

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee
(Summary Page)

RECEIVED
FEDERAL ELECTION
COMMISSION
REPORTS ANALYSIS
DIVISION

Jan 31 3 41 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 multi-candidate committee. (see FEC FORM 1M)

A. 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	COLUMN B
5. Covering Period		This Period	Calendar Year-to-Date
July 1, 1994 through Sept 30, 1994			
6. (a)	Cash on Hand January 1, 1994	\$ 9637.20	\$ 0
(b)	Cash on Hand at Beginning of Reporting Period	\$ 9303.98	
(c)	Total Receipts (from Line 19)	\$ 2380.00	\$ 3550.78
(d)	Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	\$ 11,683.98	\$ 13,187.98
7.	Total Disbursements (from Line 30)	\$ 6580.00	\$ 8084.00
8.	Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	\$ 5103.98	\$ 5103.98
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)	\$ -	

For further information contact:
Federal Election Commission
600 E Street, NW
Washington, DC 20460
Toll Free 800-424-6590
Local 202-619-3430

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: **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.

FEC FORM 3X
(revised 9/93)

95039620130

**DETAILED SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS
PAGE 2, FEC FORM 278**

(Revised 1/1/81)

NAME OF COMMITTEE Italian American Democratic Leadership Council REPORT COVERED PERIOD FROM 10/1/77 TO 9/30/1994

I. Receipts		COLUMN A Total, This Period	COLUMN B Calendar Year
11. Contributions (other than loans) From:			
a. Individual/Persons Other Than Political Committees			
I. Itemized (see Schedule A)		2000.00	3000.00
II. Unitemized		350.00	550.78
III. Total (add I and II) >		2350.00	3550.78
b. Political Party Committees		0	0
c. Other Political Committees (such as PACs)		0	0
d. Total Contributions (add a II, b and c) >		2350.00	3550.78
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		0	0
19. Total Receipts (add 11d, 12, 13, 14, 15, 16, 17, and 18) >		2350.00	3550.78
20. Total Federal Receipts (subtract line 18 from line 19) >		2350.00	3550.78
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 Committees		0	0
23. Contributions to Federal Candidates/Committees and Other Political Committees		6500.00	8087.00
24. Independent Expenditures (see Schedule E)		0	0
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(6)) (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 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) >		0	0
29. Other Disbursements		0	87.00
30. Total Disbursements (add 21c, 22, 23, 24, 25, 26, 27, 28d, and 29) >		6500.00	8087.00
31. Total Federal Disbursements (subtract line 28 d from line 30) >		6500.00	8087.00
III. Net Contributions/Operating Expenditures			
32. Total Contributions (other than loans) (from line 11 d)		2350.00	3550.78
33. Total Contribution Refunds (from line 28d)		0	0
34. Net Contributions (other than loans) (subtract line 33 from line 32)		2350.00	3550.78
35. Total Federal Operating Expenditures (add 21 a I and 21 b) >		6500.00	8087.00
36. Offsets to Operating Expenditures (from line 15)		0	0
37. Net Contribution Expenditures (subtract line 36 from line 35) >		6500.00	8087.00

95039620131

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 1 OF 1
FOR LINE NUMBER 11a

Contributions From Persons Other Than Political Committees:

Any information copied from each Report and Statement 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

95039620132

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Charles & Meta Maynaccio 4911 Massachusetts Ave, NW Washington DC 20016 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Aggregate Year-to-Date > \$1000.00	7/28/94	\$1000.00
B. Full Name, Mailing Address and ZIP Code Kathryn M. Zurich 2241 Heatherton Ln Potomac, MD 20854 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer: National Institute of Health Occupation: Physician Aggregate Year-to-Date > \$10000.00	9/29/94	\$1000.00
C. Full Name, Mailing Address and ZIP Code Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer: Occupation: Aggregate Year-to-Date > \$	Date (month, day, year):	Amount of Each Receipt This Period:
D. Full Name, Mailing Address and ZIP Code Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer: Occupation: Aggregate Year-to-Date > \$	Date (month, day, year):	Amount of Each Receipt This Period:
E. Full Name, Mailing Address and ZIP Code Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer: Occupation: Aggregate Year-to-Date > \$	Date (month, day, year):	Amount of Each Receipt This Period:
F. Full Name, Mailing Address and ZIP Code Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer: Occupation: Aggregate Year-to-Date > \$	Date (month, day, year):	Amount of Each Receipt This Period:
G. Full Name, Mailing Address and ZIP Code Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer: Occupation: Aggregate Year-to-Date > \$	Date (month, day, year):	Amount of Each Receipt This Period:

SUBTOTAL of Receipts This Page (optional)

\$2000.00

TOTAL This Period (last page this line number only)

\$2000.00

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

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 confidential purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (or Club)

Italian American Democratic Leadership Council

95039620133

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Teloni for Congress PO Box 422220 San Francisco, CA 94142	Contribution to Nancy Teloni House Candidate Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	7/26/94	\$500.00
Callahan for Congress PO Box 1553 Boise, Idaho 83701	Contribution to Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	7/26/94	\$500.00
Friends of Torrecelli PO Box 809 Teaneck, NJ 07660	Contribution to Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	7/26/94	\$500.00
Trafficant for Congress 1823 Basil Ave. Youngstown OH, 44514	Contribution to Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	7/26/94	\$500.00
Friends of John Latalce 2954 Delaware Ave Kenmore, NY 14277	Contribution to John Latalce House Candidate Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	7/26/94	\$500.00
Volunteers for Leino PO Box 65254 St Paul MN 55101	Contribution to Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	7/26/94	\$500.00
Fazio for Congress PO Box 2244 West Sacramento CA 95691	Contribution to Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	8/15/94	\$500.00
Fialletta for Congress 6th and Arch Sts Rm 10402 Philadelphia PA 19106	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	8/15/94	\$500.00
Friends of George Miller PO Box 5864 Concord CA 94524	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	8/15/94	\$500.00

SUBTOTAL of Disbursements This Page (optional)

4500.00

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
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 committee.

NAME OF COMMITTEE (in Full)

Italian American Democratic Leadership Council

95039620134

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Detroit for Congress 123 1/2 Lincoln St. Lansing, MI 48201	Contributions to Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	8/15/94	\$500.00
Joe Moakley for Congress PO Box 1073 Boston, MA 02205	Contributions to Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	8/15/94	\$500.00
Friends of John Chabotar PO Box 465 Duluth, MN 55802	Contributions to Chabotar for Congress Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	8/15/94	\$500.00
Palone for Congress 540 Broadway Long Branch, NJ 07740	Contributions to Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	8/15/94	\$500.00
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
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)	\$2000.00
TOTAL This Period (last page this line number only)	\$6500.00

**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 - 95

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

J.E.H.

PREPARER

2 - 1 - 95

DATE PREPARED

95039620135