

ITALIAN AMERICAN DEMOCRATIC LEADERSHIP COUNCIL

1101 Vermont Avenue, NW Suite 1001 • Washington, DC 20005 • 202.296.8016 • Fax 202.682.3984
iadlc@erols.com • www.iadlc.org

July 12, 2000

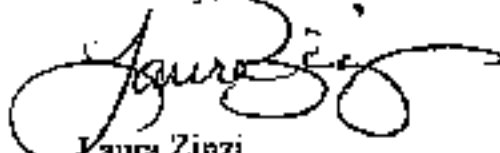
Mr. Kenneth A. Davis, Jr.
Reports Analysis Division
Federal Election Commission
999 E Street, NW
Washington, DC 20463

Re: July 15th Report (4/1/00-6/30/00)
Identification #C00299396

Dear Mr. Davis:

Enclosed please find the July 15th Quarterly Report for the Italian American Democratic Leadership Council.

Sincerely,



Laura Zinzi
PAC Director

RECEIVED
FEC MAIL ROOM
2000 JUL 15 A 8:41

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee
(Summary Page)

RECEIVED
FEC MAIL ROOM

2000 JUL 15 A 8:41

USE FEC MAILING LABEL OR PRINT TYPE OR PRINT

1. NAME OF COMMITTEE (in full) Italian American Democratic Leadership Council	2. FEC IDENTIFICATION NUMBER 000299396
ADDRESS (number and street) <input type="checkbox"/> Check if different than previously reported 1101 Vermont Ave, NW #1001	3. <input type="checkbox"/> This committee has qualified as a multicandidate committee. (see FEC FORM 1M)
CITY, STATE and ZIP CODE Washington, D.C. 20005	

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:
- | | | |
|--------------------------------------|---------------------------------------|--------------------------------------|
| <input type="checkbox"/> February 20 | <input type="checkbox"/> June 20 | <input type="checkbox"/> October 20 |
| <input type="checkbox"/> March 20 | <input type="checkbox"/> July 20 | <input type="checkbox"/> November 20 |
| <input type="checkbox"/> April 20 | <input type="checkbox"/> August 20 | <input type="checkbox"/> December 20 |
| <input type="checkbox"/> May 20 | <input type="checkbox"/> September 20 | <input type="checkbox"/> 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>4/1/00</u> through <u>6/30/00</u>		
6. (a) Cash on Hand January 1, <u>2000</u> \$ <u>14,947.62</u>		\$
(b) Cash on Hand at Beginning of Reporting Period	\$ <u>13,443.27</u>	
(c) Total Receipts (from Line 10)	\$ <u>25,830-</u>	\$ <u>39,680-</u>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	\$ <u>39,273.27</u>	\$ <u>54,627.62</u>
7. Total Disbursements (from Line 30)	\$ <u>20,098.32</u>	\$ <u>35,452.67</u>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	\$ <u>19,174.95</u>	\$ <u>19,174.95</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 999 E Street, NW Washington, DC 20463 Toll Free 800-424-9530 Local 202-219-3420
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	\$	

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

Type or Print Name of Treasurer: Charles A. Owen

Signature of Treasurer: 

Date: 7/13/00

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 8/93)

DETAILED SUMMARY PAGE

OF RECEIPTS AND DISBURSEMENTS

PAGE 2, FEC FORM 3X

(revised 1/1/91)

NAME OF COMMITTEE	REPORT COVERING PERIOD	
Italian American Democratic Leadership Council	FROM 4/1/00	TO: 6/30/00
	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)	12,575 ⁻	23,325 ⁻
ii. Unitemized	1250	1350
iii. Total (add i and ii) >	13,825 ⁻	24,675 ⁻
b. Political Party Committees	8800 ⁻	11,800 ⁻
c. Other Political Committees (such as PACs)		
d. Total Contributions (add a ii, b and c) >	22,625 ⁻	36,475 ⁻
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		
17. Other Federal Receipts (Dividends, Interest, etc.)		
18. Transfers from Nonfederal Account for Joint Activity	3205 ⁻	3205 ⁻
19. Total Receipts (add 11d, 12, 13, 14, 15, 16, 17, and 18) >	25,830 ⁻	39,680 ⁻
20. Total Federal Receipts (subtract line 18 from line 19) >	22,625 ⁻	36,475 ⁻
II. Disbursements		
21. Operating Expenditures:		
a. Shared Federal/Non-Federal Activity (from Schedule H4)		
i. Federal Share		
ii. Non-Federal Share		
b. Other Federal Operating Expenditures	12,098.32	18707.67
c. Total Operating Expenditures (add a i, a ii, and b) >	12,098.32	18707.67
22. Transfers to Affiliated/Other Party Committees	8000 ⁻	16745 ⁻
23. Contributions to Federal Candidates/Committees and Other Political Committees		
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		
30. Total Disbursements (add 21c, 22, 23, 24, 25, 26, 27, 28d, and 29) >	20098.32	35452.67
31. Total Federal Disbursements (subtract line 21 a ii from line 30) >	20098.32	35452.67
III. Net Contributions/Operating Expenditures		
32. Total Contributions (other than loans) (from line 11d)	22,625 ⁻	36,475 ⁻
33. Total Contribution Refunds (from line 28d)		
34. Net Contributions (other than loans) (subtract line 33 from 32)	22,625 ⁻	36,475 ⁻
35. Total Federal Operating Expenditures (add 21 a i and 21 b) >	12,098.32	18,707.67
36. Offsets to Operating Expenditures (from line 15)		
37. Net Operating Expenditures (subtract line 36 from 35) >	12,098.32	18,707.67

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

000299396

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Maria Mancini 13940 Davana Terr. Sherman Oaks, CA 91423 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Carter, Mancini + Sermet Occupation: Attorney Aggregate Year-to-Date > \$ 250	4/12/00	\$ 250
Robert DeTufi 130 Oak Rd. Princeton, NJ 08540 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Kladden, Arps, State, Meagher + Flom Occupation: Partner Aggregate Year-to-Date > \$ 1000	5/1/00	1000
Paul S. Polo 907 Parker St. Manchester, CT 06040 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Dynamic Server Technologies Occupation: President Aggregate Year-to-Date > \$ 2075	5/1/00	1075
Philip Piccigallo 10308 Nuptic Meadow Way Oakton, VA 22124 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Order Sons of Italian America Occupation: National Director Aggregate Year-to-Date > \$ 1000	4/2/00	1000
Charles Gueli 10034 The Mending Way Columbia, MD 21044 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Merrill Lynch Occupation: Aggregate Year-to-Date > \$ 1000	5/15/00	1000
Thomas Cardegna 3 Southerly Way #308 Towson, MD Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Handwerker, Cardegna + Funkhouser Occupation: CPA Aggregate Year-to-Date > \$ 1000	5/19/00	1000
Stephen Ceppi 1966 Greenspring Dr. #300 Timonium, MD 21093 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Diamond Comic Books Occupation: Owner Aggregate Year-to-Date > \$ 1000	5/19/00	1000

SUBTOTAL of Receipts This Page (optional)

6325

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 1191

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 Hercules Barberis 6123 Burnt Oak Rd. Baltimore, MD 21228 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Retired Occupation Aggregate Year-to-Date > 3 500	Date (month, day, year) 5/19/00	Amount of Each Receipt this Period 500 ⁻
B. Full Name, Mailing Address and ZIP Code Michael Pastore 6101 East Lombard St. Baltimore, MD 21224 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Pastore's Wholesale Grocers Occupation Principal Aggregate Year-to-Date > 3 500	Date (month, day, year) 5/19/00	Amount of Each Receipt this Period 500 ⁻
C. Full Name, Mailing Address and ZIP Code Thomas D'alesandro 6646 Walnut Wood Cir. Baltimore, MD 21212 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer D'alesandro + Miliman Occupation Retired Atty Aggregate Year-to-Date > 3 500	Date (month, day, year) 5/19/00	Amount of Each Receipt this Period 500 ⁻
D. Full Name, Mailing Address and ZIP Code Jacob Miliman 10803 Baronet Rd. Owings Mills, MD 21117 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer D'alesandro + Miliman Occupation Attorney Aggregate Year-to-Date > 3 500	Date (month, day, year) 5/19/00	Amount of Each Receipt this Period 500 ⁻
E. Full Name, Mailing Address and ZIP Code Benjamin Palumbo 1204 S. Oakcrest Ed. Arlington, VA 22203 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Palumbo + Currell Occupation Principal Aggregate Year-to-Date > 1 250	Date (month, day, year) 5/19/00	Amount of Each Receipt this Period 250 ⁻
F. Full Name, Mailing Address and ZIP Code F. Larnont Piracci 2815 Glen Keld Ct. Baldwin, MD 21013 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer unknown Occupation Aggregate Year-to-Date > 1 500	Date (month, day, year) 5/19/00	Amount of Each Receipt this Period 500 ⁻
G. Full Name, Mailing Address and ZIP Code John Muth 2107 Kimrick Pl Lutherville, MD 21093 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Merrill Lynch Occupation JP Financial Consultant Aggregate Year-to-Date > 1 500	Date (month, day, year) 5/19/00	Amount of Each Receipt this Period 500 ⁻

SUBTOTAL of Receipts This Page (optional)

3250⁻

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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

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

FOR LINE NUMBER **1191**

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
Lone Perrone Conlan PO Box 970 Capitola, CA 95010 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Conlan Ranches Occupation: Principal Aggregate Year-to-Date > \$ 1,000	5/25/00	1000 ⁻
Eugene Conti 9518 Whitley Park Pl. Bethesda, MD 20814 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	US Dept. of Transportation Occupation: Asst. Secretary Aggregate Year-to-Date > \$ 1,000	6/27/00	1000 ⁻
Joseph Paulino, Jr. 76 Porrhano St. Providence, RI 02903 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Paulino Properties Occupation: Principal Aggregate Year-to-Date > \$ 1,000	6/10/00	1000 ⁻
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)	3000⁻
TOTAL This Period (last page this line number only)	12,575⁻

SCHEDULE A

ITEMIZED RECEIPTS
Other Political Committees

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

PAGE 1 of 2
FOR LINE NUMBER 11 C

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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
American Maritime Officers' Political Action Fund 650 4th Ave. Brooklyn, NY 11234	—	5/17/00	500-
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$ 500	
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
ALPA - PAC 1625 Mass Ave. NW Washington, DC 20036	—	5/17/00	1000-
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$ 1000	
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Transportation Trades Dept. AFCCIO PAC 1025 Connecticut Ave NW Washington, DC 20036	—	5/17/00	1000-
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$ 1000	
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Sheet Metal Workers' Political Action League 1750 N.Y. Ave. NW Washington, DC 20006	—	5/17/00	2000-
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$ 2000	
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
AFSEME 1625 L St, NW Washington, DC 20036	—	5/25/00	1000-
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$ 1000	
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Motion Picture Assn. of America 1600 I St, NW Washington, DC 20006	—	5/25/00	500-
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$ 500	
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
United Association 901 Mass. Ave. NW Washington, DC 20001	—	5/25/00	1500-
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$ 1000	

SUBTOTAL of Receipts This Page (optional)

7000-

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS
Other 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 Occupation Aggregate Year-to-Date	Date (month, day, year)	Amount of Each Receipt this Period
Transportation Political Education League 44107 14600 Detroit Ave. Cleveland OH	 \$ 500	6/24/00	500
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			
B. Full Name, Mailing Address and ZIP Code Mallinckrodt, Inc. PAC 16305 Swingley Ridge Rd. Chesterfield, MO 63017	 \$ 800	6/10/00	800
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			
C. Full Name, Mailing Address and ZIP Code UNITE Campaign Cmte. 1710 Broadway New York, NY 10019	 \$ 500	6/10/00	500
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			
D. Full Name, Mailing Address and ZIP Code	 \$		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			
E. Full Name, Mailing Address and ZIP Code	 \$		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			
F. Full Name, Mailing Address and ZIP Code	 \$		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			
G. Full Name, Mailing Address and ZIP Code	 \$		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			

SUBTOTAL of Receipts This Page (optional) 1800

TOTAL This Period (last page this line number only) 8800

SCHEDULE B

ITEMIZED DISBURSEMENTS
Operating Expenses

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

PAGE 112 OF
FOR LINE NUMBER 216

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NAME OF COMMITTEE (In Full)

Italian American Democratic Leadership Council

C00299396

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Printing Solutions 1603 N. Sterling Blvd. Sterling, VA 20164	Newsletter Printing Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	4/12/00	758 ⁻
Fed Ex PO Box 332 Memphis, TN 38194	package delivery Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	4/12/00	33.47
GMS PO Box 27378 WDC, 20038	Messenger Service Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	4/12/00 6/4/00	38.01 39.81
Bell Atlantic PO Box 646 Baltimore, MD 21265	Local phones Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	4/12/00	35.50
AT-T PO BOX 2971 Omaha, NE 68103	Longdistance Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	4/12/00	45.16
Fraioli/Siggins 80 F St., NW #804 WDC 20001	fund raising Management fee Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	4/25/00 5/15/00 10/10/00	1400 ⁻ 1198.28 83.37
Matz Blaneator Assoc. 101 Vermont Ave, NW #1001 WDC 20005	PAC management fee Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	5/1/00 5/31/00	2135 ⁻ 2135 ⁻
Centrall/Cutter Printing 1739 Olive St. Capital Hts, MD 20743	Invitations - Printing Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	5/1/00	1681.43
Beyond Balloons 614 Highland Ave, NW WDC 20012	decorations Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	5/10/00	250 ⁻

SUBTOTAL of Disbursements This Page (optional)

9833.03

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 2
FOR LINE NUMBER 216

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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 Award for event #1 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
A + R Engineers 3173 Wilson Blvd. Arlington VA 22201	Award for event #1 Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	5/5/00	101.16
Dana Barcinia 1427 Nestlewood Ct. Crofton, MD 21114	Photographer for event #1 Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	5/19/00	157
National Democratic Club 30 Ivy St. SE WDC 20003	Catering/venue for event #1 Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	6/1/00	2007.13
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
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)

2265.29

TOTAL This Period (last page this line number only)

12,098.32

SCHEDULE B

ITEMIZED DISBURSEMENTS

Contributions To Federal Candidates + Other Committees

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

PAGE 1 OF 1
FOR LINE NUMBER 23

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NAME OF COMMITTEE (In Full)		G00299396	
A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Friends of George Miller 2000. Lee St #500 Alexandria, VA 22314	Contribution Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	4/10/00	500 ⁻
B. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
DNC Federal Account 430 S. Capitol St WDC 20003	5/24 event tickets Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	5/18/00	500 ⁻
C. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
DCCC 430 S. Capitol St. WDC, 20003	6/5 event Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	5/18/00	1000 ⁻
D. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
DSCC 430 S. Capitol St. WDC 20003	5/16 event/ membership Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	5/18/00	2500 ⁻
E. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Florio for Senate 2014 Rte 22 East Scotch Plains, NJ 07076	Contribution Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	5/18/00	1000 ⁻
F. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Friends of Rosa DeLauro 49 Huntington St. New Haven, CT 06511	Contribution Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	5/25/00	1000 ⁻
G. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Doyle for Congress 227 Mass Ave NE #101 WDC, 20002	Contribution Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	6/4/00	500 ⁻
H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Pelosi for Congress 1 Bush St. 11 th Floor San Francisco, CA 94104	Contribution Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	6/28/00	1000 ⁻
I. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		

SUBTOTAL of Disbursements This Page (optional)

TOTAL This Period (last page this line number only)

8000⁻

ALLOCATION RATIOS

NAME OF COMMITTEE

Italian American Democratic Leadership Council

000299396

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

Methods of allocation:

I. **FUNDRAISING** activities are allocated using the "funds received method" where the federal proportion of expenses must equal the federal proportion of monies raised.

II. **EXEMPT** activities are allocated using the "time and space method" where the federal proportion of disbursements is based on the proportion of time or space devoted to federal candidates.

III. Shared **DIRECT CANDIDATE** support activities are allocated according to benefit expected to be derived, where the federal proportion of disbursements is based on the benefit derived by federal candidates from the activity.

NAME OF ACTIVITY OR EVENT	FEDERAL %	NON-FEDERAL %
<p><i>Nancy Pelosi Award for outstanding Public Service - May 10, 2000</i></p> <p>ACTIVITY IS: <input checked="" type="checkbox"/> FUNDRAISING <input type="checkbox"/> EXEMPT <input type="checkbox"/> DIRECT CANDIDATE SUPPORT CHECK IF THE RATIO IS: <input checked="" type="checkbox"/> NEW <input type="checkbox"/> REVISED <input type="checkbox"/> SAME AS PREVIOUSLY REPORTED</p>	71%	29%
<p>NAME OF ACTIVITY OR EVENT</p> <p>ACTIVITY IS: <input type="checkbox"/> FUNDRAISING <input type="checkbox"/> EXEMPT <input type="checkbox"/> DIRECT CANDIDATE SUPPORT CHECK IF THE RATIO IS: <input type="checkbox"/> NEW <input type="checkbox"/> REVISED <input type="checkbox"/> SAME AS PREVIOUSLY REPORTED</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 CHECK IF THE RATIO IS: <input type="checkbox"/> NEW <input type="checkbox"/> REVISED <input type="checkbox"/> SAME AS PREVIOUSLY REPORTED</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 CHECK IF THE RATIO IS: <input type="checkbox"/> NEW <input type="checkbox"/> REVISED <input type="checkbox"/> SAME AS PREVIOUSLY REPORTED</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 CHECK IF THE RATIO IS: <input type="checkbox"/> NEW <input type="checkbox"/> REVISED <input type="checkbox"/> SAME AS PREVIOUSLY REPORTED</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 CHECK IF THE RATIO IS: <input type="checkbox"/> NEW <input type="checkbox"/> REVISED <input type="checkbox"/> SAME AS PREVIOUSLY REPORTED</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 CHECK IF THE RATIO IS: <input type="checkbox"/> NEW <input type="checkbox"/> REVISED <input type="checkbox"/> SAME AS PREVIOUSLY REPORTED</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 CHECK IF THE RATIO IS: <input type="checkbox"/> NEW <input type="checkbox"/> REVISED <input type="checkbox"/> SAME AS PREVIOUSLY REPORTED</p>		

RECEIPT SCHEDULE H3
(effective 1/1/91)

TRANSFERS FROM
NON-FEDERAL ACCOUNTS

NAME OF COMMITTEE: **Italian American Democratic Leadership Council** TOTAL AMOUNT TRANSFERRED

NAME OF ACCOUNT: *Italian American Democratic Leadership Council - Non Federal Account* DATE OF RECEIPT: *6/10/2000* \$ *3,205.00*

Event # 1

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>...</i>			
b) <i>...</i>			
c) <i>...</i>		<i>3205.00</i>	
d) <i>...</i>			
e) Total Amount Transferred For Direct Fundraising			
iii) Exempt Activity/Direct Candidate Support (List Events-Amount For Each)			
a) <i>...</i>			
b) <i>...</i>			
c) <i>...</i>			
d) <i>...</i>			
e) Total Amount Transferred For Exempt Activity/Direct Candidate Support			

NAME OF ACCOUNT: _____ DATE OF RECEIPT: _____ \$ _____

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>...</i>			
b) <i>...</i>			
c) <i>...</i>			
d) <i>...</i>			
e) Total Amount Transferred For Direct Fundraising			
iii) Exempt Activity/Direct Candidate Support (List Events-Amount For Each)			
a) <i>...</i>			
b) <i>...</i>			
c) <i>...</i>			
d) <i>...</i>			
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
SUBTOTAL THIS PAGE		<i>3205.00</i>	
TOTAL THIS PERIOD		<i>3205.00</i>	<i>3205.00</i>

DISBURSEMENT SCHEDULE H4
(effective 1/1/91)

JOINT FEDERAL/NON-FEDERAL
ACTIVITY SCHEDULE

PAGE 1 OF 2
FOR LINE 21a

NAME OF COMMITTEE

Italian American Democratic Leadership Council

C00299396

A. FULL NAME, MAILING ADDRESS & ZIP CODE	PURPOSE/EVENT	DATE	TOTAL AMOUNT	FEDERAL SHARE	NON-FEDERAL SHARE
Frank Siggins 80 F St, NW #804 Wash DC 20001	Fundraiser Management Event #1	4/25/00 5/15/00 6/10/00	1400.- 1199.- 283.- 2682	\$ 1904	\$ 778.-
CATEGORY: <input type="checkbox"/> ADMINISTRATIVE/VOTER DRIVE <input checked="" type="checkbox"/> FUNDRAISING <input type="checkbox"/> EXEMPT EVENT YEAR-TO-DATE: \$ DIRECT CANDIDATE SUPPORT					
B. FULL NAME, MAILING ADDRESS & ZIP CODE	PURPOSE/EVENT	DATE	TOTAL AMOUNT	FEDERAL SHARE	NON-FEDERAL SHARE
Matte Bianco & Assoc 1100 Vermont Ave, NW Wash DC 2000	TAC Management Event #1	5/1/00 5/31/00	2135.- 2135 4070	\$ 3032.	\$ 1238.-
CATEGORY: <input type="checkbox"/> ADMINISTRATIVE/VOTER DRIVE <input checked="" type="checkbox"/> FUNDRAISING <input type="checkbox"/> EXEMPT EVENT YEAR-TO-DATE: \$ DIRECT CANDIDATE SUPPORT					
C. FULL NAME, MAILING ADDRESS & ZIP CODE	PURPOSE/EVENT	DATE	TOTAL AMOUNT	FEDERAL SHARE	NON-FEDERAL SHARE
Cartell Letter Printing 1789 Olive Street Capitol Hgts MD 20743	Invitation Printing Event #1	5/1/00	\$ 1682	1194	488
CATEGORY: <input type="checkbox"/> ADMINISTRATIVE/VOTER DRIVE <input checked="" type="checkbox"/> FUNDRAISING <input type="checkbox"/> EXEMPT EVENT YEAR-TO-DATE: \$ DIRECT CANDIDATE SUPPORT					
D. FULL NAME, MAILING ADDRESS & ZIP CODE	PURPOSE/EVENT	DATE	TOTAL AMOUNT	FEDERAL SHARE	NON-FEDERAL SHARE
A&K Engineers 3173 Wilson Blvd Arlington Va 22201	Award Event #1	5/5/00	\$ 101.-	72	29
CATEGORY: <input type="checkbox"/> ADMINISTRATIVE/VOTER DRIVE <input checked="" type="checkbox"/> FUNDRAISING <input type="checkbox"/> EXEMPT EVENT YEAR-TO-DATE: \$ DIRECT CANDIDATE SUPPORT					
E. FULL NAME, MAILING ADDRESS & ZIP CODE	PURPOSE/EVENT	DATE	TOTAL AMOUNT	FEDERAL SHARE	NON-FEDERAL SHARE
Byrne Ballas 608 Highland Ave NW Wash DC 20012	Ballas Event #1	5/10/00	\$ 250.-	178	72
CATEGORY: <input type="checkbox"/> ADMINISTRATIVE/VOTER DRIVE <input checked="" type="checkbox"/> FUNDRAISING <input type="checkbox"/> EXEMPT EVENT YEAR-TO-DATE: \$ DIRECT CANDIDATE SUPPORT					
F. FULL NAME, MAILING ADDRESS & ZIP CODE	PURPOSE/EVENT	DATE	TOTAL AMOUNT	FEDERAL SHARE	NON-FEDERAL SHARE
Dana Barciniah 1427 Nettlewood Ct Crofton MD 21114	Photograph Event #1	5/18/00	\$ 157.-	112	45
CATEGORY: <input type="checkbox"/> ADMINISTRATIVE/VOTER DRIVE <input checked="" type="checkbox"/> FUNDRAISING <input type="checkbox"/> EXEMPT EVENT YEAR-TO-DATE: \$ DIRECT CANDIDATE SUPPORT					
SUBTOTAL OF JOINT FEDERAL AND NON-FEDERAL ACTIVITY THIS PAGE			9142.-	6492	2650
TOTAL THIS PERIOD (list page for each line only (Fed. share to 21 a i and non-Fed. share to 21 a ii) ...					
TOTAL THIS PERIOD FOR THE NON-FEDERAL SHARE (used for line 21 of the detailed summary page)					

JOINT FEDERAL/NON-FEDERAL
ACTIVITY SCHEDULE

NAME OF COMMITTEE: **Italian American Democratic Leadership Council** ID: **G00299396**

A. FULL NAME, MAILING ADDRESS & ZIP CODE	PURPOSE/EVENT	DATE	TOTAL AMOUNT	FEDERAL SHARE	NON-FEDERAL SHARE
<i>National Democratic Club 3014 ST. SE Wash DC 20023</i>	<i>Catering Event #1</i>	<i>6/1/00</i>	<i>2007</i>	<i>1425</i>	<i>582.-</i>
CATEGORY: <input type="checkbox"/> ADMINISTRATIVE/VOTER DRIVE <input type="checkbox"/> FUNDRAISING <input type="checkbox"/> EXEMPT <input type="checkbox"/> DIRECT CANDIDATE SUPPORT EVENT YEAR-TO-DATE: <i>1</i>					
B. FULL NAME, MAILING ADDRESS & ZIP CODE	PURPOSE/EVENT	DATE	TOTAL AMOUNT	FEDERAL SHARE	NON-FEDERAL SHARE
CATEGORY: <input type="checkbox"/> ADMINISTRATIVE/VOTER DRIVE <input type="checkbox"/> FUNDRAISING <input type="checkbox"/> EXEMPT <input type="checkbox"/> DIRECT CANDIDATE SUPPORT EVENT YEAR-TO-DATE: <i>1</i>					
C. FULL NAME, MAILING ADDRESS & ZIP CODE	PURPOSE/EVENT	DATE	TOTAL AMOUNT	FEDERAL SHARE	NON-FEDERAL SHARE
CATEGORY: <input type="checkbox"/> ADMINISTRATIVE/VOTER DRIVE <input type="checkbox"/> FUNDRAISING <input type="checkbox"/> EXEMPT <input type="checkbox"/> DIRECT CANDIDATE SUPPORT EVENT YEAR-TO-DATE: <i>1</i>					
D. FULL NAME, MAILING ADDRESS & ZIP CODE	PURPOSE/EVENT	DATE	TOTAL AMOUNT	FEDERAL SHARE	NON-FEDERAL SHARE
CATEGORY: <input type="checkbox"/> ADMINISTRATIVE/VOTER DRIVE <input type="checkbox"/> FUNDRAISING <input type="checkbox"/> EXEMPT <input type="checkbox"/> DIRECT CANDIDATE SUPPORT EVENT YEAR-TO-DATE: <i>1</i>					
E. FULL NAME, MAILING ADDRESS & ZIP CODE	PURPOSE/EVENT	DATE	TOTAL AMOUNT	FEDERAL SHARE	NON-FEDERAL SHARE
CATEGORY: <input type="checkbox"/> ADMINISTRATIVE/VOTER DRIVE <input type="checkbox"/> FUNDRAISING <input type="checkbox"/> EXEMPT <input type="checkbox"/> DIRECT CANDIDATE SUPPORT EVENT YEAR-TO-DATE: <i>1</i>					
F. FULL NAME, MAILING ADDRESS & ZIP CODE	PURPOSE/EVENT	DATE	TOTAL AMOUNT	FEDERAL SHARE	NON-FEDERAL SHARE
CATEGORY: <input type="checkbox"/> ADMINISTRATIVE/VOTER DRIVE <input type="checkbox"/> FUNDRAISING <input type="checkbox"/> EXEMPT <input type="checkbox"/> DIRECT CANDIDATE SUPPORT EVENT YEAR-TO-DATE: <i>1</i>					
SUBTOTAL OF JOINT FEDERAL AND NON-FEDERAL ACTIVITY THIS PAGE			<i>2007</i>	<i>1425</i>	<i>\$ 582.-</i>
TOTAL THIS PERIOD (see page for each line only) (Fed. share to 21 a i and non-Fed. share to 21 a ii)					<i>3232</i>
TOTAL THIS PERIOD FOR THE NON-FEDERAL SHARE (used for line 31 of the detailed summary page)					

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 type="checkbox"/> Hand Delivered	Date of Receipt
<input checked="" type="checkbox"/> First Class Mail	POSTMARKED 7-12-00
<input type="checkbox"/> Registered/Certified Mail	POSTMARKED (R/C)
<input type="checkbox"/> No Postmark	
<input type="checkbox"/> Postmark Illegible	
<input type="checkbox"/> Received from the House office of Records and Registration	Date of Receipt
<input type="checkbox"/> Received from the Senate Office of Public Records	Date of Receipt
<input type="checkbox"/> Other (Specify):	Postmarked and/or Date of Receipt
<input type="checkbox"/> Electronic Filing	
<i>SL</i>	7-15-00
PREPARER	DATE PREPARED