

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee
(Summary Page)

USE FEC MAILING LABEL
OR
TYPE OR PRINT

RECEIVED
FEDERAL ELEC
COMMISSION MAIL

1. NAME OF COMMITTEE (In full) C00174847 GERARD ZACCAGNI			081898	P252
ADDRESS (number and street) <input type="checkbox"/> Check if different than previously reported BREMERY SOFT DRINK BEER DISTR OPTICAL DENTAL MISC WORKERS WAREHOUSEMEN			2. FEC IDENTIFICATION NUMBER 1301 6 1 27	
CITY, STATE and ZIP CODE 12298 TOWNSEND ROAD PHILADELPHIA, PA			3. <input type="checkbox"/> This committee has qualified as a multicandidate committee. (see FEC FORM 1M)	
			19154	

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 _____

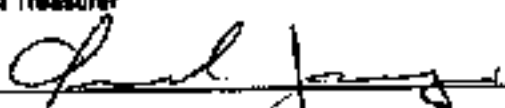
_____ in the State of _____

(b) Is this Report an Amendment? YES NO

SUMMARY		COLUMN A This Period	COLUMN B Calendar Year-to-Date
5. Covering Period	7/1/98 through 9/30/98		
6. (a) Cash on Hand January 1, 1998			\$ 263,440.28
(b) Cash on Hand at Beginning of Reporting Period		\$ 227,901.18	
(c) Total Receipts (from Line 10)		\$ 18,688.87	\$ 54,031.61
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)		\$ 246,590.05	\$ 317,471.89
7. Total Disbursements (from Line 30)		\$ 6,924.80	\$ 77,806.64
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))		\$ 239,665.25	\$ 239,665.25
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)		\$ 0	For further information contact: Federal Election Commission 999 E Street, NW Washington, DC 20463 Toll Free 800-424-9530 Local 202-219-3420
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)		\$ 0	

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
10/30/98

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

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FEC FORM 3X
(revised 8/93)

DETAILED SUMMARY PAGE

OF RECEIPTS AND DISBURSEMENTS

PAGE 2, FEC FORM 3X

(revised 1/1/81)

NAME OF COMMITTEE **Brewery, SOFT DRINK, BEER DISTRIBUTORS OPT. DENTAL, MISC WORKERS, WAREHOUSEMEN TEAMSTERS 830 FEC**

REPORT COVERING PERIOD
FROM **7/1/98** TO **9/30/98**

	COLUMN A Total This Period	COLUMN B Calendar Year	
I. Receipts			
11. Contributions (other than loans) From:			
a. Individual/Persons Other Than Political Committees			11(a)
i. Itemized (use Schedule A)	14,520.01	47,926.03	11(a)(i)
ii. Unitemized			11(a)(ii)
iii. Total (add i and ii) >	14,520.01	47,926.03	11(b)
b. Political Party Committees			11(b)
c. Other Political Committees (such as PACs)			11(c)
d. Total Contributions (add a ii, b and c) >	14,520.01	47,926.03	11(d)
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.)			15
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees			16
17. Other Federal Receipts (Dividends, Interest, etc.)	4,168.86	6,105.58	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) >	18,688.87	54,031.61	20
II. Disbursements			
21. Operating Expenditures:			
a. Shared Federal/Non-Federal Activity (from Schedule H4)			21(a)
i. Federal Share			21(a)(i)
ii. Non-Federal Share	2,479.80	12,086.64	21(a)(ii)
b. Other Federal Operating Expenditures			21(b)
c. Total Operating Expenditures (add a i, a ii, and b) >	2,479.80	12,086.64	21(c)
22. Transfers to Affiliated/Other Party Committees		50,000.00	22
23. Contributions to Federal Candidates/Committees and Other Political Committees			23
24. Independent Expenditures (use Schedule E)			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. Individual/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) >	4,445.00	15,720.00	28(d)
29. Other Disbursements			29
30. Total Disbursements (add 21c, 22, 23, 24, 25, 26, 27, 28d, and 29) >	6,924.80	77,806.64	30
31. Total Federal Disbursements (subtract line 21 a ii from line 30) >	6,924.80	77,806.64	31
III. Net Contributions/Operating Expenditures			
32. Total Contributions (other than loans)(from line 11d)	14,520.01	47,926.03	32
33. Total Contribution Refunds (from line 28d)			33
34. Net Contributions (other than loans)(subtract line 33 from 32)	14,520.01	47,926.03	34
35. Total Federal Operating Expenditures (add 21 a i and 21 b) >	2,479.80	12,086.64	35
36. Offsets to Operating Expenditures (from line 15)			36
37. Net Operating Expenditures (subtract line 36 from 35) >	2,479.80	12,086.64	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 committee.

NAME OF COMMITTEE (In Full) **BREWERY, SOFT DRINK, BEER DISTRIBUTORS, OPTICAL, DENTAL NISC, WORKERS, WAREHOUSEMEN, TEAMSTERS LOCAL UNION 830 .FEC**

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
PNC Bank 3707 Hulmeville Road Bensalem, PA 19020	Bank Charges Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	8/7/98 9/9/98	\$79.80
Thomas Havey LLP Two Bala Plaza Suite 501 Bala Cynwyd, PA 19004	Drive Programming Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	8/19/99	\$2,400.00
C. Full Name, Mailing Address and ZIP Code [Faint text]	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[Faint text]	[Faint text]
D. Full Name, Mailing Address and ZIP Code [Faint text]	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[Faint text]	[Faint text]
E. Full Name, Mailing Address and ZIP Code [Faint text]	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[Faint text]	[Faint text]
F. Full Name, Mailing Address and ZIP Code [Faint text]	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[Faint text]	[Faint text]
G. Full Name, Mailing Address and ZIP Code [Faint text]	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[Faint text]	[Faint text]
H. Full Name, Mailing Address and ZIP Code [Faint text]	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[Faint text]	[Faint text]
I. Full Name, Mailing Address and ZIP Code [Faint text]	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[Faint text]	[Faint text]

SUBTOTAL of Disbursements This Page (optional)

TOTAL This Period (last page this line number only)

\$2,479.80

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

PAGE **1** OF **2**
FOR LINE NUMBER **29**

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NAME OF COMMITTEE (in Full) BREWERY, SOFT DRINK, BEER DISTRIBUTORS, OPTICAL, DENTAL, MISC. WORKERS WAREHOUSE, TEAMSTERS LOCAL 830 FEC

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Friends of Congressman Tim Holden P.O. Box 37 St. Clair, PA 17970-0037	6 - Tickets Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	8/19/98	\$120.00
Development Corp. For Isreal Philadelphia Committee 100 S. Broad Street Suite 1525 Philadelphia, PA 19110-1013	2 - Tickets Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	8/19/98	\$200.00
Friends of Vicky Kresge Rd. #2 Box 143 B-1 New Ringgold, PA 17960	Donation Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	8/19/98	\$100.00
Friends of Robert Klock 5305 Main Street White Hall, PA 18052	Donation Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	8/19/98	\$200.00
Committee to Elect Rich Brucela Box 231 R Martins Creek, PA 18063	Donation Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	8/19/98	\$100.00
Republican City Committee 1154 Norwalk Road Philadelphia, PA 19115	13 - Tickets Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	8/26/98	\$975.00
Pottsville City Democratic Committee P.O. Box 55 Pottsville, PA 17901	Sponsor Hole. B - Tickets Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	9/2/98	\$450.00
United Labor Council Of Schykill Coun P.O. Box 475 Pottsville, PA 17901	10 - Tickets Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	9/2/98	\$200.00
Friends of Steve Samuelson 2665 West Boulevard Bethlehem, PA 18017	Contribution Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	9/2/98	\$100.00

SUBTOTAL of Disbursements This Page (optional)

\$2,445.00

TOTAL This Period (last page this line number only)

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

PAGE **2** OF **2**
FOR LINE NUMBER **29**

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NAME OF COMMITTEE (in Full) **Brewery, Soft Drink, Beer Distributors, Optical, Dental, Misc. Workers Warehouse, Teamsters Local 830 FEC**

A. 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
Salvatore for Senate 1154 Norwalk Road Philadelphia, PA 19115	8 - Tickets	9/16/98	\$2,000.00
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) **\$2,000.00**

TOTAL This Period (last page this line number only) **\$4,445.00**

**ENVELOPE REPLACEMENT PAGE
FOR INCOMING DOCUMENTS**

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

<input type="checkbox"/> Hand Delivered	Date of Receipt
<input type="checkbox"/> First Class Mail	POSTMARKED
<input checked="" type="checkbox"/> Registered/Certified Mail	POSTMARKED 11-2-98
<input type="checkbox"/> No Postmark	
<input type="checkbox"/> Postmark Illegible	
<input type="checkbox"/> Received from the House office of Records and Registration	Date of Receipt
<input type="checkbox"/> Received from the Senate Office of Public Records	Date of Receipt
<input type="checkbox"/> Other (Specify):	Postmarked and/or Date of Receipt
<input type="checkbox"/> Electronic Filing	
<i>JCH</i> PREPARER	11-6-98 DATE PREPARED