

ITALIAN AMERICAN DEMOCRATIC LEADERSHIP COUNCIL

RECEIVED
FEDERAL ELECTION
COMMISSION
REPORTS ANALYSIS
DIVISION
JAN 30 2 43 PM '96

HONORARY CO-CHAIRS

THE HONORABLE MARIO CUOMO

THE HONORABLE GERALDINE FERRARO

BOARD OF ADVISORS

HONORABLE CHRISTOPHER DODD

HONORABLE JOHN BALDACCIO
HONORABLE PETER DEPAZIO
HONORABLE ROSA DELAURIO
HONORABLE MIKE DOYLE
HONORABLE VITO PAGGI
HONORABLE THOMAS FOCILETTA

CHAIRMAN DONALD FOWLER

HONORABLE JOHN J. LAFALCE
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HONORABLE FRANK MASCOLO
HONORABLE GEORGE MILLER
HONORABLE JOHN JOSEPH MURPHY

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HONORABLE JAMES L. OBERSTAR
HONORABLE FRANK PALLONZO, JR.
HONORABLE NANCY PELOSI
HONORABLE ROBERT G. TORRICELLI
HONORABLE JAMES TRACICANT, JR.
HONORABLE BRUCE VENTO

BOARD OF DIRECTORS

JOHN CALVELLO
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MELLO COTTONE
ROBERT DE TITO
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ARTHUR GARANKA
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JAMES C. ROSAPEPE
CHARLES SCALINA
VINCENT SCORRITINO
JAMES TOZZI
LINO C. ZIBRATTI
KATHRYN ZUNICH, MD

January 30, 1996

Mr. Edward D. Ryan
Report Analysis Division
Federal Elections Commission
999 E Street, N.W.
Washington, DC 20463

Dear Mr. Ryan:

Please find enclosed IADLC's 1995 Year End Report.

Sincerely,



Charles A. Gueli
Treasurer

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee
(Summary Page)

RECEIVED
FEDERAL ELECTION
COMMISSION
REPORTS ANALYSIS
DIVISION

JAN 30 2 43 PM '96

USE FEC MAILING LABEL
OR
TYPE OR PRINT

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:

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 <i>July 1, 1995 through January 31, 1995</i>		
6. (a) Cash on Hand January 1, 19 <i>95</i>		\$ <i>4,196.70</i>
(b) Cash on Hand at Beginning of Reporting Period	\$ <i>717.95</i>	
(c) Total Receipts (from Line 18)	\$ <i>5215.00</i>	\$ <i>12,398.00</i>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	\$ <i>12,332.95</i>	\$ <i>16,594.70</i>
7. Total Disbursements (from Line 30)	\$ <i>9427.02</i>	\$ <i>13,688.77</i>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	\$ <i>2905.93</i>	\$ <i>2905.93</i>
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
999 E Street, NW
Washington, DC 20463
Toll Free 800-424-9600
Local 202-219-3420

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. Guel*

Signature of Treasurer: *[Signature]* Date: *1/29/96*

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)

DETAILED SUMMARY PAGE

OF RECEIPTS AND DISBURSEMENTS

PAGE 2, FEC FORM 3X

(revised 1/1/81)

NAME OF COMMITTEE	REPORT COVERING PERIOD		
Italian American Democratic Leadership Council	FROM July 1, 1995	TO Dec. 31, 1995	
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 (use Schedule A)	1650.00	2650.00	11(a)(i)
ii. Unitemized	3865.00	4098.00	11(a)(ii)
iii. Total (add i and ii) >	5515.00	6748.00	11(a)(iii)
b. Political Party Committees			11(b)
c. Other Political Committees (such as PACs)	2700.00	3700.00	11(c)
d. Total Contributions (add a iii, b and c) >	8215.00	10398.00	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.)	(3000.00)	(3000.00)	15
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees	-	-	16
17. Other Federal Receipts (Dividends, Interest, etc.)	-	-	17
18. Transfers from Nonfederal Account for Joint Activity	-	-	18
19. Total Receipts (add 11d, 12, 13, 14, 15, 16, 17, and 18) >	5215.00	12,398.00	19
20. Total Federal Receipts (subtract line 18 from line 19) >	5215.00	12,398.00	20
II. Disbursements			
21. Operating Expenditures:			
a. Shared Federal/Non-Federal Activity (from Schedule H4)			
i. Federal Share	-	-	21(a)(i)
ii. Non-Federal Share	-	-	21(a)(ii)
b. Other Federal Operating Expenditures	7427.02	11,688.77	21(b)
c. Total Operating Expenditures (add a i, a ii, and b) >	7427.02	11,688.77	21(c)
22. Transfers to Affiliated/Other Party Committees	-	-	22
23. Contributions to Federal Candidates/Committees and Other Political Committees	2000.00	2000.00	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) >	-	-	28(d)
29. Other Disbursements	9427.02	13,688.77	29
30. Total Disbursements (add 21c, 22, 23, 24, 25, 26, 27, 28d, and 29) >	9427.02	13,688.77	30
31. Total Federal Disbursements (subtract line 21 a ii from line 30) >	9427.02	13,688.77	31
III. Net Contributions/Operating Expenditures			
32. Total Contributions (other than loans)(from line 11d)	8215.00	8215.00	32
33. Total Contribution Refunds (from line 28d)	-	-	33
34. Net Contributions (other than loans)(subtract line 33 from 32)	8215.00	10,398.00	34
35. Total Federal Operating Expenditures (add 21 a i and 21 b) >	9427.02	13,688.77	35
36. Offsets to Operating Expenditures (from line 15)	(3000.00)	(3,000.00)	36
37. Net Operating Expenditures (subtract line 36 from 35) >	12427.02	16,688.77	37

SCHEDULE A

ITEMIZED RECEIPTS

Contributions From Persons Other Than Political Committees

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

PAGE 1 OF 1
FOR LINE NUMBER 11(a)

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

C00299396

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3

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Elaine Patricia Piccolomini 194 Washington Avenue Edison N.J. 08817 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Prudential Insurance Co Health Care Analyst Aggregate Year-to-Date > \$ 750.00	10/1/95	\$ 250.00
Arthur J. Gajarsa 9408 Firethorn Ct Potomac MD 20854 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Joseph Gajarsa Malcolm Weiner Attorney Aggregate Year-to-Date > \$ 500.00	10/9/95	\$ 500.00
Joseph Elham Cigrono 1000 S. Eads St. Apt 353 Arlington Va 22202 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Agency for International Development Chief - Cash Management Aggregate Year-to-Date > \$ 1500.00	10/17/95	\$ 500.00
Joseph K. Paolino 761 Lawrence St. Ste 210 Providence R.I. 02903 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Self-Employed Realtor Aggregate Year-to-Date > \$ 400.00	10/19/95	\$ 400.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupator Aggregate Year-to-Date > \$	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupator Aggregate Year-to-Date > \$	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupator Aggregate Year-to-Date > \$	Date (month, day, year)	Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional)

TOTAL This Period (last page this line number only)

\$ 1650.00

SCHEDULE A

ITEMIZED RECEIPTS

Other Political Committees

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

PAGE 1 OF 1
FOR LINE NUMBER 11C

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NAME OF COMMITTEE (in full)

Italian American Democratic Leadership Council

000299396

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Laborers Political League 905 16th Street, NW Washington DC 20006		9/29/95	\$1000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$ 1000.00	
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
National Association of Convenience Stores 1605 King Street Alexandria, Va. 22314	Stores	9/27/95	\$1000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	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
Friends of Sorrento 991 Sallicott Square Bldg Buffalo, NY 14203		10/11/95	\$200.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$ 200.00	
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Public Service Electric & Gas Co. PAC 80 Park Plaza Newark NJ 07101		10/11/95	\$200.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$ 200.00	
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
National Education Assoc PAC 1201 16th St NW Washington DC 20036		10/18/95	\$100.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$ 100.00	
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Hotel Restaurant Club Non-Employees Bar-Tending Union 709 8th Ave New York, NY 10036	Bar-Tending Union	11/2/95	\$100.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$ 100.00	
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
New York Hotel Motel Trades Council 707 8th Ave New York, NY 10036		11/10/95	\$100.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$ 100.00	

SUBTOTAL of Receipts This Page (optional)

TOTAL This Period (last page this line number only)

\$2700.00

SCHEDULE A

ITEMIZED RECEIPTS
Other Political Committees

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

PAGE 1 OF 1
FOR LINE NUMBER 15

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NAME OF COMMITTEE (In Full)

Italian American Democratic Leadership Council

000299396

A. Full Name, Mailing Address and ZIP Code Barca for Congress 1500 Washington Rd Lenoxa WI 53140	Name of Employer Occupation	Date (month, day, year) 8/28/95	Amount of Each Receipt this Period \$ (300.00)*
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$		
B. Full Name, Mailing Address and ZIP Code * Check Returned Due to Insufficient Funds	Name of Employer Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$		
C. Full Name, Mailing Address and ZIP Code	Name of Employer Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$		
D. Full Name, Mailing Address and ZIP Code	Name of Employer Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$		
E. Full Name, Mailing Address and ZIP Code	Name of Employer Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$		
F. Full Name, Mailing Address and ZIP Code	Name of Employer Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$		
G. Full Name, Mailing Address and ZIP Code	Name of Employer Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$		

SUBTOTAL of Receipts This Page (optional)

TOTAL This Period (last page this line number only)

\$ (300.00)

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SCHEDULE B

ITEMIZED DISBURSEMENTS

Contributions To Federal Candidates

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)

Italian American Democratic Leadership Council

000299396

A. Full Name, Mailing Address and ZIP Code

LAKEWOOD FOR CONGRESS
P.O. BOX 1553
BOISE ID 83701

Purpose of Disbursement

Voluntary Contribution
House Candidate
Disbursement for: Primary General
 Other (specify)

Date (month, day, year)

8/9/95

Amount of Each Disbursement This Period

\$ 2000.00

B. Full Name, Mailing Address and ZIP Code

Purpose of Disbursement

Disbursement for: Primary General
 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: Primary General
 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: Primary General
 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: Primary General
 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: Primary General
 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: Primary General
 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: Primary General
 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: Primary General
 Other (specify)

Date (month, day, year)

Amount of Each Disbursement This Period

SUBTOTAL of Disbursements This Page (optional)

TOTAL This Period (last page this line number only)

\$ 2000.00

SCHEDULE B

ITEMIZED DISBURSEMENTS

Operating Expenses

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

PAGE 1 OF 1

FOR LINE NUMBER 20

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

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Wells Bank PO Box 27025 Richmond Va 23261	Bank Fees Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	8/10 thru 12/95	\$52.00
Krasape & Spando 1828 U St NW Suite 1010 Wash DC 20036	Printing IADLC Newsletter Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	9/14/95	\$1777.00
Krasape & Spando 1828 U St NW Suite 1010 Wash DC 20036	Fuel, Delivery, Transportation Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	9/18/95	140.79
Charles G. ... 1034 The Mending Wall Columbia MD 2045	Office Supplies Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	9/19/95	\$29.38
Krasape & Spando 1828 U St NW Wash DC	Fundraising Event Expenses Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	12/11/95	4830.19
Joseph ... 1300 17th St Suite 400 Washington DC	Fundraising Event Expense Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	12/11/95	191.23
Ad ... PO Box 9212 Boston MA 02209	Ethnic Coordinating ... Expense Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	12/11/95	314.88
Krasape & Spando 1828 U St NW Wash DC	Fuel, Delivery, Transportation Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	12/11/95	91.55
L 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)

TOTAL This Period (last page this line number only)

\$ 7407.02

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
1-30-96

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

SB 1-30-96
PREPARER DATE PREPARED