

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee
(Summary Page)

USE FED MAILING LABEL
OR
TYPE OR PRINT

1. NAME OF COMMITTEE (in full)
 CMA LOCAL 15000, AFL-CIO
 ADDRESS (number and street) | Check if different than previously reported
 2124 RACE STREET
 CITY, STATE and ZIP CODE
 PHILADELPHIA, PA. 19103

Jan 71 12 49 PM '91

2. FEC IDENTIFICATION NUMBER
 C00105595

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

4. TYPE OF REPORT

(a) April 15 Quarterly Report | Monthly Report Due On: February 20, June 20, October 20
 July 15 Quarterly Report | March 20, July 20, November 20
 October 15 Quarterly Report | April 20, August 20, December 20
 May 20, September 20, January 31

January 31 Year End Report | Twelfth day report preceding _____ (Type of Election)
 election on _____ in the State of _____

July 31 Mid Year Report (Non-integer Year Only) | Thirtieth day report following the General Election on _____ in the State of _____

Termination Report | _____ 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: 2-1-93 through 12-31-93		
6. (a) Cash on Hand January 1, 1993		\$ 12,312.26
(b) Cash on Hand at Beginning of Reporting Period	\$ 35,151.77	
(c) Total Receipts (from Line 10)	\$ 42,512.39	\$ 34,485.40
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	\$ 77,664.16	\$ 47,427.66
7. Total Disbursements (from Line 30)	\$ 34,074.90	\$ 53,836.30
8. Cash on Hand at Close of Reporting Period (subtract line 7 from Line 6(d))	\$ 43,589.26	\$ 43,589.36
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
 660 E Street, NW
 Washington, DC 20463
 Toll Free 800-424-9600
 Local 202-376-3120

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

Type or Print Name of Treasurer

PATRICIA A. MAISANO

Signature of Treasurer

Patricia A. Maisano

Date

1-18-94

NOTE: Submission of false, misleading, 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 1/1/91)

NAME OF COMMITTEE CWA LOCAL 13000, AFL CIO		REPORT COVERING PERIOD FROM: 7-31-93 TO: 12-31-93	
		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)			
ii. Unitemized		47,022.50	83,717.50
iii. Total	(add i and ii) >	47,022.50	83,717.50
b. Political Party Committees			
c. Other Political Committees (such as PACs)			
d. Total Contributions	(add a ii, b and c) >	47,022.50	83,717.50
12. Transfers From Affiliated/Other Party Committees			
13. All Loans Received			
14. Loan Repayments Received			
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.)			
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees			
17. Other Federal Receipts (Dividends, Interest, etc.)		989.89	767.90
18. Transfers from Non-Federal Account for Joint Activity			
19. Total Receipts	(add 11d, 12, 13, 14, 15, 16, 17, and 18) >		
20. Total Federal Receipts	(subtract line 18 from line 19) >	42,512.39	80,485.40
II. Disbursements			
21. Operating Expenditures:			
a. Shared Federal/Non-Federal Activity (from Schedule H4)			
i. Federal Share			
ii. Non-Federal Share			
b. Other Federal Operating Expenditures		984.80	7,748.30
c. Total Operating Expenditures	(Add a i, a ii, and b) >	984.80	7,748.30
22. Transfers to Affiliated/Other Party Committees		16,000.00	16,000.00
23. Contributions to Federal Candidates/Committees and Other Political Committees		7,000.00	14,000.00
24. Independent Expenditures (use Schedule E)			
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F)			
26. Loan Repayments Made			
27. Loans Made			
28. Refunds of Contributions To:			
a. Individuals/Persons Other Than Political Committees			
b. Political Party Committees			
c. Other Political Committees (such as PACs)			
d. Total Contribution Refunds	(Add a, b and c) >		
29. Other Disbursements		10,090.00	16,090.00
30. Total Disbursements	(add 21c, 22, 23, 24, 25, 26, 27, 28d, and 29) >	34,074.80	53,838.30
31. Total Federal Disbursements	(subtract line 21 a > from line 30) >	30,074.80	53,838.30
III. Net Contributions/Operating Expenditures			
32. Total Contributions (other than loans) (from line 11 d)			
33. Total Contribution Refunds (from line 28d)			
34. Net Contributions (other than loans) (subtract line 33 from 32)			
35. Total Federal Operating Expenditures	(add 21 a i and 21 b) >	984.80	7,748.30
36. Offsets to Operating Expenditures (from line 15)			
37. Net Operating Expenditures	(subtract line 36 from 35) >	984.80	7,748.30

CWA LOCAL 13000, AFL CIO

SCHEDULE A

ITEMIZED RECEIPTS

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

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NAME OF COMMITTEE (in Full)				
CWA LOCAL 13000, AFL-CIO				
A. Full Name, Mailing Address and ZIP Code EXECUTIVE BOARD, PAYROLL DEDUCTION, MONTHLY		Name of Employer CWA LOCAL 13000	Date (month, day, year) 7-1-93 8-1-93 9-1-93 10-1-93 11-1-93 12-1-93	Amount of Each Receipt this Period 120.00 100.00 120.00 120.00 120.00 120.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation Aggregate Year-to-Date > \$ 1,480.00		(760.00)
B. Full Name, Mailing Address and ZIP Code UNION MEMBERS, PAYROLL DEDUCTION, MONTHLY		Name of Employer BELL OF PENNSYLVANIA	Date (month, day, year)	Amount of Each Receipt this Period 81,971.50
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation Aggregate Year-to-Date > \$ 81,971.50		
C. Full Name, Mailing Address and ZIP Code UNION MEMBERS, PAYROLL DEDUCTION, MONTHLY		Name of Employer G.T.E. TELEPHONE	Date (month, day, year)	Amount of Each Receipt this Period 45.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation Aggregate Year-to-Date > \$ 45.00		
D. Full Name, Mailing Address and ZIP Code UNION MEMBERS, PAYROLL DEDUCTION, MONTHLY		Name of Employer COXCAST CABLEVISION	Date (month, day, year)	Amount of Each Receipt this Period 208.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation Aggregate Year-to-Date > \$ 208.00		
E. Full Name, Mailing Address and ZIP Code ANTHONY CONTE		Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period 13.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation Aggregate Year-to-Date > \$ 13.00		
F. Full Name, Mailing Address and ZIP Code		Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation 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
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation Aggregate Year-to-Date > \$		
SUBTOTAL of Receipts This Page (optional)				
TOTAL This Period (last page this line number only)				47,077.50

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SCHEDULE B

ITEMIZED DISBURSEMENTS

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

PAGE 01 OF 1
FOR LINE NUMBER 21 (b)

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)

CWA LOCAL 13000, AFL-CIO

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
GILGAMM, BERKOVITZ, LEVINSON & WFINER ONE SENYER OFFICE PARK SUITE 200 OLD YORK RD & TOWNSHIP LINE RD ELKINS PARK, PA. 19117	ACCTG COSTS TO 7-1-93 ACCTG COSTS TO 9-30-93 Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	10-20-93 11-16-93	750.00 270.00
B. Full Name, Mailing Address and ZIP Code MELLON PSFS 1514 & MARKET STREETS PHILADELPHIA, PA. 19102	Purpose of Disbursement ACCOUNT ANALYSIS FEE 7-1-93 Lu 19-31-93 Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period 184.80
C. Full Name, Mailing Address and ZIP Code JILL MC LAUGHLIN 356 YARMOUTH DR SPRINGFIELD, PA. 19054	Purpose of Disbursement WORKING POLLS 11-2-93 Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 11-15-93	Amount of Each Disbursement This Period 50.00
D. Full Name, Mailing Address and ZIP Code JULIE VITA 253 LAURELTON ST PHILADELPHIA, PA. 19128	Purpose of Disbursement WORKING POLLS 11-2-93 Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 11-15-93	Amount of Each Disbursement This Period 50.00
E. Full Name, Mailing Address and ZIP Code JOE QUICLEY 225 RECTOR STREET PHILADELPHIA, PA. 19128	Purpose of Disbursement WORKING POLLS 11-2-93 Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 11-15-93	Amount of Each Disbursement This Period 50.00
F. Full Name, Mailing Address and ZIP Code GARY SALITRI 120 LEHR AV PITTSBURGH, PA. 15223	Purpose of Disbursement WORKING POLLS 11-2-93 Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 11-16-93	Amount of Each Disbursement This Period 50.00
G. Full Name, Mailing Address and ZIP Code ALEX MINISPAK, JR. 880 TWENTY-FORSE AV MCMARTINSBURG, PA. 17055	Purpose of Disbursement WORKING POLLS 11-2-93 Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 11-16-93	Amount of Each Disbursement This Period 50.00
H. Full Name, Mailing Address and ZIP Code KARLYN WALTER 210 COFFEE HILL RD. LYONS, PA. 17028	Purpose of Disbursement WORKING POLLS 11-2-93 Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 11-16-93	Amount of Each Disbursement This Period 50.00
I. Full Name, Mailing Address and ZIP Code FRANCIS C. PETTE 60 KILLBUCK PIKE PITTSBURGH, PA. 15215	Purpose of Disbursement WORKING POLLS 11-2-93 Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 12-15-93	Amount of Each Disbursement This Period 50.00

SUB TOTAL of Disbursements This Page (not oral)

TOTAL This Period (last page this line number only)

984.80

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)
 CWA LOCAL 13000, AFL-CIO

2400007300003

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
CWA COPL (93) 501 THIRD STREET WASHINGTON, D.C. 20001	DUCT FOR 1993 Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	12-5-93	16,000.00
B. 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 Disbursement This Period
C. 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 Disbursement This Period
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 Disbursement 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 Disbursement 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 Disbursement 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 Disbursement 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 Disbursement 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 Disbursement This Period

SUBTOTAL of Disbursements This Page (optional)	
TOTAL This Period (last page this line number only)	16,000.00

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

PAGE 7 OF 11
FOR LINE NUMBER 23

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NAME OF COMMITTEE (in Full)
CWA LOCAL 13000, AFL-CIO

04000070004

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
LYNN YEAP, TOR US SENATE DEBT RETIREMENT 1735 MARKET STREET 3811 FLOOR PHILADELPHIA, PA. 19103	DEBT RETIREMENT Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	9-14-93	2,000.00
B. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
CITIZENS FOR WOFFORD 1420 WALNUT STREET, SUITE 908 PHILADELPHIA, PA. 19102	DEBT RETIREMENT Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	11-23-93	5,000.00
C. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
D. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
E. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
F. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
G. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
I. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		

SUBTOTAL of Disbursements This Page (optional)	
TOTAL This Period (last page this line number only)	7,000.00

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

PAGE 1 OF 3
FOR LINE NUMBER 29

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NAME OF COMMITTEE (in Full)
CWA LOCAL 13090, AFI-CIO

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
CITIZENS FOR HUGHES P.O. BOX 13031 PHILADELPHIA, PA. 19101	CAMPAIGN EXPENSE Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	7-14-93	150.00
PHOENIX LIFE DEMOCRATIC COMMITTEE 976 CHERRY STREET PHOENIXVILLE, PA. 19360	FUND RAISER 8-22-93 Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	7-14-93	240.00
LARRY ROBERTS CAMPAIGN FUND RD 1 BOX 4002 HOPKWOOD, PA. 15147	CAMPAIGN EXPENSE Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	8-27-93	100.00
DELICIA FOR LEGISLATOR COMMITTEE 1416 BARBARA DRIVE WIROMA, PA. 15147	FUND RAISER 10-8-93 Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	9-14-93	200.00
K. CURRY A. KASUNIS CAMPAIGN COMMITTEE RD 1 DUNBAR, PA. 15111	FUND RAISER 10-1-93 Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	10-1-93	200.00
COMMITTEE TO ELECT LARRY FIELDS P.O. BOX 3154 ALTOONA, PA. 16603	CAMPAIGN EXPENSE Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	10-7-93	200.00
SEIS FOR ALTOONA CITY COUNCIL 1807 HIGHLAND STREET ALTOONA, PA. 16601	CAMPAIGN EXPENSE Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	10-7-93	200.00
RE-ELECT REPRESENTATIVE BELFANTI COMMITTEE 79 LAST AVENUE ML. CARMEL, PA. 17527	FUND RAISER 10-12-93 Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	10-7-93	200.00
CLAY FOR ITS SLATER CAMPAIGN COMMITTEE 3916 WILLOW STREET WEST PITTSBURGH, PA. 15122	FUND RAISER 10-21-93 Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	10-14-93	200.00

SUBTOTAL of Disbursements This Page (optional)	7,690.00
TOTAL This Period (last page this line number only)	

SCHEDULE B

ITEMIZED DISBURSEMENTS

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NAME OF COMMITTEE (in Full)

OWA LOCAL 13000, ATL-CIO

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
FRIENDS OF JANNIE L. BLACKWELL 6231 OSAGE STREET PHILADELPHIA, PA. 19143	FUND RAISER 10-28-93 Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	10-14-93	250.00
COMMITTEE TO RE-ELECT GENE COON SHERIFF 924 LENOIR OAK PITTSBURGH, PA. 15237	FUND RAISER 10-28-93 Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	10-14-93	200.00
PUSHINSKY 193 1808 LAW & FINANCE BLDG. PITTSBURGH, PA. 15219	CAMPAIGN EXPENSE Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	10-14-93	7,000.00
COMMITTEE TO ELECT HERBERT LORRY GOLDSTEIN P.O. BOX 5161 HARRISBURG, PA. 17110	CAMPAIGN EXPENSE Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	10-14-93	1,000.00
JOSEPH SARIANO MISTAKE FOR COMMONWEALTH COURT P.O. BOX 2437 PITTSBURGH, PA. 15230	CAMPAIGN EXPENSE Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	10-14-93	2,000.00
COMMITTEE TO ELECT BILL STANSON ONE L. HUNTING PARK AVENUE PHILADELPHIA, PA. 19124	CAMPAIGN EXPENSE Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	10-13-93	2,000.00
FRIENDS OF SEANUS MCCALLERY 510 WALNUT STREET 2TH FLOOR PHILADELPHIA, PA. 19106	FUND RAISER 10-21-93 Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	10-13-93	200.00
FRIENDS OF JANNIE L. BLACKWELL 6231 OSAGE STREET PHILADELPHIA, PA. 19143	FUND RAISER 10-28-93 Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	10-28-93	250.00
FRIENDS OF LARRY WASHINGTON 7516 OGDEN STREET PHILADELPHIA, PA. 19150	CAMPAIGN EXPENSE Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	11-23-93	200.00

SUBTOTAL of Disbursements This Page (optional)

R,100.00

TOTAL This Period (last page this line number only)

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SCHEDULE B

ITEMIZED DISBURSEMENTS

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NAME OF COMMITTEE (in Full)

CWA LOCAL 13000, AFL CIO

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
FRED A. TRELLO CAMPAIGN ACCOUNT 1719 WANCE AVENUE CORAOPOLIS, PA. 15108	FUND RAISING 12-3-93 Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	12-1-93	300.00
B. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
C. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
D. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
E. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
F. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
G. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
I. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		

SUBTOTAL of Disbursements This Page (section I)

300.00

TOTAL This Period (last page this line number only)

10,000.00

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**Federal Election Commission
 ENVELOPE REPLACEMENT PAGE
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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*
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