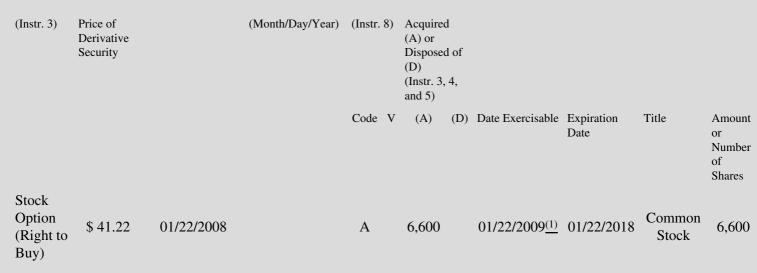
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COMMSCOPE I	NC								
Form 4									
January 23, 2008									
FORM 4	UNITED	статес	SECU	DITIES	AND EV		COMMISSION	т	PPROVAL
	Washington, D.C. 20549				OMB Number:	3235-0287			
Check this box if no longer subject to Section 16. SECURITIES						Estimated burden hou response	urs per		
(Print or Type Respo	nses)								
1. Name and Address of Reporting Person <u>*</u> STORY CHRISTOPHER A			2. Issuer Name and Ticker or Trading Symbol COMMSCOPE INC [CTV]			5. Relationship of Reporting Person(s) to Issuer (Check all applicable)			
(Last)	(First) (I	Middle)	3. Date of Earliest Transaction			(Che	ck all applicabl	e)	
1100 COMMSCOPE PLACE, SE			(Month/Day/Year) 01/22/2008			Director 10% Owner X Officer (give title Other (specify below) below) Executive Vice President			
(Street)			4. If Amendment, Date Original Filed(Month/Day/Year)			6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person			
HICKORY, NC	28602						Form filed by Person	More than One R	eporting
(City)	(State)	(Zip)	Tab	ole I - Non-	Derivative	Securities A	cquired, Disposed o	of, or Beneficia	lly Owned
	ansaction Date hth/Day/Year)	2A. Deemo Execution any (Month/Da	Date, if	Code (Instr. 8)	4. Securit onAcquired Disposed (Instr. 3, 4)	(A) or of (D)	Securities Beneficially Owned	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)
Reminder: Report or	a separate line	for each cl	ass of sec	urities bene	ficially ow	ned directly	or indirectly.		
Actinider, Report of	r a separate fille	ior each ch			Perso inform requir	ns who res nation con red to resp nys a curre	spond to the colle tained in this form ond unless the for ntly valid OMB co	are not m	SEC 1474 (9-02)

 Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned
 (e.g., puts, calls, warrants, options, convertible securities)

1. Title of	2.	3. Transaction Date	3A. Deemed	4.	5. Number	6. Date Exercisable and	7. Title and Amount of
Derivative	Conversion	(Month/Day/Year)	Execution Date, if	Transactio	nof Derivative	Expiration Date	Underlying Securities
Security	or Exercise		any	Code	Securities	(Month/Day/Year)	(Instr. 3 and 4)

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Reporting Owners

Reporting Owner Name / Address	Relationships					
	Director	10% Owner	Officer	Other		
STORY CHRISTOPHER A 1100 COMMSCOPE PLACE, SE HICKORY, NC 28602			Executive Vice President			
Cignoturoo						

Signatures

/s/Christopher	
A. Story	01/23/2008
<u>**</u> Signature of Reporting Person	Date

Explanation of Responses:

* If the form is filed by more than one reporting person, *see* Instruction 4(b)(v).

** Intentional misstatements or omissions of facts constitute Federal Criminal Violations. See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).

(1) The option vests in three equal annual installments beginning on the date indicated.

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, *see* Instruction 6 for procedure. Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number.