

**Political Organization
Report of Contributions and Expenditures**

OMB No. 1545-1596

▶ See separate instructions.

A For the period beginning July 1, 20 02 and ending September 30, 2002

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

1 Name of organization Maine AFL-CIO COPE PAC Employer identification number 01 : 0536593

2 Mailing address (P.O. Box or number, street, and room or suite number)
P.O. Box 2669

City or town, state, and ZIP code
Bangor, Maine 04402-2669

3 E-mail address of organization _____ 4 Date organization was formed _____

5a Name of custodian of records
Edmund J. McCann

5b Custodian's address
157 Park Street
Bangor, Maine 04401

6a Name of contact person
Edmund J. McCann

6b Contact person's address
157 Park Street
Bangor, Maine 04401

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: _____

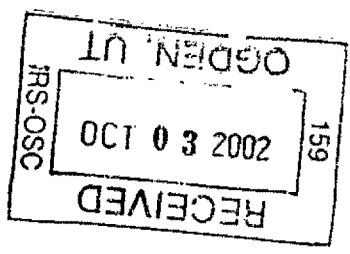
h Post-general election report (due by the 30th day after general election)
(1) Date of election: _____
(2) For the state of: _____

9 Total amount of reported contributions (total from all attached Schedules A).	9	0.00
10 Total amount of reported expenditures (total from all attached Schedules B).	10	6,500.00

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 Edmund J. McCann Date 10-01-02
Signature of authorized official

SCANNED OCT 1 0 2002



Itemized Contributions Schedule A page 1 of 1

Name of organization: **Maine AFL-CIO** COPE PAC
 Employer identification number: **01: 0536593**

Contributor's name, mailing address and ZIP code	Name of contributor's employer	Amount of contributions reported for this period
	Contributor's occupation	
	Aggregate contributions year-to-date . . . ▶ \$	
Contributor's name, mailing address and ZIP code	Name of contributor's employer	Amount of contributions reported for this period
	Contributor's occupation	
	Aggregate contributions year-to-date . . . ▶ \$	
Contributor's name, mailing address and ZIP code	Name of contributor's employer	Amount of contributions reported for this period
	Contributor's occupation	
	Aggregate contributions year-to-date . . . ▶ \$	
Contributor's name, mailing address and ZIP code	Name of contributor's employer	Amount of contributions reported for this period
	Contributor's occupation	
	Aggregate contributions year-to-date . . . ▶ \$	
Contributor's name, mailing address and ZIP code	Name of contributor's employer	Amount of contributions reported for this period
	Contributor's occupation	
	Aggregate contributions year-to-date . . . ▶ \$	
Contributor's name, mailing address and ZIP code	Name of contributor's employer	Amount of contributions reported for this period
	Contributor's occupation	
	Aggregate contributions year-to-date . . . ▶ \$	
Contributor's name, mailing address and ZIP code	Name of contributor's employer	Amount of contributions reported for this period
	Contributor's occupation	
	Aggregate contributions year-to-date . . . ▶ \$	
Contributor's name, mailing address and ZIP code	Name of contributor's employer	Amount of contributions reported for this period
	Contributor's occupation	
	Aggregate contributions year-to-date . . . ▶ \$	
Contributor's name, mailing address and ZIP code	Name of contributor's employer	Amount of contributions reported for this period
	Contributor's occupation	
	Aggregate contributions year-to-date . . . ▶ \$	

Subtotal of contributions reported on this page only. Enter here and also include this amount in the total on line 9 of Form 8872 . . . ▶ \$ 0.00

Itemized Expenditures

Name of organization
Maine AFL-CIO COPE PAC

Employer identification number
01 : 0536593

Recipient's name, mailing address and ZIP code	Name of recipient's employer	Amount of each expenditure reported for this period
Duplessie For Leadership 41 Carol Street Westbrook, Maine 04092	Recipient's occupation	500.00 \$
Recipient's name, mailing address and ZIP code Oxford County Democratic Committee Box 187 Locke Mills, Maine 04255	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 Baldacci For Governor Campaign 74 Elm Street Portland, Maine 04101	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 House Democratic Campaign Committee P.O. Box 2021 Augusta, Maine 04338	Name of recipient's employer	Amount of each expenditure reported for this period 2,500.00 \$
	Recipient's occupation	
Recipient's name, mailing address and ZIP code Senate Democratic Campaign Committee PMB 237, 126 Western Avenue Augusta, Maine 04330	Name of recipient's employer	Amount of each expenditure reported for this period 2,500.00 \$
	Recipient's occupation	
Recipient's name, mailing address and ZIP code	Name of recipient's employer	Amount of each expenditure reported for this period \$
	Recipient's occupation	
Recipient's name, mailing address and ZIP code	Name of recipient's employer	Amount of each expenditure reported for this period \$
	Recipient's occupation	
Recipient's name, mailing address and ZIP code	Name of recipient's employer	Amount of each expenditure reported for this period \$
	Recipient's occupation	
Recipient's name, mailing address and ZIP code	Name of recipient's employer	Amount of each expenditure reported for this period \$
	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.		\$ 6,500.00

