

ITALIAN AMERICAN DEMOCRATIC LEADERSHIP COUNCIL

RECEIVED
FEDERAL ELECTION
COMMISSION
PUBLIC DISCLOSURE
DIVISION

HONORARY CO-CHAIRS

THE HONORABLE MARIO CUOMO

THE HONORABLE GERALD R. FERRARO

JUN 31 4 10 PM '98

BOARD OF ADVISORS

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HONORABLE PETER DEFAZZO
HONORABLE ROSA DELAURO
HONORABLE MIKE DOYLE
HONORABLE VIC FAZZO
HONORABLE THOMAS FOGLIETTA

HONORABLE JOHN J. LAPALCE
HONORABLE NICK LAMPSON
HONORABLE PATRICK J. LEAHY
HONORABLE FRANK MASCARA
HONORABLE GEORGE MILLER
HONORABLE JOHN JOSEPH MOAKLEY
HONORABLE JAMES L. OBERSTAR

HONORABLE FRANK FALLONE, JR.
HONORABLE BILL PASCRELL
HONORABLE NANCY PELOSI
HONORABLE ROBERT G. TORRICELLI
HONORABLE JAMES TRAFICANT, JR.
HONORABLE BRUCE VENTO

BOARD OF DIRECTORS

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PETER C. ALEGI
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ROBERT DEL TUFO
DOMENIC DIPRISCO
JOSEPH DIVINCENZO
PAUL A. EQUALE
MICHAEL A. FERRARA, JR.
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EDWARD FIRE
ANGELO J. GENOVA
ROBERT A. GEORGINE
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JANICE A. ZARRO
LEO C. ZETERETTI
KATRIN ZUNICH, MD

January 31, 1998


Mr. Edward D. Ryan
Report Analysis Division
Federal Election Commission
999 E St., NW
Washington DC 20463

Dear Mr. Ryan:

Re: January 31 Year End Report
G00299396

Please find enclosed the Italian American Democratic
Leadership Council's January 31 Year End Report.

Sincerely,


Charles A. Gubli
Treasurer

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee
(Summary Page)

RECEIVED
FEDERAL ELECTION
COMMISSION
PUBLIC DISCLOSURE
DIVISION

JAN 31 1 10 PM '98

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 checked="" 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, 1997 through December 31, 1997</i>		
6. (a) Cash on Hand January 1, 19 <i>97</i>	<i>\$6452.36</i>		\$
(b) Cash on Hand at Beginning of Reporting Period		\$ <i>7076.74</i>	
(c) Total Receipts (from Line 18)		\$ <i>37308.00</i>	\$ <i>54913.00</i>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)		\$ <i>44384.74</i>	\$ <i>61365.36</i>
7. Total Disbursements (from Line 30)		\$ <i>43879.58</i>	\$ <i>60860.20</i>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))		\$ <i>505.16</i>	\$ <i>505.16</i>
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)		\$	For further information contact: Federal Election Commission 899 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)		\$	

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. Gueli*
Signature of Treasurer: *[Signature]* Date: *1/31/97*

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)

DETAILED SUMMARY PAGE

OF RECEIPTS AND DISBURSEMENTS

PAGE 2, FEC FORM 3X

(revised 1/1/91)

NAME OF COMMITTEE	REPORT COVERING PERIOD		
Italian American Democratic Leadership Council	FROM 7/1/97	TO 12/31/97	
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)	\$ 8300.00	\$ 19,600.00	114
ii. Unitemized	2,175.00	3,980.00	114
iii. Total (add i and ii) >	10,475.00	23,580.00	114
b. Political Party Committees			114
c. Other Political Committees (such as PACs)	15,500.00	20,000.00	114
d. Total Contributions (add a iii, b and c) >	25,975.00	43,580.00	114
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	7,000.00	2,000.00	16
17. Other Federal Receipts (Dividends, Interest, etc.)	225.00	225.00	17
18. Transfers from Nonfederal Account for Joint Activity	703.00	703.00	18
19. Total Receipts (add 11d, 12, 13, 14, 15, 16, 17, and 18) >	37,308.00	54,913.00	19
20. Total Federal Receipts (subtract line 16 from line 19) >	30,225.00	47,820.00	20
II. Disbursements			
21. Operating Expenditures:			
a. Shared Federal/Non-Federal Activity (from Schedule H4)			
i. Federal Share	4800.29	4800.29	21a
ii. Non-Federal Share	7919.19	7919.19	21b
b. Other Federal Operating Expenditures	10850.10	15,884.72	21c
c. Total Operating Expenditures (add a i, a ii, and b) >	32,879.58	37,914.20	21c
22. Transfers to Affiliated/Other Party Committees			22
23. Contributions to Federal Candidates/Committees and Other Political Committees	6000.00	7000.00	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. Individuals/Persons Other Than Political Committees	-	-	28a
b. Political Party Committees	-	-	28b
c. Other Political Committees (such as PACs)	-	-	28c
d. Total Contribution Refunds (add a, b and c) >	-	-	28c
29. Other Disbursements	1500.00	15,940.00	29
30. Total Disbursements (add 21c, 22, 23, 24, 25, 26, 27, 28d, and 29) >	43,849.58	60,860.20	30
31. Total Federal Disbursements (subtract line 21 a i from line 30) >	36,650.39	53,631.01	31
III. Net Contributions/Operating Expenditures			
32. Total Contributions (other than loans)(from line 11d)	25,975.00	43,580.00	32
33. Total Contribution Refunds (from line 28d)	-	-	33
34. Net Contributions (other than loans)(subtract line 33 from 32)	25,975.00	43,580.00	34
35. Total Federal Operating Expenditures (add 21 a i and 21 b) >	25,650.39	42,631.01	35
36. Offsets to Operating Expenditures (from line 15)	-	-	36
37. Net Operating Expenditures (subtract line 36 from 35) >	25,650.39	42,631.01	37

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 1 OF 3

FOR LINE NUMBER

Contributions from persons Other Than Political Committees

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

600299396

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Eugene A Corti Jr 4613 Perusse Parkway Chevy Chase, MD 20815 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	State of Maryland Dept. of Licenses Director Aggregate Year-to-Date > \$ 1250.00	8/29/97	\$ 1250.-
Sandra Durant 501 West 110th Apt 8th Newark, N.Y. 10025 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Partner Durant & Durant Principal Aggregate Year-to-Date > \$ 250.00	8/29/97	\$ 250.-
John Cafaro 7245 Belmont Ave Youngstown OH 44504 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	The Cafaro Company Owner Aggregate Year-to-Date > \$ 250.00	9/15/97	\$ 250.00
Vincent Janvin 2510 Virginia Ave, NW #503 Washington DC 20007 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Sheet Metal Workers International Assoc Exec Director Aggregate Year-to-Date > \$ 250.00	9/15/97	\$ 250.00
Peter Alegi Via Vent. Settembre 1 Rome Italy 00187 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Alegi Associates Principal Aggregate Year-to-Date > \$ 500.00	9/15/97	\$ 500.00
Robert Blarico 138 N Jackson St Arlington Va 22201 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Walt Sheaf & Blarico Principal Aggregate Year-to-Date > \$ 1250.00	9/15/97	\$ 250.00
Janice Gardo 601 West Chapman Street Alexandria Va 22301 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Malmeckrad Medical Attorney Aggregate Year-to-Date > \$ 1250.00	9/15/97	\$ 250.00

SUBTOTAL of Receipts This Page (optional)

\$ 5750.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 2 OF 3

FOR LINE NUMBER 11a

Contributions from persons Other Than Political Committees

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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
Joseph E. Venuta 1351 Via Island Dr Osprey, FL 34229 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Not Employed - Retired Occupation: _____ Aggregate Year-to-Date > \$ 250.00	9/25/97	\$ 250.00
Neil Thomas Proff 273B Oakway Street NW Apt 6 Washington DC 20008 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Conroy Cyber Bernhard McPherson & Hand Occupation: Attorney Aggregate Year-to-Date > \$ 250.00	9/25/97	\$ 250.00
Phillip Piccigallo 10308 Mystic Meadow Way Oakton VA 22124 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Sons of Halifax Occupation: Prc. Director Aggregate Year-to-Date > \$ 750.00	9/25/97	\$ 250.00
John Orlando 5965 Earl Terrace Bethesda, MD 20816 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Timmons Company Occupation: President Aggregate Year-to-Date > \$ 250.00	9/25/97	\$ 250.00
John Loebl 1400 Crescent Place NW Washington DC 20009 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	United States Information Agency Occupation: _____ Aggregate Year-to-Date > \$ 250.00	9/25/97	\$ 250.00
Robert Landino 29 Old Salt Works Rd Westbrook, Conn 06498 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Paralus Landino Design Group Occupation: Designer Aggregate Year-to-Date > \$ 250.00	9/25/97	\$ 250.00
Joe J. Vincenzo 34 Chapel Woods W. Williamsville NY 14221 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	All State Occupation: Insurance Agent Aggregate Year-to-Date > \$ 250.00	9/25/97	\$ 250.00

SUBTOTAL of Receipts This Page (optional)

\$ 2250.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE **3** OF **3**

FOR LINE NUMBER **11a1**

Contributions from persons Other Than Political Committees

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NAME OF COMMITTEE (In Full)			
Italian American Democratic Leadership Council		000299396	
<p>A. Full Name, Mailing Address and ZIP Code Michael G. Costello P.O. Box 33702 Washington DC 20033</p>			
<p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>		<p>Name of Employer: Self-employed Date (month, day, year): 9/25/17 Occupation: Aggregate Year-to-Date: \$ 250.00</p>	<p>Amount of Each Receipt this Period: \$ 250.00</p>
<p>B. Full Name, Mailing Address and ZIP Code Joseph Cornell 123 N Wilcox Blvd Los Angeles, CA 90007</p>			
<p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>		<p>Name of Employer: Palumbo & Cornell Date (month, day, year): 9/25/17 Occupation: Public Affairs Aggregate Year-to-Date: \$ 250.00</p>	<p>Amount of Each Receipt this Period: \$ 250.00</p>
<p>C. Full Name, Mailing Address and ZIP Code Joseph Ticheva 15 E 87th Street New York, New York</p>			
<p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>		<p>Name of Employer: Confidential Securities Date (month, day, year): 12/31/17 Occupation: Financial Advisor Aggregate Year-to-Date: \$ 300.00</p>	<p>Amount of Each Receipt this Period: \$ 300.00</p>
<p>D. Full Name, Mailing Address and ZIP Code</p>			
<p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>		<p>Name of Employer: Date (month, day, year): Occupation: Aggregate Year-to-Date: \$</p>	<p>Amount of Each Receipt this Period:</p>
<p>E. Full Name, Mailing Address and ZIP Code</p>			
<p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>		<p>Name of Employer: Date (month, day, year): Occupation: Aggregate Year-to-Date: \$</p>	<p>Amount of Each Receipt this Period:</p>
<p>F. Full Name, Mailing Address and ZIP Code</p>			
<p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>		<p>Name of Employer: Date (month, day, year): Occupation: Aggregate Year-to-Date: \$</p>	<p>Amount of Each Receipt this Period:</p>
<p>G. Full Name, Mailing Address and ZIP Code</p>			
<p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>		<p>Name of Employer: Date (month, day, year): Occupation: Aggregate Year-to-Date: \$</p>	<p>Amount of Each Receipt this Period:</p>

SUBTOTAL of Receipts This Page (optional)	\$ 800.00
TOTAL This Period (last page this line number only)	\$ 830.00

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 1 OF 2
FOR LINE NUMBER 112

Other Political Committees

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

4. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
<i>Independent Insurance Agents of America 412 18th St SE, Ste 200, Wash DC 20003</i>	—	<i>7/29/97</i>	<i>\$ 250.00</i>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$	
5. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
<i>Service Employees International Union 1313 L St, NW, Wash DC 20005</i>	—	<i>8/29/97</i>	<i>\$ 500.00</i>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$	
6. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
<i>Amalgamated Transit Union 5015 Wisconsin Ave, NW Wash DC 20006</i>	—	<i>8/29/97</i>	<i>\$ 1250.00</i>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$	
7. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
<i>Laborers Political League 705 16th St NW Wash DC 20006</i>	—	<i>9/25/97</i>	<i>\$ 200.00</i>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$	
8. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
<i>American Maritime Officers 650 4th Ave, Brooklyn NY 11232</i>	—	<i>9/25/97</i>	<i>\$ 1250.00</i>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$	
9. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
<i>Airline Pilots Association 1625 Monroe Ave, NW Wash DC 20036</i>	—	<i>9/25/97</i>	<i>\$ 250.00</i>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$	
10. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
<i>Moscova For Congress P.O. Box 1109, Washington VA 22101</i>	—	<i>9/25/97</i>	<i>\$ 500.00</i>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$	

SUBTOTAL of Receipts This Page (optional) *\$ 15,000.00*

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

Other Political Committees

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

PAGE *2* OF *2*
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
<i>Friends of Lou Magazzo</i> <i>P.O. Box 872, Vineland NJ 08360</i>	—	<i>9/25/97</i>	<i>\$250.00</i>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$	
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
<i>Leontine March Program for Active Citizenship</i> <i>Leontine March P.O. Box 2066</i> <i>Wilmington Delaware 19805</i>	—	<i>12/29/97</i>	<i>\$250.00</i>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$	
C. Full Name, Mailing Address and ZIP Code	Name of Employer	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):	Occupation	Aggregate Year-to-Date > \$	
D. Full Name, Mailing Address and ZIP Code	Name of Employer	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):	Occupation	Aggregate Year-to-Date > \$	
E. Full Name, Mailing Address and ZIP Code	Name of Employer	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):	Occupation	Aggregate Year-to-Date > \$	
F. Full Name, Mailing Address and ZIP Code	Name of Employer	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):	Occupation	Aggregate Year-to-Date > \$	
G. Full Name, Mailing Address and ZIP Code	Name of Employer	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):	Occupation	Aggregate Year-to-Date > \$	

SUBTOTAL of Receipts This Page (optional)

\$500.00

TOTAL This Period (last page this line number only)

\$15,500.00

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 1 OF 1
FOR LINE NUMBER 10

Refunds Of Contributions Made to Federal Candidates

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NAME OF COMMITTEE (In Full)

Italian American Democratic Leadership Council

C00299396

A. Full Name, Mailing Address and ZIP Code <i>Barca For Congress 2500 Washington Rd Kenosha, WI 53140</i>	Name of Employer Occupation Aggregate Year-to-Date > \$ <i>2000.00</i>	Date (month, day, year) <i>11/12/97</i>	Amount of Each Receipt this Period <i>\$ 2000.00</i>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			
B. Full Name, Mailing Address and ZIP Code	Name of Employer Occupation 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):			
C. Full Name, Mailing Address and ZIP Code	Name of Employer Occupation 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):			
D. Full Name, Mailing Address and ZIP Code	Name of Employer Occupation 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):			
E. Full Name, Mailing Address and ZIP Code	Name of Employer Occupation 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):			
F. Full Name, Mailing Address and ZIP Code	Name of Employer Occupation 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):			
G. Full Name, Mailing Address and ZIP Code	Name of Employer Occupation 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):			

SUBTOTAL of Receipts This Page (optional)

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

\$ 2000.00

Refund of Federal Receipt Deposited Into Non-Federal Account

SCHEDULE A ITEMIZED RECEIPTS

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

PAGE 1 OF 1
FOR LINE NUMBER 17

Transfer From Non-Federal Acc - Other Federal Receipts

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

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Angelo J. Genova 354 Eisenhower Parkway Livingston, New Jersey 07039 Receipt For: <input type="checkbox"/> Other (specify): <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	Genova, Burns @ Vernonia Attorney Aggregate Year-to-Date \$ 625.00	10/7/97	\$ 625.00
B. Full Name, Mailing Address and ZIP Code James M. Burns 160 West State Street Trenton NJ 08608 Receipt For: <input type="checkbox"/> Other (specify): <input type="checkbox"/> Primary <input type="checkbox"/> General	Genova, Burns @ Vernonia Attorney Aggregate Year-to-Date \$ 625.00	10/7/97	\$ 625.00
C. Full Name, Mailing Address and ZIP Code Receipt For: <input type="checkbox"/> Other (specify): <input type="checkbox"/> Primary <input type="checkbox"/> General	Name of Employer Occupation Aggregate Year-to-Date \$ 6	Date (month, day, year)	Amount of Each Receipt this Period
D. Full Name, Mailing Address and ZIP Code Receipt For: <input type="checkbox"/> Other (specify): <input type="checkbox"/> Primary <input type="checkbox"/> General	Name of Employer Occupation Aggregate Year-to-Date \$	Date (month, day, year)	Amount of Each Receipt this Period
E. Full Name, Mailing Address and ZIP Code Receipt For: <input type="checkbox"/> Other (specify): <input type="checkbox"/> Primary <input type="checkbox"/> General	Name of Employer Occupation Aggregate Year-to-Date \$	Date (month, day, year)	Amount of Each Receipt this Period
F. Full Name, Mailing Address and ZIP Code Receipt For: <input type="checkbox"/> Other (specify): <input type="checkbox"/> Primary <input type="checkbox"/> General	Name of Employer Occupation Aggregate Year-to-Date \$	Date (month, day, year)	Amount of Each Receipt this Period
G. Full Name, Mailing Address and ZIP Code Receipt For: <input type="checkbox"/> Other (specify): <input type="checkbox"/> Primary <input type="checkbox"/> General	Name of Employer Occupation 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)

\$ 1250.00
\$ 1250.00

Refund of Non-Fed Expense Paid For From Federal Account

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 1 OF 2

FOR LINE NUMBER 17

Transfer From Non-Federal Acct. Other Federal Receipts

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

CD0299396

A. Full Name, Mailing Address and ZIP Code National Education & Leadership Awards Sons of Italy Foundation 219 E St NE Washington DC 20002	Name of Employer Occupation Aggregate Year-to-Date > \$ 1000.00	Date (month, day, year) 10/7/97	Amount of Each Receipt this Period \$ 1000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			
B. Full Name, Mailing Address and ZIP Code			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			
C. Full Name, Mailing Address and ZIP Code			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			
D. Full Name, Mailing Address and ZIP Code			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			
E. Full Name, Mailing Address and ZIP Code			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			
F. Full Name, Mailing Address and ZIP Code			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			
G. Full Name, Mailing Address and ZIP Code			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			

SUBTOTAL of Receipts This Page (optional) \$ 1000.00

TOTAL This Period (last page this line number only)

SCHEDULE B

ITEMIZED DISBURSEMENTS
Operating Expenses

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

PAGE 1 OF 4
FOR LINE NUMBER 212

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
Rosapepe & Spando 1828 11th Street, NW Washington DC 20036	IAIDLC Exp (FAX, Phone, Yards) Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	May 97 7/21/97	\$212.51
Rosapepe & Spando	IAIDLC Exp. (FAX, Phone, Yards) Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	April 97 7/21/97	\$197.76
Effrey C. Benedetto 351 Davenport St NW Wash DC 20008	Consultant Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	7/21/97	\$700.00
Jessica Gyysia 1654 Paul Blood NW Washington DC 20010	Salary Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	7/8-7/18/97 7/21/97	\$800.00
Charlotte Lewis 2408 Oliver St Hyattsville, MD 20782	Consultant Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	7/21/97	725.00
Jessica Gyysia	Salary Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	7/21-8/1/97 8/8/97	\$800.00
Jessica Gyysia	Stamps, Photocopy Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	8/8/97	\$82.90
Rosapepe & Spando	IAIDLC Exp. (FAX, Phone, Stamps etc) Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	June 97 9/15/97	\$335.15
Printing Solutions Inc 1603 N. Sterling Blvd Sterling Va. 20164	Printing Newsletter Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	9/15/97	\$1012.10

SUBTOTAL of Disbursements This Page (optional) 4865.42

TOTAL This Period (last page this line number only)

SCHEDULE B

ITEMIZED DISBURSEMENTS
Operating Expenses

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

PAGE **2** OF **4**

FOR LINE NUMBER **210**

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
Jessica Gyarsa	Salary 9/29-10/10/97 Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/10/97	\$ 800.00
Connell Associates 3701 Larchmont Blvd Los Angeles CA 90007	Purpose of Disbursement: <i>Post Office</i> Pure FAX Copy	10/23/97	\$ 79.82
Melanie Gyarsa	Purpose of Disbursement: <i>Credit Card Gift</i> Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/23/97	\$ 221.50
Jessica Gyarsa	Purpose of Disbursement: <i>Salary</i> Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	11/18/97	\$ 400.00
Printing Solutions Inc	Purpose of Disbursement: <i>Printing/Envelopes</i> Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	11/20/97	\$ 123.00
Pasajope @ Spanso	Purpose of Disbursement: <i>Spanso</i> ADIC Exp. (Postage, FAX, Year) <i>Spanso</i> Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	11/20/97	\$ 2278.32
Jessica Gyarsa	Purpose of Disbursement: <i>Salary</i> Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	11/28/97	\$ 800.00
Jessica Gyarsa	Purpose of Disbursement: <i>Salary</i> Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	11/28/97	\$ 800.00
Janice Karro 44 West Chapman Street Alexandria Va 22301	Purpose of Disbursement: <i>Flowers</i> Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	12/5/97	\$ 114.45

SUBTOTAL of Disbursements This Page (optional)

\$ 5617.09

TOTAL This Period (last page this line number only)

SCHEDULE B

ITEMIZED DISBURSEMENTS
Operating Expenses

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

PAGE 3 OF 4
FOR LINE NUMBER 215

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
Office Dept 1900 L Street NW Washington DC	Office Supplies Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	12/5/97	\$ 197.51
Rasappe & Sparto	Computer Purchase Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	12/5/97	\$ 600.00
Jessica Gyysia	Salary 12/1-12/13/97 Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	12/12/97	\$ 800.00
Rasappe & Sparto	ADDC Exp. (FAX, Xerox, Phone etc) Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	12/12/97	\$ 160.40
Jessica Gyysia	Salary 12/15-12/19/97 Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	12/15/97	\$ 400.00
Insty Prints 1800 M Street NW Washington DC 20036	Newsletter Mailing Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	12/15/97	\$ 807.24
U.S. Postmaster	Newsletter Postage Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	12/16/97	\$ 2016.00
Jessica Gyysia	Salary 12/22-12/26/97 Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	12/26/97	\$ 400.00
Jessica Gyysia	Salary 12/29-1/1 Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	12/31/97	\$ 400.00

SUBTOTAL of Disbursements This Page (optional)

\$ 5781.15

TOTAL This Period (last page this line number only)

SCHEDULE B

ITEMIZED DISBURSEMENTS
Operating Expenses

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committees.

NAME OF COMMITTEE (In Full) 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
Kinko's 4102 New York Avenue Washington DC 20005	Printing/Xeroxing Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/24/97	477.46
Jessica Gajusa	Office Supplies Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/24/97	145.88
Lina Lora 1850 S NW Washington DC 20036	Coffee for Meeting Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	11/2/97	16.20
Doug DeMink	Photography Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	11/7/97	410.00
Jessica Gajusa	Salary 11/3-11/7/97 Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	11/7/97	400.00
Cafe Sesto 827 15th Street NW Wash 20006	Catering Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	11/10/97	1850.00
LR Downing Jewelers 6935 Wisconsin Ave Cherry Hill MD 20815	Tiffany vase Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	11/10/97	48.00
Rozappe & Spando	1AOC Express Print, Postage, Xerox, FAX Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	11/10/97	1129.75
Rozappe & Spando	Courier - Hand letter Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	11/10/97	109.15

SUBTOTAL of Disbursements This Page (optional) 4586.44
TOTAL This Period (last page this line number only) 20,850.10

SCHEDULE B

ITEMIZED DISBURSEMENTS
Contributions To Federal Candidates

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
Vitaliano for Congress P.O. Box 60692 Spoken Island NY 10304	Contributor DENC. Vitaliano House Candidate Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	7/29/97 9/29/97	\$1000.00 \$4000.00
Fasceff for Congress 63 Quartz Lane, Paterson NJ 07501	Contributor Bill Fasceff House Candidate Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/10/97	\$500.00
Campson for Congress P.O. Box 2578 Beaumont TX 77700	Contributor Patric Campson House Candidate Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/18/97	\$500.00
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)

TOTAL This Period (last page this line number only) **\$6000.00**

ALLOCATION RATIOS

NAME OF COMMITTEE
Italian American Democratic Leadership Council 000299396

ALLOCATION RATIOS FOR INDIVIDUAL FUNDRAISING EVENTS, EXEMPT ACTIVITIES, AND SHARED DIRECT CANDIDATE SUPPORT APPEARING ON THIS REPORT.

Methods of allocation:

- I. **FUNDRAISING** activities are allocated using the "funds received method" where the federal proportion of expenses must equal the federal proportion of monies raised.
- II. **EXEMPT** activities are allocated using the "time and space method" where the federal proportion of disbursements is based on the proportion of time or space devoted to federal candidates.
- III. Shared **DIRECT CANDIDATE** support activities are allocated according to benefit expected to be derived, where the federal proportion of disbursements is based on the benefit derived by federal candidates from the activity.

<p>NAME OF ACTIVITY OR EVENT: <i>September 9, 1997 Salute to the Italian American Democratic Members of Congress</i></p> <p>ACTIVITY IS: <input checked="" type="checkbox"/> FUNDRAISING <input type="checkbox"/> EXEMPT <input type="checkbox"/> DIRECT CANDIDATE SUPPORT</p> <p>CHECK IF THE RATIO IS: <input checked="" type="checkbox"/> NEW <input type="checkbox"/> REVISED <input type="checkbox"/> SAME AS PREVIOUSLY REPORTED</p>	<p>FEDERAL % <i>40%</i></p>	<p>NON-FEDERAL % <i>60%</i></p>
<p>NAME OF ACTIVITY OR EVENT</p> <p>ACTIVITY IS: <input type="checkbox"/> FUNDRAISING <input type="checkbox"/> EXEMPT <input type="checkbox"/> DIRECT CANDIDATE SUPPORT</p> <p>CHECK IF THE RATIO IS: <input type="checkbox"/> NEW <input type="checkbox"/> REVISED <input type="checkbox"/> SAME AS PREVIOUSLY REPORTED</p>	<p>FEDERAL %</p>	<p>NON-FEDERAL %</p>
<p>NAME OF ACTIVITY OR EVENT</p> <p>ACTIVITY IS: <input type="checkbox"/> FUNDRAISING <input type="checkbox"/> EXEMPT <input type="checkbox"/> DIRECT CANDIDATE SUPPORT</p> <p>CHECK IF THE RATIO IS: <input type="checkbox"/> NEW <input type="checkbox"/> REVISED <input type="checkbox"/> SAME AS PREVIOUSLY REPORTED</p>	<p>FEDERAL %</p>	<p>NON-FEDERAL %</p>
<p>NAME OF ACTIVITY OR EVENT</p> <p>ACTIVITY IS: <input type="checkbox"/> FUNDRAISING <input type="checkbox"/> EXEMPT <input type="checkbox"/> DIRECT CANDIDATE SUPPORT</p> <p>CHECK IF THE RATIO IS: <input type="checkbox"/> NEW <input type="checkbox"/> REVISED <input type="checkbox"/> SAME AS PREVIOUSLY REPORTED</p>	<p>FEDERAL %</p>	<p>NON-FEDERAL %</p>
<p>NAME OF ACTIVITY OR EVENT</p> <p>ACTIVITY IS: <input type="checkbox"/> FUNDRAISING <input type="checkbox"/> EXEMPT <input type="checkbox"/> DIRECT CANDIDATE SUPPORT</p> <p>CHECK IF THE RATIO IS: <input type="checkbox"/> NEW <input type="checkbox"/> REVISED <input type="checkbox"/> SAME AS PREVIOUSLY REPORTED</p>	<p>FEDERAL %</p>	<p>NON-FEDERAL %</p>
<p>NAME OF ACTIVITY OR EVENT</p> <p>ACTIVITY IS: <input type="checkbox"/> FUNDRAISING <input type="checkbox"/> EXEMPT <input type="checkbox"/> DIRECT CANDIDATE SUPPORT</p> <p>CHECK IF THE RATIO IS: <input type="checkbox"/> NEW <input type="checkbox"/> REVISED <input type="checkbox"/> SAME AS PREVIOUSLY REPORTED</p>	<p>FEDERAL %</p>	<p>NON-FEDERAL %</p>
<p>NAME OF ACTIVITY OR EVENT</p> <p>ACTIVITY IS: <input type="checkbox"/> FUNDRAISING <input type="checkbox"/> EXEMPT <input type="checkbox"/> DIRECT CANDIDATE SUPPORT</p> <p>CHECK IF THE RATIO IS: <input type="checkbox"/> NEW <input type="checkbox"/> REVISED <input type="checkbox"/> SAME AS PREVIOUSLY REPORTED</p>	<p>FEDERAL %</p>	<p>NON-FEDERAL %</p>

RECEIPT SCHEDULE H3
(effective 1/1/91)

**TRANSFERS FROM
NON-FEDERAL ACCOUNTS**

PAGE / OF /
FOR LINE 16

NAME OF COMMITTEE Italian American Democratic Leadership Council	TOTAL AMOUNT TRANSFERRED
NAME OF ACCOUNT Italian American Democratic Leadership Council - Non Federal Account	DATE OF RECEIPT 10/1/97
\$ 7083.00	

	BREAKDOWN OF TRANSFER RECEIVED		
	ADMIN./VOTER DRIVE AMOUNT	DIRECT FUND-RAISING AMOUNT	EXEMPT ACTIVITY/DIRECT CANDIDATE SUPPORT
i) Total Administrative/Voter Drive			
ii) Direct Fundraising (List Events-Amount for Each)			
a) September 1, 1997 - \$1000			
b) Italian American Members of Congress			
c) Italian American Members of Congress			
d) Italian American Members of Congress			
e) Total Amount Transferred For Direct Fundraising		\$ 7083.00	
iii) Exempt Activity/Direct Candidate Support (List Events-Amount For Each)			
a) _____			
b) _____			
c) _____			
d) _____			
e) Total Amount Transferred For Exempt Activity/Direct Candidate Support			

	BREAKDOWN OF TRANSFER RECEIVED		
	ADMIN./VOTER DRIVE AMOUNT	DIRECT FUND-RAISING AMOUNT	EXEMPT ACTIVITY/DIRECT CANDIDATE SUPPORT
i) Total Administrative/Voter Drive			
ii) Direct Fundraising (List Events-Amount for Each)			
a) _____			
b) _____			
c) _____			
d) _____			
e) Total Amount Transferred For Direct Fundraising			
iii) Exempt Activity/Direct Candidate Support (List Events-Amount For Each)			
a) _____			
b) _____			
c) _____			
d) _____			
e) Total Amount Transferred For Exempt Activity/Direct Candidate Support			

	TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED		
	ADMIN./VOTER DRIVE AMOUNT	DIRECT FUND-RAISING AMOUNT	EXEMPT ACTIVITY/DOS
SUBTOTAL THIS PAGE		\$ 7083.00	
TOTAL THIS PERIOD		\$ 7083.00	\$ 7083.00

NAME OF COMMITTEE

Italian American Democratic Leadership Council

000299396

A. FULL NAME, MAILING ADDRESS & ZIP CODE	PURPOSE/EVENT	DATE	TOTAL AMOUNT	FEDERAL SHARE	NON-FEDERAL SHARE
Jessica Gajara 154 Parkwood NW Washington DC 20010	Salary 8/15-8/15/97	8/15/97	\$800.-	\$300.-	\$480.-
CATEGORY: <input type="checkbox"/> ADMINISTRATIVE/VOTER DRIVE <input checked="" type="checkbox"/> FUNDRAISING <input type="checkbox"/> EXEMPT EVENT YEAR-TO-DATE: \$ DIRECT CANDIDATE SUPPORT					
B. FULL NAME, MAILING ADDRESS & ZIP CODE	PURPOSE/EVENT	DATE	TOTAL AMOUNT	FEDERAL SHARE	NON-FEDERAL SHARE
Angela De Miah 3200 Wisconsin Ave NW Washington DC 20016	Photos	9/10/97	\$325.-	\$130.-	\$195.-
CATEGORY: <input type="checkbox"/> ADMINISTRATIVE/VOTER DRIVE <input checked="" type="checkbox"/> FUNDRAISING <input type="checkbox"/> EXEMPT EVENT YEAR-TO-DATE: \$ DIRECT CANDIDATE SUPPORT					
C. FULL NAME, MAILING ADDRESS & ZIP CODE	PURPOSE/EVENT	DATE	TOTAL AMOUNT	FEDERAL SHARE	NON-FEDERAL SHARE
Rosario Siano 1200 K Street NW Washington DC 20036	Phone, FAX Relay	9/15/97	\$115.99	\$46.40	\$69.59
CATEGORY: <input type="checkbox"/> ADMINISTRATIVE/VOTER DRIVE <input checked="" type="checkbox"/> FUNDRAISING <input type="checkbox"/> EXEMPT EVENT YEAR-TO-DATE: \$ DIRECT CANDIDATE SUPPORT					
D. FULL NAME, MAILING ADDRESS & ZIP CODE	PURPOSE/EVENT	DATE	TOTAL AMOUNT	FEDERAL SHARE	NON-FEDERAL SHARE
Jessica Gajara	Salary 8/15-8/15/97	9/15/97	\$800.-	\$300	\$480
CATEGORY: <input type="checkbox"/> ADMINISTRATIVE/VOTER DRIVE <input checked="" type="checkbox"/> FUNDRAISING <input type="checkbox"/> EXEMPT EVENT YEAR-TO-DATE: \$ DIRECT CANDIDATE SUPPORT					
E. FULL NAME, MAILING ADDRESS & ZIP CODE	PURPOSE/EVENT	DATE	TOTAL AMOUNT	FEDERAL SHARE	NON-FEDERAL SHARE
Courty Hennigan	Data Entry Consultant	9/5/97	\$266.-	\$106.00	\$160.-
CATEGORY: <input type="checkbox"/> ADMINISTRATIVE/VOTER DRIVE <input checked="" type="checkbox"/> FUNDRAISING <input type="checkbox"/> EXEMPT EVENT YEAR-TO-DATE: \$ DIRECT CANDIDATE SUPPORT					
F. FULL NAME, MAILING ADDRESS & ZIP CODE	PURPOSE/EVENT	DATE	TOTAL AMOUNT	FEDERAL SHARE	NON-FEDERAL SHARE
CATEGORY: <input type="checkbox"/> ADMINISTRATIVE/VOTER DRIVE <input type="checkbox"/> FUNDRAISING <input type="checkbox"/> EXEMPT EVENT YEAR-TO-DATE: \$ DIRECT CANDIDATE SUPPORT					
SUBTOTAL OF JOINT FEDERAL AND NON-FEDERAL ACTIVITY THIS PAGE			\$1206.99	\$402.40	\$804.59
TOTAL THIS PERIOD (last page for each line only)(Fed. share to 21 a i and non-Fed. share to 21 a j) ...					
TOTAL THIS PERIOD FOR THE NON-FEDERAL SHARE (used for line 31 of the detailed summary page) ...					

JOINT FEDERAL/NON-FEDERAL
ACTIVITY SCHEDULE

NAME OF COMMITTEE

Italian American Democratic Leadership Council

000299396

A. FULL NAME, MAILING ADDRESS & ZIP CODE	PURPOSE/EVENT	DATE	TOTAL AMOUNT	FEDERAL SHARE	NON-FEDERAL SHARE
Insty Print 1800 M Street NW Washington DC 20036	Program Printing	9/5/97	\$ 273.50	\$ 109.50	\$ 164.00
CATEGORY: <input type="checkbox"/> ADMINISTRATIVE/VOTER DRIVE <input checked="" type="checkbox"/> FUNDRAISING <input type="checkbox"/> EXEMPT EVENT YEAR-TO-DATE: \$ _____ <input type="checkbox"/> DIRECT CANDIDATE SUPPORT					
B. FULL NAME, MAILING ADDRESS & ZIP CODE	PURPOSE/EVENT	DATE	TOTAL AMOUNT	FEDERAL SHARE	NON-FEDERAL SHARE
Rosapete Spando	FAX, Year Postage Delivery	9/15/97	\$ 3159.76	\$ 1263.90	\$ 1895.86
CATEGORY: <input type="checkbox"/> ADMINISTRATIVE/VOTER DRIVE <input checked="" type="checkbox"/> FUNDRAISING <input type="checkbox"/> EXEMPT EVENT YEAR-TO-DATE: \$ _____ <input type="checkbox"/> DIRECT CANDIDATE SUPPORT					
C. FULL NAME, MAILING ADDRESS & ZIP CODE	PURPOSE/EVENT	DATE	TOTAL AMOUNT	FEDERAL SHARE	NON-FEDERAL SHARE
Printing Solutions 1603 D Sterling Blvd Sterling Va 20154	Post Cards Printing	9/15/97	\$ 468.-	\$ 176.-	\$ 292.-
CATEGORY: <input type="checkbox"/> ADMINISTRATIVE/VOTER DRIVE <input checked="" type="checkbox"/> FUNDRAISING <input type="checkbox"/> EXEMPT EVENT YEAR-TO-DATE: \$ _____ <input type="checkbox"/> DIRECT CANDIDATE SUPPORT					
D. FULL NAME, MAILING ADDRESS & ZIP CODE	PURPOSE/EVENT	DATE	TOTAL AMOUNT	FEDERAL SHARE	NON-FEDERAL SHARE
Printing Solutions	Reproducible Printing	9/15/97	\$ 579.-	\$ 232.-	\$ 347.-
CATEGORY: <input type="checkbox"/> ADMINISTRATIVE/VOTER DRIVE <input checked="" type="checkbox"/> FUNDRAISING <input type="checkbox"/> EXEMPT EVENT YEAR-TO-DATE: \$ _____ <input type="checkbox"/> DIRECT CANDIDATE SUPPORT					
E. FULL NAME, MAILING ADDRESS & ZIP CODE	PURPOSE/EVENT	DATE	TOTAL AMOUNT	FEDERAL SHARE	NON-FEDERAL SHARE
Jessica Gajusa	Free Sample Transportation	9/15/97	\$ 118.09	\$ 47.23	\$ 70.86
CATEGORY: <input type="checkbox"/> ADMINISTRATIVE/VOTER DRIVE <input checked="" type="checkbox"/> FUNDRAISING <input type="checkbox"/> EXEMPT EVENT YEAR-TO-DATE: \$ _____ <input type="checkbox"/> DIRECT CANDIDATE SUPPORT					
F. FULL NAME, MAILING ADDRESS & ZIP CODE	PURPOSE/EVENT	DATE	TOTAL AMOUNT	FEDERAL SHARE	NON-FEDERAL SHARE
Jessica Gajusa	Salary 9/1-9/30/97	9/15/97	\$ 800.00	\$ 320.00	\$ 480.00
CATEGORY: <input type="checkbox"/> ADMINISTRATIVE/VOTER DRIVE <input checked="" type="checkbox"/> FUNDRAISING <input type="checkbox"/> EXEMPT EVENT YEAR-TO-DATE: \$ _____ <input type="checkbox"/> DIRECT CANDIDATE SUPPORT					
SUBTOTAL OF JOINT FEDERAL AND NON-FEDERAL ACTIVITY THIS PAGE			\$ 5378.35	\$ 2148.63	\$ 3249.72
TOTAL THIS PERIOD (last page for each line only) (Fed. share to 21 a i and non-Fed. share to 21 a ii)					
TOTAL THIS PERIOD FOR THE NON-FEDERAL SHARE (used for line 31 of the detailed summary 92-99)					

JOINT FEDERAL/NON-FEDERAL
ACTIVITY SCHEDULE

NAME OF COMMITTEE

Italian American Democratic Leadership Council

000299396

A. FULL NAME, MAILING ADDRESS & ZIP CODE	PURPOSE/EVENT	DATE	TOTAL AMOUNT	FEDERAL SHARE	NON-FEDERAL SHARE
Bice Restaurant 601 Penn Avenue NW Washington DC 2004	Catering	9/24/97	\$2,143.14	1177.26	1765.88
CATEGORY: <input type="checkbox"/> ADMINISTRATIVE/VOTER DRIVE <input checked="" type="checkbox"/> FUNDRAISING <input type="checkbox"/> EXEMPT EVENT YEAR-TO-DATE: 97 DIRECT CANDIDATE SUPPORT					
B. FULL NAME, MAILING ADDRESS & ZIP CODE	PURPOSE/EVENT	DATE	TOTAL AMOUNT	FEDERAL SHARE	NON-FEDERAL SHARE
Printing Solutions	Envelope Printing	9/29/97	490.-	196.-	294.-
CATEGORY: <input type="checkbox"/> ADMINISTRATIVE/VOTER DRIVE <input checked="" type="checkbox"/> FUNDRAISING <input type="checkbox"/> EXEMPT EVENT YEAR-TO-DATE: 97 DIRECT CANDIDATE SUPPORT					
C. FULL NAME, MAILING ADDRESS & ZIP CODE	PURPOSE/EVENT	DATE	TOTAL AMOUNT	FEDERAL SHARE	NON-FEDERAL SHARE
Kelly Ann Gallagher 4407 Occoquan Sq Alexandria Va 22309	Cash	9/29/97	191.-	36.-	55.-
CATEGORY: <input type="checkbox"/> ADMINISTRATIVE/VOTER DRIVE <input checked="" type="checkbox"/> FUNDRAISING <input type="checkbox"/> EXEMPT EVENT YEAR-TO-DATE: 97 DIRECT CANDIDATE SUPPORT					
D. FULL NAME, MAILING ADDRESS & ZIP CODE	PURPOSE/EVENT	DATE	TOTAL AMOUNT	FEDERAL SHARE	NON-FEDERAL SHARE
Jessica Gyusa	Salary 9/15-9/29/97	9/29/97	800.-	30.-	480.-
CATEGORY: <input type="checkbox"/> ADMINISTRATIVE/VOTER DRIVE <input checked="" type="checkbox"/> FUNDRAISING <input type="checkbox"/> EXEMPT EVENT YEAR-TO-DATE: 97 DIRECT CANDIDATE SUPPORT					
E. FULL NAME, MAILING ADDRESS & ZIP CODE	PURPOSE/EVENT	DATE	TOTAL AMOUNT	FEDERAL SHARE	NON-FEDERAL SHARE
CATEGORY: <input type="checkbox"/> ADMINISTRATIVE/VOTER DRIVE <input type="checkbox"/> FUNDRAISING <input type="checkbox"/> EXEMPT EVENT YEAR-TO-DATE: 97 DIRECT CANDIDATE SUPPORT					
F. FULL NAME, MAILING ADDRESS & ZIP CODE	PURPOSE/EVENT	DATE	TOTAL AMOUNT	FEDERAL SHARE	NON-FEDERAL SHARE
CATEGORY: <input type="checkbox"/> ADMINISTRATIVE/VOTER DRIVE <input type="checkbox"/> FUNDRAISING <input type="checkbox"/> EXEMPT EVENT YEAR-TO-DATE: 97 DIRECT CANDIDATE SUPPORT					
SUBTOTAL OF JOINT FEDERAL AND NON-FEDERAL ACTIVITY THIS PAGE			4324.14	1729.26	2594.88
TOTAL THIS PERIOD (last page for each line only)(Fed. share to 21 a i and non-Fed. share to 21 a ii)			2009.48	4800.29	
TOTAL THIS PERIOD FOR THE NON-FEDERAL SHARE (used for line 31 of the detailed summary page)					7229.19

Transfer Of Non-Federal Receipts Deposited In Federal Account

SCHEDULE B

ITEMIZED DISBURSEMENTS
OTHER DISBURSEMENTS

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

PAGE 1 OF 1
FOR LINE NUMBER 29

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Italian American Democratic Leadership Council

000299396

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
Service Employees International Union 1313 L St NW Wash DC 20005		10/1/97	\$ 500.00
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)

TOTAL This Period (last page this line number only)

\$ 500.00

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 checked="" type="checkbox"/> Hand Delivered	Date of Receipt <i>1-31-58</i>
<input type="checkbox"/> First Class Mail	POSTMARKED
<input type="checkbox"/> Registered/Certified Mail	POSTMARKED
<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>Ses</i> PREPARER	<i>1-31-58</i> DATE PREPARED