

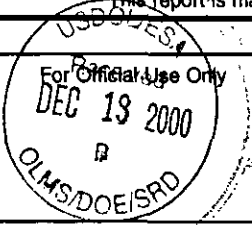

FORM LM-3 LABOR ORGANIZATION ANNUAL REPORT

FOR USE BY LABOR ORGANIZATIONS WITH LESS THAN \$200,000 IN TOTAL ANNUAL RECEIPTS

02A

This report is mandatory under P.L. 86-257, as amended. Failure to comply may result in criminal prosecution, fines, or civil penalties as provided by 29 U.S.C. 439 or 440.

READ THE INSTRUCTIONS CAREFULLY BEFORE PREPARING THIS REPORT.

	1. FILE NUMBER	2. PERIOD COVERED	3. (a) AMENDED — If this is an amended report correcting a previously filed report, check here:
	011-770	MO DAY YEAR From 10 01 1999 Through 09 30 2000	(b) TERMINAL — If your organization ceased to exist and this is its terminal report, see Section XII of the instructions and check here: (c) SUBSIDIARY — If this is a report for a subsidiary organization of your union as defined in Section X of the instructions, check here:
ROBERT PHILLIPS (3) 011-770 COMMUNICATIONS WORKERS AFL-CIO 130 LU 1061 618 AVENUE E BAYONNE, NJ 07002 9/2000 		8. MAILING ADDRESS (Type or print in capital letters.)	
4. AFFILIATION OR ORGANIZATION NAME		First Name	
5. DESIGNATION (Local, Lodge, etc.)		Last Name	
6. DESIGNATION NUMBER		P.O. Box • Building and Room Number (if any)	
7. UNIT NAME (if any)		Number and Street	
9. Are your organization's records kept at its mailing address? (If "No," provide address in Item 56.)		City	
Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>		State ZIP Code + 4	

56. ADDITIONAL INFORMATION (If more space is needed, attach additional pages properly identified.)

Item Number	
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Each of the undersigned, duly authorized officers of the above labor organization, declares, under the applicable penalties of law, that all of the information submitted in this report (including the information contained in any accompanying documents) has been examined by the signatory and is, to the best of the undersigned's knowledge and belief, true, correct, and complete. (See Section VI on penalties in the instructions.)

57. SIGNED: <u>Bruce G. Foh</u>	PRESIDENT	58. SIGNED: <u>Robert Phillips</u>	TREASURER
<u>12/18/00</u>	(If other title, see instructions.)	<u>12/18/00</u>	(If other title, see instructions.)
<u>(973) 386-6890</u>		<u>(973) 386-6890</u>	
Date Telephone Number		Date Telephone Number	

24. ALL OFFICERS AND DISBURSEMENTS TO OFFICERS

Enter Amounts in Dollars Only — Do Not Enter Cents

FILE NUMBER: 001111

(A) Name <small>(List all persons who held office during the reporting period even if they received no salary or other disbursements. Use all capital letters.)</small>		Gross Salary (before taxes and other deductions) (D)	Allowances and Other Disbursements (E)	Total (F)
(B) Title <small>(Enter title of officer, such as PRESIDENT or TREASURER.)</small>	Status (C)*			
1. <small>Last Name</small> FABIAN	<small>First Name</small> BRUCE	9751		9751
<small>Title</small> PRESIDENT	<small>Status</small> C			
2. <small>Last Name</small> CLARK	<small>First Name</small> THOMAS	2206		2206
<small>Title</small> EXEC VP	<small>Status</small> C			
3. <small>Last Name</small> PHILLIPS	<small>First Name</small> ROBERT	3000		3000
<small>Title</small> TREAS	<small>Status</small> C			
4. <small>Last Name</small> WAGER	<small>First Name</small> WILLIAM	2323		2323
<small>Title</small> SECY	<small>Status</small> C			
5. <small>Last Name</small> CORDERO	<small>First Name</small> GEORGE	2860		2860
<small>Title</small> EXEC VP	<small>Status</small> C			
6. <small>Last Name</small>	<small>First Name</small>			
<small>Title</small>	<small>Status</small>			
7. <small>Last Name</small>	<small>First Name</small>			
<small>Title</small>	<small>Status</small>			
8. Totals from additional pages (if any)				
9. Totals of Lines 1 through 8				20140
10. Less Deductions				
Enter the Total from Line 11 in Item 45 ⇨				20140

*Code for Status (C): past officer — P; continuing officer — C; new officer during the reporting period — N.

(If any officer was not elected at a regular election in accordance with your organization's constitution and bylaws, explain in Item 56 on page 1.)

Enter Amounts in Dollars Only — Do Not Enter Cents

FILE NUMBER: —

STATEMENT A ASSETS AND LIABILITIES	ASSETS		LIABILITIES			
	Item	Start of Reporting Period (A)	End of Reporting Period (B)	Item	Start of Reporting Period (C)	End of Reporting Period (D)
	25. Cash	76534	88020	32. Accounts Payable	1304	1167
	26. Loans Receivable			33. Loans Payable		
	27. U.S. Treasury Securities			34. Mortgages Payable		
	28. Investments			35. Other Liabilities		
	29. Fixed Assets	878	878	36. TOTAL LIABILITIES	1304	1167
	30. Other Assets			37. NET ASSETS (Item 31 less Item 36).....	76108	87731
	31. TOTAL ASSETS.....	77412	88898			

STATEMENT B RECEIPTS AND DISBURSEMENTS	CASH RECEIPTS		CASH DISBURSEMENTS	
	Item	AMOUNT	Item	AMOUNT
	38. Dues	72534	45. To Officers (from Item 24)	20140
	39. Per Capita Tax		46. To Employees (less deductions)	2384
	40. Fees, Fines, Assessments & Work Permits		47. Per Capita Tax	
	41. Interest & Dividends	1551	48. Office & Administrative Expense	2376
	42. Sale of Investments & Fixed Assets		49. Professional Fees	925
	43. Other Receipts		50. Benefits	
	44. TOTAL RECEIPTS	74085	51. Contributions, Gifts & Grants	
<p>If total receipts reported in Item 44 are \$200,000 or more, your organization must file Form LM-2 instead of this form.</p>			52. Purchase of Investments & Fixed Assets	
			53. Loans Made	
			54. Other Disbursements	36637
			55. TOTAL DISBURSEMENTS	62462