

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee
(Summary Page)

RECEIVED
FEDERAL ELECTION
COMMISSION MAIL ROOM

2000 JAN 12 P 1:57

USE FEC MAILING LABEL
OR
TYPE OR PRINT

1. NAME OF COMMITTEE (In full)
Teamsters Local 1150 Federal PAC

ADDRESS (number and street) Check if different than previously reported
150 Garfield Ave.

CITY, STATE and ZIP CODE
Stratford, CT 06615

2. FEC IDENTIFICATION NUMBER
C 00297630

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

- 12-Day Pre-Election Report for the _____
(Type of Election)
election on _____ in the State of _____
- 30-Day Post-Election 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>7/1/99</u> through <u>12/31/99</u>		
6. (a) Cash on Hand January 1, 19 <u>99</u>		\$ 10,227.11
(b) Cash on Hand at Beginning of Reporting Period	\$ 11,658.93	
(c) Total Receipts (from Line 18)	\$ 3,165.27	\$ 5,057.09
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	\$ 14,824.20	\$ 15,284.20
7. Total Disbursements (from Line 20)	\$ 10,225.00	\$ 10,685.00
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	\$ 4,599.20	\$ 4,599.20
9. Debts and Obligations Owed TO 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 202-694-1100
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
Jeffrey W. Cederbaum

Signature of Treasurer
Jeffrey Cederbaum

Date
01/10/00

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

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FEC FORM 3X
(revised 9/99)

**DETAILED SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS
PAGE 2, FEC FORM 3X**

(revised 1/1/91)

NAME OF COMMITTEE		REPORT COVERING PERIOD		
Termster's Local 1150 Federal PAC		FROM 7/1/99	TO 12/31/99	
		COLUMN A Total This Period	COLUMN B Calendar Year	
I. Receipts				
11.	Contributions (other than loans) From:			
a.	Individual/Persons Other Than Political Committees			
i.	Itemized (use Schedule A)	1,680.00	1,680.00	11(a)(i)
ii.	Unitemized	1,475.27	3,367.09	11(a)(ii)
ii.	Total (add i and ii) >	3,155.27	5,047.09	11(a)(ii)
b.	Political Party Committees	-	-	11(b)
c.	Other Political Committees (such as PACs)	-	-	11(c)
d.	Total Contributions (add a ii, b and c) >	3,155.27	5,047.09	11(d)
12.	Transfers From Affiliated/Other Party Committees	-	-	12
13.	All Loans Received	-	-	13
14.	Loan Repayments Received	-	-	14
15.	Offsets To Operating Expenditures (Refunds, Rebates, etc.)	10.00	10.00	15
16.	Refunds of Contributions Made to Federal Candidates and Other Political Committees	-	-	16
17.	Other Federal Receipts (Dividends, Interest, etc.)	-	-	17
18.	Transfers from Nonfederal Account for Joint Activity	-	-	18
19.	Total Receipts (add 11d, 12, 13, 14, 15, 16, 17, and 18) >	3,165.27	5,057.09	19
20.	Total Federal Receipts (subtract line 18 from line 19) >	3,165.27	5,057.09	20
II. Disbursements				
21.	Operating Expenditures:			
a.	Shared Federal/Non-Federal Activity (from Schedule H4)			
i.	Federal Share	-	-	21(a)(i)
ii.	Non-Federal Share	-	-	21(a)(ii)
b.	Other Federal Operating Expenditures	225.00	685.00	21(b)
c.	Total Operating Expenditures (add a i, a ii, and b) >	225.00	685.00	21(c)
22.	Transfers to Affiliated/Other Party Committees	-	-	22
23.	Contributions to Federal Candidates/Committees and Other Political Committees	10,000.00	10,000.00	23
24.	Independent Expenditures (use Schedule E)	-	-	24
25.	Coordinated Expenditures Made by Party Committees (2 U.S.C. 441e(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	-	-	28(a)
b.	Political Party Committees	-	-	28(b)
c.	Other Political Committees (such as PACs)	-	-	28(c)
d.	Total Contribution Refunds (add a, b and c) >	-	-	28(d)
29.	Other Disbursements	-	-	29
30.	Total Disbursements (add 21c, 22, 23, 24, 25, 26, 27, 28d, and 29) >	10,225.00	10,685.00	30
31.	Total Federal Disbursements (subtract line 21 a ii from line 30) >	10,225.00	10,685.00	31
III. Net Contributions/Operating Expenditures				
32.	Total Contributions (other than loans) (from line 11d)	3,155.27	5,047.09	32
33.	Total Contribution Refunds (from line 28d)	-	-	33
34.	Net Contributions (other than loans) (subtract line 33 from 32)	3,155.27	5,047.09	34
35.	Total Federal Operating Expenditures (add 21 a i and 21 b) >	225.00	685.00	35
36.	Offsets to Operating Expenditures (from line 15)	10.00	10.00	36
37.	Net Operating Expenditures (subtract line 36 from 35) >	215.00	675.00	37

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 1 OF 2
FOR LINE NUMBER 11a

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)

Teamsters Local 1150 Federal PAC

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt (this Period)
Florian Folger 112 Cliff St. Shelton, CT 06484	Teamsters Local Union 1150	Various	210-
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Secretary		
	Aggregate Year-to-Date > \$ 210-		
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Joseph Braca 66 Cottage St. Trumbull, CT 06611	Teamsters Local Union 1150	Various	210-
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: V. Pres. / Bus. Agent		
	Aggregate Year-to-Date > \$ 210-		
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Jeffrey Cederbaum 12 Rocky Glen Seymour, CT 06483	Teamsters Local Union 1150	Various	210-
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Sec. Treas. / Bus. Agent		
	Aggregate Year-to-Date > \$ 210-		
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Raymond McMorrin 422 Mulberry St. Naugatuck, CT 06710	Teamsters Local Union 1150	Various	210-
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Pres. / Bus. Agent		
	Aggregate Year-to-Date > \$ 210-		
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
John Toth 59 Coldspring Circle Shelton, CT 06484	Teamsters Local Union 1150	Various	210-
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Rec. Secty. / Bus. Agent		
	Aggregate Year-to-Date > \$ 210-		
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Randy Daskam 23 Pheasant Drive Seymour, CT 06483	Teamsters Local Union 1150	Various	210-
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Bus. Agent / Trustee		
	Aggregate Year-to-Date > \$ 210-		
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Thomas Lionetti 79 Sunset Drive Derby, CT 06418	Teamsters Local Union 1150	Various	210-
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Bus. Agent / Trustee		
	Aggregate Year-to-Date > \$ 210-		

SUBTOTAL of Receipts This Page (optional) 1470.00

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 2
FOR LINE NUMBER 11a

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)
Teamsters Local 1150 Federal PAC

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Eugene Moriarty 41 Pine St. Watertown, CT 06795	Teamsters Local Union 1150	Various	210-
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Bus. Agent	Aggregate Year-to-Date	\$ 210-
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	\$
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)	210.00
TOTAL This Period (last page this line number only)	1680.00

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

PAGE 1 OF 1
FOR LINE NUMBER 21b

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)

Teamsters Local 1150 Federal PAC

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
S. M. Esposito Co, PC 1 Bradley Rd, Suite 401 Woodbridge, CT 06525	Accounting Services Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify)	8/13/99	225.00
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)	225.00
TOTAL This Period (last page this line number only)	225.00

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

PAGE 1 OF 1
FOR LINE NUMBER 83

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NAME OF COMMITTEE (in Full)

Teamsters Local 1150 Federal PAC

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
<i>Friends of Jim Maloney 20 East Main St. Waterbury, CT</i>	<i>Jim Maloney Cong. District #5</i>	<i>12/22/99</i>	<i>5000.00</i>
<i>Friends of Rosa Delawro 49 Huntington St. New Haven, CT 06511</i>	<i>Rosa Delawro Cong. District #3</i>	<i>12/23/99</i>	<i>5000.00</i>
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)

10,000.00

TOTAL This Period (last page this line number only)

10,000.00

