

8872

Political Organization Report of Contributions and Expenditures

OMB No 1545-1696

November 2002) Department of the Treasury Internal Revenue Service

See Separate instructions.

A For the period beginning April 1, 2013 and ending June 30, 2013

B Check applicable boxes: [x] Initial report, [] Change of address, [] Amended report, [] Final report

1 Name of organization: Quad City Federation of Labor; Employer identification number: 36-4383255

2 Mailing address (P O Box or number, street, and room or suite number): 48001 46th Ave

City or town, state, and ZIP code: Rock Island, IL, 61201

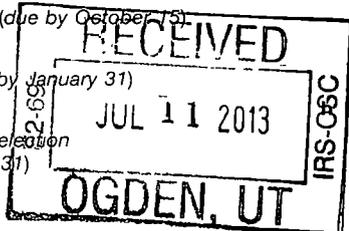
3 E-mail address of organization: www.quadcityfed.com; 4 Date organization was formed

5a Name of custodian of records: Shen Carnahan; 5b Custodian's address: 4600 46th Ave, Rock Island, IL 61201

6a Name of contact person: Shen Carnahan; 6b Contact person's address: 4600 46th Ave, Rock Island, IL 61201

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): [x] Second quarterly report (due by July 15); [] Monthly report for the month of...; [] Pre-election report...; [] Post-general election report...



9 Total amount of reported contributions (total from all attached Schedules A); 10 Total amount of reported expenditures (total from all attached Schedules B): 359.87

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: Shen Carnahan (Signature); June 9, 2013 (Date)

For Paperwork Reduction Act Notice, see separate instructions. Cat No 30406G Form 8872 (11-2002)

SCANNED JUN 30 2013

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Schedule A Itemized Contributions		Schedule A page _____ of _____
Name of organization		Employer identification number
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
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
\$ Total of contributions reported on this page only Enter here and also include this amount in the total on line 9 of Form 8872 ▶		\$

Schedule B Itemized Expenditures		Schedule B page of
Name of organization Quad City Federation of Labor		Employer identification number 36:4383255
Recipient's name, mailing address and ZIP code Illinois AFL-CIO 534 S. Second ST Suite 200 Springfield, IL 62701-1764	Name of recipient's employer	Amount of expenditure \$ 200.00
	Recipient's occupation	Date of expenditure April 15, 2013
Purpose of expenditure Donation, COPE Fundraiser		
Recipient's name, mailing address and ZIP code Dino Leone 9115 Turkey Hollow RD Taylor Ridge, IL 61284	Name of recipient's employer	Amount of expenditure \$ 159.87
	Recipient's occupation	Date of expenditure April 15, 2013
Purpose of expenditure Reimburse food expenses for Quad City Federation of Labor COPE PAC meeting		
	Name of recipient's employer	Amount of expenditure \$
	Recipient's occupation	Date of expenditure
Purpose of expenditure		
	Name of recipient's employer	Amount of expenditure \$
	Recipient's occupation	Date of expenditure
Purpose of expenditure		
	Name of recipient's employer	Amount of expenditure \$
	Recipient's occupation	Date of expenditure
Purpose of expenditure		
	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		\$ 359.87

