Image# 201601279004661872		_		PAGE 1 / 11
FEC AN	PORT OF RECE	ENTS	Office Use	Only
1. NAME OF TYP COMMITTEE (in full)		le: If typing, type e lines.	2FE4M5	
ADDRESS (number and street)	400 Eye St., N.W.			
Check if different	uite 900 Vashington		DC 20005	
2. FEC IDENTIFICATION NUMB	ER V CITY	ST	ATE Z	
C C00299396	3. IS THIS REPORT	× NEW (N) OR	AMENDED (A)	
 (Choose One) (a) Quarterly Reports: April 15 Quarterly Report (Q1) July 15 Quarterly Report (Q2) October 15 Quarterly Report (Q3) 	PRE-Election Report for the: Co	May 20 (M5) Jun 20 (M6) Jul 20 (M7) mary (12P) nvention (12C)		Nov 20 (M11) (Non-Election Year Only) Dec 20 (M12 (Non-Election Year Only) Jan 31 (YE) Runoff (12R)
 January 31 Year-End Report (YE) July 31 Mid-Year Report (Non-election Year Only) (MY) Termination Report (TER) 	Election on (d) 30-Day POST -Election Report for the: Election on	neral (30G)	Runoff (30R)	State of Special (30S) n the State of
5. Covering Period	01 / Y Y Y Y 01 2015	through	D / Y Y Y 31 2015	
Signature of Treasurer	Ifred Rotandaro	ectronically Filed] Date	e 01 / 27	2016 / Y Y Y Y
NOTE: Submission of false, erroneous, Office Use Only	or incomplete information may subje	ct the person signing this	FEC	of 2 U.S.C. §437g. FORM 3X v. 12/2004

01/27/2016 19 : 00

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

Page 2

FEC Form 3X (Rev. 02/2003) Write or Type Committee Name

ITALIAN AMERICAN DEMOCRATIC LEADERSHIP COUNCIL

R	Report Covering the Period: From: 07	M / D D / Y Y Y Y 01 2015 To:	12 31 Y Y Y Y Y 2015
		COLUMN A This Period	COLUMN B Calendar Year-to-Date
6.	(a) Cash on Hand January 1, 2015		11454.44
	(b) Cash on Hand at Beginning of Reporting Period	9826.32	
	(c) Total Receipts (from Line 19)	1925.00	3700.00
	 (d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) 	11751.32	15154.44
7.	Total Disbursements (from Line 31)	5862.50	9265.62
8.	Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	5888.82	5888.82
9.	Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10.	Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	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

Image#	2016	012790	04661874
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DETAILED SUMMARY PAGE

of Receipts

Page 3

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name

ITALIAN AMERICAN DEMOCRATIC LEADERSHIP COUNCIL

R	eport Covering the Period: From: 07	/ D D / Y Y Y Y 01 2015	To: 12 / 31 / 2015					
	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)	1500.00	3250.00					
	(ii) Unitemized (iii) TOTAL (add	425.00	450.00					
	Lines 11(a)(i) and (ii)▶	7 1925.00	3700.00					
	(b) Political Party Committees(c) Other Political Committees	0.00	0.00					
	 (such as PACs) (d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry 	0.00	0.00					
12.	Totals to Line 33, page 5)	1925.00	3700.00					
	Party Committees	0.00	0.00					
13.	All Loans Received	0.00	0.00					
	Loan Repayments Received Offsets To Operating Expenditures (Refunds, Rebates, etc.)	0.00	0.00					
16.	(Carry Totals to Line 37, page 5) Refunds of Contributions Made to Federal Candidates and Other	0.00	0.00					
17.	Political Committees Other Federal Receipts	0.00	0.00					
	(Dividends, Interest, etc.) Transfers from Non-Federal and Levin Funds (a) Non-Federal Account	0.00	0.00					
	(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))►	1925.00	3700.00					
20.	Total Federal Receipts (subtract Line 18(c) from Line 19)►	1925.00	3700.00					

I

DETAILED SUMMARY PAGE

1. Operating Expenditures: (a) Allocated Federal/Non-Federal Activity (from Schedule H4) (b) Pederal Share 0.00 (c) Total Operating Expenditures (a) Other Federal Operating Expenditures 0.00 (c) Total Operating Expenditures 0.00 (c) Total Operating Expenditures 5112.50 (c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) > 5112.50 (c) Total Committees (add 21(a)(i), (a)(ii), and (b)) > 5112.50 (c) Total Operating Expenditures (c) Contributions to Federal Candidates/Committees 500.00 (c) Total Operating Expenditures (c) 0.00 (c) Contributions to Federal Candidates/Committees 0.00 (c) 0.00 (c) 0.00 (c) 0.00 (c) Loans Made. 0.00 0.00 (c) 0	Year-to-Date
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(b) Other Federal Operating Expenditures 5112.50 (c) Total Operating Expenditures (add 21(a)(), (a)(i), and (b)) ► Transfers to Affiliated/Other Party Committees 500.00 Contributions to Federal Candidates/Committees 500.00 Independent Expenditures (use Schedule F) 0.00 Loan Repayments Made 0.00 Loan Repayments Made 0.00 Loan Repayments Made 0.00 (a) Individuals/Persons Other Than Political Committees 0.00 (b) Political Party Committees 0.00 (c) Other Political Committees 0.00 (a) Individuals/Persons Other Than Political Committees 0.00 (c) Other Political Committees 0.00 (d) Total Contribution Refunds (add Lines 28(a), (b), and (c)) 0.00 (d) Total Contribution Refunds 0.00 (i) Federal Election Activity (from Schedule H6) 0.00 (i) Tevin" Share 0.00 (ii) "Levin" Share 0.00 (ii) "Levin" Share 0.00 (ii) "Levin" Share 0.00 (iii) "Levin" Share 0.00 (iii) "Levin" Share 0.00 (ivit) Federal Election Activity (add <td< td=""><td>7</td></td<>	7
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Loan Repayments Made	
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(c) Other Political Committees (such as PACs)	0.00
(c) Other Political Committees (such as PACs)	0.0
(such as PACs) 0.00 (d) Total Contribution Refunds (add Lines 28(a), (b), and (c)) 0.00 Other Disbursements	0.0
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))	0.0
(add Lines 28(a), (b), and (c))	- 7
(add Lines 28(a), (b), and (c))	
(add Lines 28(a), (b), and (c))	0.0
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With Federal Funds 0.00 (c) Total Federal Election Activity (add	-7
(c) Total Federal Election Activity (add	0.0
	0.00
	-7
Total Disbursements (add Lines 21(c), 22,	
23, 24, 25, 26, 27, 28(d), 29 and 30(c)) 5862.50	9265.6
Total Federal Disbursements	
(subtract Line 21(a)(ii) and Line 30(a)(ii)	
from Line 31) > 5862.50	9265.62

FE6AN026

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DETAILED SUMMARY PAGE

of Disbursements

III. Net Contributions/Operating Ex- penditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
3. Total Contributions (other than loans) (from Line 11(d), page 3)	1925.00	3700.00
 Total Contribution Refunds (from Line 28(d)) 	0.00	0.00
5. Net Contributions (other than loans) (subtract Line 34 from Line 33)	1925.00	3700.00
 Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) 	5112.50	7220.62
 Offsets to Operating Expenditures (from Line 15, page 3) 	0.00	0.00
3. Net Operating Expenditures (subtract Line 37 from Line 36)	5112.50	7220.62

SCHEDULE A (FEC Form 3X) ITEMIZED DECEIDTS

FOR LINE NUMBER:

(check only one)

PAGE 6 OF

11

		for each category of the		11a		11	lb 🗌	11c	12							
		Detailed Summary Page		13		14		15	16	17						
Any information copied from such Reports and or for commercial purposes, other than using th	Statements mane and a	ay not be sold or used by any pe iddress of any political committee	erson fo to sol	or the icit cor	purp ntrib	pos outic	se of s ons fro	soliciting om suc	g contribu h commi	utions ttee.						
NAME OF COMMITTEE (In Full)	RATIC LE	ADERSHIP COUNCIL														
Full Name (Last, First, Middle Initial) A. Arthur Gajarsa			Date of Receipt													
Mailing Address 48 Flint Lane (PO226)				м м 08	/	E	07	/ Y	ү ү 2015	Y						
City Holderness	State NJ	Zip Code 03245						SA11AI.								
FEC ID number of contributing federal political committee.	С			mount	: of	Ea	ich Re	eceipt th	nis Perioo 100	0.00						
Name of Employer Retired	Occupation None															
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1750.00														
Full Name (Last, First, Middle Initial) B. Alfred Rotandaro				Date of	Re	ecei	ipt									
Mailing Address 5904 Ashby Manor Place	Mailing Address 5904 Ashby Manor Place						08 / D D / Y E Y E Y E Y 08 14 2015									
City	State	Zip Code					-	6A11AI.								
Alexandria	VA	22310	A	mount	of	Ea	ich Re	eceipt th	nis Perioo	d						
FEC ID number of contributing federal political committee.	s and the second					5										
Name of Employer Matz-Blancato & Associates	Occupation President															
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 500.00														
Full Name (Last, First, Middle Initial)				Date of	Re	ecei	ipt									
Mailing Address				M = M	/	Γ	D D	/ Y	Y Y	Y						
City	State	Zip Code	A	Amount of Each Receipt this Period												
FEC ID number of contributing federal political committee.	С															
Name of Employer	Occupation															
Receipt For: Primary General Other (specify) ▼		Year-to-Date ▼														
SUBTOTAL of Receipts This Page (optional)	<u> </u>					-			1500).00						
TOTAL This Period (last page this line numbe		· · · · · ·				7			1500).00						

	CHEDULE B (FEC Form 3X)					NUMBER: PAGE 7 OF 11									
ITEMIZED DISBURSEMENTS Use separate schedure for each category of Detailed Summary P						k only 21b 27	one	e) 22 28a		23 28b	F	24 280	;	25 29	26 30b
	ny information copied from such Reports and State for commercial purposes, other than using the na														
	NAME OF COMMITTEE (In Full)	FIC LEAD		JUN	ICI	L									
Α.	Full Name (Last, First, Middle Initial) Patuxent Consulting						C	Date of	f Di				V	Y	Y
	Mailing Address 1400 Eye Street NW Suite 900							08		1	14			015	
	City Washington Purpose of Disbursement	State DC	Zip Code 20005					Trans	act	ion ID):	SB21E	8.487	4	
	Strategic Consulting Services						A	moun	t of	Each	C	isburs	emen	t this	Period
	Candidate Name			Cate Ty	egor ype	·y/				7				95	0.00
	Office Sought: House Disburse Senate President State: District:	ement For: Primary Other (spe	General cify) ▼												
в.	Full Name (Last, First, Middle Initial) Patuxent Consulting							Date of	f Di	sburse			Y Y	Y	Y
	Mailing Address 1400 Eye Street NW Suite 900						08 31 2015								
	City Washington	State DC	Zip Code 20005					Trans	sact	ion IE):	SB21I	3.487	5	
	Purpose of Disbursement Strategic Consulting Services						А	moun	t of	Each	C	isburs	emen	t this	Period
	Candidate Name			Cate Ty	egor ype	·y/	-[,	2	. ,		137	7.18
	Office Sought: House Disburse Senate President State: District:	ment For: Primary Other (spec	General cify) ▼		<u>, , , , , , , , , , , , , , , , , , , </u>					-		,			
<u>с</u> .	Full Name (Last, First, Middle Initial) Patuxent Consulting							Date of	f Di						
	Mailing Address 1400 Eye Street NW Suite 900							10 ^M	/	C)9			015	Y
	City Washington Purpose of Disbursement				Trans	sact	ion ID):	SB21	3.487	6				
	Strategic Consulting Services Candidate Name		Category/ Type				moun	t of	Each	C)isburs	emen		Period 0.00	
	Office Sought: House Disburse Senate President State: District:	ment For: Primary Other (spe	General cify) ▼		<u>) </u>					7					
⊢	SUBTOTAL of Disbursements This Page (optional).							-		л л					7.18

SCHEDULE B (FEC Form 3X)	llse senarate se	Use separate schedule(s)				NUMBER: PAGE 8 OF 11									
IEMIZED DISBURSEIVIEN IS for each estageny of the					c only 21b 27) 22 28a		23 28b		24 280		25 29	26 30b	
Any information copied from such Reports and State or for commercial purposes, other than using the na															
NAME OF COMMITTEE (IN Full)	FIC LEADERS	SHIP CC	UN	ICI	L										
Full Name (Last, First, Middle Initial) A. Patuxent Consulting									sburse		ent	V	· · · · ·	V	
Mailing Address 1400 Eye Street NW Suite 900						11 06 2015									
City Washington Purpose of Disbursement	State Zip C DC 2000					-	Frans	sacti	ion ID)::	SB21E	8.487	7		
Strategic Consulting Services						A	noun	t of	Each	Di	sburs	emen	t this	Period	
Candidate Name			Cate Ty	egor /pe	y/				7				75	0.00	
Senate President	ement For: Primary Other (specify)	General													
State: District: Full Name (Last, First, Middle Initial) B. Patuxent Consulting							ate o		sburse		ent	Y Y	Y	Y	
Mailing Address 1400 Eye Street NW Suite 900						11 06 2015									
City Washington Purpose of Disbursement	State Zip C DC 2000						Trans	sact	ion ID) :	SB21E	8.487	8		
Strategic Consulting Services						Aı	noun	t of	Each	Di	sburs	emen	t this	Period	
Candidate Name			Cate Ty	egor /pe	y/				,		. ,		27	6.77	
Senate President	ement For: Primary Other (specify)	General ,													
State: District: Full Name (Last, First, Middle Initial)															
C. Patuxent Consulting						_	ate o		sburse		ent	Y Y	Y	Y	
Mailing Address 1400 Eye Street NW Suite 900							11		3	30		2	015		
City Washington Purpose of Disbursement	Washington DC 20005								ion ID)::	SB21E	8.487	9		
Strategic Consulting Services Candidate Name	[Category/ Type				Amount of Each Disbursement this Period 750.00									
Office Sought: House Disburse Senate President State: District:	ement For: Primary Other (specify)	General		/pc			_		7						
SUBTOTAL of Disbursements This Page (optional) TOTAL This Period (last page this line number only						Γ			7		7		1776		

SCHEDULE B (FEC Form 3X)							GE 9	OF 11				
ITEMIZED DISBURSEMENTS	Use separate schedule(s) (ch			y one)								
	Detailed Summary Page						25 29	26 30b				
Any information copied from such Reports and Stater or for commercial purposes, other than using the nar	nents may not be sold or used ne and address of any politica	d by ar I comm	ny per nittee	son for the	purpose	of soliciting	g contribu h commit	itions tee.				
NAME OF COMMITTEE (In Full)												
ITALIAN AMERICAN DEMOCRAT	IC LEADERSHIP CC	ONU	CIL									
Full Name (Last, First, Middle Initial) A. Lucy Winterhalder				Date o	of Disburs	ement						
Mailing Address 1400 Street, NW		07		27 Y	2015	Ŷ						
City	State Zip Code			Trop	oootion II	D - 68248	4070					
Washington	DC 20005			Iran	saction I	D : SB21B.	4872					
Purpose of Disbursement Travel Reimbursement				Amour	nt of Eacl	n Disburser	nent this	Period				
Candidate Name		Categ Typ					24	9.66				
Office Sought: House Disburser Senate President	nent For: Primary General Other (specify) ▼				,							
State: District:												
Full Name (Last, First, Middle Initial) B.				Date of	of Disburs	sement						
Mailing Address				N	/ D	D / Y	ŶŶŶ	Y				
City	State Zip Code											
Purpose of Disbursement		-		- Amour	nt of Fac	n Disburser	nent this	Period				
Candidate Name	date Name Categ											
Office Sought: House Disburser Senate President	nent For: Primary General Other (specify) ▼	- 190										
State: District:												
Full Name (Last, First, Middle Initial)				Date o	of Disburs	sement						
Mailing Address												
City	State Zip Code											
Purpose of Disbursement	-											
Candidate Name	Categ Typ		Amour	nt of Eacl	n Disburser	nent this	Period					
Office Sought: House Disburser Senate President State: District:	nent For: Primary General Other (specify) ▼											
SUBTOTAL of Disbursements This Page (optional)							249	9.66				
TOTAL This Period (last page this line number only)				H			5103	3.61				

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SCHEDULE B (FEC Form 3X)		NUMBER: PAGE 10 OF 11							
ITEMIZED DISBURSEMENTS	ZED DISBURSEMENTS								
	Detailed Summary Page	21b	22 X 23 24 25 26 28a 28b 28c 29 30b						
	Any information copied from such Reports and Statements may not be sold or used by any pe or for commercial purposes, other than using the name and address of any political committee								
NAME OF COMMITTEE (In Full)									
	IC LEADERSHIP C	OUNCIL	1						
Full Name (Last, First, Middle Initial) A. LEAHY FOR U.S. SENATOR COM	Date of Disbursement								
Mailing Address PO BOX 1042			07 21 2015						
City S MONTPELIER	State Zip Code VT 05601		Transaction ID : SB23.4880						
Purpose of Disbursement			-						
Contribution Candidate Name			Amount of Each Disbursement this Period						
PATRICK J LEAHY		Category/ Type	500.00						
Office Sought: House Disburser	nent For: 2016 Primary General Other (specify) v								
State: VT District: 00									
Full Name (Last, First, Middle Initial)			Date of Disbursement						
Mailing Address									
City	State Zip Code								
Purpose of Disbursement			Amount of Foot Diskumon and this Deviad						
Candidate Name		Category/ Type	Amount of Each Disbursement this Period						
Office Sought: House Disburser Senate President	nent For: Primary General Other (specify) ▼								
State: District:									
Full Name (Last, First, Middle Initial)			Date of Disbursement						
Mailing Address									
City	State Zip Code								
Purpose of Disbursement									
Candidate Name	Category/ Type	Amount of Each Disbursement this Period							
Office Sought: House Disburser Senate President District:	nent For: Primary General Other (specify) ▼								
SUBTOTAL of Disbursements This Page (optional)			500.00						
TOTAL This Period (last page this line number only)			500.00						

SCHEDULE B (FEC Form 3X)	FOR LINE	NUMBER: PAGE 11 OF 11							
ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the	(check only	one)						
	Detailed Summary Page	21b	22 23 24 25 26 28a 28b 28c X 29 30b						
Any information copied from such Reports and Sta or for commercial purposes, other than using the	ed by any perso al committee to	on for the purpose of soliciting contributions							
ITALIAN AMERICAN DEMOCRA	ATIC LEADERSHIP CO	JUNCIL							
Full Name (Last, First, Middle Initial)									
A. Ohio Senate Democrats	Date of Disbursement								
Mailing Address 340 E Fulton St			10 / D D / Y Y Y Y 26 2015						
City	State Zip Code		Transaction ID : SB29.4883						
Columbus Purpose of Disbursement	OH 43215								
Contribution-Non-Federal			Amount of Each Disbursement this Period						
Candidate Name		Category/	250.00						
Office Sought: House Disbur	sement For:	Туре							
Senate	Primary General								
State: District:	Other (specify)								
Full Name (Last, First, Middle Initial)									
B.			Date of Disbursement						
Mailing Address			M = M / D = D / Y = Y = Y						
Maning Address									
City	State Zip Code								
Purpose of Disbursement									
			Amount of Each Disbursement this Period						
Candidate Name		Category/ Type							
Office Sought: House Disbur	sement For:	1300							
Senate President	Primary General								
State: District:	Other (specify)								
Full Name (Last, First, Middle Initial)									
С.			Date of Disbursement						
Mailing Address			M M / D D / Y Y Y Y						
City	State Zip Code								
Purpose of Disbursement									
Candidate Name	Category/ Type	Amount of Each Disbursement this Period							
	rsement For:								
Senate President	Primary General Other (specify) ▼								
State: District:									
		ľ	250.00						
SUBTOTAL of Disbursements This Page (optiona	l)	•••••	250.00						
TOTAL This Period (last page this line number o	nly)	••••••	250.00						