

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee
(Summary Page)

FEB 28 10 45 AM '96

1. NAME OF COMMITTEE (in full) NYNEX Employees' Federal Political Action Committee		2. FEC IDENTIFICATION NUMBER C00179762
ADDRESS (number and street) <input type="checkbox"/> Check if different than previously reported 1095 Avenue of the Americas, 30th Floor		
CITY, STATE and ZIP CODE New York, NY 10036		

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

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SUMMARY	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. Covering Period <u>01/01/96</u> through <u>01/31/96</u>		
8. (a) Cash on Hand January 1, 19 <u>96</u>		\$ 69,010.33
(b) Cash on Hand at Beginning of Reporting Period	\$ 69,010.33	
(c) Total Receipts (from line 19)	\$ 8,341.40	\$ 8,341.40
(d) Subtotal (add Lines 8(b) and 8(c) for Column A and Lines 8(a) and 8(c) for Column B)	\$ 67,351.73	\$ 67,351.73
7. Total Disbursements (from Line 30)	\$ 0.00	\$ 0.00
8. Cash on Hand at Close of Reporting Period (Subtract Line 7 from Line 6(d))	\$ 67,351.73	\$ 67,351.73
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	\$ 0.00	For further information: 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)	\$ 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

Type or Print Name Of Treasurer
Joseph A. Torralz - NYNEX Assistant Treasurer

Signature of Treasurer: *J. A. Torralz* Date: 2/26/96

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

DETAILED SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

PAGE 2, FEC FORM 3X

Revised (1/1/81)

NAME OF COMMITTEE NYNEX Employees' Federal Political Action Committee	REPORT COVERING PERIOD	
	FROM: 01/01/96	TO: 01/31/96
	COLUMN A	COLUMN B
	Total This Period	Calendar Year
I. Receipts		
11. Contributions (other than loans) From:		
a. Individual/Persons Other Than Political Committees		
i. Itemized (Use Schedule A).....	266.67	266.67
ii. Unitemized.....	8,074.73	8,074.73
iii. Total.....(add i and ii)>	8,341.40	8,341.40
b. Political Party Committees.....	0.00	0.00
c. Other Political Committees (such as PACs).....	0.00	0.00
d. Total Contributions.....(add all, b and c)>	8,341.40	8,341.40
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)>	8,341.40	8,341.40
20. Total Federal Receipts.....(subtract line 18 from line 19)>	8,341.40	8,341.40
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 a, ai, and bi)>	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.....	0.00	0.00
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	0.00
30. Total Disbursements.....(Add 21c, 22, 23, 24, 25, 26, 27, 28d, and 29)>	0.00	0.00
31. Total Federal Disbursements.....(Subtract line 21 dii from line 30)>	0.00	0.00
III. Net Contributions/Operating Expenditures		
32. Total Contributions (Other than loans)(from line 11d).....	8,341.40	8,341.40
33. Total Contribution Refunds (from line 28d).....	0.00	0.00
34. Net Contributions (Other than loans)(subtract line 33 from 32).....	8,341.40	8,341.40
35. Total Federal Operating Expenditures.....(add 21 ai and 21 bi)>	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

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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 or any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (in full)
NYNEX Employees' Federal Political Action Committee

9603033374

A. Full Name, Mailing Address and Zip Code IVAN SEIDENBERG G 1113 WESTCHESTER AVE WHITE PLAINS, NY 10604 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)	Name of Employer NYNEX CORP Occupation PRES & CHIEF OPER OFFICER Aggregate Year-to-date > \$ 266.67	Date (Month day, Year) Payroll Deduction 266.67	Amount of Each Receipt this Period 266.67 (\$266.67 Monthly)
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) Aggregate Year-to-date > \$	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) Aggregate Year-to-date > \$	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) Aggregate Year-to-date > \$	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) Aggregate Year-to-date > \$	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) Aggregate Year-to-date > \$	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) Aggregate Year-to-date > \$	Amount of Each Receipt this Period

SUB TOTAL of Receipts This Page (Optional).....>	266.67
TOTAL this Period (Last page this line number only).....>	266.67

**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.

96030323375

<input checked="" type="checkbox"/> Hand Delivered	DATE OF RECEIPT <i>2-29-96</i>
<input type="checkbox"/> First Class Mail	POSTMARKED
<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>JMN</i> PREPARER	<i>2-29-96</i> DATE PREPARED