

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee
(Summary Page)

RECEIVED
FEDERAL ELECTION
COMMISSION
MAIL ROOM

DEC 4 9 40 AM '96

1. NAME OF COMMITTEE (In full) United Water Resources Employee PAC		2. FEC IDENTIFICATION NUMBER C00200156
ADDRESS (number and street) <input type="checkbox"/> Check if different than previously reported 200 Old Hook Road		
CITY, STATE and ZIP CODE Harrington Park, NJ 07640		3. <input checked="" type="checkbox"/> This committee has qualified as a multicandidate committee. (See FEC FORM IM)

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
11/2 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>10/01/96</u> through <u>11/25/96</u>		
6. (a) Cash on Hand January 1, 19 <u>96</u>		\$ 8,718.42
(b) Cash on Hand at Beginning of Reporting Period	\$ 5,448.42	
(c) Total Receipts (from line 19)	\$ 1,704.25	\$ 18,456.25
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	\$ 7,152.67	\$ 27,174.67
7. Total Disbursements (from line 30)	\$ 3,900.00	\$ 23,522.00
8. Cash on Hand at Close of Reporting Period (Subtract Line 7 from line 6(d))	\$ 3,652.67	\$ 3,652.67
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	\$ 0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	\$ 0.00	
I Certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and Complete		For further information: Federal Election Commission 999 E Street, NW Washington, DC 20463 Toll Free 800-424-9530 Local 202-219-3420
Type or Print Name of Treasurer John J. Turner		
Signature of Treasurer <i>John J. Turner</i>		Date 12/2/96

NOTE: Admission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 1 U.S.C. 437g.

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DETAILED SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

PAGE 2, FEC FORM 3X

Revised 11/1/91

NAME OF COMMITTEE	REPORT COVERING PERIOD	
United Water Resources Employee PAC	FROM: 10/01/96	TO: 11/25/96
	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)	906.75	7,086.75
ii. Unitemized	797.50	11,369.50
iii. Total (add i and ii) >	1,704.25	18,456.25
b. Political Party Committees	0.00	0.00
c. Other Political Committees (such as PACs)	0.00	0.00
d. Total Contributions (add aiii, b and c) >	1,704.25	18,456.25
12. Transfers From Affiliated/Other Party Committees	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.)	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.)	0.00	0.00
18. Transfers from Nonfederal Account for Joint Activity	0.00	0.00
19. Total Receipts (add 11d, 12, 13, 14, 15, 16, 17, and 18) >	1,704.25	18,456.25
20. Total Federal Receipts (subtract line 18 from line 19) >	1,704.25	18,456.25
II. Disbursements		
21. Operating Expenditures:		
a. Shared Federal/Non-Federal Activity (from Schedule H4)		
i. Federal Share	0.00	0.00
ii. Non-Federal Share	0.00	0.00
b. Other Federal Operating Expenditures	0.00	0.00
c. Total Operating Expenditures (Add ai, aii, and b) >	0.00	0.00
22. Transfers to Affiliated/Other Party Committees	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees	3,500.00	20,755.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F)	0.00	0.00
26. Loan Repayments Made	0.00	0.00
27. Loans Made	0.00	0.00
28. Refunds of Contributions To:		
a. Individuals/Persons Other Than Political Committees	0.00	0.00
b. Political Party Committees	0.00	0.00
c. Other Political Committees (Such As PACs)	0.00	0.00
d. Total Contribution Refunds (Add a, b, and c) >	0.00	0.00
29. Other Disbursements	0.00	2,767.00
30. Total Disbursements (Add 21c, 22, 23, 24, 25, 26, 27, 28d, and 29) >	3,500.00	23,522.00
31. Total Federal Disbursements (subtract line 21 all from line 30) >	3,500.00	23,522.00
III. Net Contributions/Operating Expenditures		
32. Total Contributions (Other than loans) (from line 11d)	1,704.25	18,456.25
33. Total Contribution Refunds (from line 28d)	0.00	0.00
34. Net Contributions (Other than loans) (subtract line 33 from 32)	1,704.25	18,456.25
35. Total Federal Operating Expenditures (add 21 ai and 21 b) >	0.00	0.00
36. Offsets to Operating Expenditures (from line 15)	0.00	0.00
37. Net Operating Expenditures (subtract line 36 from 35) >	0.00	0.00

SCHEDULE A

ITEMIZED RECEIPTS

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

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)
United Water Resources Employee PAC

<p>A. Full Name, Mailing Address and Zip Code PHILIP RUSCONI 216 York Road Lebanon, CT 06249</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)</p>	<p>Name of Employer Lab Resources</p> <p>Occupation General Manager</p> <p>Aggregate Year-to-date > \$ 260.00</p>	<p>Date (Month day, Year) 10/29/96</p> <p>Payroll 260.00</p> <p>Deduction 0.00</p> <p>Aggregate Year-to-date > \$ 260.00</p>	<p>Amount of Each Receipt this Period 40.00</p> <p>Payroll 260.00</p> <p>Deduction 0.00</p> <p>Aggregate Year-to-date > \$ 260.00</p>
<p>B. Full Name, Mailing Address and Zip Code THOMAS MACCLAVE 101 THORNWOOD DRIVE MARLTON, NJ 08053</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)</p>	<p>Name of Employer UNITED WATER MANAGEMENT AND SERVICES</p> <p>Occupation ASST TREAS/DIR INT AUD</p> <p>Aggregate Year-to-date > \$ 300.00</p>	<p>Date (Month day, Year) Payroll</p> <p>Payroll 300.00</p> <p>Deduction (\$30.00)</p> <p>Aggregate Year-to-date > \$ 300.00</p>	<p>Amount of Each Receipt this Period 30.00</p> <p>Payroll 300.00</p> <p>Deduction (\$30.00)</p> <p>Aggregate Year-to-date > \$ 300.00</p>
<p>C. Full Name, Mailing Address and Zip Code MARY GETTLER 24 OLDEBT DRIVE PEARL RIVER, NY 10965</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)</p>	<p>Name of Employer UNITED WATER MANAGEMENT AND SERVICES</p> <p>Occupation PROJECT TEAM</p> <p>Aggregate Year-to-date > \$ 400.00</p>	<p>Date (Month day, Year) Payroll</p> <p>Payroll 400.00</p> <p>Deduction (\$40.00)</p> <p>Aggregate Year-to-date > \$ 400.00</p>	<p>Amount of Each Receipt this Period 40.00</p> <p>Payroll 400.00</p> <p>Deduction (\$40.00)</p> <p>Aggregate Year-to-date > \$ 400.00</p>
<p>D. Full Name, Mailing Address and Zip Code ROBERT THEELE 180 OAK AVENUE SOUTH RIVER VALE, NJ 07675</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)</p>	<p>Name of Employer UNITED WATER MANAGEMENT AND SERVICES</p> <p>Occupation ASST VP CONTRACT OPRINS</p> <p>Aggregate Year-to-date > \$ 277.50</p>	<p>Date (Month day, Year) Payroll</p> <p>Payroll 277.50</p> <p>Deduction (\$30.00)</p> <p>Aggregate Year-to-date > \$ 277.50</p>	<p>Amount of Each Receipt this Period 30.00</p> <p>Payroll 277.50</p> <p>Deduction (\$30.00)</p> <p>Aggregate Year-to-date > \$ 277.50</p>
<p>E. Full Name, Mailing Address and Zip Code LOUIS MONDELLO 173 12TH STREET CRESSKILL, NJ 07626</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)</p>	<p>Name of Employer UNITED WATER NEW JERSEY</p> <p>Occupation DIR-CUST SERVICE</p> <p>Aggregate Year-to-date > \$ 300.00</p>	<p>Date (Month day, Year) Payroll</p> <p>Payroll 300.00</p> <p>Deduction (\$30.00)</p> <p>Aggregate Year-to-date > \$ 300.00</p>	<p>Amount of Each Receipt this Period 30.00</p> <p>Payroll 300.00</p> <p>Deduction (\$30.00)</p> <p>Aggregate Year-to-date > \$ 300.00</p>
<p>F. Full Name, Mailing Address and Zip Code MICHAEL BARNES 23 MAGNOLIA AVENUE MONTVALE, NJ 07645</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)</p>	<p>Name of Employer UNITED WATER NEW JERSEY</p> <p>Occupation DIR-ENGINEERING</p> <p>Aggregate Year-to-date > \$ 400.00</p>	<p>Date (Month day, Year) Payroll</p> <p>Payroll 400.00</p> <p>Deduction (\$40.00)</p> <p>Aggregate Year-to-date > \$ 400.00</p>	<p>Amount of Each Receipt this Period 40.00</p> <p>Payroll 400.00</p> <p>Deduction (\$40.00)</p> <p>Aggregate Year-to-date > \$ 400.00</p>
<p>G. Full Name, Mailing Address and Zip Code ROBERT IACULLO 23 HOLIDAY DRIVE WEST CALDWELL, NJ 07006</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)</p>	<p>Name of Employer UNITED WATER MANAGEMENT AND SERVICES</p> <p>Occupation VP-REGULATORY BUSINESS</p> <p>Aggregate Year-to-date > \$ 650.00</p>	<p>Date (Month day, Year) Payroll</p> <p>Payroll 650.00</p> <p>Deduction (\$65.00)</p> <p>Aggregate Year-to-date > \$ 650.00</p>	<p>Amount of Each Receipt this Period 65.00</p> <p>Payroll 650.00</p> <p>Deduction (\$65.00)</p> <p>Aggregate Year-to-date > \$ 650.00</p>
SUB TOTAL of Receipts This Page (Optional).....>			275.00
TOTAL this Period (Last page this line number only).....>			

SCHEDULE A ITEMIZED RECEIPTS

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NAME OF COMMITTEE (in full)
United Water Resources Employee PAC

A. Full Name, Mailing Address and Zip Code WILLIAM COLFORD 338 JAMES STREET RIDGEWOOD, NJ 07450		Name of Employer UNITED WATER MANAGEMENT AND SERVICES <small>Occupation</small> VICE PRES-ADMIN	Date (Month day, Year) Payroll Deduction	Amount of Each Receipt this Period 30.00 (\$30.00) Monthly
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)		Aggregate Year-to-date > \$ 300.00		
B. Full Name, Mailing Address and Zip Code DONALD CORRELL 375 SPRING AVENUE RIDGEWOOD, NJ 07450		Name of Employer UNITED WATER MANAGEMENT AND SERVICES <small>Occupation</small> PRES/CEO/CHAIRMAN	Date (Month day, Year) Payroll Deduction	Amount of Each Receipt this Period 180.00 (\$180.00) Monthly
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)		Aggregate Year-to-date > \$ 1,800.00		
C. Full Name, Mailing Address and Zip Code JOHN TURNER 111 SECOND AVENUE WESTWOOD, NJ 07675		Name of Employer UNITED WATER MANAGEMENT AND SERVICES <small>Occupation</small> VICE PRES-FINANCE	Date (Month day, Year) Payroll Deduction	Amount of Each Receipt this Period 30.00 (\$30.00) Monthly
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)		Aggregate Year-to-date > \$ 300.00		
D. Full Name, Mailing Address and Zip Code WILLIAM LINAM 422 HASBROUCK BLVD ORADELL, NJ 07649		Name of Employer UNITED WATER MANAGEMENT AND SERVICES <small>Occupation</small> VICE PRES-REGION	Date (Month day, Year) Payroll Deduction	Amount of Each Receipt this Period 60.00 (\$60.00) Monthly
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)		Aggregate Year-to-date > \$ 570.00		
E. Full Name, Mailing Address and Zip Code GREGORY WYATT 29 TEABERRY DR CARLISLE, PA 17013		Name of Employer UNITED WATER PENNSYLVANIA <small>Occupation</small> GENERAL MANAGER	Date (Month day, Year) Payroll Deduction	Amount of Each Receipt this Period 40.00 (\$0.00) Monthly
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)		Aggregate Year-to-date > \$ 380.00		
F. Full Name, Mailing Address and Zip Code KENNETH KOMISKE P. O. BOX 4151 HARRISBURG, PA 17111-0151		Name of Employer UNITED WATER PENNSYLVANIA <small>Occupation</small> MANAGER	Date (Month day, Year) Payroll Deduction	Amount of Each Receipt this Period 40.00 (\$0.00) Monthly
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)		Aggregate Year-to-date > \$ 380.00		
G. Full Name, Mailing Address and Zip Code JOHN HOLLENBACH 906 W. HIGH ST. JEFFERSON CITY, MO 65109		Name of Employer UNITED WATER MISSOURI <small>Occupation</small> MANAGER	Date (Month day, Year) Payroll Deduction	Amount of Each Receipt this Period 28.00 (\$0.00) Monthly
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)		Aggregate Year-to-date > \$ 218.00		
SUB TOTAL of Receipts This Page (Optional)>				408.00
TOTAL this Period (Last page this line number only)>				

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 3 OF 3
FOR LINE NUMBER 11 a 1

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NAME OF COMMITTEE (in full)
United Water Resources Employee PAC

A. Full Name, Mailing Address and Zip Code JOSEPH DWYER 415 HUGUENOT ST NEW ROCHELLE, NY 10802	Name of Employer UNITED WATER NEW ROCHELLE	Date (Month day, Year)	Amount of Each Receipt this Period
	Occupation MANAGER	Payroll Deduction	40.00 (\$0.00)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)	Aggregate Year-to-date > \$ 320.00		Monthly)
B. Full Name, Mailing Address and Zip Code SAMBAMURTHI MUNIPALLI 4069 SABEL DR JACKSONVILLE, FL 32277	Name of Employer UNITED WATER FLORIDA	Date (Month day, Year)	Amount of Each Receipt this Period
	Occupation MANAGER	Payroll Deduction	20.00 (\$0.00)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)	Aggregate Year-to-date > \$ 240.00		Monthly)
C. Full Name, Mailing Address and Zip Code JANNETTE DELANEY 3911 LITTLE JOHN PINE BLUFF, AR 71603	Name of Employer UNITED WATER ARKANSAS	Date (Month day, Year)	Amount of Each Receipt this Period
	Occupation MANAGER	Payroll Deduction	30.00 (\$0.00)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)	Aggregate Year-to-date > \$ 270.00		Monthly)
D. Full Name, Mailing Address and Zip Code EDWARD HUGHMANIC 26 EAST DR TOMS RIVER, NJ 08753	Name of Employer UNITED WATER TOMS RIVER	Date (Month day, Year)	Amount of Each Receipt this Period
	Occupation MANAGER	Payroll Deduction	23.75 (\$0.00)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)	Aggregate Year-to-date > \$ 204.25		Monthly)
E. Full Name, Mailing Address and Zip Code Anthony Langley 6641 Caldwell Rd Lebanon, IN 46052	Name of Employer UNITED WATER WEST LAFAYETTE	Date (Month day, Year)	Amount of Each Receipt this Period
	Occupation MANAGER	Payroll Deduction	40.00 (\$0.00)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)	Aggregate Year-to-date > \$ 400.00		Monthly)
F. Full Name, Mailing Address and Zip Code ROBERT WALKER 2000 FIRST STATE BLVD WILMINGTON, DE 19804	Name of Employer UNITED WATER DELAWARE	Date (Month day, Year)	Amount of Each Receipt this Period
	Occupation MANAGER	Payroll Deduction	70.00 (\$0.00)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)	Aggregate Year-to-date > \$ 350.00		Monthly)
G. Full Name, Mailing Address and Zip Code	Name of Employer	Date (Month day, Year)	Amount of Each Receipt this Period
	Occupation		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)	Aggregate Year-to-date > \$		

SUB TOTAL of Receipts This Page (Optional).....>	223.75
TOTAL this Period (Last page this line number only).....>	906.75

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)
 United Water Resources Employee PAC

A. Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (Month day, Year)	Amount of Each Disb. this Period
MENENDEZ FOR CONGRESS P.O. BOX 848 UNION CITY, NJ 07087	Robert Menendez, U.S. HOUSE 13th NJ Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify) 1996	10/27/96	500.00
B. Full Name, Mailing Address and Zip Code NAWC-PAC 1725 K ST. NW SUITE 1212 WASHINGTON DC, 20006	National Assoc. of Water Co. PAC Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify) 1996	10/29/96	2,500.00
C. Full Name, Mailing Address and Zip Code Pascrell for Congress 63 Quartz Lane Paterson, NJ 07501	William Pascrell, U.S. HOUSE NJ Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (Specify) 1996	10/22/96	500.00
D. Full Name, Mailing Address and Zip Code	Purpose of Disbursement Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)	Date (Month day, Year)	Amount of Each Disb. 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 Disb. 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 Disb. 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 Disb. 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 Disb. 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 Disb. this Period

SUB TOTAL of Disbursements this page (Optional).....> 3,500.00

TOTAL this Period (Last page this line number only).....> 3,500.00

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.

Hand Delivered

DATE OF RECEIPT

12/4/96

First Class Mail

POSTMARKED

Registered/Certified Mail

POSTMARKED

No Postmark

Postmark Illegible

Received from the House Office of Records
and Registration

DATE OF RECEIPT

Received from the Senate Office of Public
Records

DATE OF RECEIPT

Other (Specify):

POSTMARKED

and/or DATE OF RECEIPT

E.S.
PREPARER

12/4/96
DATE PREPARED