.00 \$500.00
Schilliro for Congress 393 Sunrise Highway Lynbrook, NY 11563	Contribution to Philip Schilliro House Candidate Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/3/94 10/24/94	\$500.00 \$500.00
Denari for Congress 16 Windward Court Aurora, IL 60506	Contribution to Peter Denari House Candidate Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	11/1/94	\$500.00
Barca for Congress 512 56th Street Kenosha, WI 53140	Contribution to Peter Barca House Candidate Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	11/1/94	\$3500.00
Lakocco for Congress P.O. Box 1553 Boise, ID 83701	Contribution to Larry Lakocco House Candidate Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	11/1/94	\$2500.00

SUBTOTAL of Disbursements This Page (optional)

\$12,500.00

TOTAL This Period (last page this line number only)

SCHEDULE B

ITEMIZED DISBURSEMENTS
(Contributions to Federal Candidates)

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

PAGE 2 OF 2
FOR LINE NUMBER 13

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NAME OF COMMITTEE (In Full)			
Italian American Democratic Leadership Council			
A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
John Cappozzi for U.S. Rep 1619 G. Street, S.E. Washington, D.C. 20003	Contribution To John Cappozzi House Candidate	11/1/94	\$100.00
Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)			
B. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Friends of Jim Oberstar 221 West 1st Street, Box 465 Duluth, MN 55802	Contribution To Jim Oberstar House Candidate	11/1/94	(\$500) Replaces 8/15/94 check stolen
Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)			
C. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
DeFazio for Congress P.O. Box 1316 Springfield, OR 97477	Contribution To Peter DeFazio House Candidate	11/1/94	(\$500.00) Replaces 8/15/94 check stolen
Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)			
D. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Schilliro for Congress Same as on Page 1	Contribution To Philip Schilliro House Candidate	11/1/94	(\$500.00) Replaces 10/3/94 check stolen
Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)			
E. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
American Mothers Association 1201 Pennsylvania Ave, NW Suite 500 Washington DC 20005	Contribution Dine & Reception for General	10/28/94	(\$100) (in-kind)
Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> 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: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> 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: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> 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: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> 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: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			

SUBTOTAL of Disbursements This Page (optional)

\$100.00

TOTAL This Period (last page this line number only)

\$12,600.00

ITEMIZED DISBURSEMENTS
(Other Disbursements)

Use separate schedule(s)
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NAME OF COMMITTEE (in Full)
Italian American Democratic Leadership Council

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
John Castell 10522 Red Landing Circle Burke, Va 22015	Consulting Services Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	11/1/94	\$5000.00
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)

\$5000.00

TOTAL This Period (last page this line number only)

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

First Class Mail POSTMARKED
6-20-95

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

SHY

6-26-95

PREPARER

DATE PREPARED