

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee
(Summary Page)

FF
JUL 24 12 35 PM '95

USE FEC MAILING LABEL OR TYPE OR PRINT

1. C00174847 061495 p 250
 JOSEPH BROCK
 BREWERY SOFT DRINK BEER DISTR
 OPTICAL DENTAL MISC WORKERS WA
 12298 TOWNSEND ROAD
 PHILADELPHIA PA 19154

2. FEC IDENTIFICATION NUMBER
 C00174847

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 _____ (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 <u>1/1/95</u> through <u>6/30/95</u>		This Period	Calendar Year-to-Date
6. (a)	Cash on Hand January 1, 19 <u>95</u>		\$ 193,283.87
(b)	Cash on Hand at Beginning of Reporting Period	\$ 193,283.87	
(c)	Total Receipts (from Line 10)	\$ 35,954.47	\$ 35,954.47
(d)	Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	\$ 229,238.34	\$ 229,238.34
7.	Total Disbursements (from Line 30)	\$ 25,921.10	\$ 25,921.10
8.	Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	\$ 203,317.24	\$ 203,317.24
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 202-219-8420
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
 Joseph F. Brock, Sr.

Signature of Treasurer


Date
 7/20/95

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 8/93)

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

(revised 1/1/91)

NAME OF COMMITTEE Brewry, Soft Drnk, Beer Dists., Optcl & Dntl, Misc. Wrkrs, Whsemn & Hlprs. Local 830 PAC		REPORT COVERING PERIOD FROM 1/1/95 TO 6/30/95	
		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)		-0-	-0-
II. Unitemized		34,102.04	34,102.04
III. Total (add I and II) >		34,102.04	34,102.04
b. Political Party Committees		-0-	-0-
c. Other Political Committees (such as PACs)		-0-	-0-
d. Total Contributions (add a III, b and c) >		34,102.04	34,102.04
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.)		1,852.43	1,852.43
18. Transfers from Nonfederal Account for Joint Activity		-0-	-0-
19. Total Receipts (add 11d, 12, 13, 14, 15, 16, 17, and 18) >		35,954.47	35,954.47
20. Total Federal Receipts (subtract line 18 from line 19) >		35,954.47	35,954.47
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		7,141.10	7,141.10
c. Total Operating Expenditures (add a i, a ii, and b) >		7,141.10	7,141.10
22. Transfers to Affiliated/Other Party Committees		-0-	-0-
23. Contributions to Federal Candidates/Committees and Other Political Committees		2,750.00	2,750.00
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) >		-0-	-0-
29. Other Disbursements		16,030.00	16,030.00
30. Total Disbursements (add 21c, 22, 23, 24, 25, 26, 27, 28d, and 29) >		25,921.10	25,921.10
31. Total Federal Disbursements (subtract line 21 a ii from line 30) >		25,921.10	25,921.10
III. Net Contributions/Operating Expenditures			
32. Total Contributions (other than loans)(from line 11d)		34,102.04	34,102.04
33. Total Contribution Refunds (from line 28d)		-0-	-0-
34. Net Contributions (other than loans)(subtract line 33 from 32)		34,102.04	34,102.04
35. Total Federal Operating Expenditures (add 21 a i and 21 b) >		7,141.10	7,141.10
36. Offsets to Operating Expenditures (from line 15)		-0-	-0-
37. Net Operating Expenditures (subtract line 36 from 35) >		7,141.10	7,141.10

9 0 3 9 0 6 3 5 7

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

PAGE 1 OF 1
FOR LINE NUMBER 21 B

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 and Dental, Miscellaneous Workers, Warehousemen and Helpers LOCAL 830 POLITICAL ACTION COMMITTEE**

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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 Service Charges Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	1/1/95- 6/30/95	254.28
PNC Bank 3707 Hulmeville Road Bensalem PA 19020	1120 PDL Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	3/6/95	1500.32
American Express P.O.Box 53779 Phoenix, AZ 85072	Travel, Meals & Lodging Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	2/15/95	429.72
Teamsters Local Union No. 830 12298 Townsend Road Phila. PA 19154	Postage reimbursement, refund over-deduction Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	5/11/95	1211.78
Teamsters Local Union No.115 2833 Cottman Avenue Phila. PA 19149	Printing Charges Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	4/20/95 5/11/95	3745.00
	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		

SUBTOTAL of Disbursements This Page (optional)	7141.10
TOTAL This Period (last page this line number only)	7141.10

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 Distributors, Optical and 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
National Rainbow Coalition 1377 "K" Street Washington, DC 20005	Contribution Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	3/13/95	2500.00
B. Full Name, Mailing Address and ZIP Code Democratic National Committee Federal Account Washington, DC	Contribution Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	3/30/95	250.00
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

95039863549

SUBTOTAL of Disbursements This Page (optional)	2750.00
TOTAL This Period (last page this line number only)	2750.00

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

PAGE 1 OF 3
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 Distributors, Optical and Dental, Miscellaneous Workers, Warehousemen and Helpers, LOCAL 830 POLITICAL ACTION COMMITTEE

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A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Committee to Re-elect John Taylor 2847 Almond Street Phila. PA 19134	B Tickets Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	1/18/95	200.00
B. Full Name, Mailing Address and ZIP Code Salvatore for Senate 14219 Barcalow Street Phila. PA 19116	Purpose of Disbursement 4 tickets Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 1/27/95	Amount of Each Disbursement This Period 1000.00
C. Full Name, Mailing Address and ZIP Code Republican City Committee c/o Salvator for Senate Edith Kitchin, Treasurer 14219 Barcalow St., Phila. PA 19116	Purpose of Disbursement 1 ticket Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 1/27/95	Amount of Each Disbursement This Period 1000.00
D. Full Name, Mailing Address and ZIP Code House Democratic Campaign Committee P.O. Box 555, Federal Sq. Station Harrisburg PA 17108	Purpose of Disbursement 1 ticket Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 1/27/95	Amount of Each Disbursement This Period 250.00
E. Full Name, Mailing Address and ZIP Code Committee to Re-elect Marge Tartaglione 1407 Van Kirk Street Phila. PA 19149	Purpose of Disbursement Contribution Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 2/27/95	Amount of Each Disbursement This Period 200.00
F. Full Name, Mailing Address and ZIP Code Committee to Elect Richard Watson 1455 E. Vernon Road Phila. PA 19150	Purpose of Disbursement Contribution Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 3/1/95	Amount of Each Disbursement This Period 500.00
G. Full Name, Mailing Address and ZIP Code Friends of Brian O'Neill 2000 Market St., 10th Floor Phila. PA 19103	Purpose of Disbursement Contribution Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 3/9/95	Amount of Each Disbursement This Period 500.00
H. Full Name, Mailing Address and ZIP Code Rendell '95 Suite 1265, 1617 JFK Blvd. Phila. PA 19103	Purpose of Disbursement Contribution Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 3/13/95	Amount of Each Disbursement This Period 2000.00
I. Full Name, Mailing Address and ZIP Code 34th Ward Democratic Executive Committee 1301 Kimberly Drive Phila. PA 19151	Purpose of Disbursement Contribution Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 4/5/95	Amount of Each Disbursement This Period 2500.00

SUBTOTAL of Disbursements This Page (optional)

8,150.00

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 3
FOR LINE NUMBER 29

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NAME OF COMMITTEE (in Full) Brewery, Soft Drink, Beer Distributors, Optical and 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
Republican City Committee c/o Edith Kitchin 14219 Barcalow Street, Phila.PA 19116	10 Tickets Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	4/5/95	1000.00
B. Full Name, Mailing Address and ZIP Code Pottsville City Democratic Committee P.O.Box 66,321 W. Market Street Pottsville, PA 17901	Contribution Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	4/6/95	1000.00
C. Full Name, Mailing Address and ZIP Code Bi-Partisan Friends for Ed Barket P.O.Box 64 Pottsville, PA 17901	Contribution Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	4/6/95	500.00
D. Full Name, Mailing Address and ZIP Code Committee to Elect Ricahrd Watson 1455 E. Vernon Road Phila. PA 19150	Contribution Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	4/26/95	500.00
E. Full Name, Mailing Address and ZIP Code Dr.Peter J.Antonsen for Allentown City Council c/o Elsa Vasquez 620 No.6th Street Allentown, PA 18102	Contribution Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	5/1/95	1000.00
F. Full Name, Mailing Address and ZIP Code Kenney for Legislator 13420 Priestly Street Phila. PA 19116	2 tickets Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	5/3/95	300.00
G. Full Name, Mailing Address and ZIP Code Committee to Elect Juan "Johnny" Cruz District Justice P.O.Box 5095 Bethlehem, PA	Contribution Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	5/4/95	500.00
H. Full Name, Mailing Address and ZIP Code Committee to Elect Sarah E. Ruszin c/o Jack Edwards 703 Garden Street Britol PA 19007	Contribution Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	5/9/95	500.00
I. Full Name, Mailing Address and ZIP Code People to Elect LaGrotta P.O. Box 842 Ellwood City PA 16117	2 tickets Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	5/11/95	250.00

SUBTOTAL of Disbursements This Page (optional) 5,550.00

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 3 OF 3
FOR LINE NUMBER 29

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NAME OF COMMITTEE (in Full) Brewery, Soft Drink, Beer Distributors, Optical and 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
Friends of Senator Joe Loeper P.O.Box 135 Drexel Hill, PA 19026	Contribution Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	5/11/95	2000.00
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)

2000.00

TOTAL This Period (last page this line number only) Includes Itemized and Unitemized(330.00)

16,030.00

9 5 0 3 9 0 6 3 5 7 2

**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

Registered/Certified Mail

POSTMARKED

7/20/95

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

D.M.Q.
PREPARER

7/24/95
DATE PREPARED

95039863573