

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee
(Summary Page)

RECEIVED
FEC MAIL ROOM

2000 DEC -6 A 8 28

USE FEC MAILING LABEL
OR
TYPE OR PRINT

1. NAME OF COMMITTEE (in full) United Water Resources Employees PAC		2. FEC IDENTIFICATION NUMBER C00280156
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 07840		
3. <input checked="" 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	10/01/00 through 11/27/00		
6. (a) Cash on Hand January 1, 2000			\$ 14,847.86
(b) Cash on Hand at Beginning of Reporting Period		\$ 14,868.72	
(c) Total Receipts (from Line 19)		\$ 1,588.54	\$ 16,399.40
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)		\$ 16,457.26	\$ 31,247.26
7. Total Disbursements (from Line 30)		\$ 0.00	\$ 14,790.00
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))		\$ 16,457.26	\$ 16,457.26
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 contact:
Federal Election Commission
999 E Street, NW
Washington, DC 20463
Toll Free 800-426-9530
Local 202-694-1100

Type or Print Name of Treasurer
Donna Cole

Signature of Treasurer *Donna Cole* Date 11-30-00

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 7/1/87)

NAME OF COMMITTEE	REPORT COVERING PERIOD		
United Water Resources Employees PAC	FROM	TO	
	10/01/00	11/27/00	
	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)	868.08	8,267.32	11(a)(4)
ii. Unitemized	720.46	8,132.08	11(a)(5)
ii. Total (add i and ii) >	1,588.54	16,399.40	11(a)(6)
b. Political Party Committees	0.00	0.00	11(b)
c. Other Political Committees (such as PACs)	0.00	0.00	11(c)
d. Total Contributions (add a, b, c and d) >	1,588.54	16,399.40	11(d)
12. Transfers From Affiliated/Other Party Committees	0.00	0.00	12
13. All Loans Received	0.00	0.00	13
14. Loan Repayments Received	0.00	0.00	14
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.)	0.00	0.00	15
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees	0.00	0.00	16
17. Other Federal Receipts (Dividends, Interest, etc.)	0.00	0.00	17
18. Transfers from Nonfederal Account for Joint Activity	0.00	0.00	18
19. Total Receipts (add 11d, 12, 13, 14, 15, 16, 17, and 18) >	1,588.54	16,399.40	19
20. Total Federal Receipts (subtract line 18 from line 19) >	1,588.54	16,399.40	20
II. Disbursements			
21. Operating Expenditures:			
a. Shared Federal/Non-Federal Activity (from Schedule H4)			
i. Federal Share	0.00	0.00	21(a)(1)
ii. Non-Federal Share	0.00	0.00	21(a)(2)
b. Other Federal Operating Expenditures	0.00	0.00	21(b)
c. Total Operating Expenditures (add a, a i, and b) >	0.00	0.00	21(c)
22. Transfers to Affiliated/Other Party Committees	0.00	11,500.00	22
23. Contributions to Federal Candidates/Committees and Other Political Committees	0.00	0.00	23
24. Independent Expenditures (use Schedule E)	0.00	0.00	24
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F)	0.00	0.00	25
26. Loan Repayments Made	0.00	0.00	26
27. Loans Made	0.00	0.00	27
28. Refunds of Contributions To:			
a. Individual/Persons Other Than Political Committees	0.00	0.00	28(a)
b. Political Party Committees	0.00	0.00	28(b)
c. Other Political Committees (such as PACs)	0.00	0.00	28(c)
d. Total Contribution Refunds (add a, b and c) >	0.00	0.00	28(d)
29. Other Disbursements	0.00	3,190.00	29
30. Total Disbursements (add 21c, 22, 23, 24, 25, 26, 27, 28d, and 29) >	0.00	14,790.00	30
31. Total Federal Disbursements (subtract line 21 a, ii from line 30) >	0.00	14,790.00	31
III. Net Contributions/Operating Expenditures			
32. Total Contributions (other than loans) (from line 11d)	1,588.54	16,399.40	32
33. Total Contribution Refunds (from line 28d)	0.00	0.00	33
34. Net Contributions (other than loans) (subtract line 33 from 32)	1,588.54	16,399.40	34
35. Total Federal Operating Expenditures (add 21 a i and 21 b) >	0.00	0.00	35
36. Offsets to Operating Expenditures (from line 15)	0.00	0.00	36
37. Net Operating Expenditures (subtract line 36 from 35) >	0.00	0.00	37

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 1 OF 2
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)
United Water Resources Employees PAC

A. Full Name, Mailing Address and ZIP Code Kenneth F Komiske 15 Ridgefield Road Warwick, NY 10990 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer United Water M&S Date (month, day, year)	Payroll Deduction	Amount of Each Receipt this Period 40.00 (\$40.00)
	Occupation Project Manager Aggregate Year-to-Date > 6 400.00	Monthly	
B. Full Name, Mailing Address and ZIP Code Thomas R MacClave 101 Thornwood Drive Marlton, NJ 08053 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer United Water M&S Date (month, day, year)	Payroll Deduction	Amount of Each Receipt this Period 30.00 (\$30.00)
	Occupation Assistant Treasurer Aggregate Year-to-Date > \$ 300.00	Monthly	
C. Full Name, Mailing Address and ZIP Code Robert E Thiele 180 Oak Avenue South River Vale, NJ 07875 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer United Water M&S Date (month, day, year)	Payroll Deduction	Amount of Each Receipt this Period 65.00 (\$65.00)
	Occupation Asst VP Contract Operations Aggregate Year-to-Date > \$ 650.00	Monthly	
D. Full Name, Mailing Address and ZIP Code Louis P Mondello 30 Patrick Avenue Emerson, NJ 07630 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer United Water M&S Date (month, day, year)	Payroll Deduction	Amount of Each Receipt this Period 30.00 (\$30.00)
	Occupation Director-Customer Care Aggregate Year-to-Date > 3 300.00	Monthly	
E. Full Name, Mailing Address and ZIP Code John E Joyner 111 Middle Valley Rd Long Valley, NJ 07863 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer United Water M&S Date (month, day, year)	Payroll Deduction	Amount of Each Receipt this Period 100.00 (\$100.00)
	Occupation Sr VP Business Development Aggregate Year-to-Date > 3 300.00	Monthly	
F. Full Name, Mailing Address and ZIP Code James P Creedon 131 North 12th St Allentown, PA 18102 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer United Water M&S Date (month, day, year)	Payroll Deduction	Amount of Each Receipt this Period 100.00 (\$100.00)
	Occupation VP Business Development Aggregate Year-to-Date > \$ 300.00	Monthly	
G. Full Name, Mailing Address and ZIP Code Walton F Hill 15 Wathersfield Lane Highland Mills, NY 10930 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer United Water M&S Date (month, day, year)	Payroll Deduction	Amount of Each Receipt this Period 40.00 (\$40.00)
	Occupation Vice President-Reg Business Aggregate Year-to-Date > \$ 400.00	Monthly	

SUBTOTAL of Receipts This Page (optional) 405.00

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 2 OF 2
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 V Boyle 208 Marie Road West Chester, PA 19380	Name of Employer United Water M&S	Date (month, day, year) Payroll Deduction	Amount of Each Receipt this Period 120.00 (\$120.00 Monthly)
	Occupation Director-Proj Analysis & Dev	Aggregate Year-to-Date > \$ 360.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			

B. Full Name, Mailing Address and ZIP Code Donald L Corrali 746 Wooded Trails Franklin Lakes, NJ 07417	Name of Employer United Water M&S	Date (month, day, year) Payroll Deduction	Amount of Each Receipt this Period 180.00 (\$180.00 Monthly)
	Occupation President/CEO/Chairman	Aggregate Year-to-Date > \$ 1,800.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			

C. Full Name, Mailing Address and ZIP Code Gregory P Wyatt 11828 West Armaga Ct Boise, ID 83709	Name of Employer United Water Idaho	Date (month, day, year) Payroll Deduction	Amount of Each Receipt this Period 40.00 (\$40.00 Monthly)
	Occupation General Manager-UWID	Aggregate Year-to-Date > \$ 400.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			

D. Full Name, Mailing Address and ZIP Code John B Pine 3040 Oak Road Orange Park, FL 32065	Name of Employer United Water Florida	Date (month, day, year) Payroll Deduction	Amount of Each Receipt this Period 23.08 (\$23.08 Monthly)
	Occupation New Business Coordinator	Aggregate Year-to-Date > \$ 230.80	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			

E. Full Name, Mailing Address and ZIP Code Karen J Wigand 3050 Greensview Dr Greenwood, IN 46143	Name of Employer United Water M&S	Date (month, day, year) Payroll Deduction	Amount of Each Receipt this Period 100.00 (\$100.00 Monthly)
	Occupation Vice President QA/QC UWB	Aggregate Year-to-Date > \$ 250.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			

F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation	Aggregate Year-to-Date > \$	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			

G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation	Aggregate Year-to-Date > \$	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			

SUBTOTAL of Receipts This Page (optional) 463.08

TOTAL This Period (last page this line number only) 868.08

**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 checked="" type="checkbox"/> Hand Delivered	Date of Receipt <i>12-6-02</i>
<input type="checkbox"/> First Class Mail	POSTMARKED
<input type="checkbox"/> Registered/Certified Mail	POSTMARKED (R/C)
<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
<input type="checkbox"/> Electronic Filing	
<i>Jm13</i> PREPARER	<i>12-6-02</i> DATE PREPARED