

Italian American Democratic Leadership Council

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The Honorable Mario Cuomo

The Honorable Geraldine Ferraro

Board of Advisors

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Hon. Robert Brady
Hon. Mike Caputo
Hon. Peter DeFazio
Hon. Diana DeGette
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Hon. John J. LaFalce
Hon. Nick Lampson
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Vincent Sumbacchio
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Janice A. Zarro

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Julia Dough

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Robert R. Blumstein

Vice Chair

Paulette Corsicelli Fiderock

National Coordinator

Joseph R. Paulino, Jr.

Secretary

John Calvelli

Treasurer

Charles A. Gueli

Regional Chairman

Joseph DiVincenzo

Regional Chairman

Joseph R. Cervell, Sr.

July 30, 1999


Ms. Andrea Wilkins
Reports Analysis Division
Federal Election Commission
999 E Street, NW
Washington, DC 20463

Dear Ms. Wilkins:

RE: July 31, 1999 Mid-Year Report
C00299396

Please find enclosed the Italian American Democratic Leadership Council's July 31, 1999 Mid-Year Report.

Sincerely,


Charles A. Gueli
Treasurer

RECEIVED
FEDERAL ELECTION
COMMISSION MAIL ROOM
JUL 30 1 09 PM '99

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee
(Summary Page)

FILED
FEDERAL ELECTION
COMMISSION MAIL ROOM

JUL 30 1 09 PM '99

USE FEC MAILING LABEL OR TYPE OR PRINT

1. NAME OF COMMITTEE (in full)
Italian American Democratic Leadership Council

ADDRESS (number and street) Check if different than previously reported
1828 L Street, NW, Suite 1010

CITY, STATE and ZIP CODE
Washington, D.C. 20036

2. FEC IDENTIFICATION NUMBER
000299396

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

4. TYPE OF REPORT

- (a) April 15 Quarterly Report
- July 15 Quarterly Report
- October 15 Quarterly Report
- January 31 Year End Report
- July 31 Mid Year Report (Non-election Year Only)
- Termination Report

Monthly Report Due On:

- February 20 June 20 October 20
- March 20 July 20 November 20
- April 20 August 20 December 20
- May 20 September 20 January 31

- Twelfth day report preceding _____ (Type of Election)
election on _____ in the State of _____
- Thirtieth day report following the General Election on _____ in the State of _____

(b) Is this Report an Amendment? YES NO

SUMMARY		COLUMN A This Period	COLUMN B Calendar Year-to-Date
5. Covering Period	<u>Jan 1, 1999 through June 30, 1999</u>		
6. (a) Cash on Hand January 1, 19 <u>99</u>	<u>\$ 8276.81</u>		\$
(b) Cash on Hand at Beginning of Reporting Period		\$ <u>8276.81</u>	
(c) Total Receipts (from Line 19)		\$ <u>21550.-</u>	\$
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)		\$ <u>29826.81</u>	\$
7. Total Disbursements (from Line 30)		\$ <u>2476.46</u>	\$
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))		\$ <u>7050.35</u>	\$
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)		\$	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)		\$	

For further information contact:
Federal Election Commission
999 E Street, NW
Washington, DC 20463
Toll Free 800-424-9530
Local 202-218-3420

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer

Charles A. Cueli

Signature of Treasurer

[Signature]

Date

7/30/99

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. 9437g.

FEC FORM 3X
(revised 9/93)

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 <u>11/1/99</u>	TO: <u>6/30/99</u>
	COLUMN A Total This Period	COLUMN B Calendar Year
I. Receipts		
11. Contributions (other than loans) From:		
a. Individuals/Persons Other Than Political Committees		
i. Itemized (use Schedule A)	\$ 13,250.00	11ja
ii. Unitemized	400.00	11ia
iii. Total (add i and ii) >	13,650.00	11i
b. Political Party Committees	7,900.00	11ic
c. Other Political Committees (such as PACs)		11ic
d. Total Contributions (add a ii, b and c) >	21,550.00	12
12. Transfers From Affiliated/Other Party Committees		13
13. All Loans Received		14
14. Loan Repayments Received		15
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.)		18
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees		17
17. Other Federal Receipts (Dividends, Interest, etc.)		18
18. Transfers From Nonfederal Account for Joint Activity		19
19. Total Receipts (add 11d, 12, 13, 14, 15, 16, 17, and 18) >	\$ 21,550.00	20
20. Total Federal Receipts (subtract line 18 from line 19) >	\$ 21,550.00	
II. Disbursements		
21. Operating Expenditures:		
a. Shared Federal/Non-Federal Activity (from Schedule H4)		21ie
i. Federal Share		21ie
ii. Non-Federal Share	\$ 14,476.46	21if
b. Other Federal Operating Expenditures		21ic
c. Total Operating Expenditures (add a i, a ii, and b) >	\$ 14,476.46	22
22. Transfers to Affiliated/Other Party Committees	\$ 7350.00	23
23. Contributions to Federal Candidates/Committees and Other Political Committees		24
24. Independent Expenditures (use Schedule E)		25
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F)		26
26. Loan Repayments Made		27
27. Loans Made		
28. Refunds of Contributions To:		28ia
a. Individuals/Persons Other Than Political Committees		28ic
b. Political Party Committees		28ic
c. Other Political Committees (such as PACs)	\$ 1000.00	28ic
d. Total Contribution Refunds (add a, b and c) >		29
29. Other Disbursements	\$ 22,776.46	30
30. Total Disbursements (add 21c, 22, 23, 24, 25, 26, 27, 28d, and 29) >	\$ 22,776.46	31
31. Total Federal Disbursements (subtract line 21 a ii from line 30) >	\$ 22,776.46	
III. Net Contributions/Operating Expenditures		
32. Total Contributions (other than loans)(from line 11d)	—	32
33. Total Contribution Refunds (from line 28d)	—	33
34. Net Contributions (other than loans)(subtract line 33 from 32)	—	34
35. Total Federal Operating Expenditures (add 21 a i and 21 b) >	\$ 22,776.46	35
36. Offsets to Operating Expenditures (from line 15)	—	36
37. Net Operating Expenditures (subtract line 36 from 35) >	\$ 22,776.46	37

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 1 OF 3
FOR LINE NUMBER 11a

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

000299396

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Robert J. DeLufo 13 Ober Road Princeton N.J. 08540	Sladden Arms State Magner & Flom Attorney	1/12/99	\$ 1000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 1000.00		
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Dennis DeLascini 4416 49th Street NW Washington DC 20016	Harry Romani & DeLascini Associates Partner	1/12/99	\$ 1000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 1000.00		
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Robert B. Bianco 138 N Jackson St Arlington Va 22201	Shea Matz Bianco Consultant	2/8/99 3/29/99	\$ 500.00 250.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 750.00		
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Neil T. Proso 2733 Ordway St. NW Apt 6 Washington DC 20008	Verney Lybert, Bayard McNair & Hand Attorney	3/4/99	\$ 1000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 1000.00		
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Mary L. Vitell 3820 Livingston St NW Washington DC 20015	Archimed Engineering Assoc. International Engineer	3/4/99	\$ 1000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 1000.00		
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Paul Polo P.O. Box 240, 255 Sheldon Rd Manchester CT 06045	Gunner Manufacturing Company Principal	3/4/99	\$ 1000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 1000.00		
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Frank J. Guarino 30 Montgomery Jersey City, NJ 07302	Carroll & Guarino Attorney	3/4/99	\$ 1000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 1000.00		

SUBTOTAL of Receipts This Page (optional)

\$ 6750.00

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

11a

Contributions from persons Other Than Political Committees

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NAME OF COMMITTEE (In Full)

Italian American Democratic Leadership Council

G00299396

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Joseph S. Fichera 115 E 87 St New York, NY 10428	Financial Securities Financial Consultant	3/29/99	\$ 1000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	Aggregate Year-to-Date > \$ 1000.00		
B. Full Name, Mailing Address and ZIP Code Philip Riccigallo 10300 Mystic Meadow Way Oakton Va 22124	Sons of Italy Executive Director	3/29/99	\$ 1000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	Aggregate Year-to-Date > \$ 1000.00		
C. Full Name, Mailing Address and ZIP Code Eugene A. Corti Jr 601 Penn Ave NW Wash DC 20004	US Department of Immigration Assistant Secretary	4/16/99	\$ 1000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	Aggregate Year-to-Date > \$ 1000.00		
D. Full Name, Mailing Address and ZIP Code Joseph P. DiPuzenzo 34 Chapel Woods Dr Williamsburg NY 11721	Tri Star Enterprises Inc President	4/16/99	\$ 1000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	Aggregate Year-to-Date > \$ 1000.00		
E. Full Name, Mailing Address and ZIP Code Peter C. Alogoskoufis Via Ventin Settembre Rome, Italy 00187	Alogoskoufis Associates Attorney	4/16/99	\$ 1000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	Aggregate Year-to-Date > \$ 1000.00		
F. Full Name, Mailing Address and ZIP Code Nicholas A. Spilotro 44 Pouch Terrace Staten Island, NY 10305	Italian American Labor Council Attorney	4/26/99	\$ 250.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	Aggregate Year-to-Date > \$ 250.00		
G. Full Name, Mailing Address and ZIP Code Vincent J. DeLuca MD 220 Hamburg Turnpike Wayne, NJ 07470	Self-employed Doctor	5/24/99	\$ 1000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	Aggregate Year-to-Date > \$ 1000.00		

SUBTOTAL of Receipts This Page (optional)

6000.00

TOTAL This Period (last page this line number only)

1121

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
Robert Blomco 138 N. Cochran Arlington, Va 22201	Shea Metz Blomco Consultant	6/23/99	\$ 250.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date	1,000.00	
B. 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	6
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	8
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	6
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	3
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)

TOTAL This Period (last page this line number only)

250.00

13,250.00

SCHEDULE B

ITEMIZED DISBURSEMENTS
Operating Expenses

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

PAGE 1 OF 3

FOR LINE NUMBER 212

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NAME OF COMMITTEE (In Full)

Italian American Democratic Leadership Council

G00299396

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Federal Express P.O. Box 1142 Memphis Tenn 38101	Delivery Services Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	1/10/99 4/15/99	\$ 14.25 16.25
B. Full Name, Mailing Address and ZIP Code Bell Atlantic P.O. Box 1915 Beltsville, MD 20704	Purpose of Disbursement Telephone Service Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	2/1/99 2/16/99	\$ 65.38 73.97
C. Full Name, Mailing Address and ZIP Code AT&T, P.O. Box 371 Pittsburgh PA 37130	Purpose of Disbursement Long Distance Service Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	2/1/99 3/3/99	\$ 89.70 65.61
D. Full Name, Mailing Address and ZIP Code Staples, P.O. Box 30292 Salt Lake City, UT 84130	Purpose of Disbursement Office Supplies Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	2/1/99	\$ 82.38
E. Full Name, Mailing Address and ZIP Code Julia Bonds 600 Wolf Trap Road Vienna Va 22182	Purpose of Disbursement Consulting Services Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	2/28/99 3/15/99	\$ 125.00 1125.00
F. Full Name, Mailing Address and ZIP Code Best Mailing Lists Washington DC	Purpose of Disbursement Mailing Lists Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	3/3/99	\$ 22.00
G. Full Name, Mailing Address and ZIP Code GMA, P.O. Box 2738 Washington DC 20038	Purpose of Disbursement Message Service Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	3/3/99 3/30/99	\$ 81.74 41.93
H. Full Name, Mailing Address and ZIP Code Bell Atlantic	Purpose of Disbursement Telephone Service Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	3/30/99 5/26/99	\$ 67.40 169.78
I. Full Name, Mailing Address and ZIP Code AT&T	Purpose of Disbursement Long Distance Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	3/30/99 4/26/99	\$ 113.84 94.50

SUBTOTAL of Disbursements This Page (optional)

3438.73

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 3

FOR LINE NUMBER 212

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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
Juba Foods	Consulting Service Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	4/15/99 4/30/99	\$1125.- 1125.-
QMS	Printing Service Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	4/15/99 5/24/99	38.76 23.05
Dialog P.O. Box 9449 Boston Mass 02209	Conference Call/Telephone Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	4/26/99 5/24/99	701.65 39.13
Juba Foods	Consulting Services Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	5/15/99 5/31/99	1125.00 1125.00
Kwik Copy Printing 1275 K Street NW Washington DC 20005	Copying Service Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	5/25/99	211.50
Bell Atlantic	Telephone Service Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	6/30/99	151.60
Printing Solutions 1603 Sterling Blvd Sterling Va 20164	Newspaper Printing Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	5/25/99	971.00
Juba Foods	Consulting Services Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	6/15/99 6/29/99	1125.- 1125.-
Juba Foods	Medical Ins Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	5/31/99	52.00

SUBTOTAL of Disbursements This Page (optional)

8338.59

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 **3**
FOR LINE NUMBER **112**

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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
QMS	Messenger Service Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	6/23/99	50.85
Vialogy	Conference Call/telep. Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	6/23/99	98.89
Sesto Sense Washington 18th St, Washington DC	Catering Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	6/29/99	2500.00
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)

2649.14

TOTAL This Period (last page this line number only)

14426.46

SCHEDULE A

ITEMIZED RECEIPTS
Other Political Committees

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

PAGE 11 OF 12
FOR LINE NUMBER 112

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NAME OF COMMITTEE (in Full)

Italian American Democratic Leadership Council

G00299396

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
International Union of Electrical, Electronic, Solder, Machine & Furniture Workers AFL-CIO - Washington DC		1/12/99	\$ 1000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	Occupation	Aggregate Year-to-Date > \$ 1000.00	
<input type="checkbox"/> Other (specify):			
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Mellin Credit loc PAC 7733 Forsyth Blvd St. Louis MO 63105		3/29/99	\$ 400.-
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	Occupation	Aggregate Year-to-Date > \$ 400.-	
<input type="checkbox"/> Other (specify):			
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Francis of Sorentino 37 Franklin Street SE 900 Buffalo NY 14202		4/16/99	\$ 1000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	Occupation	Aggregate Year-to-Date > \$ 1000.-	
<input type="checkbox"/> Other (specify):			
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Sheet Metal Workers International 1750 Napoth Avenue, NW Washington DC 20006		5/24/99	\$ 2500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	Occupation	Aggregate Year-to-Date > \$ 2500	
<input type="checkbox"/> Other (specify):			
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Independent Insurance Agents American 412 First Street SE 08E300 Washington DC 20003		5/24/99	\$ 1000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	Occupation	Aggregate Year-to-Date > \$ 1000.-	
<input type="checkbox"/> Other (specify):			
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Unitel Food & Commercial Workers 1775 K Street NW Washington DC 20006		5/24/99	\$ 1000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	Occupation	Aggregate Year-to-Date > \$ 1000.-	
<input type="checkbox"/> Other (specify):			
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Dyloma Cassett Federal PAC 800 Michigan National Tower Cansing MI 48933		6/23/99	\$ 1000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	Occupation	Aggregate Year-to-Date > \$ 1000.	
<input type="checkbox"/> Other (specify):			

SUBTOTAL of Receipts This Page (optional)

TOTAL This Period (last page this line number only)

\$ 7900.00

SCHEDULE B

And Other Political Committees
ITEMIZED DISBURSEMENTS
 Contributions To Federal Candidates **A**

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

PAGE 1 OF 1
 FOR LINE NUMBER 13

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
<i>Democratic Senatorial Campaign Committee - 430 Capitol St. SE Washington DC 20003</i>	Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	<i>2/22/99</i> <i>3/30/99</i>	<i>250.00</i> <i>250.00</i>
<i>B. Full Name, Mailing Address and ZIP Code Italian Leadership Council 34 Chapel Woods W Buffalo NY 14221</i>	Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	<i>3/3/99</i>	<i>200.00</i>
<i>C. Full Name, Mailing Address and ZIP Code Italian American Democrats 34 Chapel Woods W Buffalo NY 14221</i>	Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	<i>3/16/99</i>	<i>150.00</i>
<i>D. Full Name, Mailing Address and ZIP Code Friend of John LaFalce 422 New Jersey Ave SE Washington DC 20003</i>	<i>Contribution</i> Purpose of Disbursement: <i>John LaFalce House Candidate</i> Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	<i>5/4/99</i>	<i>1000.00</i>
<i>E. Full Name, Mailing Address and ZIP Code Campaign for Congress 38 W 4th Street SE Washington DC 20003</i>	<i>Contribution</i> Purpose of Disbursement: <i>Nick Lampson House Candidate</i> Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	<i>6/15/99</i>	<i>500.00</i>
<i>F. Full Name, Mailing Address and ZIP Code Fosco For Congress 63 Quartz Lane Trenton, NJ 07501</i>	<i>Contribution</i> Purpose of Disbursement: <i>Bob Fosco House Candidate</i> Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	<i>6/23/99</i>	<i>500.00</i>
G. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
I. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	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)

7350.00

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

PAGE 1 OF 1
FOR LINE NUMBER 150

Refund of Contribution to Other Political Committee

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
<i>Committee on Political Education 815 16th St, NW Wash DC</i>	<i>Contribution Exceeded Statutory Limit</i>	<i>3/30/99</i>	<i>\$1000.00</i>
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)

1000.00

Federal Election Commission

**ENVELOPE REPLACEMENT PAGE
FOR INCOMING DOCUMENTS**

The Commission has added this page to the end of this filing to indicate how it was received.

<input checked="" type="checkbox"/> Hand Delivered	Date of Receipt 7/30/99
<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	
 G.A.Q.	 7/30/99
PREPARER	DATE PREPARED