

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 ON FRONT

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:

- | | | |
|--------------------------------------|---------------------------------------|--|
| <input type="checkbox"/> February 20 | <input type="checkbox"/> June 20 | <input type="checkbox"/> October 20 |
| <input type="checkbox"/> March 20 | <input type="checkbox"/> July 20 | <input type="checkbox"/> November 20 |
| <input type="checkbox"/> April 20 | <input type="checkbox"/> August 20 | <input type="checkbox"/> December 20 |
| <input type="checkbox"/> May 20 | <input type="checkbox"/> September 20 | <input checked="" type="checkbox"/> 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>Sept 1, 1993</u> through <u>Dec 31, 1993</u>			
6. (a)	Cash on Hand January 1, 19 <u>93</u>		\$
(b)	Cash on Hand at Beginning of Reporting Period	\$ 0	
(c)	Total Receipts (from Line 10)	\$ 12,637.28	\$ 12,637.28
(d)	Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	\$ 12,637.28	\$ 12,637.28
7.	Total Disbursements (from Line 20)	\$ 3,000.08	\$ 3,000.08
8.	Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	\$ 9,637.20	\$ 9,637.20
9.	Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	\$ 0	
10.	Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	\$ 0	

For further information contact
Federal Election Commission
660 E Street, NW
Washington, DC 20463
Toll Free 800-424-9530
Local 202-219-6422

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: James A. Gueli

Signature of Treasurer: [Signature] 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.

95039620123

DETAILED SUMMARY PAGE

OF RECEIPTS AND DISBURSEMENTS

PAGE 2, FIC FORM 3X

(revised 1/1/01)

NAME OF COMMITTEE	REPORT COVERING PERIOD FROM	TO	
Italian American Democratic Leadership Council	1/1/93	Dec. 31 1993	
		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)		7300.00	7300.00
II. Unitemized		2573.28	2573.28
III. Total (add I and II) >		9873.28	9873.28
b. Political Party Committees		0	0
c. Other Political Committees (such as PACs)		2820.00	2820.00
d. Total Contributions (add a, b, and c) >		12,673.28	12,673.28
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 Representative Account for Joint Activity		0	0
19. Total Receipts (add 11d, 12, 13, 14, 15, 16, 17, and 18) >		12,673.28	12,673.28
20. Total Federal Receipts (subtract line 18 from line 19) >		12,673.28	12,673.28
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		2876.80	2876.80
c. Total Operating Expenditures (add a, b, and c) >		2876.80	2876.80
22. Transfers to Affiliated/Other Party Committees		0	0
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)		173.28	173.28
d. Total Contribution Refunds (add a, b and c) >		173.28	173.28
29. Other Disbursements		0	0
30. Total Disbursements (add 21c, 22, 23, 24, 25, 26, 27, 28d, and 29) >		3000.08	3000.08
31. Total Federal Disbursements (subtract line 21 a & b from line 30) >		3000.08	3000.08
III. Net Contributions/Operating Expenditures			
32. Total Contributions (other than loans) (from line 11d)		12,673.28	12,673.28
33. Total Contribution Refunds (from line 28d)		173.28	173.28
34. Net Contributions (other than loans) (subtract line 33 from line 32)		12,500.00	12,500.00
35. Total Federal Operating Expenditures (add 21 a & b and 21 c) >		2876.80	2876.80
36. Offsets to Operating Expenditures (from line 15)		0	0
37. Net Operating Expenditures (subtract line 36 from line 35) >		2876.80	2876.80

95039620124

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 1 OF 3

FOR LINE NUMBER

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

95039620125

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Rocco & Linda Lucette 50 Walter Avenue Tonawanda NY 14150	Attorney at Law	9/22/93	\$300.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 300.00		
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Neil T. Proto 2733 Ordway St. NW Apt 6 Washington DC 20005	Verner Liffert Attorney at Law	10/4/93	\$1000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 1000.00		
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Michael & Ann Freedman 719 Dubuque Ct Rockville, MD 20855	Le 99 Mason Vice President Investments	10/6/93	\$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	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Joseph R. Galinger Jr 7 Jackson Walkway Providence, R.I. 02903	Rhode Island Dept. of Economic Development Director	10/6/93	\$1000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 1000.00		
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Robert B. Blancato 138 N Jackson St Arlington Va 22201	National Italian American Foundation Public Affairs	10/6/93	\$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	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Anthony F. Podesta 2651 Woodley Road NW Washington DC 20008	Podesta & Associates President Public Policy & Finance	10/7/93	\$1000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 1000.00		
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Arthur J. Grayson 4403 Fretwell Ct Potsdam, MD 20854	Jason Grayson McDonnell Pinner Attorney	10/6/93	\$1000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 1000.00		

SUBTOTAL of Receipts This Page (optional)

\$5800.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE **2** OF **3**

FOR LINE NUMBER **11(a)**

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

95039620126

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Jonathan W. Cuneo Esq. 1301 K St NW Suite 600 Washington DC 20005 Receipt For: <input type="checkbox"/> Other (specify): <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	Self-employed Attorney Aggregate Year-to-Date > \$ 500.00	10/4/93	\$500.00
B. Full Name, Mailing Address and ZIP Code James Joseph 1331 H Street, NW Suite 300 Washington DC 20005 Receipt For: <input type="checkbox"/> Other (specify): <input type="checkbox"/> Primary <input type="checkbox"/> General	Roseff & James Public Affairs Aggregate Year-to-Date > \$ 1000.00	10/20/93	\$1000.00
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)

\$1500.00

TOTAL This Period (last page this line number only)

\$7300.00

SCHEDULE A

ITEMIZED RECEIPTS
Other Political Committees

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

PAGE 3 OF 3
FOR LINE NUMBER 11(C)

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

95039620127

A. Full Name, Mailing Address and ZIP Code Receipt For: <input type="checkbox"/> Other (specify): <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	Name of Employer Occupation Aggregate Year-to-Date	Date (month, day, year)	Amount of Each Receipt This Period
Spanni For Congress 1000 Main St. Plaza Jersey City, N.J. 07306	— — > \$ 2000.00	9/17/93	\$ 2000.00
B. Full Name, Mailing Address and ZIP Code Receipt For: <input type="checkbox"/> Other (specify): <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	— — > \$	9/22/93	\$ 800.00
C. Full Name, Mailing Address and ZIP Code Receipt For: <input type="checkbox"/> Other (specify): <input type="checkbox"/> Primary <input type="checkbox"/> General	— — > \$		
D. Full Name, Mailing Address and ZIP Code Receipt For: <input type="checkbox"/> Other (specify): <input type="checkbox"/> Primary <input type="checkbox"/> General	— — > \$		
E. Full Name, Mailing Address and ZIP Code Receipt For: <input type="checkbox"/> Other (specify): <input type="checkbox"/> Primary <input type="checkbox"/> General	— — > \$		
F. Full Name, Mailing Address and ZIP Code Receipt For: <input type="checkbox"/> Other (specify): <input type="checkbox"/> Primary <input type="checkbox"/> General	— — > \$		
G. Full Name, Mailing Address and ZIP Code Receipt For: <input type="checkbox"/> Other (specify): <input type="checkbox"/> Primary <input type="checkbox"/> General	— — > \$		

SUBTOTAL of Receipts This Page (optional) \$ 2800.00
 TOTAL This Period (last page this line number only) \$ 2800.-

SCHEDULE B

ITEMIZED DISBURSEMENTS
Other Operating Expenditures

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

PAGE 1 OF 1
 FOR LINE NUMBER 216

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NAME OF COMMITTEE (in Full)

Italian American Democratic Leadership Council

000299396

95039620128

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Arthur D. Gajjar 4403 Foothold Ct POTOMAC MD 20854	Reimburse fundraising dinner costs Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/8/93	\$2054.85
Print Recycling Inc 1333 Shepard Dr Sterling Va 20164	Envelopes & Stationery Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	12/30/93	\$152.00
Jim Roscoe 1381 H Street NW, Suite 300 Washington DC 20005	Reimburse train fare Buffalo fundraiser Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	12/30/93	\$563.00
Nations Bank 8027 Leesburg Pike Vienna Va 22180	Check printing & Monthly fees Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/14/93 12/17/93	56.95
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
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)

2826.80

TOTAL This Period (last page this line number only)

2826.80

**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.

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DATE OF RECEIPT

1-31-95

First Class Mail

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Registered/Certified Mail

POSTMARKED

No Postmark

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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

S.S.
 PREPARER

2-1-95

DATE PREPARED

95039620129