

**Political Organization  
 Report of Contributions and Expenditures**

OMB No 1545-1696

▶ See separate instructions.

**A** For the period beginning JANUARY 1, 2013 and ending JUNE 30, 2013

**B** Check applicable boxes.  Initial report  Change of address  Amended report  Final report

**1** Name of organization LABORERS' LOCAL 17 POLITICAL ACTION COMMITTEE Employer identification number 14-1730881

**2** Mailing address (P.O. Box or number, street, and room or suite number)  
451A LITTLE BRITAIN ROAD

City or town, state, and ZIP code  
NEWBURGH, NEW YORK 12550

**3** E-mail address of organization TDIORIO 555@AOL.COM **4** Date organization was formed 6-1-88

**5a** Name of custodian of records LABORERS' LOCAL 17 **5b** Custodian's address  
451A LITTLE BRITAIN ROAD  
NEWBURGH, NEW YORK 12550

**6a** Name of contact person DEAN M. TAMBURRI **6b** Contact person's address  
451A LITTLE BRITAIN ROAD  
NEWBURGH, NEW YORK 12550

**7** Business address of organization (if different from mailing address shown above). Number, street, and room or suite number

City or town, state, and ZIP code

**8** Type of report (check only one box)

a  First quarterly report (due by April 15)

b  Second quarterly report (due by July 15)

c  Third quarterly report (due by October 15)

d  Year-end report (due by January 31)

e  Mid-year report (Non-election year only-due by July 31)

f  Monthly report for the month of \_\_\_\_\_ (due by the 20th day following the month shown above, except the December report, which is due by January 31)

g  Pre-election report (due by the 12th or 15th day before the election)  
 (1) Type of election: \_\_\_\_\_  
 (2) Date of election: \_\_\_\_\_  
 (3) For the state of: \_\_\_\_\_

h  Post-general election report (due by the 30th day after general election)  
 (1) Date of election: \_\_\_\_\_  
 (2) For the state of: \_\_\_\_\_

**9** Total amount of reported contributions (total from all attached Schedules A). . . . . 19,672.94

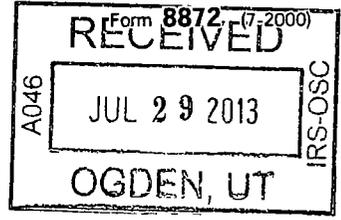
**10** Total amount of reported expenditures (total from all attached Schedules B). . . . . 15,704.56

Under penalties of perjury I declare that I have examined this report, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete

**Sign Here** Dean M. Tamburri Date 7/26/13  
 Signature of authorized official

For Paperwork Reduction Act Notice, see separate instructions.

Cat No 30406G



SCANNED AUG 01 2013

Schedule A Itemized Contributions		Schedule A page 1 of 1
Name of organization LABORERS' LOCAL 17 POLITICAL ACTION COMMITTEE		Employer identification number 14: 1730881
Contributor's name, mailing address and ZIP code LABORERS' LOCAL 17 JOINT BENEFIT FUND 4513 LITTLE BRITAIN ROAD NEWBURGH, NEW YORK 12550	Name of contributor's employer Contributor's occupation Aggregate contributions year-to-date . . . ▶ \$ 14,672.94	Amount of contributions reported for this period \$ 14,672.94
Contributor's name, mailing address and ZIP code A. SERVIDONE/B ANTHONY 1364 RTE. 9 CASTLETON, N.Y. 12033 * RETURN OF CONTRIBUTION *	Name of contributor's employer Contributor's occupation Aggregate contributions year-to-date . . . ▶ \$	Amount of contributions reported for this period \$ 5,000.00
Contributor's name, mailing address and ZIP code	Name of contributor's employer Contributor's occupation Aggregate contributions year-to-date . . . ▶ \$	Amount of contributions reported for this period \$
Contributor's name, mailing address and ZIP code	Name of contributor's employer Contributor's occupation Aggregate contributions year-to-date . . . ▶ \$	Amount of contributions reported for this period \$
Contributor's name, mailing address and ZIP code	Name of contributor's employer Contributor's occupation Aggregate contributions year-to-date . . . ▶ \$	Amount of contributions reported for this period \$
Contributor's name, mailing address and ZIP code	Name of contributor's employer Contributor's occupation Aggregate contributions year-to-date . . . ▶ \$	Amount of contributions reported for this period \$
Contributor's name, mailing address and ZIP code	Name of contributor's employer Contributor's occupation Aggregate contributions year-to-date . . . ▶ \$	Amount of contributions reported for this period \$
Contributor's name, mailing address and ZIP code	Name of contributor's employer Contributor's occupation Aggregate contributions year-to-date . . . ▶ \$	Amount of contributions reported for this period \$
Contributor's name, mailing address and ZIP code	Name of contributor's employer Contributor's occupation Aggregate contributions year-to-date . . . ▶ \$	Amount of contributions reported for this period \$
Contributor's name, mailing address and ZIP code	Name of contributor's employer Contributor's occupation Aggregate contributions year-to-date . . . ▶ \$	Amount of contributions reported for this period \$
Contributor's name, mailing address and ZIP code	Name of contributor's employer Contributor's occupation Aggregate contributions year-to-date . . . ▶ \$	Amount of contributions reported for this period \$
Subtotal of contributions reported on this page only Enter here and also include this amount in the total on line 9 of Form 8872 . . . . . ▶		\$ 19,672.94

Schedule B Itemized Expenditures		Schedule B page 1 of 5
Name of organization Laborers' Local 17 Political Action Committee		Employer identification number 14 1730881
Recipient's name, mailing address and ZIP code L. TODD DIORIO PO Box 170 MARLBORO, N.Y. 12542	Name of recipient's employer	Amount of each expenditure reported for this period  \$ 500.00
	Recipient's occupation	
Recipient's name, mailing address and ZIP code JEFFREY T. DIORIO 4 BILLESIMO DRIVE MARLBORO, N.Y. 12542	Name of recipient's employer	Amount of each expenditure reported for this period  \$ 375.00
	Recipient's occupation	
Recipient's name, mailing address and ZIP code DEAN TAMBURRI 87 HOLMES ROAD NEWBURGH, N.Y. 12550	Name of recipient's employer	Amount of each expenditure reported for this period  \$ 375.00
	Recipient's occupation	
Recipient's name, mailing address and ZIP code CHRIS CERONE 44 BINGHAM ROAD MARLBORO, N.Y. 12542	Name of recipient's employer	Amount of each expenditure reported for this period  \$ 375.00
	Recipient's occupation	
Recipient's name, mailing address and ZIP code RICHARD MESSINA 2575 ROUTE 44/55 GARDINER, N.Y. 12525	Name of recipient's employer	Amount of each expenditure reported for this period  \$ 375.00
	Recipient's occupation	
Recipient's name, mailing address and ZIP code ROY McATEER PO Box 425 MARLBORO, N.Y. 12542	Name of recipient's employer	Amount of each expenditure reported for this period  \$ 375.00
	Recipient's occupation	
Recipient's name, mailing address and ZIP code ERIC BECK 7 DIORIO/PRINCE PLACE MARLBORO, N.Y. 12542	Name of recipient's employer	Amount of each expenditure reported for this period  \$ 375.00
	Recipient's occupation	
Recipient's name, mailing address and ZIP code HUDSON VALLEY AREA LABOR FEDERATION PO Box 10663 NEWBURGH, N.Y. 12550	Name of recipient's employer	Amount of each expenditure reported for this period  \$ 75.00
	Recipient's occupation	
Recipient's name, mailing address and ZIP code ORANGE COUNTY REPUBLICAN COMM 75 MAIN STREET GOSHEN, N.Y. 10924	Name of recipient's employer	Amount of each expenditure reported for this period  \$ 1000.00
	Recipient's occupation	
Subtotal of expenditures reported on this page only. Enter here and also include this amount in the total on line 10 of Form 8872.		\$ 3,825.00



Schedule B Itemized Expenditures		Schedule B page 2 of 5
Name of organization Laborers' Local 17 Political Action Committee		Employer identification number 14 1730881
Recipient's name, mailing address and ZIP code CITIZENS TO ELECT JOHN BONACIE PO Box 425 NEW HAMPTON, N.Y. 10958	Name of recipient's employer	Amount of each expenditure reported for this period  \$ 1,000.00
	Recipient's occupation	
Recipient's name, mailing address and ZIP code FRIENDS OF JOHN C. TRAZYIK c/o MORTELL 31 GARFIELD PLACE Poughkeepsie, N.Y. 12601	Name of recipient's employer	Amount of each expenditure reported for this period  \$ 250.00
	Recipient's occupation	
Recipient's name, mailing address and ZIP code TENNEY FOR ASSEMBLY PO Box 53 CLINTON, N.Y. 13323	Name of recipient's employer	Amount of each expenditure reported for this period  \$ 200.00
	Recipient's occupation	
Recipient's name, mailing address and ZIP code TOWN OF NEWBURGH REPUBLICAN COMM. c/o BENTON 28 PILLA DRIVE NEWBURGH, N.Y. 12550	Name of recipient's employer	Amount of each expenditure reported for this period  \$ 200.00
	Recipient's occupation	
Recipient's name, mailing address and ZIP code RIVERSIDE BANK 11 GARDEN STREET Poughkeepsie, N.Y. 12601	Name of recipient's employer	Amount of each expenditure reported for this period  \$ 172.00
	Recipient's occupation	
Recipient's name, mailing address and ZIP code CITIZENS FOR ANNIE RABBITT PO Box 254 GOSHEN, New York 10924	Name of recipient's employer	Amount of each expenditure reported for this period  \$ 500.00
	Recipient's occupation	
Recipient's name, mailing address and ZIP code MOLINARO FOR DUTCHESS PO Box 1111 Poughkeepsie, N.Y. 12602	Name of recipient's employer	Amount of each expenditure reported for this period  \$ 950.00
	Recipient's occupation	
Recipient's name, mailing address and ZIP code DINAPOLI 2014 PO Box 1776 MINEOLA, N.Y. 11501	Name of recipient's employer	Amount of each expenditure reported for this period  \$ 250.00
	Recipient's occupation	
Recipient's name, mailing address and ZIP code FRIENDS OF ROB POLISON c/o BETROS 510 HAIGHT AVENUE Poughkeepsie, N.Y. 12603	Name of recipient's employer	Amount of each expenditure reported for this period  \$ 100.00
	Recipient's occupation	
Subtotal of expenditures reported on this page only. Enter here and also include this amount in the total on line 10 of Form 8872.		\$ 3,622.00



**Schedule B Itemized Expenditures** Schedule B page 3 of 5

Name of organization: **Laborers' Local 17 Political Action Committee** Employer identification number: **14 1730881**

Recipient's name, mailing address and ZIP code	Name of recipient's employer	Amount of each expenditure reported for this period
ANDREW CUOMO 2014 PO Box 4105 NEW YORK, N.Y. 10163		\$ 1,000.00
WELLS FARGO PO Box 6415 CAROL STREAM, IL 60197		\$ 1,146.02
AMERICAN EXPRESS PO Box 1270 NEWARK, N.J. 07101		\$ 1,332.04
CAPITOL INFO 34208 AURORA RD #284 Solon, OH 44139		\$ 234.50
COMMITTEE TO ELECT WAYNE BOOTH 40 WEYANTS LANE NEWBURGH, N.Y. 12550		\$ 500.00
CITIZENS FOR DEPEW 348 PROSPEROUS VALLEY ROAD MIDDLETOWN, N.Y. 10940		\$ 500.00
ULSTER COUNTY DEMOCRATIC COMMITTEE 32 JOHN STREET KINGSTON, N.Y. 12401		\$ 250.00
KENNETH T. BROOKS 268 RIDGE ROAD MILTON, N.Y. 12547		\$ 300.00
JIM SULLIVAN 15 DIORIO/PRINCE PLACE MARLBORO, N.Y. 12542		\$ 300.00

**Subtotal** of expenditures reported on this page only Enter here and also include this amount in the total on line 10 of Form 8872. **\$ 5,562.56**



Schedule B Itemized Expenditures		Schedule B page 4 of 5
Name of organization Laborers' Local 17 Political Action Committee		Employer identification number 14 : 1730881
Recipient's name, mailing address and ZIP code NEW YORKERS ON THE BALL PO BOX 607 PAWLING, N.Y. 12564	Name of recipient's employer  Recipient's occupation	Amount of each expenditure reported for this period  \$ 500.00
Recipient's name, mailing address and ZIP code FRIENDS OF MELISSA BONACIC PO BOX 501 NEW HAMPTON, N.Y. 10958	Name of recipient's employer  Recipient's occupation	Amount of each expenditure reported for this period  \$ 200.00
Recipient's name, mailing address and ZIP code CITIZENS FOR LARKIN PO BOX 4321 NEW WINDSOR, N.Y. 12553	Name of recipient's employer  Recipient's occupation	Amount of each expenditure reported for this period  \$ 180.00
Recipient's name, mailing address and ZIP code TOWN OF MONTGOMERY REPUBLICAN COMM. PO BOX 593 MONTGOMERY, N.Y. 12549	Name of recipient's employer  Recipient's occupation	Amount of each expenditure reported for this period  \$ 200.00
Recipient's name, mailing address and ZIP code ORANGE COUNTY DEMOCRATIC COMM. 843 UNION AVE, 2nd FLOOR NEW WINDSOR, N.Y. 12553	Name of recipient's employer  Recipient's occupation	Amount of each expenditure reported for this period  \$ 250.00
Recipient's name, mailing address and ZIP code COMMITTEE TO ELECT BRESCIA 73 RAILROAD AVENUE MONTGOMERY, N.Y. 12549	Name of recipient's employer  Recipient's occupation	Amount of each expenditure reported for this period  \$ 90.00
Recipient's name, mailing address and ZIP code FRIENDS OF STEVE NEUHAUS P.O. BOX 101 CHESTER, N.Y. 10918	Name of recipient's employer  Recipient's occupation	Amount of each expenditure reported for this period  \$ 600.00
Recipient's name, mailing address and ZIP code COMMITTEE TO ELECT ERNIE BELLO 50 HY-VUE DRIVE NEW WINDSOR, N.Y. 12553	Name of recipient's employer  Recipient's occupation	Amount of each expenditure reported for this period  \$ 50.00
Recipient's name, mailing address and ZIP code RAY MAYONE PO BOX 125 GLASCO, N.Y. 12432	Name of recipient's employer  Recipient's occupation	Amount of each expenditure reported for this period  \$ 250.00
<b>Subtotal</b> of expenditures reported on this page only. Enter here and also include this amount in the total on line 10 of Form 8872.		\$ 2,320.00



**Schedule B Itemized Expenditures** Schedule B page 5 of 5

Name of organization: Laborers' Local 17 Political Action Committee Employer identification number: 14 1730881

Recipient's name, mailing address and ZIP code <u>LISA ARGENIO</u> <u>34 SESAME STREET</u> <u>ROCK TAVERN, N.Y. 12575</u>	Name of recipient's employer	Amount of each expenditure reported for this period  <b>\$ 375.00</b>
	Recipient's occupation	
Recipient's name, mailing address and ZIP code	Name of recipient's employer	Amount of each expenditure reported for this period  <b>\$</b>
	Recipient's occupation	
Recipient's name, mailing address and ZIP code	Name of recipient's employer	Amount of each expenditure reported for this period  <b>\$</b>
	Recipient's occupation	
Recipient's name, mailing address and ZIP code	Name of recipient's employer	Amount of each expenditure reported for this period  <b>\$</b>
	Recipient's occupation	
Recipient's name, mailing address and ZIP code	Name of recipient's employer	Amount of each expenditure reported for this period  <b>\$</b>
	Recipient's occupation	
Recipient's name, mailing address and ZIP code	Name of recipient's employer	Amount of each expenditure reported for this period  <b>\$</b>
	Recipient's occupation	
Recipient's name, mailing address and ZIP code	Name of recipient's employer	Amount of each expenditure reported for this period  <b>\$</b>
	Recipient's occupation	
Recipient's name, mailing address and ZIP code	Name of recipient's employer	Amount of each expenditure reported for this period  <b>\$</b>
	Recipient's occupation	
Recipient's name, mailing address and ZIP code	Name of recipient's employer	Amount of each expenditure reported for this period  <b>\$</b>
	Recipient's occupation	
Recipient's name, mailing address and ZIP code	Name of recipient's employer	Amount of each expenditure reported for this period  <b>\$</b>
	Recipient's occupation	

**Subtotal** of expenditures reported on this page only Enter here and also include this amount in the total on line 10 of Form 8872 **\$ 375.00**

