

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee
(Summary Page)

USE FEC MAILING LABEL
OR
TYPE OR PRINT

RECEIVED
FEDERAL ELECTION
COMMISSION

Oct 15 12 26 PM '98

1. NAME OF COMMITTEE (In full)
**UTILITY WORKERS UNION OF AMERICA, AFL-CIO
POLITICAL CONTRIBUTIONS COMMITTEE**

ADDRESS (number and street) Check if different than previously reported
815 16TH ST., N.W.

CITY, STATE and ZIP CODE
WASHINGTON, D.C. 20006

2. FEC IDENTIFICATION NUMBER
C000040741

3. 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	7/1/98 through 9/30/98		
6. (a) Cash on Hand January 1, 1998			\$ 21,507.50
(b) Cash on Hand at Beginning of Reporting Period		\$ 37,269.77	
(c) Total Receipts (from Line 19)		\$ 35,457.03	\$ 67,119.30
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)		\$ 72,726.80	\$ 88,626.80
7. Total Disbursements (from Line 30)		\$ 18,500.00	\$ 34,400.00
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))		\$ 54,226.80	\$ 54,226.80
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)		\$ 0	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)		\$ 0	

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
JOHN M. WALSH, JR. NATIONAL SECRETARY-TREASURER

Signature of Treasurer

Date

9/30/98

NOTE: Commission 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 9/98)

**DETAILED SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS
PAGE 2, FEC FORM 3X**

(revised 1/1/91)

NAME OF COMMITTEE

REPORT COVERING PERIOD

FROM 7/1/98 TO: 9/30/98

COLUMN A
Total This Period

COLUMN B
Calendar Year

I. Receipts

11. Contributions (other than loans) From:		
e. Individual/Persons Other Than Political Committees		
i. Itemized (use Schedule A)	7,516.88	7,516.88
ii. Unitemized	27,940.15	64,602.42
iii. Total (add i and ii) >	35,457.03	67,119.30
b. Political Party Committees		
c. Other Political Committees (such as PACs)		
d. Total Contributions (add a ii, b and c) >	35,457.03	67,119.30
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.)		
18. Transfers from Nonfederal Applicant for Joint Activity		
19. Total Receipts (add 11d, 12, 13, 14, 15, 16, 17, and 18) >	35,457.03	67,119.30
20. Total Federal Receipts (subtract line 18 from line 19) >	35,457.03	67,119.30

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		
c. Total Operating Expenditures (add a i, a ii, and b) >		
22. Transfers to Affiliated/Other Party Committees		
23. Contributions to Federal Candidates/Committees and Other Political Committees	8,200.00	14,100.00
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) >		
29. Other Disbursements	10,300.00	15,300.00
30. Total Disbursements (add 21c, 22, 23, 24, 25, 26, 27, 28d, and 29) >	18,500.00	34,400.00
31. Total Federal Disbursements (subtract line 21 a ii from line 30) >		

III. Net Contributions/Operating Expenditures

32. Total Contributions (other than loans)(from line 11d)	35,457.03	67,119.30
33. Total Contribution Refunds (from line 28d)		
34. Net Contributions (other than loans)(subtract line 33 from 32)	35,457.03	67,119.30
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 35) >		

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 1 OF 4
FOR LINE NUMBER

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NAME OF COMMITTEE (in Full)

UTILITY WORKERS UNION OF AMERICA, AFL-CIO POLITICAL CONTRIBUTIONS COMMITTEE

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
WIGHTMAN, DONALD 815 16TH ST., N.W. WASHINGTON, D.C. 20006	UTILITY WORKERS	9/30/98 \$	347.65
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation PRESIDENT	Aggregate Year-to-Date > \$ 1,029.32	
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
WALSH, JOHN 815 16TH ST., N.W. WASHINGTON, D.C. 20006	UTILITY WORKERS	9/30/98 \$	339.52
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation SEC-TREAS	Aggregate Year-to-Date > \$ 1,013.98	
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
JAMES KELLER 815 16TH ST., N.W. WASHINGTON, D.C. 20006	UTILITY WORKERS	9/30/98	339.52
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation VICE PRESIDENT	Aggregate Year-to-Date > \$ 1,013.98	
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
MORIARTY, JOHN 850-19 NEWBRIDGE ROAD EAST MEADOW, NY 11554	UTILITY WORKERS	9/30/98 \$	264.36
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation REGIONAL DIR	Aggregate Year-to-Date > \$ 779.92	
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
JOHN HOLLAND 8 WALNUT STREET FOXBORO, MA 02035	UTILITY WORKERS	9/30/98	218.64
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation NATIONAL REP	Aggregate Year-to-Date > \$ 854.74	
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
MARTIN, ANTHONY 116 HURON STRET BROOKLYN, NY 11222	UTILITY WORKERS	9/30/98	136.81
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation NATIONAL REP	Aggregate Year-to-Date > \$ 536.87	
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
HICKER, FRED 63 TANNEHILL DRIVE WASHINGTON, PA 15301	UTILITY WORKERS	9/30/98 \$	264.36
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation REGIONAL DIR	Aggregate Year-to-Date > \$ 779.92	

SUBTOTAL of Receipts This Page (optional) \$1,910.86

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 6
FOR LINE NUMBER

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NAME OF COMMITTEE (in Full)

UTILITY WORKERS UNION OF AMERICA, AFL-CIO POLITICAL CONTRIBUTIONS COMMITTEE

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
WILSON, ALLEN RD#1 BOX 401-A UNIONTOWN, PA 15401 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	UTILITY WORKERS Occupation NATIONAL REP Aggregate Year-to-Date > \$ 654.71	9/30/98 \$	218.64
B. Full Name, Mailing Address and ZIP Code OPATKA, DONALD 7559 ANCHOR LANE NORTHFIELD, OH 44067 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	UTILITY WORKERS Occupation NATIONAL REP Aggregate Year-to-Date > \$ 662.07	9/30/98 \$	226.00
C. Full Name, Mailing Address and ZIP Code LAFOREST, RONALD 1900 1/2 S. WENONA ST BAY CITY, MI 48706 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	UTILITY WORKERS Occupation REGIONAL DIR Aggregate Year-to-Date > \$ 779.93	9/30/98	264.36
D. Full Name, Mailing Address and ZIP Code HOUSER, ROBERT 42 RAVENWOOD BLVD BARNEGAT, NJ 08005 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	UTILITY WORKERS Occupation NATIONAL REP Aggregate Year-to-Date > \$ 167.15	9/30/98 \$	167.15
E. Full Name, Mailing Address and ZIP Code MANOOGIAN, GEORGE 1100 WESTBORO BIRMINGHAM, MI 48009 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	UTILITY WORKERS Occupation NATIONAL REP Aggregate Year-to-Date > \$ 618.70	9/30/98	218.64
F. Full Name, Mailing Address and ZIP Code GARCIA, BERNARDO 5070 CASPIAN WAY OCEANSIDE, CA 92057 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	UTILITY WORKERS Occupation REGIONAL DIR Aggregate Year-to-Date > \$ 779.92	9/30/98	264.36
G. Full Name, Mailing Address and ZIP Code WOOD, CARL 168 AMIGOS WAY FALLBROOK, CA 92028 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	UTILITY WORKERS Occupation NATIONAL REP Aggregate Year-to-Date > \$ 654.71	9/30/98 \$	218.64

SUBTOTAL of Receipts This Page (optional)

1,577.79

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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PAGE **3** OF **6**
FOR LINE NUMBER

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NAME OF COMMITTEE (In Full)

UTILITY WORKERS UNION OF AMERICA, AFL-CIO POLITICAL CONTRIBUTIONS COMMITTEE

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
WEINSTEIN, SAM 815 16TH ST., N.W. WASHINGTON, D.C. 20006	UTILITY WORKERS	9/30/98	254.03
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: ASST TO PRESIDENT	Aggregate Year-to-Date > \$ 790.71	
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
GENO, MARILYN 815 16TH ST., N.W. WASHINGTON, D.C. 20006	UTILITY WORKERS	9/30/98	0
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: ORGANIZER	Aggregate Year-to-Date > \$ 243.21	
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
DEVLIN, JOHN RR1 BOX 22 POUGHQUAG, NY 12570	UTILITY WORKERS	9/30/98	182.20
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: NATIONAL REP	Aggregate Year-to-Date > \$ 182.20	
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
GEIST, ROBERT 10239 KRUGH ROAD MENDON, OH 45862	UTILITY WORKERS	9/30/98	150.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: EX BD	Aggregate Year-to-Date > \$ 450.00	
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
LOPEZ, JOAQUIN 420 E 111TH ST. #2209 NEW YORK, NY 10029	UTILITY WORKERS	9/30/98	150.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: EX BD	Aggregate Year-to-Date > \$ 450.00	
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
AHUMADA, ALEHANDRO 600 S NEW HAMPSHIRE AVE LOS ANGELES, CA 90005	UTILITY WORKERS	9/30/98	150.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: EX BD	Aggregate Year-to-Date > \$ 450.00	
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
CARNEY, PATRICK 60 TERRACE ROAD MEDFORD, MA 02155	UTILITY WORKERS	9/30/98	150.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: EX BD	Aggregate Year-to-Date > \$ 450.00	

SUBTOTAL of Receipts This Page (optional) **1,036.23**

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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PAGE **4** OF **6**
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NAME OF COMMITTEE (in Full)

UTILITY WORKERS UNION OF AMERICA, AFL-CIO POLITICAL CONTRIBUTIONS COMMITTEE

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
HARRIS, MARTA 4827 GOLDEN RIDGE DR CORONA, CA 91720	UTILITY WORKERS	9/30/98	225.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation EX BD	Aggregate Year-to-Date > \$ 675.00	
B. Full Name, Mailing Address and ZIP Code JONES, JOHN 109-27 225TH STREET QUEENS VILLAGE, NY 11429	UTILITY WORKERS	9/30/98	150.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation EX BD	Aggregate Year-to-Date > \$ 450.00	
C. Full Name, Mailing Address and ZIP Code KOTECKI, DAVID 13124 OAK PARK BLVD GARFIELD HEIGHTS, OH 44125	UTILITY WORKERS	9/30/98	150.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation EX BD	Aggregate Year-to-Date > \$ 450.00	
D. Full Name, Mailing Address and ZIP Code NAYLOR, JOHN 8510 FARMINGTON RD GERMANTOWN, OH 45327	UTILITY WORKERS	9/30/98	150.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation EX BD	Aggregate Year-to-Date > \$ 450.00	
E. Full Name, Mailing Address and ZIP Code RUFFNER, GARY 110 W. LENAWEE LANSING, MI 48933	UTILITY WORKERS	9/30/98	500.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation EX BD	Aggregate Year-to-Date > \$ 2,000.00	
F. Full Name, Mailing Address and ZIP Code STERNER, WILLIAM 333 STATE STREET CHARLEROI, PA 15022	UTILITY WORKERS	8/30/98	150.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation EX BD	Aggregate Year-to-Date > \$ 450.00	
G. Full Name, Mailing Address and ZIP Code TOLAND, FRANCIS 158 EDGEHILL RD BRAintree, MA 02184	UTILITY WORKERS	9/30/98	75.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation EX BD	Aggregate Year-to-Date > \$ 225.00	

SUBTOTAL of Receipts This Page (optional)

1,400.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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NAME OF COMMITTEE (in Full)

UTILITY WORKERS UNION OF AMERICA, AFL-CIO POLITICAL CONTRIBUTIONS COMMITTEE

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
VARRICHIO, PHILIP 17 WAGG AVENUE MALVERNE, NY 11565	UTILITY WORKERS	9/30/98	150.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation EX BD	Aggregate Year-to-Date > \$ 450.00	
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
WATERS, GERALD 10 HAYMAKER LANE LEVITTOWN, NY 11756	UTILITY WORKERS	9/30/98	150.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation EX BD	Aggregate Year-to-Date > \$ 450.00	
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
MOFFETT, JAMES 658 WEST PARK AVNEUE 17 VAN TERRACE S SPARKILL, NY 10976	UTILITY WORKERS	9/30/98	150.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation EX BD	Aggregate Year-to-Date > \$ 450.00	
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
FLAHERTY, JOSEPH 658 WEST PARK AVENUE LONG BEACH, FL 11561	UTILITY WORKERS	9/30/98	150.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation EX BD	Aggregate Year-to-Date > \$ 450.00	
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
LANGFORD, MICHAEL 2711 SOUTH OTTER CREEK LASALLE, MI 48145	UTILITY WORKERS	9/30/98	150.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation EX BD	Aggregate Year-to-Date > \$ 300.00	
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
ABEYTA, MICHELE 1301 WILCOX AVENUE MONTEREY PARK, CA 91754	CA EDISON	9/30/98	207.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation C/S REP	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
AGUILAR, DIANA 12059 E. ROSE HEDGE DR WHITTIER, CA 90606	CA EDISON	9/30/98	100.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation SP ACCT REP	Aggregate Year-to-Date > \$ 60.00	

SUBTOTAL of Receipts This Page (optional)

1,057.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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PAGE 6 OF 6
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NAME OF COMMITTEE (In Full)

UTILITY WORKERS UNION OF AMERICA, POLITICAL CONTRIBUTIONS COMMITTEE

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
BUCHMAN, NANCY 16631 MALCOLM LANE YORBA LINDA, CA 92686	CA EDISON	9/30/98	100.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation LGSIC REP		
	Aggregate Year-to-Date	\$	60.00
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
FAUSTINO, JOHN 17520 ELGAR AVENUE TORRENCE, CA 90504	CA EDISON	9/30/98	100.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation ENER TECH		
	Aggregate Year-to-Date	\$	60.00
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
KARWOSKI, PATRICK 40364 ARGYLE LANE PALMDALE, CA 93551	CA EDISON	9/30/98	135.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation ENER TECH		
	Aggregate Year-to-Date	\$	90.00
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
LOPEZ, GAIL 4562 LOS TOROS AVENUE RICO RIVIERA, CA 90660	CA EDISON	9/30/98	200.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation ENER TECH		
	Aggregate Year-to-Date	\$	120.00
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Contributions Under the \$200.00 limit			27,940.15
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)

28,425.15

TOTAL This Period (last page this line number only)

35,457.03

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

PAGE 1 OF 4
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NAME OF COMMITTEE (In Full)
UTILITY WORKERS UNION OF AMERICA, AFL-CIO POLITICAL CONTRIBUTIONS COMMITTEE

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
DEAN FLOREZ 600 S. NEW HAMPSHIRE AVE LOS ANGELES, CA 90005	CONTRIBUTION Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	9/17/98	1,000.00
LEE FISHER 271 E. STATE ST COLUMBUS, OH 43215	CONTRIBUTION Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	9/17/98	500.00
RE-ELECT ROSS BOGGS, JR PO BOX 2982 COLUMBUS, OH 43216	CONTRIBUTION Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	9/17/98	200.00
CHARLETA TAVARES 66 THURMAN AVE COLUMBUS, OH 43206	CONTRIBUTION Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	9/17/98	200.00
RICHARD CORDRAY 218 EAST STATE ST COLUMBUS, OH 43215	CONTRIBUTION Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	9/17/98	200.00
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)

2,100.00

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 2 OF 4
FOR LINE NUMBER

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)

A. 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
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 RICHARD ALARCON 600 S. NEW HAMPSIRE AVE LOS ANGELES, CA 90005	Purpose of Disbursement CONTRIBUTION Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 7/31/98	Amount of Each Disbursement This Period 1,000.00
D. Full Name, Mailing Address and ZIP Code CA FOR GRAY DAVIS 10355 LOS ALAMITOS BLVD LOS ALAMITOS, CA 90720	Purpose of Disbursement CONTRIBUTION Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 7/1/98	Amount of Each Disbursement This Period 5,000.00
E. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement CONTRIBUTION 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 HILDA SOLIS 10355 LOS ALAMITOS BLVD LOS ALAMITOS, CA 90720	Purpose of Disbursement CONTRIBUTION Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 7/1/98	Amount of Each Disbursement This Period 500.00
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)

6,500.00

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 3 OF 4
FOR LINE NUMBER

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)
UTILITY WORKERS UNION OF AMERICA, AFL-CIO POLITICAL CONTRIBUTIONS COMMITTEE

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement CONTRIBUTION 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
CAROLYN SQUIRES PO BOX 1176 HELENA, MT 59624	CONTRIBUTION Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	9/24/98	100.00
DAN STANLEY PO BOX 1176 HELENA, MT 59624	CONTRIBUTION Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	9/24/98	100.00
DAN HARRINGTON PO BOX 1176 HELENA, MT 59624	CONTRIBUTION Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	9/24/98	100.00
ED LOGAN PO BOX 1176 HELENA, MT 59624	CONTRIBUTION Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	9/24/98	100.00
RON ERICKSON PO BOX 1176 HELENA, MT 59624	CONTRIBUTION Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	9/24/98	100.00
GEORGE GOLIE PO BOX 1176 HELENA, MT 59624	CONTRIBUTION Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	9/24/98	100.00
BOB RANEY PO BOX 1176 HELENA, MT 59624	CONTRIBUTION Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	9/24/98	100.00
GLENN ROUSH PO BOX 1176 HELENA, MT 59624	CONTRIBUTION Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	9/24/98	100.00
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)

800.00

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 4 OF 4
FOR LINE NUMBER

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)
UTILITY WORKERS UNION OF AMERICA, AFL-CIO POLITICAL CONTRIBUTIONS COMMITTEE

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement CONTRIBUTION	Date (month, day, year)	Amount of Each Disbursement This Period
BOB CULP PO BOX 1176 HELENA, MT 59624	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	9/24/98	100.00
B. Full Name, Mailing Address and ZIP Code WILLIAM MENAHAN PO BOX 1176 HELENA, MT 59624	Purpose of Disbursement CONTRIBUTION Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	9/24/98	100.00
C. Full Name, Mailing Address and ZIP Code JAMES CARNEY PO BOX 1176 HELENA, MT 59624	Purpose of Disbursement CONTRIBUTION Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	9/24/98	100.00
D. Full Name, Mailing Address and ZIP Code JOHN SCHIEFFER PO BOX 1176 HELENA, MT 59624	Purpose of Disbursement CONTRIBUTION Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	9/24/98	100.00
E. Full Name, Mailing Address and ZIP Code BRENNAN RYAN PO BOX 1176 HELENA, MT 59624	Purpose of Disbursement CONTRIBUTION Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	9/24/98	100.00
F. Full Name, Mailing Address and ZIP Code GORDON HALL PO BOX 1176 HELENA, MT 59624	Purpose of Disbursement CONTRIBUTION Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	9/24/98	100.00
G. Full Name, Mailing Address and ZIP Code HUGO TURECK PO BOX 1176 HELENA, MT 59624	Purpose of Disbursement CONTRIBUTION Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	9/24/98	100.00
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)

700.00

TOTAL This Period (last page this line number only)

10,100.00

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

PAGE 1 OF 3
FOR LINE NUMBER

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NAME OF COMMITTEE (in Full)
UTILITY WORKERS UNION OF AMERICA, AFL-CIO POLITICAL CONTRIBUTIONS COMMITTEE

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement CONTRIBUTION 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
JOHN TIERNEY PO BOX 8013 SALEM, MA 01970	CONTRIBUTION Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	7/1/98	1,000.00
LEVIN FOR CONGRESS 7041 SCHAEFFER ROAD DEARBORN, MI 48126	CONTRIBUTION Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	7/1/98	1,000.00
CHRISTINE KEHOE 168 AMIGOS WAY FALLBROOK, CA 92028	CONTRIBUTION Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	7/1/98	1,000.00
JOSEPH MOAKLEY 220 FORBES ROAD #210 BRAINTREE, MA 02184	CONTRIBUTION Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	7/1/98	500.00
ROSA DELAURO 49 HUNTINGTON STREET NEW HAVEN, CT 06511	CONTRIBUTION Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	7/1/98	500.00
JOHN OLIVER 220 FORBES ROAD #210 BRAINTREE, MA 02184	CONTRIBUTION Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	7/1/98	500.00
STEVE OWENS 5818 7TH STREET, #200 PHOENIX, AZ 85014	CONTRIBUTION Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	7/1/98	500.00
DEBBIE STABENOW 555 SOUTH FLOWER ST. #4510 LOS ANGELES, CA 90071	CONTRIBUTION Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	7/1/98	500.00
STEVE PEACE 5205 KEARING VILLA WAY SAN DIEGO, CA 92123	CONTRIBUTION Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	7/31/98	1,500.00

SUBTOTAL of Disbursements This Page (optional)

7,000.00

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 2 OF 3
FOR LINE NUMBER

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NAME OF COMMITTEE (In Full)
UTILITY WORKERS UNION OF AMERICA, AFL-CIO POLITICAL CONTRIBUTIONS COMMITTEE

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
JOEL CASLER 1900 1/2 S. WENONA STREET BAY CITY, MI 48706	CONTRIBUTION Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	7/15/98	250.00
SHEILA HIXON 1009 BROADMORE CIRCLE SILVER SPRING, MD 20904	CONTRIBUTION Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	7/1/98	250.00
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 CONTRIBUTION Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 7/1/98	Amount of Each Disbursement This Period 500.00
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 CONTRIBUTION Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 9/17/98	Amount of Each Disbursement This Period 500.00
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)

1,500.00

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 3 OF 3
FOR LINE NUMBER

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NAME OF COMMITTEE (in Full)
UTILITY WORKERS UNION OF AMERICA, AFL-CIO POLITICAL CONTRIBUTIONS COMMITTEE

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
MARY BOYLE FOR SENATE PO BOX 6328 CLEVELAND, OH 44101	CONTRIBUTION Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	9/17/98	2,000.00
ROBERT BURCH FOR CONG PO BOX 1032 NEW PHILADELPHIA, OH 44653	CONTRIBUTION Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	9/17/98	200.00
STUPAK FOR CONGRESS 110 W. LENAWE LANSING, MI 48933	CONTRIBUTION Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	9/24/98	500.00
KAPTUR FOR CONGRESS PO BOX 899 TOLEDO, OH 43697	CONTRIBUTION Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	9/24/98	500.00
PEOPLE FOR BERRYMAN 101 EAST MAUMEE ST ADRIAN, MI 49221	CONTRIBUTION Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	9/24/98	1,000.00
GEPHARDT IN CONGRESS 386 PARK AVENUE S. 4TH FL NEW YORK, NY 10017	VOID CONTRIBUTION Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	11/26/97	(2,000.00)
CONGRESSMAN PETER DEUTE 204 CANNON BLDG WASHINGTON, DC 20515	VOID CONTRIBUTION Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	7/22/97	(500.00)
LOCKYER FOR SENATE 10355 LOS ALAMITOS BLVD LOS ALAMITOS, CA 90720	VOID CONTRIBUTION Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/3/96	(2,000.00)

SUBTOTAL of Disbursements This Page (optional)

(300.00)

TOTAL This Period (last page this line number only)

8,200.00

JOINT FEDERAL/NON-FEDERAL
ACTIVITY SCHEDULE

NAME OF COMMITTEE
Utility Workers Union of America, AFL-CIO Political Contributions Committee

A. FULL NAME, MAILING ADDRESS & ZIP CODE	PURPOSE/EVENT	DATE	TOTAL AMOUNT	FEDERAL SHARE	NON-FEDERAL SHARE
Political Reform Division Sacramento, Ca	fine	7/1/98	200.00		200.00
CATEGORY: <input type="checkbox"/> ADMINISTRATIVE/VOTER DRIVE <input type="checkbox"/> FUNDRAISING <input type="checkbox"/> EXEMPT EVENT YEAR-TO-DATE: \$ <input type="checkbox"/> DIRECT CANDIDATE SUPPORT					
B. FULL NAME, MAILING ADDRESS & ZIP CODE	PURPOSE/EVENT	DATE	TOTAL AMOUNT	FEDERAL SHARE	NON-FEDERAL SHARE
CATEGORY: <input type="checkbox"/> ADMINISTRATIVE/VOTER DRIVE <input type="checkbox"/> FUNDRAISING <input type="checkbox"/> EXEMPT EVENT YEAR-TO-DATE: \$ <input type="checkbox"/> DIRECT CANDIDATE SUPPORT					
C. FULL NAME, MAILING ADDRESS & ZIP CODE	PURPOSE/EVENT	DATE	TOTAL AMOUNT	FEDERAL SHARE	NON-FEDERAL SHARE
CATEGORY: <input type="checkbox"/> ADMINISTRATIVE/VOTER DRIVE <input type="checkbox"/> FUNDRAISING <input type="checkbox"/> EXEMPT EVENT YEAR-TO-DATE: \$ <input type="checkbox"/> DIRECT CANDIDATE SUPPORT					
D. FULL NAME, MAILING ADDRESS & ZIP CODE	PURPOSE/EVENT	DATE	TOTAL AMOUNT	FEDERAL SHARE	NON-FEDERAL SHARE
CATEGORY: <input type="checkbox"/> ADMINISTRATIVE/VOTER DRIVE <input type="checkbox"/> FUNDRAISING <input type="checkbox"/> EXEMPT EVENT YEAR-TO-DATE: \$ <input type="checkbox"/> DIRECT CANDIDATE SUPPORT					
E. FULL NAME, MAILING ADDRESS & ZIP CODE	PURPOSE/EVENT	DATE	TOTAL AMOUNT	FEDERAL SHARE	NON-FEDERAL SHARE
CATEGORY: <input type="checkbox"/> ADMINISTRATIVE/VOTER DRIVE <input type="checkbox"/> FUNDRAISING <input type="checkbox"/> EXEMPT EVENT YEAR-TO-DATE: \$ <input type="checkbox"/> DIRECT CANDIDATE SUPPORT					
F. FULL NAME, MAILING ADDRESS & ZIP CODE	PURPOSE/EVENT	DATE	TOTAL AMOUNT	FEDERAL SHARE	NON-FEDERAL SHARE
CATEGORY: <input type="checkbox"/> ADMINISTRATIVE/VOTER DRIVE <input type="checkbox"/> FUNDRAISING <input type="checkbox"/> EXEMPT EVENT YEAR-TO-DATE: \$ <input type="checkbox"/> DIRECT CANDIDATE SUPPORT					
SUBTOTAL OF JOINT FEDERAL AND NON-FEDERAL ACTIVITY THIS PAGE					200.00
TOTAL THIS PERIOD (omit page for each line only)(Fed. share to 21 a.i and non-Fed. share to 21 a.ii)					200.00
TOTAL THIS PERIOD FOR THE NON-FEDERAL SHARE (used for line 31 of the detailed summary page)					

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 10/14/98
<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
<input type="checkbox"/> Electronic Filing	
 <i>RJS</i> PREPARER	 10/15/98 DATE PREPARED