

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee
(Summary Page)

RECEIVED
FEC MAIL ROOM

2000 JUN 21 A 10:11

USE FEC MAILING LABEL
OR
TYPE OR PRINT

| | | |
|--|--|---|
| 1. NAME OF COMMITTEE (in full) CWA Local 13000 AFL-CIO | | 2. FEC IDENTIFICATION NUMBER C00109595 |
| ADDRESS (number and street) <input type="checkbox"/> Check if different than previously reported 2124 Race Street, 3rd Floor | | |
| CITY, STATE and ZIP CODE Philadelphia, PA 19103 | | 3. <input 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

12-Day Pre-Election Report for the _____
(Type of Election)

election on _____ in the State of _____

30-Day Post-Election 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 <u>5/01/2000</u> through <u>5/31/2000</u> | | | |
| 6. (a) | Cash on Hand January 1, 19_____ | | \$ 158,263.54 |
| (b) | Cash on Hand at Beginning of Reporting Period _____ | \$ 164,868.04 | |
| (c) | Total Receipts (from Line 19) _____ | \$ 13,677.71 | \$ 63,786.29 |
| (d) | Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) _____ | \$ 178,545.75 | \$ 222,049.83 |
| 7. | Total Disbursements (from Line 3D) _____ | \$ 15,500.00 | \$ 59,004.08 |
| 8. | Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) _____ | \$ 163,045.75 | \$ 163,045.75 |
| 9. | Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D) _____ | \$ | For further information contact: Federal Election Commission 999 E Street, NW Washington, DC 20483 Toll Free 800-424-9530 Local 202-694-1100 |
| 10. | Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D) _____ | \$ | |

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

PATRICIA A MAISANO

Signature of Treasurer

Patricia A Maisano

Date

6-14-00

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

| | | | | | | | | |
|--|--|--|--|--|--|--|--|--|
| | | | | | | | | |
|--|--|--|--|--|--|--|--|--|

FEC FORM 3X

(revised 9/93)

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 5/01/2000 TO 5/31/2000 | |
|--|---|---|---------------------------|
| | | 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) | 121.00 | 347.00 |
| | ii. Unitemized | 13,444.75 | 62,755.94 |
| | Total (add i and ii) > | 13,565.75 | 63,102.94 |
| b. | Political Party Committees | | |
| c. | Other Political Committees (such as PACs) | | |
| d. | Total Contributions (add a iii, b and c) > | | |
| 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.) | 111.96 | 683.35 |
| 18. | Transfers from Nonfederal Account for Joint Activity | | |
| 19. | Total Receipts (add 11d, 12, 13, 14, 15, 16, 17, and 18) > | 13,677.71 | 63,786.29 |
| 20. | Total Federal Receipts (subtract line 18 from line 19) > | 13,677.71 | 63,786.29 |
| II. Disbursements | | | |
| 21. | Operating Expenditures: | | |
| a. | Shared Federal/Non-Federal Activity (from Schedule H4) | | |
| | i. Federal Share | | |
| | ii. Non-Federal Share | | 1,464.08 |
| b. | Other Federal Operating Expenditures | | 1,464.08 |
| c. | Total Operating Expenditures (add a i, ii, and b) > | | |
| 22. | Transfers to Affiliated/Other Party Committees | | |
| 23. | Contributions to Federal Candidates/Committees and Other Political Committees | 15,000.00 | 40,100.00 |
| 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. Individual/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) > | 500.00 | 17,440.00 |
| 29. | Other Disbursements | | |
| 30. | Total Disbursements (add 21c, 22, 23, 24, 25, 26, 27, 28d, and 29) > | 15,500.00 | 59,004.08 |
| 31. | Total Federal Disbursements (subtract line 21 a ii from line 30) > | 15,500.00 | 59,004.08 |
| III. Net Contributions/Operating Expenditures | | | |
| 32. | Total Contributions (other than loans) (from line 11d) | | |
| 33. | Total Contribution Refunds (from line 28d) | | |
| 34. | Net Contributions (other than loans) (subtract line 33 from line 32) | | |
| 35. | Total Federal Operating Expenditures (add 21 a i and 21 b) > | | |
| 36. | Offsets to Operating Expenditures (from line 15) | | |
| 37. | Net Operating Expenditures (subtract line 36 from line 35) > | | |

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE OF
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)

CWA Local 13000 AFL-CIO

| A. Full Name, Mailing Address and ZIP Code PATRICIA MAISANO 1012 PUTNAM BLVD WALLINGFORD, PA 19086 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Name of Employer CWA LOCAL 13000 Occupation EXECUTIVE BOARD Aggregate Year-to-Date > \$ 255.00 | Date (month, day, year) 5/17/00 | Amount of Each Receipt this Period \$51.00 |
|--|--|------------------------------------|---|
| B. Full Name, Mailing Address and ZIP Code EDWARD MOONEY 322 ROSEBERRY ST PHILA, PA 19148 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Name of Employer CWA LOCAL 13000 Occupation EXECUTIVE BOARD Aggregate Year-to-Date > \$ 385.00 | Date (month, day, year) 5/17/00 | Amount of Each Receipt this Period \$70.00 |
| 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) | 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) | 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) | 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) | 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) | Amount of Each Receipt this Period |

SUBTOTAL of Receipts This Page (optional)

\$121.00

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 OF
FOR LINE NUMBER 17

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 | Name of Employer | Date (month, day, year) | Amount of Each Receipt This Period |
|---|-------------------|------------------------------------|------------------------------------|
| MELLON BANK 18TH & MARKET PHILA., PA 19103 | INTEREST RECEIVED | 5/31/2000 | \$111.96 |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation | Aggregate Year-to-Date > \$ 683.35 | |
| B. 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 > \$ | |
| C. 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 > \$ | |
| D. 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 > \$ | |
| E. 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 > \$ | |
| 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)

\$111.96

TOTAL This Period (last page this line number only)

SCHEDULE B

ITEMIZED DISBURSEMENTS

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 |
|--|--|-------------------------|---|
| CITIZENS FOR RON KLINK P.O. BOX 15491 PITTSBURGH, PA 15237 | 2000 PRIMARY Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | 5/02/2000 | \$5,000.00 |
| CITIZENS FOR RON KLINK P.O. BOX 15491 PITTSBURGH, PA 15237 | 2000 GENERAL Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | 5/02/2000 | \$5,000.00 |
| COMMITTEE TO ELRCT ED O'BRIEN P.O. BOX 447 BETHLEHEM, PA 18018 | 2000 GENERAL Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | 5/02/2000 | \$5,000.00 |
| 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) | \$15,000.00 |
| TOTAL This Period (last page this line number only) | |

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

PAGE **1** OF
FOR LINE NUMBER
29

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 144TH DISTRICT Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | Date (month, day, year) 5/02/2000 | Amount of Each Disbursement This Period \$500.00 |
|--|--|--------------------------------------|---|
| 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)

\$500.00

TOTAL This Period (last page this line number only)

