

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines. **12FE4M5**
ITALIAN AMERICAN DEMOCRATIC LEADERSHIP COUNCIL

ADDRESS (number and street) **555 11th St NW**
Suite 401
 Check if different than previously reported. (ACC) **Washington DC 20004**

2. FEC IDENTIFICATION NUMBER ▼ CITY ▲ STATE ▲ ZIP CODE ▲
C C00299396 3. IS THIS REPORT NEW (N) OR AMENDED (A)

4. TYPE OF REPORT (Choose One)
(a) Quarterly Reports:
 April 15 Quarterly Report (Q1)
 July 15 Quarterly Report (Q2)
 October 15 Quarterly Report (Q3)
 January 31 Year-End Report (YE)
 July 31 Mid-Year Report (Non-election Year Only) (MY)
 Termination Report (TER)
(b) Monthly Report Due On:
 Feb 20 (M2) May 20 (M5) Aug 20 (M8) Nov 20 (M11) (Non-Election Year Only)
 Mar 20 (M3) Jun 20 (M6) Sep 20 (M9) Dec 20 (M12) (Non-Election Year Only)
 Apr 20 (M4) Jul 20 (M7) Oct 20 (M10) Jan 31 (YE)
(c) 12-Day PRE-Election Report for the:
 Primary (12P) General (12G) Runoff (12R)
 Convention (12C) Special (12S)
Election on / / in the State of
(d) 30-Day POST-Election Report for the:
 General (30G) Runoff (30R) Special (30S)
Election on / / in the State of

5. Covering Period / / 2021 through / / 2021

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.
Lazarus, Maggi, , ,
Type or Print Name of Treasurer

Signature of Treasurer *Lazarus, Maggi, , ,* [Electronically Filed] Date / / 2021

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 52 U.S.C. § 30109.

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 05/2016)

Page 2

Write or Type Committee Name

ITALIAN AMERICAN DEMOCRATIC LEADERSHIP COUNCIL

Report Covering the Period: From: / / To: / /

| | COLUMN A This Period | COLUMN B Calendar Year-to-Date |
|--|---------------------------------------|---------------------------------------|
| 6. (a) Cash on Hand January 1, <input type="text" value="2021"/> | <input type="text" value="26216.28"/> | <input type="text" value="26216.28"/> |
| (b) Cash on Hand at Beginning of Reporting Period..... | <input type="text" value="26216.28"/> | |
| (c) Total Receipts (from Line 19) | <input type="text" value="70280.00"/> | <input type="text" value="70280.00"/> |
| (d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)..... | <input type="text" value="96496.28"/> | <input type="text" value="96496.28"/> |
| 7. Total Disbursements (from Line 31)..... | <input type="text" value="37848.57"/> | <input type="text" value="37848.57"/> |
| 8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))..... | <input type="text" value="58647.71"/> | <input type="text" value="58647.71"/> |
| 9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D) | <input type="text" value="0.00"/> | |
| 10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D) | <input type="text" value="0.00"/> | |

This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission
999 E Street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE
of Receipts

Write or Type Committee Name

ITALIAN AMERICAN DEMOCRATIC LEADERSHIP COUNCIL

Report Covering the Period: From: / / To: / /

| I. Receipts | COLUMN A Total This Period | COLUMN B Calendar Year-to-Date |
|---|-------------------------------|-----------------------------------|
| 11. Contributions (other than loans) From: | | |
| (a) Individuals/Persons Other Than Political Committees | | |
| (i) Itemized (use Schedule A)..... | 4750.00 | 4750.00 |
| (ii) Unitemized | 530.00 | 530.00 |
| (iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶ | 5280.00 | 5280.00 |
| (b) Political Party Committees | 0.00 | 0.00 |
| (c) Other Political Committees (such as PACs)..... | 0.00 | 0.00 |
| (d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) | 5280.00 | 5280.00 |
| 12. Transfers From Affiliated/Other Party Committees..... | 0.00 | 0.00 |
| 13. All Loans Received | 0.00 | 0.00 |
| 14. Loan Repayments Received..... | 0.00 | 0.00 |
| 15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)..... | 0.00 | 0.00 |
| 16. Refunds of Contributions Made to Federal Candidates and Other Political Committees..... | 0.00 | 0.00 |
| 17. Other Federal Receipts (Dividends, Interest, etc.)..... | 65000.00 | 65000.00 |
| 18. Transfers from Non-Federal and Levin Funds | | |
| (a) Non-Federal Account (from Schedule H3)..... | 0.00 | 0.00 |
| (b) Levin Funds (from Schedule H5) | 0.00 | 0.00 |
| (c) Total Transfers (add 18(a) and 18(b)).. | 0.00 | 0.00 |
| 19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)).....▶ | 70280.00 | 70280.00 |
| 20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶ | 70280.00 | 70280.00 |

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 4

| II. Disbursements | COLUMN A Total This Period | COLUMN B Calendar Year-to-Date |
|--|-------------------------------|-----------------------------------|
| 21. Operating Expenditures: | | |
| (a) Allocated Federal/Non-Federal Activity (from Schedule H4) | | |
| (i) Federal Share | 0.00 | 0.00 |
| (ii) Non-Federal Share..... | 0.00 | 0.00 |
| (b) Other Federal Operating Expenditures | 4819.08 | 4819.08 |
| (c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) | 4819.08 | 4819.08 |
| 22. Transfers to Affiliated/Other Party Committees..... | 0.00 | 0.00 |
| 23. Contributions to Federal Candidates/Committees and Other Political Committees..... | 0.00 | 0.00 |
| 24. Independent Expenditures (use Schedule E) | 972.88 | 972.88 |
| 25. Coordinated Party Expenditures (52 U.S.C. § 30116(d)) (use Schedule F)..... | 0.00 | 0.00 |
| 26. Loan Repayments Made..... | 0.00 | 0.00 |
| 27. Loans Made..... | 0.00 | 0.00 |
| 28. Refunds of Contributions To: | | |
| (a) Individuals/Persons Other Than Political Committees | 0.00 | 0.00 |
| (b) Political Party Committees | 0.00 | 0.00 |
| (c) Other Political Committees (such as PACs)..... | 0.00 | 0.00 |
| (d) Total Contribution Refunds (add Lines 28(a), (b), and (c))..... | 0.00 | 0.00 |
| 29. Other Disbursements (Including Non-Federal Donations)..... | 32056.61 | 32056.61 |
| 30. Federal Election Activity (52 U.S.C. § 30101(20)) | | |
| (a) Allocated Federal Election Activity (from Schedule H6) | | |
| (i) Federal Share | 0.00 | 0.00 |
| (ii) "Levin" Share..... | 0.00 | 0.00 |
| (b) Federal Election Activity Paid Entirely With Federal Funds | 0.00 | 0.00 |
| (c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b)) | 0.00 | 0.00 |
| 31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) .. | 37848.57 | 37848.57 |
| 32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31)..... | 37848.57 | 37848.57 |

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 5

| III. Net Contributions/ Operating Expenditures | COLUMN A Total This Period | COLUMN B Calendar Year-to-Date |
|--|---------------------------------------|---|
| 33. Total Contributions (other than loans) (from Line 11(d), page 3) | 5280.00 | 5280.00 |
| 34. Total Contribution Refunds (from Line 28(d)) | 0.00 | 0.00 |
| 35. Net Contributions (other than loans) (subtract Line 34 from Line 33) | 5280.00 | 5280.00 |
| 36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) | 4819.08 | 4819.08 |
| 37. Offsets to Operating Expenditures (from Line 15, page 3)..... | 0.00 | 0.00 |
| 38. Net Operating Expenditures (subtract Line 37 from Line 36) | 4819.08 | 4819.08 |

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

| | | | |
|---|------------------------------|-----------------------------------|---|
| Use separate schedule(s) for each category of the Detailed Summary Page | | FOR LINE NUMBER: (check only one) | PAGE 6 OF 18 |
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 <input type="checkbox"/> 17 |

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

A. Contarino, Dave, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11705 OWL CREEK LN
 City Louisville State KY Zip Code 40223
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Contarino & Associates Occupation (for Individual) Consultant
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 06 / 15 / 2021
Transaction ID : SA11AI.5713
 Amount of Each Receipt this Period 1000.00
 Memo Item

B. DeConcini, Dennis, W., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5686 Dolphin Pl.
 City La Jolla State CA Zip Code 92037
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self-employed Occupation (for Individual) Retired US Senator
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 02 / 02 / 2021
Transaction ID : SA11AI.5715
 Amount of Each Receipt this Period 1000.00
 Memo Item

C. Genova, Angelo, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 494 Broad Street
 City Newark State NJ Zip Code 07102
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Genova Burns LLC Occupation (for Individual) lawyer
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 01 / 12 / 2021
Transaction ID : SA11AI.5698
 Amount of Each Receipt this Period 1000.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 3000.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

| | | | |
|---|------------------------------|-----------------------------------|---|
| Use separate schedule(s) for each category of the Detailed Summary Page | | FOR LINE NUMBER: (check only one) | PAGE 7 OF 18 |
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 <input type="checkbox"/> 17 |

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NAME OF COMMITTEE (In Full)
ITALIAN AMERICAN DEMOCRATIC LEADERSHIP COUNCIL

A. Palumbo, Benjamin, L., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1204 South Oakcrest Road
 City Arlington State VA Zip Code 22202
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) The Palumbo Company Occupation (for Individual) Consultant
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 01 / 11 / 2021
Transaction ID : SA11AI.5697
 Amount of Each Receipt this Period 250.00
 Memo Item

B. Rotellini, Felecia, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3444 North 49th St
 City Phoenix State AZ Zip Code 85018
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Zwilling Greek & Knecht Occupation (for Individual) Attorney
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 01 / 15 / 2021
Transaction ID : SA11AI.5699
 Amount of Each Receipt this Period 500.00
 Memo Item

C. Tapella, William, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9739 N. CR 2250 E
 City Ashmore State IL Zip Code 61912
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Tapella & Eberspacher LLC Occupation (for Individual) Attorney
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 05 / 03 / 2021
Transaction ID : SA11AI.5710
 Amount of Each Receipt this Period 1000.00
 Memo Item

| | |
|---|---------|
| SUBTOTAL of Receipts This Page (optional)..... | 1750.00 |
| TOTAL This Period (last page this line number only)..... | 4750.00 |

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

| | | | |
|---|------------------------------|-----------------------------------|--|
| Use separate schedule(s) for each category of the Detailed Summary Page | | FOR LINE NUMBER: (check only one) | PAGE 8 OF 18 |
| <input type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 |
| | | | <input checked="" type="checkbox"/> 17 |

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NAME OF COMMITTEE (In Full)
ITALIAN AMERICAN DEMOCRATIC LEADERSHIP COUNCIL

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. American Federation of Teachers

Mailing Address 555 New Jersey Avenue, NW

| | | |
|--------------------|-------------|-------------------|
| City Washington | State DC | Zip Code 20001 |
|--------------------|-------------|-------------------|

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) _____ Occupation (for Individual) _____

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
15000.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 01 | / | 29 | / | 2021 |

Transaction ID : SA17.5747

Amount of Each Receipt this Period
15000.00

Memo Item
Contribution - IE Only Account

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. Interdigital Communications Corporation

Mailing Address 515 C Street NE

| | | |
|--------------------|-------------|-------------------|
| City Washington | State DC | Zip Code 20002 |
|--------------------|-------------|-------------------|

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) _____ Occupation (for Individual) _____

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
15000.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 02 | / | 01 | / | 2021 |

Transaction ID : SA17.5749

Amount of Each Receipt this Period
15000.00

Memo Item
Contribution - IE Only Account

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. LIUNA BUILDING AMERICA

Mailing Address 905 16TH STREET, NW

| | | |
|--------------------|-------------|-------------------|
| City WASHINGTON | State DC | Zip Code 20006 |
|--------------------|-------------|-------------------|

FEC ID number of contributing federal political committee. **C C00568964**

Name of Employer (for Individual) _____ Occupation (for Individual) _____

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
10000.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 02 | / | 01 | / | 2021 |

Transaction ID : SA17.5751

Amount of Each Receipt this Period
10000.00

Memo Item
Contribution - IE Only Account

| | |
|--|----------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 40000.00 |
| TOTAL This Period (last page this line number only).....▶ | |

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

| | | | |
|---|------------------------------|-----------------------------------|--|
| Use separate schedule(s) for each category of the Detailed Summary Page | | FOR LINE NUMBER: (check only one) | PAGE 9 OF 18 |
| <input type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 |
| | | | <input checked="" type="checkbox"/> 17 |

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NAME OF COMMITTEE (In Full)
ITALIAN AMERICAN DEMOCRATIC LEADERSHIP COUNCIL

A. NATIONAL AIR TRAFFIC CONTROLLERS ASSOCIATION PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1325 MASSACHUSETTS AVE., NW

| | | |
|--------------------|-------------|-------------------|
| City WASHINGTON | State DC | Zip Code 20005 |
|--------------------|-------------|-------------------|

FEC ID number of contributing federal political committee. **C** C00238725

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
15000.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 02 | / | 01 | / | 2021 |

Transaction ID : SA17.5752

Amount of Each Receipt this Period
15000.00

Memo Item
Contribution - IE Only Account

B. The Messina Group Inc.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1155 Connecticut Ave, NW

| | | |
|--------------------|-------------|-------------------|
| City Washington | State DC | Zip Code 20036 |
|--------------------|-------------|-------------------|

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
10000.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 02 | / | 12 | / | 2021 |

Transaction ID : SA17.5754

Amount of Each Receipt this Period
10000.00

Memo Item
Contribution - IE Only Account

C.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address

| | | |
|------|-------|----------|
| City | State | Zip Code |
|------|-------|----------|

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
|-------|---|-------|---|-------------|

Amount of Each Receipt this Period

Memo Item

| | |
|--|----------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 25000.00 |
| TOTAL This Period (last page this line number only).....▶ | 65000.00 |

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

| | | | | |
|---|------------------------------|------------------------------|-----------------------------|------------------------------|
| <input checked="" type="checkbox"/> 21b | <input type="checkbox"/> 22 | <input type="checkbox"/> 23 | <input type="checkbox"/> 26 | <input type="checkbox"/> 27 |
| <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)
ITALIAN AMERICAN DEMOCRATIC LEADERSHIP COUNCIL

Full Name (Last, First, Middle Initial)

A. Herberger, Jeff, , ,

Mailing Address 10657 Glen Hanna Drive

City Laurel State MD Zip Code 20723

Purpose of Disbursement
Video Editing

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
01 / 08 / 2021

FEC Identification Number

C
Transaction ID : SB21B.5696
Amount of Each Disbursement this Period
650.00

Memo Item

Full Name (Last, First, Middle Initial)

B. Ingersoll, Chris, , ,

Mailing Address 10397 Bocal Raton Drive

City Ellicot City State MD Zip Code 21042

Purpose of Disbursement
Strategic Consulting Services

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
01 / 04 / 2021

FEC Identification Number

C
Transaction ID : SB21B.5682
Amount of Each Disbursement this Period
4000.00

Memo Item

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY

FEC Identification Number

C
Amount of Each Disbursement this Period

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

4650.00
4650.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

| | | | | |
|------------------------------|------------------------------|------------------------------|--|------------------------------|
| <input type="checkbox"/> 21b | <input type="checkbox"/> 22 | <input type="checkbox"/> 23 | <input type="checkbox"/> 26 | <input type="checkbox"/> 27 |
| <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input checked="" type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)
ITALIAN AMERICAN DEMOCRATIC LEADERSHIP COUNCIL

Full Name (Last, First, Middle Initial)
A. Conference of Presidents of Major Italian Organizations

Mailing Address P O Box 306

City Ivy State VA Zip Code 22945

Purpose of Disbursement Annual Dues

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 01 / 08 / 2021

FEC Identification Number: C

Transaction ID : **SB29.5695**

Amount of Each Disbursement this Period: 250.00

Memo Item

Full Name (Last, First, Middle Initial)
B. Erickson & Company

Mailing Address 38 Ivy Street, SE

City Washington State DC Zip Code 20003

Purpose of Disbursement Fundraising Consulting - IE Only Account

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 02 / 10 / 2021

FEC Identification Number: C

Transaction ID : **SB29.5729**

Amount of Each Disbursement this Period: 7500.00

Memo Item

Full Name (Last, First, Middle Initial)
C. Herberger, Jeff, , ,

Mailing Address 10657 Glen Hanna Drive

City Laurel State MD Zip Code 20723

Purpose of Disbursement Video Editing - IE Only Account

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 02 / 10 / 2021

FEC Identification Number: C

Transaction ID : **SB29.5733**

Amount of Each Disbursement this Period: 400.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 8150.00

TOTAL This Period (last page this line number only)..... ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

| | | | | |
|------------------------------|------------------------------|------------------------------|--|------------------------------|
| <input type="checkbox"/> 21b | <input type="checkbox"/> 22 | <input type="checkbox"/> 23 | <input type="checkbox"/> 26 | <input type="checkbox"/> 27 |
| <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input checked="" type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)

ITALIAN AMERICAN DEMOCRATIC LEADERSHIP COUNCIL

Full Name (Last, First, Middle Initial)

A. Ingersoll, Chris, , ,

Mailing Address 10397 Bocal Raton Drive

City Ellicot City State MD Zip Code 21042

Purpose of Disbursement Strategic Consulting - IE Only Account

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
02 / 10 / 2021

FEC Identification Number

C

Transaction ID : SB29.5731

Amount of Each Disbursement this Period

3200.00

Memo Item

Full Name (Last, First, Middle Initial)

B. Ingersoll, Chris, , ,

Mailing Address 10397 Bocal Raton Drive

City Ellicot City State MD Zip Code 21042

Purpose of Disbursement Strategic Consulting - IE Only Account

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
03 / 26 / 2021

FEC Identification Number

C

Transaction ID : SB29.5727

Amount of Each Disbursement this Period

3200.00

Memo Item

Full Name (Last, First, Middle Initial)

C. Ingersoll, Chris, , ,

Mailing Address 10397 Bocal Raton Drive

City Ellicot City State MD Zip Code 21042

Purpose of Disbursement Strategic Consulting - IE Only Account

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
04 / 02 / 2021

FEC Identification Number

C

Transaction ID : SB29.5725

Amount of Each Disbursement this Period

4000.00

Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

10400.00

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

| | | | | |
|------------------------------|------------------------------|------------------------------|--|------------------------------|
| <input type="checkbox"/> 21b | <input type="checkbox"/> 22 | <input type="checkbox"/> 23 | <input type="checkbox"/> 26 | <input type="checkbox"/> 27 |
| <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input checked="" type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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

A. Ingersoll, Chris, , ,

Full Name (Last, First, Middle Initial)

Date of Disbursement: MM / DD / YYYY
05 / 10 / 2021

Mailing Address 10397 Bocal Raton Drive

City Ellicot City State MD Zip Code 21042

Purpose of Disbursement Strategic Consulting - IE Only Account

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

FEC Identification Number: C

Transaction ID : SB29.5726

Amount of Each Disbursement this Period: 3846.15

Memo Item

B. Ingersoll, Chris, , ,

Full Name (Last, First, Middle Initial)

Date of Disbursement: MM / DD / YYYY
06 / 07 / 2021

Mailing Address 10397 Bocal Raton Drive

City Ellicot City State MD Zip Code 21042

Purpose of Disbursement Strategic Consulting - IE Only Account

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

FEC Identification Number: C

Transaction ID : SB29.5732

Amount of Each Disbursement this Period: 3846.15

Memo Item

C. Longthrow Productions

Full Name (Last, First, Middle Initial)

Date of Disbursement: MM / DD / YYYY
02 / 10 / 2021

Mailing Address 10657 Glen Hannah Drive

City Laurel State MD Zip Code 20723

Purpose of Disbursement Video Editing - IE Only Account

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

FEC Identification Number: C

Transaction ID : SB29.5740

Amount of Each Disbursement this Period: 2000.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 9692.30

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

| | | | | |
|------------------------------|------------------------------|------------------------------|--|------------------------------|
| <input type="checkbox"/> 21b | <input type="checkbox"/> 22 | <input type="checkbox"/> 23 | <input type="checkbox"/> 26 | <input type="checkbox"/> 27 |
| <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input checked="" type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)
ITALIAN AMERICAN DEMOCRATIC LEADERSHIP COUNCIL

A. Patuxent Consulting

Full Name (Last, First, Middle Initial)

Mailing Address 555 11th Street NW

City Washington State DC Zip Code 20004

Purpose of Disbursement
Phones, Printing, Software - IE Only Account

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 06 / 14 / 2021

FEC Identification Number: C
Transaction ID : SB29.5738
Amount of Each Disbursement this Period: 2476.47

Memo Item

B. Quigley, Carrie, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 11804 Bristolwood Terrace

City Laurel State MD Zip Code 20708

Purpose of Disbursement
ASL Interpreter - IE Only Account

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 03 / 26 / 2021

FEC Identification Number: C
Transaction ID : SB29.5734
Amount of Each Disbursement this Period: 240.00

Memo Item

C. Sandler, Reiff, Lamb, Rosenstein & Birkenstock, P.C.

Full Name (Last, First, Middle Initial)

Mailing Address 1025 Vermont Ave, NW Suite 300

City Washington State DC Zip Code 20005

Purpose of Disbursement
Legal Services - IE Only Account

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 03 / 26 / 2021

FEC Identification Number: C
Transaction ID : SB29.5728
Amount of Each Disbursement this Period: 795.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 3511.47

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

| | | | | |
|------------------------------|------------------------------|------------------------------|--|------------------------------|
| <input type="checkbox"/> 21b | <input type="checkbox"/> 22 | <input type="checkbox"/> 23 | <input type="checkbox"/> 26 | <input type="checkbox"/> 27 |
| <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input checked="" type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)
ITALIAN AMERICAN DEMOCRATIC LEADERSHIP COUNCIL

Full Name (Last, First, Middle Initial)

A. United Bank

Mailing Address 1667 K Street, NW

City Washington State DC Zip Code 20006

Purpose of Disbursement
Bank Charge - IE Only Account

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
06 / 07 / 2021

FEC Identification Number

C

Transaction ID : SB29.5724

Amount of Each Disbursement this Period

25.00

Memo Item

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify)

Category/Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y

FEC Identification Number

C

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y

FEC Identification Number

C

Amount of Each Disbursement this Period

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

25.00

31778.77

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

| | |
|---|--|
| (Use separate schedule(s) for each numbered line) | PAGE 16 OF 18 |
| | FOR LINE NUMBER: (check only one) |
| <input type="checkbox"/> 9 | <input checked="" type="checkbox"/> 10 |

NAME OF COMMITTEE (In Full)
ITALIAN AMERICAN DEMOCRATIC LEADERSHIP COUNCIL

| | | | |
|--|-------------|-------------------|---------------------------------------|
| A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Patuxent Consulting | | | Nature of Debt (Purpose): Robocall |
| Mailing Address 555 11th Street NW | | | |
| City Washington | State DC | Zip Code 20004 | |

| | | | |
|---|-------------------------------|---|--|
| Outstanding Balance Beginning This Period 486.30 | | Transaction ID : SD10.5690 | |
| Amount Incurred This Period 0.00 | Payment This Period 486.30 | Outstanding Balance at Close of This Period 0.00 | |

| | | | |
|--|-------|----------|---------------------------|
| B. Full Name (Last, First, Middle Initial) of Debtor or Creditor | | | Nature of Debt (Purpose): |
| Mailing Address | | | |
| City | State | Zip Code | |

| | | | |
|---|---------------------|---|--|
| Outstanding Balance Beginning This Period | | Outstanding Balance at Close of This Period | |
| Amount Incurred This Period | Payment This Period | | |

| | | | |
|--|-------|----------|---------------------------|
| C. Full Name (Last, First, Middle Initial) of Debtor or Creditor | | | Nature of Debt (Purpose): |
| Mailing Address | | | |
| City | State | Zip Code | |

| | | | |
|---|---------------------|---|--|
| Outstanding Balance Beginning This Period | | Outstanding Balance at Close of This Period | |
| Amount Incurred This Period | Payment This Period | | |

| | |
|--|------|
| 1) SUBTOTALS This Period This Page (optional)..... ▶ | 0.00 |
| 2) TOTALS This Period (last page this line number only)..... ▶ | 0.00 |
| 3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) ▶ | |
| 4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶ | |

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) ITALIAN AMERICAN DEMOCRATIC LEADERSHIP COUNCIL
FEC IDENTIFICATION NUMBER C C00299396

Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee Patuxent Consulting
Mailing Address 555 11th Street NW
City Washington State DC Zip Code 20004
Purpose of Expenditure RoboCall - IE Only Account
Name of Federal Candidate: OSSOFF, T. JONATHAN, , , Support
Office Sought: Senate State: GA
Disbursement For: Other (specify) Runoff

Full Name of Payee Patuxent Consulting
Mailing Address 555 11th Street NW
City Washington State DC Zip Code 20004
Purpose of Expenditure RoboCall - IE Only Account
Name of Federal Candidate: WARNOCK, RAPHAEL, , , Support
Office Sought: Senate State: GA
Disbursement For: Other (specify) Runoff

(a) SUBTOTAL of Itemized Independent Expenditures 486.58
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Lazarus, Maggi, , , [Electronically Filed] Date 07 / 26 / 2021
Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) ITALIAN AMERICAN DEMOCRATIC LEADERSHIP COUNCIL
FEC IDENTIFICATION NUMBER C C00299396

Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee Patuxent Consulting
Mailing Address 555 11th Street NW
City Washington State DC Zip Code 20004
Purpose of Expenditure Robocall - IE Only Account
Name of Federal Candidate: OSSOFF, T. JONATHAN, , , Support
Office Sought: Senate State: GA
Calendar Year-To-Date Per Election for Office Sought 729.73
Disbursement For: Other (specify) Runoff

Full Name of Payee Patuxent Consulting
Mailing Address 555 11th Street NW
City Washington State DC Zip Code 20004
Purpose of Expenditure Robocall - IE Only Account
Name of Federal Candidate: WARNOCK, RAPHAEL, , , Support
Office Sought: Senate State: GA
Calendar Year-To-Date Per Election for Office Sought 972.88
Disbursement For: Other (specify) Runoff

Table with 2 columns: Description and Amount. (a) SUBTOTAL of Itemized Independent Expenditures 486.30, (b) SUBTOTAL of Unitemized Independent Expenditures, (c) TOTAL Independent Expenditures 972.88

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Lazarus, Maggi, , , [Electronically Filed] Date 07 / 26 / 2021
Signature