

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee
(Summary Page)

RECEIVED
FEDERAL ELECTION
COMMISSION
MAIL ROOM

OCT 5 11 20 AM '95

USE FEC MAILING LABEL
OR
TYPE OR PRINT

1. NAME OF COMMITTEE (in full) LOC# 13000 CWA AFL-CIO C00109595 061495 PATRICIA A. MAISANO		2. FEC IDENTIFICATION NUMBER C00109595
ADDRESS (number and street) <input type="checkbox"/> Check if different than previously reported 2124 RACE STREET		
CITY, STATE and ZIP CODE PHILADELPHIA, PA 19103		
3. <input 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	1-1-95 through 6-30-95		
6. (a)	Cash on Hand January 1, 1995		\$ 73,912.69
(b)	Cash on Hand at Beginning of Reporting Period	\$ 73,912.69	
(c)	Total Receipts (from Line 19)	\$ 47,672.74	\$ 47,672.74
(d)	Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	\$ 121,585.43	\$ 121,585.43
7.	Total Disbursements (from Line 30)	\$ 2,593.77	\$ 2,593.77
8.	Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	\$ 118,991.66	\$ 118,991.66
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 PATRICIA A. MAISANO			
Signature of Treasurer <i>Patricia A. Maisano</i>		Date 10-2-95	

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

9503992119

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

(revised 1/1/91)

9503992190

NAME OF COMMITTEE		REPORT COVERING PERIOD		
CWA LOCAL 13000 AFL-CIO		FROM 1-1-95	TO 6-30-95	
		COLUMN A Total This Period	COLUMN B Calendar Year	
I. Receipts				
11.	Contributions (other than loans) From:			
a.	Individuals/Persons Other Than Political Committees			
i.	Itemized (use Schedule A)	250.00	250.00	11(a)(i)
ii.	Unitemized	46,317.75	46,317.75	11(a)(ii)
iii.	Total	46,567.75	46,567.75	11(a)(iii)
b.	Political Party Committees			11(b)
c.	Other Political Committees (such as PACs)			11(c)
d.	Total Contributions			11(d)
12.	Transfers From Affiliated/Other Party Committees			12
13.	All Loans Received			13
14.	Loan Repayments Received			14
15.	Offsets To Operating Expenditures (Refunds, Rebates, etc.)			15
16.	Refunds of Contributions Made to Federal Candidates and Other Political Committees			16
17.	Other Federal Receipts (Dividends, Interest, etc.)	1,104.99	1,104.99	17
18.	Transfers from Nonfederal Account for Joint Activity			18
19.	Total Receipts	47,672.74	47,672.74	19
20.	Total Federal Receipts	47,672.74	47,672.74	20
II. Disbursements				
21.	Operating Expenditures:			
a.	Shared Federal/Non-Federal Activity (from Schedule H4)			
i.	Federal Share			21(a)(i)
ii.	Non-Federal Share			21(a)(ii)
b.	Other Federal Operating Expenditures	1,383.77	1,383.77	21(b)
c.	Total Operating Expenditures			21(c)
22.	Transfers to Affiliated/Other Party Committees			22
23.	Contributions to Federal Candidates/Committees and Other Political Committees			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.	Individuals/Persons Other Than Political Committees			28(a)
b.	Political Party Committees			28(b)
c.	Other Political Committees (such as PACs)			28(c)
d.	Total Contribution Refunds			28(d)
29.	Other Disbursements	1,210.00	1,210.00	29
30.	Total Disbursements	2,593.77	2,593.77	30
31.	Total Federal Disbursements	2,593.77	2,593.77	31
III. Net Contributions/Operating Expenditures				
32.	Total Contributions (other than loans)(from line 11d)			32
33.	Total Contribution Refunds (from line 28d)			33
34.	Net Contributions (other than loans)(subtract line 33 from 32)			34
35.	Total Federal Operating Expenditures	1,383.77	1,383.77	35
36.	Offsets to Operating Expenditures (from line 15)			36
37.	Net Operating Expenditures			37

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 1 OF 1
FOR LINE NUMBER 11 (a) (i)

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)

CWA LOCAL 13000 AFL-CIO

9503992121

A. Full Name, Mailing Address and ZIP Code LIZ DENN 622 GATES LN ENOLA, PA 17025		Name of Employer Occupation	Date (month, day, year) 1-16-95	Amount of Each Receipt this Period 250.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Aggregate Year-to-Date > \$ 250.00		
B. Full Name, Mailing Address and ZIP Code		Name of Employer Occupation	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 Occupation	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 Occupation	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 Occupation	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 Occupation	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 Occupation	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)

TOTAL This Period (last page this line number only)

250.00

SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedule(s) 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)

CWA LOCAL 13000, AFL-CIO

9503992122

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
MELLON PSFS BANK 18TH & MARKET STS PHILADELPHIA PA 19102 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	INTEREST RECEIVED FOR: 1-1-95 to 6-30-95 Occupation Aggregate Year-to-Date \$	6-30-95	1,104.99
B. 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
C. 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
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)

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 1 OF 1
FOR LINE NUMBER 21 (b)

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NAME OF COMMITTEE (in Full)

CWA LOCAL 13000, AFL-CIO

95039992103

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
MELLOY PSFS BANK 18TH & MARKET STS PHILADELPHIA PA 19102	ACCOUNT ANALYSIS FEE WIRE TRANSFER Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	1-1-95 to 6-30-95	154.77
PROVIDENT NATIONAL BANK PHILADELPHIA PA	Purpose of Disbursement FEDERAL CORP. INCOME TAX 1994 Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	2-23-95	379.00
C. Full Name, Mailing Address and ZIP Code A. G. EPSTEIN CO 610 OLD YORK RD JENKINTOWN PA 19046	Purpose of Disbursement ACCOUNTING FEES FOR 1994 Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	3-15-95	600.00
D. Full Name, Mailing Address and ZIP Code DONALD HOPKINS 1107 N IRVING AVE QUAKERTOWN PA 18951	Purpose of Disbursement WORKED POLLS 5-16-95 Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	6-6-95	50.00
E. Full Name, Mailing Address and ZIP Code FRANCIS PEITZ 60 KITTANNING PK PITTSBURGH PA 15205	Purpose of Disbursement WORKED POLLS 5-16-95 Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	6-6-95	50.00
F. Full Name, Mailing Address and ZIP Code JOE VITA 537 CONROE ST PHILADELPHIA PA 19128	Purpose of Disbursement WORKED POLLS 5-16-95 Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	6-6-95	50.00
G. Full Name, Mailing Address and ZIP Code JOE QUIGLEY 225 RECTOR ST PHILADELPHIA PA 19128	Purpose of Disbursement WORKED POLLS 5-16-95 Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	6-6-95	50.00
H. Full Name, Mailing Address and ZIP Code KENNETH W. SIDOT 248 PERKASIE AVE QUAKERTOWN PA 18951	Purpose of Disbursement WORKED POLLS 5-16-1995 Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	6-12-95	50.00
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)

1,383.77

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)

CWA LOCAL 13000, AFL-CIO

9503992124

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
COMMITTEE TO ELECT ROBERT FREEMAN 138 S 10TH ST EASTON PA 18042	FUND RAISER - TICKETS Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	2-13-95	60.00
B. Full Name, Mailing Address and ZIP Code COMMITTEE TO ELECT THERCAS CARR DENI JUDGE 1334 WALNUT ST 5TH FLOOR PHILADELPHIA PA 19107	Purpose of Disbursement CAMPAIGN EXP. 1995 Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 2-23-95	Amount of Each Disbursement This Period 100.00
C. Full Name, Mailing Address and ZIP Code RE-ELECT DAVID COHEN 5635 N 16TH ST PHILADELPHIA PA 19141	Purpose of Disbursement CAMPAIGN EXP. 1995 Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 2-23-95	Amount of Each Disbursement This Period 100.00
D. Full Name, Mailing Address and ZIP Code SELUCA FOR LEGISLATURE COMMITTEE 1416 BARBARA DR VERGNA PA 15147	Purpose of Disbursement FUND RAISER 4-29-95 Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 3-29-95	Amount of Each Disbursement This Period 100.00
E. Full Name, Mailing Address and ZIP Code LONGSTRETH FOR PHILADELPHIA FUND P O BOX 58513 PHILADELPHIA PA 19102	Purpose of Disbursement CAMPAIGN EXP. 1995 Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 4-26-95	Amount of Each Disbursement This Period 100.00
F. Full Name, Mailing Address and ZIP Code CITIZENS FOR RON RIJNK 141 RENFER ST PITTSBURGH PA 15237	Purpose of Disbursement FUND RAISER 4-24-95 Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 4-26-95	Amount of Each Disbursement This Period 200.00
G. Full Name, Mailing Address and ZIP Code FRIENDS OF JAMES M. WEAVER 10 N THIRD ST BRADFORD PA 16701	Purpose of Disbursement CAMPAIGN EXP. 1995 Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 5-3-95	Amount of Each Disbursement This Period 200.00
H. Full Name, Mailing Address and ZIP Code CITIZENS FOR A BETTER DORMONT 1204 HILLSDALE AVE PITTSBURGH PA 15216	Purpose of Disbursement CAMPAIGN EXP. 1995 Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 5-5-95	Amount of Each Disbursement This Period 100.00
I. Full Name, Mailing Address and ZIP Code DEMOCRATIC COMMITTEE OF PHILADELPHIA 225 RECTOR ST PHILADELPHIA PA 19128	Purpose of Disbursement FUND RAISER 5-10-95 Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 5-9-95	Amount of Each Disbursement This Period 250.00

SUBTOTAL of Disbursements This Page (optional)

TOTAL This Period (last page this line number only)

1,210.00

**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.

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PREPARER

10-5-95

DATE PREPARED

9503992125