

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee
(Summary Page)

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USE FEC MAILING LABEL
OR
TYPE OR PRINT

1. NAME OF COMMITTEE (in full)
 C00174847 082796 P 250
 GERARD ZACCAGNI
 BREWERY BOFT DRINK BEER DISTR
 OPTICAL DENTAL MISC WORKERS WA
 12298 TOWNSEND ROAD
 PHILADELPHIA PA 19154
 WORKER
 listed

2. FEC IDENTIFICATION NUMBER
 3. This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

4. TYPE OF REPORT

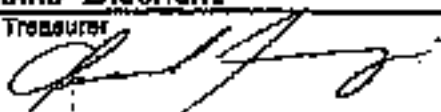
- (a) April 15 Quarterly Report
 July 15 Quarterly Report
 October 15 Quarterly Report
 January 31 Year End Report
 July 31 Mid Year Report (Non-election Year Only)
 Termination Report

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 General
 (Type of Election)
 election on 11/5/96 in the State of Pennsylvania
 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>10/1/96</u> through <u>10/16/96</u>		
6.	(a) Cash on Hand January 1, 19		\$ 216,798.93
	(b) Cash on Hand at Beginning of Reporting Period	\$ 238,134.49	
	(c) Total Receipts (from Line 19)	\$ 4,331.00	\$ 59,991,893.9
	(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	\$ 242,465.49	\$ 276,790.32
7.	Total Disbursements (from Line 20)	\$ 11,727.60	\$ 46,052.43
8.	Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	\$ 230,737.89	\$ 230,737.89
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 20483 Toll Free 800-424-9530 Local 202-218-3420
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 GERARD ZACCAGNI			
Signature of Treasurer 		Date 10/23/96	

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

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FEC FORM 3X
(revised 9/93)

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

(revised 1/1/91)

NAME OF COMMITTEE
BREWERY SOFT DRINK, BEER DISTRIBUTOR OPT. DENT. MISC. WORKER

REPORT COVERING PERIOD
 FROM **10/1/96** TO: **10/16/96**

		COLUMN A	COLUMN B	
		Total This Period	Calendar Year	
I. Receipts				
11.	Contributions (other than loans) From:			
a.	Individual/Persons Other Than Political Committees			
	I. Itemized (use Schedule A)			11(a)
	ii. Unitemized	\$4,331.00	\$54,193.80	11(b)
	iii. Total (add i and ii) >	\$4,331.00	\$54,193.80	11(c)
b.	Political Party Committees			11(d)
c.	Other Political Committees (such as PACs)			11(e)
d.	Total Contributions (add a ii, b and c) >	\$4,331.00	\$54,193.80	11(f)
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.)		\$ 1,769.50	15
16.	Refunds of Contributions Made to Federal Candidates and Other Political Committees			16
17.	Other Federal Receipts (Dividends, Interest, etc.)		\$ 4,028.09	17
18.	Transfers from Nonfederal Account for Joint Activity			18
19.	Total Receipts (add 11d, 12, 13, 14, 15, 16, 17, and 18) >			19
20.	Total Federal Receipts (subtract line 18 from line 19) >	\$4,331.00	\$59,991.39	20
II. Disbursements				
21.	Operating Expenditures:			
a.	Shared Federal/Non-Federal Activity (from Schedule H4)			
	i. Federal Share			21(a)
	ii. Non-Federal Share			21(b)
b.	Other Federal Operating Expenditures	\$1,027.60	\$ 9,240.43	21(c)
c.	Total Operating Expenditures (add a i, a ii, and b) >	\$1,027.60	\$ 9,240.43	21(d)
22.	Transfers to Affiliated/Other Party Committees			22
23.	Contributions to Federal Candidates/Committees and Other Political Committees	\$2,300.00	\$4,550.00	23
24.	Independent Expenditures (use Schedule E)	0	\$ 1,272.00	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.	Individuals/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	\$8,400.00	\$30,990.00	29
30.	Total Disbursements (add 21c, 22, 23, 24, 25, 26, 27, 28d, and 29) >	\$11,727.60	\$46,052.43	30
31.	Total Federal Disbursements (subtract line 21 a ii from line 30) >	\$11,727.60	\$46,052.43	31
III. Net Contributions/Operating Expenditures				
32.	Total Contributions (other than loans)(from line 11d)	\$4,331.00	\$54,193.80	32
33.	Total Contribution Refunds (from line 28d)	0	0	33
34.	Net Contributions (other than loans)(subtract line 33 from 32)	\$4,331.00	\$54,193.80	34
35.	Total Federal Operating Expenditures (add 21 a i and 21 b) >	\$1,027.60	\$ 9,240.43	35
36.	Offsets to Operating Expenditures (from line 15)	0	\$ 1,769.50	36
37.	Net Operating Expenditures (subtract line 36 from 35) >	\$1,027.60	\$ 7,470.93	37

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

PAGE 1 OF 1

FOR LINE NUMBER 21b

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 committees.

NAME OF COMMITTEE (In Full) BREWERY SOFT DRINK, BEER DISTRIBUTOR, OPTICAL, DENTAL MISCELLANEOUS WORKERS, WAREHOUSEMEN AND HELPERS LOCAL 830 POLITICAL ACTION COMMITTEE

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Innovative Software Solutions, Inc. 1060 North Kings Highway Cherry Hill, NJ 08034	Support Services Agreement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/3/96	\$954.00
B. Full Name, Mailing Address and ZIP Code Teamsters Local No. 830 12298 Townsend Road Philadelphia, PA 19154	Purpose of Disbursement Reimbursement for postage for Elect. Day Mailing Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/15/96	\$ 73.60
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)

\$1,027.60

TOTAL This Period (last page this line number only)

\$1,027.60

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

PAGE 1 OF 1
FOR LINE NUMBER 23

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NAME OF COMMITTEE (in Full) BREWERY SOFT DRINK, BEER DISTRIBUTOR, OPTICAL, DENTAL MISCELLANEOUS WORKERS, WAREHOUSEMEN AND HELPERS LOCAL No. 830 POLITICAL ACTION COMMITTEE

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
VICTORY 96 1421 Walnut Street Philadelphia, PA 19103	Contribution Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/10/96	\$2,000.00
B. Full Name, Mailing Address and ZIP Code Friends of Congressman Tim Holden P.O. Box 8492 Reading, PA 19603	Tickets Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/10/96	\$ 300.00
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)

\$2,300.00

TOTAL This Period (last page this line number only)

\$2,300.00

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

PAGE 1 OF 1
FOR LINE NUMBER 29

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) **BREWERY SOFT DRINK, BEER DISTRIBUTOR, OPTICAL, DENTAL, MISCELLANEOUS WORKERS, WAREHOUSEMEN AND HELPERS LOCAL #930 POLITICAL ACTION COMMITTEE**

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
HRCC '97 PHILADELPHIA Event P.O. Box 826 Harrisburg, PA 17108	State House of Rep. Contribution Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/3/96	\$2,000.00
B. Full Name, Mailing Address and ZIP Code Salvatore for Senate Committee 14219 Barcalow Street Philadelphia, PA 19116	Purpose of Disbursement Tickets Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/10/96	\$ 500.00
C. Full Name, Mailing Address and ZIP Code Upper Darby Republican Campaign Committee 312 McClatchy Building Upper Darby, PA 19082	Purpose of Disbursement Contribution Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/10/96	\$2,000.00
D. Full Name, Mailing Address and ZIP Code 34th Ward Democratic Executive Committee 1301 Kimberly Drive Philadelphia, PA 19151	Purpose of Disbursement Contribution Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/10/96	\$2,000.00
E. Full Name, Mailing Address and ZIP Code Pottsville City Democratic Committee P.O. Box 66 Pottsville, PA 17901	Purpose of Disbursement Tickets Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/10/96	\$ 100.00
F. Full Name, Mailing Address and ZIP Code Santoni For State Representative P.O. Box 12893 Reading, PA 19612-2893	Purpose of Disbursement Tickets Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/10/96	\$ 300.00
G. Full Name, Mailing Address and ZIP Code Friends for Baylor Committee P.O. Box 191 New Ringgold, PA 17960	Purpose of Disbursement Contribution Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/10/96	\$500.00
H. Full Name, Mailing Address and ZIP Code Zeller Candidate -General Assembly R.D. #2 Box 1463 Schuylkill Haven PA 17972	Purpose of Disbursement Contribution Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/10/96	\$1,000.00
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) \$8,400.00

TOTAL This Period (last page this line number only) \$8,400.00

Federal Election Commission
**ENVELOPE REPLACEMENT PAGE
FOR INCOMING DOCUMENTS**

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JLS
PREPARER

6-9-97
DATE PREPARED