

Political Organization Report of Contributions and Expenditures

OMB No 1545-1696

▶ See Separate instructions.

A For the period beginning JANUARY 1, 20 13 and ending JUNE 30, 20 13

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

1 Name of organization LOCAL 342 C.O.P.E **Employer identification number** 11-3562565

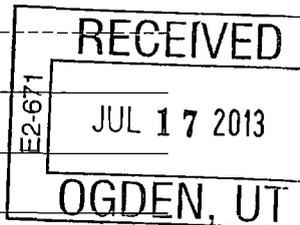
2 Mailing address (P O Box or number, street, and room or suite number)
501 WILLIAM FLOYD PARKWAY
City or town, state, and ZIP code
SHIRLEY, NY 11967

3 E-mail address of organization NONE **4** Date organization was formed

5a Name of custodian or records LOCAL 342 L.I.P.S.E **5b** Custodian's address SAME AS ABOVE

6a Name of contact person WILLIAM HENNESSEY **6b** Contact person's address SAME AS ABOVE

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)

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 _____

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

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 report contributions (total from all attached Schedules A) **9** 5,258.70

10 Total amount of reported expenditures (total from all attached Schedules B) **10** 6,397.00

Sign Here

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

▶ [Signature]
Signature of authorized official

▶ 7-12-13
Date

For Paperwork Reduction Act Notice, see separate instructions

Form **8872** (11-2002)

SCANNED JUL 29 2013

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Schedule A Itemized Contributions		Schedule A page 1 of 1
Name of organization		Employer identification number
LOCAL 342 C.O.P.E		11-3562565
Contributor's name, mailing address and ZIP code AGGREGATE BELOW THRESHHOLD 501 WILLIAM FLOYD PARKWAY SHIRLEY, NY 11967	Name of contributor's employer N/A	Amount of contribution
	Contributor's occupation POLITICAL ORGANIZATION	\$ 5,258.70
	Aggregate contributions year-to-date ▶ \$ 5,258.70	Date of contribution
Contributor's name, mailing address and ZIP code	Name of contributor's employer	Amount of contribution
	Contributor's occupation	\$
	Aggregate contributions year-to-date ▶ \$	Date of contribution
Contributor's name, mailing address and ZIP code	Name of contributor's employer	Amount of contribution
	Contributor's occupation	\$
	Aggregate contributions year-to-date ▶ \$	Date of contribution
Contributor's name, mailing address and ZIP code	Name of contributor's employer	Amount of contribution
	Contributor's occupation	\$
	Aggregate contributions year-to-date ▶ \$	Date of contribution
Contributor's name, mailing address and ZIP code	Name of contributor's employer	Amount of contribution
	Contributor's occupation	\$
	Aggregate contributions year-to-date ▶ \$	Date of contribution
Contributor's name, mailing address and ZIP code	Name of contributor's employer	Amount of contribution
	Contributor's occupation	\$
	Aggregate contributions year-to-date ▶ \$	Date of contribution
Contributor's name, mailing address and ZIP code	Name of contributor's employer	Amount of contribution
	Contributor's occupation	\$
	Aggregate contributions year-to-date ▶ \$	Date of contribution
Contributor's name, mailing address and ZIP code	Name of contributor's employer	Amount of contribution
	Contributor's occupation	\$
	Aggregate contributions year-to-date ▶ \$	Date of contribution
Contributor's name, mailing address and ZIP code	Name of contributor's employer	Amount of contribution
	Contributor's occupation	\$
	Aggregate contributions year-to-date ▶ \$	Date of contribution
Subtotal of contributions reported on this page only Enter here and also include this amount in the total on line 9 of Form 8872 ▶		\$ 5,258.70

Schedule B Itemized Expenditures		Schedule B page 1 of 2
Name of organization LOCAL 342 C.O.P.E		Employer identification number 11-3562565
Recipient's name, mailing address and ZIP code FRIENDS OF FRANK P. PETRONE PO BOX 1447 HUNTINGTON, NY 11743	Name of recipient's employer N/A	Amount of expenditure \$ 1,000.00
	Recipient's occupation POLITICAL ORGANIZATION	Date of expenditure 2/26/2013
Purpose of expenditure POLITICAL CONTRIBUTION		
Recipient's name, mailing address and ZIP code FRIENDS OF KATHLEEN WALSH PO BOX 1427 SELDEN, NY 11784		Amount of expenditure \$ 500.00
	Name of recipient's employer N/A	Date of expenditure
	Recipient's occupation POLITICAL ORGANIZATION	2/7/2013
Purpose of expenditure POLITICAL CONTRIBUTION		
Recipient's name, mailing address and ZIP code FRIENDS OF WILLIAM NAUGHTON PO BOX 1046 HUNTINGTON, NY 11743		Amount of expenditure \$ 750.00
	Name of recipient's employer N/A	Date of expenditure
	Recipient's occupation POLITICAL ORGANIZATION	4/5/2013
Purpose of expenditure POLITICAL CONTRIBUTION		
Recipient's name, mailing address and ZIP code ROMAINE FOR SUPERVISOR PO BOX 776 YAPHANK, NY 11980		Amount of expenditure \$ 600.00
	Name of recipient's employer N/A	Date of expenditure
	Recipient's occupation POLITICAL ORGANIZATION	5/2/2013
Purpose of expenditure POLITICAL CONTRIBUTION		
Recipient's name, mailing address and ZIP code BROOKHAVEN TOWN DEMOCRATIC COMMITTEE C/O MOLLOY BISHOP PO BOX 855 SOUTHAMPTON, NY 11969		Amount of expenditure \$ 750.00
	Name of recipient's employer N/A	Date of expenditure
	Recipient's occupation POLITICAL ORGANIZATION	5/31/2013
Purpose of expenditure POLITICAL CONTRIBUTION		
Recipient's name, mailing address and ZIP code FRIENDS OF FRANK P. PETRONE PO BOX 1447 HUNTINGTON, NY 11743		Amount of expenditure \$ 600.00
	Name of recipient's employer N/A	Date of expenditure
	Recipient's occupation POLITICAL ORGANIZATION	6/27/13
Purpose of expenditure POLITICAL CONTRIBUTION		
Subtotal of expenditures reported on this page only Enter here and also include this amount in the total on line 10 of Form 8872.		\$ 4,200.00

Schedule B Itemized Expenditures		Schedule B page 2 of 2
Name of organization		Employer identification number
LOCAL 342 C.O.P.E		11-3562565
Recipient's name, mailing address and ZIP code AGGREGATE BELOW THRESHOLD 501 WILLIAM FLOYD PARKWAY SHIRLEY, NY 11967	Name of recipient's employer	Amount of expenditure
	Recipient's occupation POLITICAL ORGANIZATION	\$ 2,197.00 Date of expenditure 6/30/2013
Purpose of expenditure POLITICAL CONTRIBUTION		
Recipient's name, mailing address and ZIP code	Name of recipient's employer	Amount of expenditure
	Recipient's occupation	\$ Date of expenditure
Purpose of expenditure		
Recipient's name, mailing address and ZIP code	Name of recipient's employer	Amount of expenditure
	Recipient's occupation	\$ Date of expenditure
Purpose of expenditure		
Recipient's name, mailing address and ZIP code	Name of recipient's employer	Amount of expenditure
	Recipient's occupation	\$ Date of expenditure
Purpose of expenditure		
Recipient's name, mailing address and ZIP code	Name of recipient's employer	Amount of expenditure
	Recipient's occupation	\$ Date of expenditure
Purpose of expenditure		
Recipient's name, mailing address and ZIP code	Name of recipient's employer	Amount of expenditure
	Recipient's occupation	\$ Date of expenditure
Purpose of expenditure		
Subtotal of expenditures reported on this page only Enter here and also include this amount in the total on line 10 of Form 8872.		\$ 2,197.00