

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee
(Summary Page)

RECEIVED
FEDERAL ELECTION
COMMISSION MAIL ROOM

Jan 21 9 32 AM '98

USE FEC MAILING LABEL
OR
TYPE OR PRINT

1. NAME OF COMMITTEE (In Full) C00008078 082796 P 236		2. FEC IDENTIFICATION NUMBER C00008078
GARY M. TIBONI ADDRESS (Number and street) Check if different than previously reported OHIO D.R.I.V.E. (DEMOCRATIC RE PUBLICAN INDEPENDENT VOTER EDU 3150 CHESTER AVENUE CITY, STATE AND ZIP CODE CLEVELAND, OHIO 44114		
<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

12-Day Pre-Election Report for the _____
(Type of Election)

election on _____ in the State of _____

30-Day Post-Election Report following the General Election

on _____ in the State of _____

(b) Is this Report an Amendment? YES NO

SUMMARY	COLUMN A This Period	COLUMN B Calendar Year-to-Date
5. Covering Period <u>7-1-97</u> through <u>12-31-97</u>		
6. (a) Cash on Hand January 1, 19 <u>98</u>		\$ 80,178.82
(b) Cash on Hand at Beginning of Reporting Period	\$ 45,983.64	
(c) Total Receipts (from Line 1B)	\$ 23,935.32	\$ 48,607.49
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	\$ 69,918.96	\$ 128,786.31
7. Total Disbursements (from Line 2D)	\$ 25,537.27	\$ 38,420.98
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	\$ 44,381.69	\$ 90,365.33
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 800-424-9590 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

Gary M. Tiboni, Secretary Treasurer

Signature of Treasurer

Gary M. Tiboni

Date

1-14-98

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §497g.

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FEC FORM 3X

(revised 9/93)

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

(revised 1/1/91)

NAME OF COMMITTEE OHIO D.R.I.V.E. (DEMOCRAT REPUBLICAN		REPORT COVERING PERIOD FROM 7-1-97 TO: 12-31-97	
INDEPENDENT VOTER EDUCATION / TEAMSTERS		COLUMN A Total This Period	COLUMN B Calendar Year
Receipts			
11. Contributions (other than loans) From:			
a. Individual/Persons Other Than Political Committees			
i. Itemized (use Schedule A)			11(a)
ii. Unitemized	13,446.00	26,309.00	11(a)(i)
iii. Total (add i and ii) >	13,446.00	26,309.00	11(a)(ii)
b. Political Party Committees			11(b)
c. Other Political Committees (such as PACs)			11(c)
d. Total Contributions (add a, b and c) >	13,446.00	26,309.00	11(d)
12. Transfers From Affiliated/Other Party Committees	9,677.63	20,769.38	12
13. All Loans Received			13
14. Loan Repayments Received			14
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.)			15
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees			16
17. Other Federal Receipts (Dividends, Interest, etc.)	811.69	1,529.11	17
18. Transfers from Nonfederal Account for Joint Activity			18
19. Total Receipts (add 11d, 12, 13, 14, 15, 16, 17, and 18) >	23,935.32	48,607.49	19
20. Total Federal Receipts (subtract line 16 from line 19) >	23,935.32	48,607.49	20
Disbursements			
21. Operating Expenditures:			
a. Shared Federal/Non-Federal Activity (from Schedule H4)			21(a)
i. Federal Share			21(a)(i)
ii. Non-Federal Share			21(a)(ii)
b. Other Federal Operating Expenditures	10,357.27	16,490.98	21(b)
c. Total Operating Expenditures (add a i, a ii, and b) >	10,357.27	16,490.98	21(c)
22. Transfers to Affiliated/Other Party Committees			22
23. Contributions to Federal Candidates/Committees and Other Political Committees	1,800.00	2,800.00	23
24. Independent Expenditures (use Schedule E)			24
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F)			25
26. Loan Repayments Made			26
27. Loans Made			27
28. Refunds of Contributions To:			
a. Individual/Persons Other Than Political Committees	5.00	15.00	28(a)
b. Political Party Committees			28(b)
c. Other Political Committees (such as PACs)			28(c)
d. Total Contribution Refunds (add a, b and c) >	5.00	15.00	28(d)
29. Other Disbursements	13,975.00	19,115.00	29
30. Total Disbursements (add 21c, 22, 23, 24, 25, 26, 27, 28d, and 29) >	25,537.27	38,420.98	30
31. Total Federal Disbursements (subtract line 21 a d from line 30) >	25,537.27	38,420.98	31
Net Contributions/Operating Expenditures			
32. Total Contributions (other than loans)(from line 11 d)	23,123.63	47,078.38	32
33. Total Contribution Refunds (from line 28d)			33
34. Net Contributions (other than loans)(subtract line 33 from 32)	23,123.63	47,078.38	34
35. Total Federal Operating Expenditures (add 21 a i and 21 b) >	10,357.27	16,490.98	35
36. Offsets to Operating Expenditures (from line 15)			36
37. Net Operating Expenditures (subtract line 36 from 35) >	10,357.27	16,490.98	37

SCHEDULE B

ITEMIZED DISBURSEMENTS

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)
OHIO D.R.I.V.E. (DEMOCRAT REPUBLICAN INDEPENDENT VOTER EDUCATION) - TEAMSTERS

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
National D.R.I.V.E. 25 Louisiana Avenue, NW Washington, D.C. 20001	Transfer of Funds FEC ID #C000032979 Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	8-19-97	5,436.00
National D.R.I.V.E. 25 Louisiana Avenue NW Washington, D.C. 20001	Transfer of Funds FEC ID #C000032979 Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	11-4-97	4,241.63
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)	9,677.63
TOTAL This Period (last page this line number only)	9,677.63

SCHEDULE B

ITEMIZED DISBURSEMENTS

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NAME OF COMMITTEE (In Full)
OHIO D.R.I.V.E. (DEMOCRAT REPUBLICAN INDEPENDENT VOTER EDUCATION) TEAMSTERS

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Society National Bank Playhouse Square Cleveland, Ohio 44114	Interest Income Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	7-1-97 12-31-97	170.66
B. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Security Federal 1413 Golden Gate Blvd. Mayfield Hts., Ohio 44124	Interest Income Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	11-30-97	641.03
C. 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)		
D. 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)		
E. 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)		
F. 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)		
G. 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)		
H. 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)		
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)	811.69
TOTAL This Period (last page this line number only)	811.69

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

PAGE 1 OF 4
FOR LINE NUMBER 21

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NAME OF COMMITTEE (in Full)

OHIO D.R.I.V.E. (DEMOCRAT REPUBLICAN INDEPENDENT VOTER EDUCATION) TEAMSTERS

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Postage	Date (month, day, year)	Amount of Each Disbursement This Period
Postmaster, Cleveland, Ohio 2400 Orange Avenue Cleveland, Ohio 44101	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	7-3-97	620.00 ✓
B. Full Name, Mailing Address and ZIP Code Ameritech P.O. Box 84000 Columbus, Ohio 43284-0001	Purpose of Disbursement Telephone Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	7-3-97	Amount of Each Disbursement This Period 32.62 ✓
C. Full Name, Mailing Address and ZIP Code AT&T P.O. Box 27-866 Kansas City, Miss 64184-0001	Purpose of Disbursement Telephone Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	7-3-97	Amount of Each Disbursement This Period 5.15 ✓
D. Full Name, Mailing Address and ZIP Code Joint Council No. 41 3150 Chester Avenue Cleveland, Ohio 44114	Purpose of Disbursement Blood Bank Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	7-11-97	Amount of Each Disbursement This Period 360.00 ✓
E. Full Name, Mailing Address and ZIP Code Michael E. Cozza 1420 Standard Bldg. Cleveland, Ohio 44113	Purpose of Disbursement Audit Expense Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	7-11-97	Amount of Each Disbursement This Period 250.00 ✓
F. Full Name, Mailing Address and ZIP Code Arlene B. Steuer 1420 Standard Bldg. Cleveland, Ohio 44113	Purpose of Disbursement Legal Expense Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	7-11-97	Amount of Each Disbursement This Period 375.00 ✓
G. Full Name, Mailing Address and ZIP Code Ameritech P.O. Box 84000 Columbus, Ohio 43284-0001	Purpose of Disbursement Telephone Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	7-24-97	Amount of Each Disbursement This Period 31.69 ✓
H. Full Name, Mailing Address and ZIP Code AT&T P.O. Box 27-866 Kansas City, Miss 64184-0001	Purpose of Disbursement Telephone Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	7-24-97	Amount of Each Disbursement This Period 5.15 ✓
I. Full Name, Mailing Address and ZIP Code Michael E. Cozza 1420 Standard Bldg. Cleveland, Ohio 44113	Purpose of Disbursement Audit Expense Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	8-8-97	Amount of Each Disbursement This Period 250.00 ✓

SUBTOTAL of Disbursements This Page (optional)

1,929.61

TOTAL This Period (last page this line number only)

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

PAGE 2 OF 4
FOR LINE NUMBER 21

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NAME OF COMMITTEE (In Full)

OHIO D.R.I.V.E. (DEMOCRAT REPUBLICAN INDEPENDENT VOTER EDUCATION) TEAMSTERS.

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Arlene B. Steuer 1420 Standard Bldg. Cleveland, Ohio 44113	Legal Expense Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	8-8-97	375.00 ✓
B. Full Name, Mailing Address and ZIP Code AT&T P.O. Box 27-866 Kansas City, Miss 64184-0866	Telephone Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	9-2-97	5.15 ✓
C. Full Name, Mailing Address and ZIP Code Postmaster, Cleveland, Ohio P.O. Box 94849 Cleveland, Ohio 44101-4849	Annual Fee Renewal Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	9-2-97	85.00 ✓
D. Full Name, Mailing Address and ZIP Code Ameritech P.O.Box 84000 Columbus, Ohio 43284	Telephone Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	9-2-97	32.00 ✓
E. Full Name, Mailing Address and ZIP Code Michael E. Cozza 1420 Standard Bldg. Cleveland, Ohio 44113	Audit Expense Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	9-4-97	250.00 ✓
F. Full Name, Mailing Address and ZIP Code Arlene B. Steuer 1420 Standard Bldg. Cleveland, Ohio 44113	Legal Expense Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	9-5-97	375.00 ✓
G. Full Name, Mailing Address and ZIP Code AT&T P.O Box 27-866 Kansas City, Miss 64184-0866	Telephone Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	10-3-97	5.15 ✓
H. Full Name, Mailing Address and ZIP Code Ameritech P.O.Box 84000 Columbus, Ohio 43284	Telephone Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	10-3-97	31.69 ✓
I. Full Name, Mailing Address and ZIP Code Arlene B. Steuer 1420 Standard Bldg. Cleveland, Ohio 44113	Legal Expense Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	10-6-97	375.00 ✓

SUBTOTAL of Disbursements This Page (optional)

1,533.99

TOTAL This Period (last page this line number only)

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

PAGE 3 OF 4
FOR LINE NUMBER 21

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NAME OF COMMITTEE (In Full)

OHIO D.R.I.V.E. (DEMOCRAT REPUBLICAN INDEPENDENT VOTER EDUCATION) TEAMSTERS.

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Audit Expense Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 10-6-97	Amount of Each Disbursement This Period 250.00
B. Full Name, Mailing Address and ZIP Code P.S. Graphics 13834 Bellaire Road Cleveland, Ohio 44135	Purpose of Disbursement Printing Expense Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 10-21-97	Amount of Each Disbursement This Period 3,175.76
C. Full Name, Mailing Address and ZIP Code Ameritech P.O. Box 84000 Columbus, Ohio 43284	Purpose of Disbursement Telephone Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 10-23-97	Amount of Each Disbursement This Period 32.00
D. Full Name, Mailing Address and ZIP Code AT&T P.O.Box 27-856 Kansas City, Miss 64184-0866	Purpose of Disbursement Telephone Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 10-27-97	Amount of Each Disbursement This Period 5.15
E. Full Name, Mailing Address and ZIP Code Slovenian American Home 6117 St. Clair Avenue Cleveland, Ohio 44103	Purpose of Disbursement Advertising Newspaper Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 10-28-97	Amount of Each Disbursement This Period 200.00
F. Full Name, Mailing Address and ZIP Code Michael E. Cozza 1420 Standard Bldg. Cleveland, Ohio 44113	Purpose of Disbursement Audit Expense Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 11-4-97	Amount of Each Disbursement This Period 250.00
G. Full Name, Mailing Address and ZIP Code Arlene B. Steuer 1420 Standard Bldg. Cleveland, Ohio 44113	Purpose of Disbursement Legal Expense Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 11-4-97	Amount of Each Disbursement This Period 375.00
H. Full Name, Mailing Address and ZIP Code Faulkner, Sackett & Muskovitz 820 West Superior Avenue Suite 300 Cleveland, Ohio 44113	Purpose of Disbursement Legal Expense Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 11-4-97	Amount of Each Disbursement This Period 991.50
I. Full Name, Mailing Address and ZIP Code AT&T P.O.Box 84000 Columbus, Ohio 43284	Purpose of Disbursement Telephone Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 12-2-97	Amount of Each Disbursement This Period 5.15

SUBTOTAL of Disbursements This Page (optional)

5,284.56

TOTAL This Period (last page this line number only)

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

PAGE 4 OF 4
FOR LINE NUMBER 21

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NAME OF COMMITTEE (in Full)

OHIO D.R.I.V.E. (DEMOCRAT REPUBLICAN INDEPENDENT VOTER EDUCATION) TEAMSTERS

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Ameritech P.O.Box 84000 Columbus, Ohio 43284--0001	Telephone Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	12-1-97	31.69
B. Full Name, Mailing Address and ZIP Code Michael E. Cozza 1420 Standard Bldg. Cleveland, Ohio 44113	Audit Expense Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	12-5-97	250.00
C. Full Name, Mailing Address and ZIP Code Arlene B. Steuer 1420 Standard Bldg. Cleveland, Ohio 44113	Legal Expense Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	12-5-97	375.00
D. Full Name, Mailing Address and ZIP Code Faulkner, Sackett & Muskovitz 820 West Superior Avenue, Suite 300 Cleveland, Ohio 44113	Legal Expense Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	12-16-97	947.27
E. Full Name, Mailing Address and ZIP Code AT&T P.O.Box 84000 Columbus, Ohio 43284--0001	Telephone Expense Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	12-22-97	5.15
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)

1,609.11

TOTAL This Period (last page this line number only)

10,357.27

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

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NAME OF COMMITTEE (in Full)
OHIO D.R.I.V.E. (DEMOCRAT REPUBLICAN INDEPENDENT VOTER EDUCATION) TEAMSTERS

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Boyle for Senate 2800 Euclid Avenue, Room 310 Cleveland, Ohio 44115	Political Contribution Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	8-25-97	300.00
B. Full Name, Mailing Address and ZIP Code Re-elect Congressman Kucinich Comm. 611 Pennsylvania Avenue, SE #373 Washington, D.C. 20003	Political Contribution Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	10-23-97	500.00
C. Full Name, Mailing Address and ZIP Code Boyle for Senate 2800 Euclid Avenue, Room 310 Cleveland, Ohio 44115	Political Contribution Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	12-22-97	1,000.00
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)	1,800.00
TOTAL This Period (last page this line number only)	1,800.00

SCHEDULE B

ITEMIZED DISBURSEMENTS

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)
 OHIO D.R.I.V.E. (DEMOCRAT REPUBLICAN INDEPENDENT VOTER EDUCATION) TEAMSTERS

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Jerry Jelenic 4865 Sandalwood Cleveland, Ohio 44140	Refund Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	12-16-97	5.00
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)	5.00
TOTAL This Period (last page this line number only)	5.00

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

PAGE 1 OF 4
FOR LINE NUMBER 29

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NAME OF COMMITTEE (in Full)

OHIO D.R.I.V.E. (DEMOCRAT REPUBLICAN INDEPENDENT VOTER EDUCATION) TEAMSTERS

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Ticket Contribution Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 7-11-97	Amount of Each Disbursement This Period 100.00
Richard D. Watkins for Mayor 1200 North Main Street North Canton, Ohio 44720	Purpose of Disbursement man Ticket Cont. Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 7-21-97	Amount of Each Disbursement This Period 200.00
Richard Taylor Candidate for Council 5647 LaFayette Maple Heights, Ohio 44137	Purpose of Disbursement Ticket contribution Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 7-24-97	Amount of Each Disbursement This Period 50.00
Friends of Colleen Coyne-Gallagher 4205 Ivywood Drive Brooklyn, Ohio 44144	Purpose of Disbursement Political Cont. Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 9-2-97	Amount of Each Disbursement This Period 100.00
Colleen Coyne-Gallagher 10616 Biddulph Brooklyn, Ohio 44144	Purpose of Disbursement Political Cont. Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 9-2-97	Amount of Each Disbursement This Period 200.00
Ed Stryker for Council at Large 1933D Boston Road Strongsville, Ohio 44136	Purpose of Disbursement Political Cont. Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 9-2-97	Amount of Each Disbursement This Period 300.00
Citizens for Pat Coyne 16947 South Meadows Circle Strongsville, Ohio 44136	Purpose of Disbursement Political Cont. Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 9-2-97	Amount of Each Disbursement This Period 200.00
Friends of Wayne Jones 2525 W. Bailey Road Cuyahoga Falls, Ohio 44221	Purpose of Disbursement Ticket Cont. Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 9-2-97	Amount of Each Disbursement This Period 200.00
Warren for Sheriff Committee 331 Hillman Road Akron, Ohio 44312	Purpose of Disbursement Ticket Cont. Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 9-2-97	Amount of Each Disbursement This Period 200.00
Bonanno Boosters 5284 W. 52nd Street Parma, Ohio 44134	Purpose of Disbursement Ticket cont. Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 9-2-97	Amount of Each Disbursement This Period 100.00

SUBTOTAL of Disbursements This Page (optional)

1,450.00

TOTAL This Period (last page this line number only)

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

PAGE 2 OF 14
FOR LINE NUMBER 29

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NAME OF COMMITTEE (In Full)

OHIO D.R.I.V.E. (DEMOCRAT REPUBLICAN INDEPENDENT VOTER EDUCATION) TEAMSTERS

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Committee to Re-elect Anthony C. Zielinski 6211 Manchester Road Parma, Ohio 44129	Ticket Contribution Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	9-2-97	50.00 ✓
Russ Phillips, Chairman Friends of Kelly 2894 Rich Road Norton, Ohio 44203	Ticket Contribution Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	9-15-97	200.00 ✓
Franklin County Democratic Party 218 E. State Street Columbus, Ohio 43215	Political Contribution Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	9-15-97	1,000.00 ✓
Citizens for Coyne 14438 Sheldon Road Brookpark, Ohio 44142	Ticket Contribution Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	9-17-97	400.00 ✓
Committee for Martin E. Vittardi 6009 Dawn Vista Oval Parma, Ohio 44129	Political Contribution Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	9-26-97	250.00 ✓
Committee for Charles L. Patton 18525 Harvard Avenue Cleveland, Ohio 44128	Political Contribution Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	9-26-97	500.00 ✓
Council Leadership Fund 1300 Ninth Street, Suite 1300 Bond Court Bldg. Cleveland, Ohio 44114	Political Contribution Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	10-1-97	2,000.00 ✓
Michael A. White Committee 5062 Joseph Street Maple Hts., Ohio 44137	Political Contribution Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	10-1-97	100.00 ✓
Committee to Elect Susan M. Straub 7409 Kenilworth Avenue Parma, Ohio 44129	Ticket Contribution Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	10-1-97	100.00 ✓

SUBTOTAL of Disbursements This Page (optional)

4,600.00

TOTAL This Period (last page this line number only)

SCHEDULE B

ITEMIZED DISBURSEMENTS

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NAME OF COMMITTEE (In Full)
OHIO D.R.I.V.E. (DEMOCRAT REPUBLICAN INDEPENDENT VOTER EDUCATION) TEAMSTERS

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Janet A. Saringer, President of Council 23336 Stoneybrook Drive North Olmsted, Ohio 44070	Ticket Contribution Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	10-1-97	100.00 ✓
Committee to Stop Corporate Attacks on Injured Workers 51 North High Street, Suite 401 Columbus, Ohio 43215 Issue Two	Political Contribution Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	10-1-97	200.00 ✓
Elect Danny Kelly to City Council Committee 13610 Tyler Cleveland, Ohio 44111	Political Contribution Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	10-1-97	100.00 ✓
Friends of Perez 1233 13th Street NW Canton, Ohio 44703	Political Contribution Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	10-6-97	100.00 ✓
Jech Boosters 2325 Keystone Parma, Ohio 44134	Ticket Contribution Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	10-7-97	150.00 ✓
Citizens for Jim Petro 88 East Broad Street, Suite 1600 Columbus, Ohio 43215	Ticket Contribution Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	10-17-97	75.00 ✓
Friends of Helen Smith 3256 Fulton Road Cleveland, Ohio 44109	Political contribution Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	10-17-97	200.00 ✓
Friends of Helen Smith 3256 Fulton Road Cleveland, Ohio 44109	Political Contribution Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	10-22-97	800.00 ✓
Committee to Elect Ed Boyle 5733 Elmhurst Road North Olmsted, Ohio 44070	Political Contribution Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	10-23-97	1,000.00 ✓

SUBTOTAL of Disbursements This Page (optional) 2,725.00

TOTAL This Period (last page this line number only)

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

PAGE 4 OF 4
FOR LINE NUMBER 29

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NAME OF COMMITTEE (in Full)

OHIO D.R.I.V.E. (DEMOCRAT-REPUBLICAN INDEPENDENT VOTER EDUCATION)- TEAMSTERS

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Re-elect Mayor Margaret A. Egensperger Committee 6369 Ashdale Road Mayfield Hts., Ohio 44124	Political Contribution Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	10-24-97	1,000.00
B. Full Name, Mailing Address and ZIP Code Wichowski for Mayor 323 N. Erie Street Toledo, Ohio 43604	Political Contribution Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	10-29-97	1,000.00
C. Full Name, Mailing Address and ZIP Code Frank Gerlach 618 Chillicothe Street Portsmouth, Ohio 45662	Political Contribution Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	11-4-97	300.00
D. Full Name, Mailing Address and ZIP Code Johnnie Maier 13520 Barrs St. SW Massillon, Ohio 44647	Political Contribution Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	11-12-97	100.00
E. Full Name, Mailing Address and ZIP Code Elizabeth Kelley 6811 Mayfield Rd. Apt 879 Mayfield Hts., Ohio 44124	Political Contribution Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	12-8-97	200.00
F. Full Name, Mailing Address and ZIP Code Friends of Fisher Committee 629 Euclid Avenue Cleveland, Ohio 44114	Political Contribution Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	12-22-97	1,000.00
G. Full Name, Mailing Address and ZIP Code Perry Committee, Cass Beach, Treas. 886 Ogden Avenue Toledo, Ohio 43609	Political Contribution Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	12-22-97	1,000.00
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)

4,600.00

TOTAL This Period (last page this line number only)

13,375.00

Federal Election Commission

**ENVELOPE REPLACEMENT PAGE
FOR INCOMING DOCUMENTS**

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

<input type="checkbox"/> Hand Delivered	Date of Receipt
<input type="checkbox"/> First Class Mail	POSTMARKED
<input checked="" type="checkbox"/> Registered/Certified Mail	POSTMARKED 1/14/98
<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 <hr/> and/or Date of Receipt
<input type="checkbox"/> Electronic Filing	
 O.A.O. PREPARER	 1/21/98 DATE PREPARED