

**REPORT OF COMMUNICATION COSTS
BY CORPORATIONS AND MEMBERSHIP ORGANIZATIONS**

(See reverse side for instructions.)

RECEIVED
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COMMISSION
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APR 12 9 40 AM '96

<p>1. (a) NAME OF ORGANIZATION Communications Workers of America</p> <p>(b) ADDRESS (Number and Street) 501 Third Street, N.W.</p> <p>(c) CITY, STATE AND ZIP CODE Washington, D.C. 20001</p>	<p>2. IDENTIFICATION NUMBER (Assigned by Commission) Applied For</p> <p>1. TYPE OF ORGANIZATION (Check Appropriate Box)</p> <table style="width:100%;"> <tr> <td><input type="checkbox"/> Corporation</td> <td><input type="checkbox"/> Trade Association</td> </tr> <tr> <td><input checked="" type="checkbox"/> Labor Organization</td> <td><input type="checkbox"/> Cooperative</td> </tr> <tr> <td><input type="checkbox"/> Membership Organization</td> <td><input type="checkbox"/> Corporation without capital stock</td> </tr> </table>	<input type="checkbox"/> Corporation	<input type="checkbox"/> Trade Association	<input checked="" type="checkbox"/> Labor Organization	<input type="checkbox"/> Cooperative	<input type="checkbox"/> Membership Organization	<input type="checkbox"/> Corporation without capital stock
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<input checked="" type="checkbox"/> Labor Organization	<input type="checkbox"/> Cooperative						
<input type="checkbox"/> Membership Organization	<input type="checkbox"/> Corporation without capital stock						
<p>4. TYPE OF REPORT (Check One):</p> <p>(a) <input type="checkbox"/> April 15 Quarterly Report <input checked="" type="checkbox"/> July 15 Quarterly Report <input type="checkbox"/> October 15 Quarterly Report</p> <p><input type="checkbox"/> 12 Day Pre-General Election Report held on _____ at the State of _____ (date)</p> <p><input type="checkbox"/> January 31 Year End Report</p> <p>(b) Is this Report an Amendment? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO</p>							

5. THIS REPORT COVERS THE PERIOD **1-1-96** THROUGH **7-15-96**

SUMMARY OF COMMUNICATION COSTS

Type of Communication	Class or Category Communicated With	Date(s) of Communication	Check One		Identify Candidate, Office Sought, District and State, and Whether for Primary or General Election	Cost of Communication (Per Candidate)
			Support	Oppose		
<input checked="" type="checkbox"/> Direct Mail	<input checked="" type="checkbox"/> Executive/ Administrative Personnel	3/1/96	X		Bill Clinton President-General	46,724.87
<input type="checkbox"/> Telephone		4/1/96	X			3,675.39
<input type="checkbox"/> Telegram	<input type="checkbox"/> Stockholders	4/2/96	X			4,656.23
<input type="checkbox"/> Other:	<input type="checkbox"/> Members	4/22/96	X			8,381.60
<u>Materials</u>		4/19/96	X			97,488.50
(Specify)		4/22/96	X			99,522.30
		4/22/96	X			133,799.85
		4/22/96	X			4,180.32
		4/22/96	X			3,184.50
<input checked="" type="checkbox"/> Direct Mail	<input checked="" type="checkbox"/> Executive/ Administrative Personnel	4/22/96	X		Bill Clinton President - General	16,500.00
<input type="checkbox"/> Telephone		4/29/96	X			107,816.85
<input type="checkbox"/> Telegram	<input type="checkbox"/> Stockholders	4/29/96	X			58,615.09
<input type="checkbox"/> Other:	<input checked="" type="checkbox"/> Members	5/7/96	X			47,787.70
<u>Materials</u>		5/7/96	X			28.83
(Specify)		5/7/96	X			6,765.20
		5/16/96	X			513.50
		6/26/96	X			527,329.18

(NOTE: For additional communications, attach separate sheets containing the same information as above.)

TOTAL COMMUNICATION COSTS FOR THIS PERIOD \$ 1,166,969.91

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

Loretta Bowen *Loretta Bowen* Asst. to Secy-Treas 8/7/96
Type or Print Name Signature and Title of Person Designated to Sign This Report Date

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

<p>WHERE TO FILE: Federal Election Commission 999 E. Street, N.W. Washington, DC 20463</p>	<p>FOR FURTHER INFORMATION CONTACT: Federal Election Commission Toll Free: 800-424-9630 Local: 202-219-3430</p>
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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.

<input type="checkbox"/> Hand Delivered	DATE OF RECEIPT
<input checked="" type="checkbox"/> First Class Mail	POSTMARKED <i>8-8-96</i>
<input type="checkbox"/> Registered/Certified Mail	POSTMARKED
<input type="checkbox"/> No Postmark	
<input type="checkbox"/> Postmark Illegible	
<input type="checkbox"/> Received from the House Office of Records and Registration	DATE OF RECEIPT
<input type="checkbox"/> Received from the Senate Office of Public Records	DATE OF RECEIPT
<input type="checkbox"/> Other (Specify):	POSTMARKED
	and/or DATE OF RECEIPT
<i>gls</i> PREPARER	<i>8-12-96</i> DATE PREPARED