

# REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee  
(Summary Page)

RECEIVED  
FEDERAL ELECTION  
COMMISSION  
REPORTS ANALYSIS  
DIVISION

Jul 29 2 09 PM '98

USE FEC MAILING LABEL  
OR  
TYPE OR PRINT

1. NAME OF COMMITTEE (in full) <b>Italian American Democratic Leadership Council</b>		2. FEC IDENTIFICATION NUMBER <b>00299395</b>
ADDRESS (number and street) <input type="checkbox"/> Check if different than previously reported <b>1828 L Street, NW, Suite 1010</b>		
CITY, STATE and ZIP CODE <b>Washington, D.C. 20036</b>		
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 <u>July 1, 1997</u> through <u>December 31, 1997</u>		
6. (a) Cash on Hand January 1, 19 <u>97</u> <u>\$6452.36</u>		\$
(b) Cash on Hand at Beginning of Reporting Period	\$ <u>7076.74</u>	
(c) Total Receipts (from Line 19)	\$ <u>37308.00</u>	\$ <u>57,913.00</u>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	\$ <u>44384.74</u>	\$ <u>61,365.36</u>
7. Total Disbursements (from Line 30)	\$ <u>43879.58</u>	\$ <u>62,860.20</u>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	\$ <u>505.16</u>	\$ <u>505.16</u>
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	\$	For further information contact: Federal Election Commission 889 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	<u>James A. Coeli</u>
Signature of Treasurer	<u>[Signature]</u> Date <u>7/28/98</u>

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. 5437g.

**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
		COLUMN A Total This Period	COLUMN B Calendar Year
<b>I. Receipts</b>			
11. Contributions (other than loans) From:			
a. Individual/Persons Other Than Political Committees		\$	\$
i. Itemized (use Schedule A)	8300.00	19,600.00	
ii. Unitemized	2175.00	3,980.00	
iii. Total (add i and ii)	10,475.00	23,580.00	
b. Political Party Committees			
c. Other Political Committees (such as PACs)	15,500.00	70,000.00	
d. Total Contributions (add a iii, b and c)	25,975.00	43,580.00	
12. Transfers From Affiliated/Other Party Committees			
13. All Loans Received	-	-	
14. Loan Repayments Received	-	-	
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.)			
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees	7000.00	7000.00	
17. Other Federal Receipts (Dividends, Interest, etc.)	2250.00	2250.00	
18. Transfers from Nonfederal Account for Joint Activity	7083.00	7083.00	
19. Total Receipts (add 11d, 12, 13, 14, 15, 16, 17, and 18)	37,308.00	54,913.00	
20. Total Federal Receipts (subtract line 18 from line 19)	30,225.00	47,830.00	
<b>B. Disbursements</b>			
21. Operating Expenditures:			
a. Shared Federal/Non-Federal Activity (from Schedule H4)			
i. Federal Share	4800.29	4800.29	
ii. Non-Federal Share	779.19	779.19	
b. Other Federal Operating Expenditures	10550.10	10550.10	
c. Total Operating Expenditures (add a i, a ii, and b)	16329.58	16329.58	
22. Transfers to Affiliated/Other Party Committees			
23. Contributions to Federal Candidates/Committees and Other Political Committees	6000.00	7000.00	
24. Independent Expenditures (use Schedule E)	-	-	
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F)	-	-	
26. Loan Repayments Made	-	-	
27. Loans Made	-	-	
28. Refunds of Contributions To:			
a. Individual/Persons Other Than Political Committees	-	-	
b. Political Party Committees	-	-	
c. Other Political Committees (such as PACs)	-	-	
d. Total Contribution Refunds (add a, b and c)	-	-	
29. Other Disbursements	5000.00	15,946.00	
30. Total Disbursements (add 21c, 22, 23, 24, 25, 26, 27, 28d, and 29)	43,899.58	60,860.20	
31. Total Federal Disbursements (subtract line 21 a ii from line 30)	36,650.39	53,631.01	
<b>III. Net Contributions/Operating Expenditures</b>			
32. Total Contributions (other than loans) (from line 11d)	25,975.00	43,580.00	
33. Total Contribution Refunds (from line 28d)	-	-	
34. Net Contributions (other than loans) (subtract line 33 from 32)	25,975.00	43,580.00	
35. Total Federal Operating Expenditures (add 21 a i and 21 b)	25,650.39	42,631.01	
36. Offsets to Operating Expenditures (from line 15)	-	-	
37. Net Operating Expenditures (subtract line 35 from 34)	25,650.39	42,631.01	

**SCHEDULE A**

**ITEMIZED RECEIPTS**

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

PAGE 1 OF 3

FOR LINE NUMBER

11a1

**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

G00299396

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Eugene A Contino 4613 Perusse Parkway Cherry Chase, MD 20815	State of Maryland Dept. of Licenses Director	8/29/97	\$ 1250.-
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 1250.00		
Sandra Durant 501 West 40th St Apt 8H New York, N.Y. 10015	Partner Durant & Durant Principal	8/29/97	\$ 250.-
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 250.00		
John Latoro 2445 Belmont Ave Youngstown OH 44504	The Cataro Company Owner	9/25/97	\$ 250.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 250.00		
Vincent Tambling 2510 Virginia Ave, NW #503 Washington DC 20037	Sheet Metal Workers International Assoc Exec Director	9/25/97	\$ 250.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 250.00		
Peter Alegri Via Veni Settembre 1 Rome Italy 00187	Alegri Associates Principal	9/25/97	\$ 500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 500.00		
Robert Blazevich 138 N Jackson St Arlington Va 22201	Walt Shea & Blazevich Principal	9/25/97	\$ 250.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 250.00		
James Carlo 601 West Chapman Street Alexandria Va 22301	Malonekroat Medical Attorney	9/25/97	\$ 250.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 250.00		

SUBTOTAL of Receipts This Page (optional)

\$ 5250.00

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 11a1

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 13511a Bland Dr Osprey, FL 34229	Not Employed - Retired	9/25/97	\$ 250.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$ 750.00	
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Neil Thomas Proff 2730 Oakway Street NW Apt 6 Washington DC 20007	Conrad Eplerst Bernhard McPherson + Hand	9/25/97	\$ 250.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Attorney	Aggregate Year-to-Date > \$ 750.00	
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Phillip Piccigallo 1398 Mystic Meadow Way Oakton Va 22124	Sons of Italy Inc	9/25/97	\$ 250.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Exec. Director	Aggregate Year-to-Date > \$ 750.00	\$ 500.00
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
John Orlando 2865 Park Terrace Berkeley, MD 20816	Timmons Company	9/25/97	\$ 250.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation President	Aggregate Year-to-Date > \$ 250.00	
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
John Corallo 1400 Crescent Place NW Washington DC 20009	United States Information Agency	9/25/97	\$ 250.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$ 250.00	
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Robert Landino 219 Old Salt Works Rd Westbrook Conn 06498	Dualis Landino Design Group	9/25/97	\$ 250.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Designer	Aggregate Year-to-Date > \$ 250.00	
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Joe J. Vinciguerra 34 Chapel Woods W. Williamsville NY 14221	All State	9/25/97	\$ 250.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Insurance Agent	Aggregate Year-to-Date > \$ 750.00	

SUBTOTAL of Receipts This Page (optional)

\$ 2250.00

TOTAL This Period (last page this line number only)

**SCHEDULE A**

**ITEMIZED RECEIPTS**

Use separate schedules 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**

**G00299396**

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Michael G. Costello P.O. Box 39702 Washington DC 20033 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Self-employed Occupation:	9/25/97 Aggregate Year-to-Date > \$ 250.00	\$250.00
Joseph Cerrell 123 N Wilcox Blvd Los Angeles, CA 90004 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Palumbo & Cerrell Public Affairs Occupation:	9/25/97 Aggregate Year-to-Date > \$ 250.00	\$250.00
Joseph Fichera 15 E 87th Street New York, New York Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Prudential Securities Financial Advisor Occupation:	12/31/97 Aggregate Year-to-Date > \$ 200.00	\$200.00
D. Full Name, Mailing Address and ZIP Code Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	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"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	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"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	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"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$	Date (month, day, year)	Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional)

\$ 800.00

TOTAL This Period (last page this line number only)

\$ 830.00

**SCHEDULE A**

**ITEMIZED RECEIPTS**

*Other Political Committees*

Use separate sheets for each category of the Detailed Summary Page

PAGE 1 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>Independent Insurance Agents of America 412 1st St SE, Ste 20, 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 > \$	
<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 > \$	
<i>Amalgamated Transit Union 5025 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 > \$	
<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 > \$	
<i>American Maritime Officers 650 4th St, 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 > \$	
<i>Airline Pilots Association 1625 Missouri, 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 > \$	
<i>Mascara for Congress P.O. Box 1109, Washington VA 22001</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 P.O. Box 812, 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>Donor March Program for Active Citizenship Donor March Plaza, W.R. Olds 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
	Occupation	Aggregate Year-to-Date > \$	
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
	Occupation	Aggregate Year-to-Date > \$	
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
	Occupation	Aggregate Year-to-Date > \$	
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
	Occupation	Aggregate Year-to-Date > \$	
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
	Occupation	Aggregate Year-to-Date > \$	
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 schedules 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

000299396

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Barca For Congress 2500 Washington Rd Kenosha, WI 53140		11/12/97	\$ 200.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$ 200.00	
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 > \$	
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)

TOTAL This Period (last page this line number only)

\$ 200.00



Refund of Federal Receipt Deposited into Non-Federal Account

SCHEDULE A

ITEMIZED RECEIPTS

Transfer from Non-Federal Acc - Other Federal Receipts

Use separate schedules for each category of the Detailed Summary Page

PAGE 1 OF 1 FOR LINE NUMBER 17

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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	Genova, Burns @ Verioia	10/7/97	\$625.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	Occupation: Attorney	Aggregate Year-to-Date > \$ 625.00	
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
James M. Burns 160 West State Street Hendon, NJ 08608	Genova, Burns @ Verioia	10/7/97	\$625.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	Occupation: Attorney	Aggregate Year-to-Date > \$ 625.00	
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 checked="" type="checkbox"/> General	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 checked="" type="checkbox"/> General	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 checked="" type="checkbox"/> General	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 checked="" type="checkbox"/> General	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 checked="" type="checkbox"/> General	Occupation	Aggregate Year-to-Date > \$	

SUBTOTAL of Receipts This Page (optional)

TOTAL This Period (last page this line number only)

\$1250.00  
\$1250.00

# Refund of Un-ted 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 Fed Receipts

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NAME OF COMMITTEE (in Full)

Italian American Democratic Leadership Council

GD0299396

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

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 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
Rosapope & Spando 1828 U Street NW Washington DC 20036	HAOLC Exp (FAX, Phone, Xerox)	7/21/97	\$212.51
Rosapope & Spando	HAOLC Exp (FAX, Phone, Xerox)	7/21/97	\$197.76
Jeffrey C. Benedetto 3511 Overport St NW Wash DC 20008	Consultant	7/21/97	\$700.00
Jessica Gyarsa 1654 Paul Blood NW Washington DC 20010	Salary 7/8-7/8/97	7/21/97	\$800.00
Charlotte Lewis 4408 Oliver St Hyattsville, MD 20782	Consultant	7/21/97	750.00
Jessica Gyarsa	Salary 7/21-8/1/97	8/8/97	\$800.00
Jessica Gyarsa	Stamps Photocopy	8/8/97	\$82.90
Rosapope & Spando	HAOLC Exp (FAX, Phone, Stamps etc)	9/15/97	\$335.15
Printing Solutions Inc 1603 Waterling Blvd Sterling Va 20164	Printing Newsletter	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  
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

G00299396

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
Cornell Associates 3201 Larchmont Blvd Los Angeles CA 90007	Purpose of Disbursement: <i>Postcard</i> Phone, FAX Copy	10/23/97	79.82
Melanie Gyarsa	Purpose of Disbursement: <i>Copied Post-Card</i> Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/23/97	22.50
Jessica Gyarsa	Purpose of Disbursement: <i>Salary</i> 11/10-11/14/97 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
Rodriguez @ Spanso	Purpose of Disbursement: <i>SALES</i> IADC Ex. (Postage, FAX, Xerox)	11/20/97	2278.32
Jessica Gyarsa	Purpose of Disbursement: <i>Salary</i> 10/20-03/97 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> 11/17-11/28/97 Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	11/28/97	800.00
Janice Farro 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 schedules for each category of the Detailed Summary Page

PAGE 3 OF 4  
FOR LINE NUMBER 110

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

G00299396

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Office Dept 1909 L Street NW Washington DC	Office Supplies Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	12/5/97	\$ 197.51
Rosappo + Spanso	Computer Purchase Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	12/5/97	\$ 600.00
Jessica Gyjusa	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
Rosappo + Spanso	1 ADC 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 Gyjusa	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 800 M Street NW Washington DC 20036	Newsletter Mailing Disbursement for: <input type="checkbox"/> Primary <input checked="" 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 Gyjusa	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 Gyjusa	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

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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
Kinko's 402 Paw Creek 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 Gyaua	Taxi Office Supplies Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/24/97	145.88
Uma Giza 1848 17th NW Washington DC 20036	Coffee for Meeting Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	11/7/97	16.60
Doug De Mott	Photography Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	11/7/97	410.00
Jessica Gyaua	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 Sento 827 15th Street NW Wash DC 20005	Catering Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	11/10/97	1850.00
R. D. Dunning Twelve 6935 Wisconsin Ave New Orleans MO 63115	Telery Use Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	11/10/97	48.00
Rosapope & Spina	ADLC Expns Phone Postage Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	11/10/97	1129.75
Rosapope & Spina	Courier - Law 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)	20850.10

**SCHEDULE B**

**ITEMIZED DISBURSEMENTS**  
**Contributions To Federal Candidates**

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

PAGE 1 OF 1  
 FOR LINE NUMBER 13

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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
Vitaliano for Congress P.O. Box 60692 Staten Island NY 10304	Purpose of Disbursement: <u>Contribution</u> 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	Purpose of Disbursement: <u>Contribution</u> Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/10/97	\$500.00
Campaign for Congress P.O. Box 2578 Beaumont TX 77700	Purpose of Disbursement: <u>Contribution</u> 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

SCHEDULE H2

(effective 1/1/91)

ALLOCATION RATIOS

PAGE / OF

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"/> REVISSED <input type="checkbox"/> SAME AS PREVIOUSLY REPORTED</p> <p><i>Event # 1 - Category 1</i></p>	<p>FEDERAL %</p> <p><i>40%</i></p>	<p>NON-FEDERAL %</p> <p><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"/> REVISSED <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"/> REVISSED <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"/> REVISSED <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"/> REVISSED <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"/> REVISSED <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"/> REVISSED <input type="checkbox"/> SAME AS PREVIOUSLY REPORTED</p>	<p>FEDERAL %</p>	<p>NON-FEDERAL %</p>



TRANSFERS FROM  
NON-FEDERAL ACCOUNTS

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

	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) <i>March 1, 1997</i>			
b) <i>Italian American Members of Congress</i>		\$	
c) <i>7083.00</i>			
e) Total Amount Transferred For Direct Fundraising .....		<b>7083.00</b>	
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
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/DCS
	\$ <b>7083.00</b>	
SUBTOTAL THIS PAGE .....	\$ <b>7083.00</b>	\$ <b>7083.00</b>
TOTAL THIS PERIOD .....	\$ <b>7083.00</b>	\$ <b>7083.00</b>

NAME OF COMMITTEE

Italian American Democratic Leadership Council

G00299396

A. FULL NAME, MAILING ADDRESS & ZIP CODE	PURPOSE/EVENT	DATE	TOTAL AMOUNT	FEDERAL SHARE	NON-FEDERAL SHARE
Event #1 Jessica Gyura 1654 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: \$500.00 <input type="checkbox"/> DIRECT CANDIDATE SUPPORT					
Event #1 Doug DeMack 3207 Wisconsin Blvd 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: \$325.00 <input type="checkbox"/> DIRECT CANDIDATE SUPPORT					
Event #1 Rosanne Spino 1828 K Street NW Washington DC 20036	Pure, 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: \$115.99 <input type="checkbox"/> DIRECT CANDIDATE SUPPORT					
Event #1 Jessica Gyura	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: \$1600.00 <input type="checkbox"/> DIRECT CANDIDATE SUPPORT					
Event #1 Courtney Finnigan	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: \$266.00 <input type="checkbox"/> DIRECT CANDIDATE SUPPORT					
F. FULL NAME, MAILING ADDRESS & ZIP CODE			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: \$ <input type="checkbox"/> DIRECT CANDIDATE SUPPORT					
SUBTOTAL OF JOINT FEDERAL AND NON-FEDERAL ACTIVITY THIS PAGE			\$1236.99	\$402.40	\$1384.59
TOTAL THIS PERIOD (last page for each line only) (Fed. share to 21 a i and non-Fed. share to 21 a ii)					

NAME OF COMMITTEE

Italian American Democratic Leadership Council

000299396

Event #1

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: \$ 273.00 <input type="checkbox"/> DIRECT CANDIDATE SUPPORT					

Event #1

B. FULL NAME, MAILING ADDRESS & ZIP CODE	PURPOSE/EVENT	DATE	TOTAL AMOUNT	FEDERAL SHARE	NON-FEDERAL SHARE
Kasappa Rajam	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: \$ 3275.75 <input type="checkbox"/> DIRECT CANDIDATE SUPPORT					

Event #1

C. FULL NAME, MAILING ADDRESS & ZIP CODE	PURPOSE/EVENT	DATE	TOTAL AMOUNT	FEDERAL SHARE	NON-FEDERAL SHARE
Printing Solutions 1003 W 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: \$ 468.00 <input type="checkbox"/> DIRECT CANDIDATE SUPPORT					

Event #1

D. FULL NAME, MAILING ADDRESS & ZIP CODE	PURPOSE/EVENT	DATE	TOTAL AMOUNT	FEDERAL SHARE	NON-FEDERAL SHARE
Printing Solutions	Periodical 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: \$ 1047.00 <input type="checkbox"/> DIRECT CANDIDATE SUPPORT					

Event #1

E. FULL NAME, MAILING ADDRESS & ZIP CODE	PURPOSE/EVENT	DATE	TOTAL AMOUNT	FEDERAL SHARE	NON-FEDERAL SHARE
Jessica Gjajica	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: \$ 1178.09 <input type="checkbox"/> DIRECT CANDIDATE SUPPORT					

Event #1

F. FULL NAME, MAILING ADDRESS & ZIP CODE	PURPOSE/EVENT	DATE	TOTAL AMOUNT	FEDERAL SHARE	NON-FEDERAL SHARE
Jessica Gjajica	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: \$ 2518.07 <input type="checkbox"/> DIRECT CANDIDATE SUPPORT					

SUBTOTAL OF JOINT FEDERAL AND NON-FEDERAL ACTIVITY THIS PAGE ..... \$5398.35 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 (use for line 21 of the return)

NAME OF COMMITTEE: Italian American Democratic Leadership Council  
G00299396

Event #1

A. FULL NAME, MAILING ADDRESS & ZIP CODE	PURPOSE/EVENT	DATE	TOTAL AMOUNT	FEDERAL SHARE	NON-FEDERAL SHARE
Dice Restaurant 601 Pong Avenue NW Washington DC 2004	Catering	9/24/97	\$2,143.14	1177.26	1765.88

CATEGORY:  ADMINISTRATIVE/VOTER DRIVE  FUNDRAISING  EXEMPT  
EVENT YEAR-TO-DATE: \$2,143.14 DIRECT CANDIDATE SUPPORT

Event #1

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:  ADMINISTRATIVE/VOTER DRIVE  FUNDRAISING  EXEMPT  
EVENT YEAR-TO-DATE: \$1,532.00 DIRECT CANDIDATE SUPPORT

Event #1

C. FULL NAME, MAILING ADDRESS & ZIP CODE	PURPOSE/EVENT	DATE	TOTAL AMOUNT	FEDERAL SHARE	NON-FEDERAL SHARE
Kelly Ann Gallagher 4407 Scarborough Sq Alexandria Va 22309	Consultant	9/29/97	\$91.-	36.-	55.-

CATEGORY:  ADMINISTRATIVE/VOTER DRIVE  FUNDRAISING  EXEMPT  
EVENT YEAR-TO-DATE: \$91.00 DIRECT CANDIDATE SUPPORT

Event #1

D. FULL NAME, MAILING ADDRESS & ZIP CODE	PURPOSE/EVENT	DATE	TOTAL AMOUNT	FEDERAL SHARE	NON-FEDERAL SHARE
Jessica Gyusa	Salary	9/29/97	\$800.-	30.-	480.-

CATEGORY:  ADMINISTRATIVE/VOTER DRIVE  FUNDRAISING  EXEMPT  
EVENT YEAR-TO-DATE: \$3318.09 DIRECT CANDIDATE SUPPORT

E. FULL NAME, MAILING ADDRESS & ZIP CODE	PURPOSE/EVENT	DATE	TOTAL AMOUNT	FEDERAL SHARE	NON-FEDERAL SHARE

CATEGORY:  ADMINISTRATIVE/VOTER DRIVE  FUNDRAISING  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:  ADMINISTRATIVE/VOTER DRIVE  FUNDRAISING  EXEMPT  
EVENT YEAR-TO-DATE: \$ DIRECT CANDIDATE SUPPORT

SUBTOTAL OF JOINT FEDERAL AND NON-FEDERAL ACTIVITY THIS PAGE: \$4324.14 \$1791.26 \$2594.88

TOTAL THIS PERIOD (last page for each line only) (Fed. share to 21 a 1 and non-Fed. share to 21 a 2) ... \$2069.48 \$4800.29

TOTAL THIS PERIOD FOR THE NON-FEDERAL SHARE (used for line 31 of the detailed summary page) \$7729.19

# Transfer Of Non-Federal Receipts Reported 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 19

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 Employee 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

