For Other Than An Authorized Committee

(Summary Page)

USE FEC MAILING LABEL OR TYPE OR PRINT

1. NAME OF COMMITTEE (Print)
United States Telephone Association
Political Action Committee

ADDRESS (number and street) Check if different than previously reported
1401 H Street, NW, #600

CITY, STATE and ZIP CODE
Washington, DC 20005

RECEIVED
FEDERAL ELECTION COMMISSION
MAIL ROOM

2. FEC IDENTIFICATION NUMBER
C00000984 APR 19 1 45 PM '96

3. This committee qualified as a multicandidate committee DURING THIS Reporting Period on _____ (date)

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
X 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 XX NO

SUMMARY

		COLUMN A This Period	COLUMN B Calendar Year-to-Date
5.	Covering Period 3-1-96 through 3-31-96		
6. (a)	Cash on Hand January 1, 1996		$ 46,901.76
(b)	Cash on Hand at Beginning of Reporting Period	$ 55,202.48	
(c)	Total Receipts (from Line 19)	$ 10,604.06	$18,904.78
(d)	Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	$ 65,806.54	$65,806.54
7.	Total Disbursements (from Line 30)	$ 13,382.07	$13,382.07
8.	Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	$ 52,424.47	$52,424.47
9.	Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	$	
10.	Debts and Obligations Owed BY 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 202-376-3120

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
Larry Clinton

Signature of Treasurer
Larry Clinton

Date
4/17/96

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

FEC FORM 3X

revised 1/1/91

9 5 0 3 0 4 4 4 2 4 7

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

(revised 1/1/91)

NAME OF COMMITTEE: United States Telephone Assoc. Political Action Committee

REPORT COVERING PERIOD FROM 3/1/96 TO 3/31/96

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year	
11. Contributions (other than loans) From:			
a. Individual/Persons Other Than Political Committees			
i. Itemized (use Schedule A)	500.00	3,500.00	11(a)
ii. Unitemized		100.00	11(a)
iii. Total (add i and ii) ➤			11(a)
b. Political Party Committees			11(b)
c. Other Political Committees (such as PACs)	10,000.00	15,000.00	11(c)
d. Total Contributions (add a iii, b and c) ➤	10,500.00	18,600.00	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.)	104.06	304.78	17
18. Transfers from Nonfederal Account for Joint Activity			18
19. Total Receipts (add 11d, 12, 13, 14, 15, 16, 17, and 18) ➤	10,604.06	18,904.78	19
20. Total Federal Receipts (subtract line 18 from line 19) ➤	18,904.78	18,904.78	20
II. Disbursements			
21. Operating Expenditures:			
a. Shared Federal/Non-Federal Activity (from Schedule H4)			
i. Federal Share			21(a)
ii. Non-Federal Share			21(a)
b. Other Federal Operating Expenditures			21(b)
c. Total Operating Expenditures (add a i, a ii, and b) ➤			21(c)
22. Transfers to Affiliated/Other Party Committees			22
23. Contributions to Federal Candidates/Committees and Other Political Committees	13,382.07	13,382.07	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 (add a, b and c) ➤			28(d)
29. Other Disbursements			29
30. Total Disbursements (add 21c, 22, 23, 24, 25, 26, 27, 28d, and 29) ➤	13,382.07	13,382.07	30
31. Total Federal Disbursements (subtract line 21 a ii from line 30) ➤	13,382.07	13,382.07	31
III. Net Contributions/Operating Expenditures			
32. Total Contributions (other than loans)(from line 11d)	10,500.00	18,600.00	32
33. Total Contribution Refunds (from line 28d)	-	-	33
34. Net Contributions (other than loans)(subtract line 33 from 32)	10,500.00	18,600.00	34
35. Total Federal Operating Expenditures (add 21 a i and 21 b) ➤	00	00	35
36. Offsets to Operating Expenditures (from line 15)	00	00	36
37. Net Operating Expenditures (subtract line 36 from 35) ➤			37

4-00173

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SCHEDULE B **ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER 23

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 States Telephone Association Political Action Committee

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Bilbray for Congress 4451 Brookfield Corp. DR. #200 Chantilly, VA 22021-1632	Contribution Disbursement for: [X] Primary [ ] General [ ] Other (specify)	3/6/96	500.00
B. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Friends of Conrad Burns PO Box 3311 Billings, MT 59103	Contribution Disbursement for: [ ] Primary [ ] General [X] Other (specify) Debt Retirement	3/6/96	500.00
C. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Democratic Senatorial Campaign 430 S. Capital St., SE Cmte. Washington, DC 20003	Contribution Disbursement for: [ ] Primary [ ] General [X] Other (specify) Party Contribution	3/6/96	5,000.00
D. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Tom DeLay Congressional Cmte. 10707 Corporate Dr. #130 Stafford, TX 77477	Contribution Disbursement for: [X] Primary [ ] General [ ] Other (specify)	3/6/96	1,000.00
E. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Bill Frist for U.S. Senate 4205 Hillsboro Rd. #306 Nashville, TN 37215	Contribution Disbursement for: [ ] Primary [ ] General [X] Other (specify) '94 Debt Retirement	3/6/96	500.00
F. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Goodlatte for Congress PO Box 292 Roanoke, VA 24002	Contribution Disbursement for: [X] Primary [ ] General [ ] Other (specify)	3/6/96	500.00
G. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Gramm '96 Senate Reelection 3001 Park Center Drive, #1105 Alexandria, VA 22301	Contribution Disbursement for: [X] Primary [ ] General [ ] Other (specify)	3/6/96	1,000.00
H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
La Brasserie Restaurant 239 Massachusetts Ave., NE Washington, DC 20002	Contribution Disbursement for: [ ] Primary [ ] General [X] Other (specify) In Kind-Rep. Susan Molinari	3/6/96	382.07
I. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
'96 Leadership PAC 1617 Hancock Ave. Alexandria, VA 22301	Contribution Disbursement for: [ ] Primary [ ] General [X] Other (specify) Leadership PAC - Rep. Mike Oxley	3/6/96	500.00

SUBTOTAL of Disbursements This Page (optional) 9,882.07

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

95030424249

SCHEDULE B **ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER 23

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NAME OF COMMITTEE (In Full)

United States Telephone Association Political Action Committee

Full Name, Mailing Address and ZIP Code	Purpose of Disbursement / Disbursement for	Date (month, day, year)	Amount of Each Disbursement This Period
A. Oxley for Congress PO Box 1996 Findlay, OH 45839	Contribution Disbursement for: [ ] Primary [X] General [ ] Other (specify)	3/6/96	1,000.00
B. Citizens for Rush PO Box 2884 Washington, DC 20013	Contribution Disbursement for: [X] Primary [ ] General [ ] Other (specify)	3/6/96	500.00
C. Friends of Larry Pressler PO Box 77166 Washington, DC 20013	Contribution Disbursement for: [X] Primary [ ] General [ ] Other (specify)	3/18/96	1,000.00
D. Roberts for Senate PO Box 433 Great Bend, KS 67530	Contribution Disbursement for: [X] Primary [ ] General [ ] Other (specify)	3/18/96	1,000.00
E. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: [ ] Primary [ ] General [ ] 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: [ ] Primary [ ] General [ ] 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: [ ] Primary [ ] General [ ] 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: [ ] Primary [ ] General [ ] 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: [ ] Primary [ ] General [ ] 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) 13,382.07

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SCHEDULE A **ITEMIZED RECEIPTS**

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

PAGE 1 OF 1

FOR LINE NUMBER: 11i

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NAME OF COMMITTEE (In Full)

United States Telephone Association Political Action Committee

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Jim Daubendiek 607 S. Locust Jefferson, IA 50129	Jefferson Tel. Co.	3/18/96	500.00
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Occupation: Executive 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
	Occupation		
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Aggregate Year-to-Date > $		
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation		
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Aggregate Year-to-Date > $		
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation		
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Aggregate Year-to-Date > $		
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation		
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Aggregate Year-to-Date > $		
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation		
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Aggregate Year-to-Date > $		
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation		
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Aggregate Year-to-Date > $		

SUBTOTAL of Receipts This Page (optional) .....

TOTAL This Period (last page this line number only) 500.00

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SCHEDULE A **ITEMIZED RECEIPTS**

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

PAGE 1 OF 1

FOR LINE NUMBER 11C

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NAME OF COMMITTEE (In Full)

United States Telephone Association Political Action Committee

A. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
US West PAC 5325 Zuni St. Rm 679 Denver, CO 80221	Contribution	3/18/96	5,000.00
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Aggregate Year-to-Date > $5,000.00		
B. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
BellSouth - PAC 1133 21st, NW #900 Washington, DC 20036	Contribution	3/28/96	5,000.00
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Aggregate Year-to-Date > $5,000.00		
C. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: ☐ Primary ☐ General ☐ 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: ☐ Primary ☐ General ☐ 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: ☐ Primary ☐ General ☐ 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: ☐ Primary ☐ General ☐ 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: ☐ Primary ☐ General ☐ Other (specify):	Aggregate Year-to-Date > $		

SUBTOTAL of Receipts This Page (optional) ..... >

TOTAL This Period (last page this line number only) ..... > 10,000.00

2 6 0 3 0 4 4 2 7 2

SCHEDULE A **ITEMIZED RECEIPTS**

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

FOR LINE NUMBER 17

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NAME OF COMMITTEE (In Full)
United States Telephone Association Political Action Committee

Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
A. Century National Bank 1875 Eye St., NW Washington, DC 20006 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Checking Account Interest Aggregate Year-to-Date $ 179.77	March 96	65.96
B. Century National Bank 1875 Eye St., NW Washington, DC 20006 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Money Market Account Interest Aggregate Year-to-Date $ 125.01	March 96	38.10
C. Full Name, Mailing Address and ZIP Code Receipt For: ☐ Primary ☐ General ☐ 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: ☐ Primary ☐ General ☐ 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: ☐ Primary ☐ General ☐ 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: ☐ Primary ☐ General ☐ 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: ☐ Primary ☐ General ☐ 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) 104.06

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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 4-19-96
☐	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

kb — PREPARER

4-19-96 — DATE PREPARED

FEC FORM 70-2 (12/92)

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