

Form **8872**
(July 2000)

Political Organization Report of Contributions and Expenditures

OMB No. 1545-1696

Department of the Treasury
Internal Revenue Service

▶ See separate instructions.

A For the period beginning APRIL 1, 2002 and ending JUNE 30, 2002

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

1 Name of organization MSEA - THGE Employer identification number 01-0536651

2 Mailing address (P.O. Box or number, street, and room or suite number)
PO BOX 1072, 65 STATE ST.

City or town, state, and ZIP code
AUGUSTA MAINE 04332-1072

3 E-mail address of organization msea.seiu.org 4 Date organization was formed 07-00

5a Name of custodian of records
JOAN C. TOWLE
MAINE STATE EMPLOYEES ASSN.
LOCAL 1989, SEIU

5b Custodian's address
PO BOX 1072, 65 STATE ST.
AUGUSTA MAINE 04332-1072

6a Name of contact person
CARL LEINONEN
EXEC. DIRECTOR

6b Contact person's address
PO BOX 1072, 65 STATE ST.
AUGUSTA, MAINE 04332-1072

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: _____

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9 Total amount of reported contributions (total from all attached Schedules A) 9,384

10 Total amount of reported expenditures (total from all attached Schedules B) OGDEN, UTAH

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 Blenda G. Fuller Date 7/8/02
Signature of authorized official

SCANNED JUL 22 2002

Schedule A Itemized Contributions

Schedule A page 1 of 1

Name of organization **MSEA-PAGE**

Employer identification number
01 0536651

Contributor's name, mailing address and ZIP code	Name of contributor's employer	Amount of contributions reported for this period
MAINE STATE EMPLOYEES ASSN LOCAL 1989, SEIU PO BOX 1072, 65 STATE ST. AUGUSTA, MAINE 04332-1072	Contributor's occupation	\$ 9,384
	Aggregate contributions year-to-date . . . ▶ \$ 24,384	
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 ▶		\$ 9,384

Schedule B Itemized Expenditures

Schedule B page 1 of 1

Name of organization *MSEA-PAGE*

Employer identification number
01-0536651

Recipient's name, mailing address and ZIP code	Name of recipient's employer Recipient's occupation	Amount of each expenditure reported for this period \$
Recipient's name, mailing address and ZIP code	Name of recipient's employer Recipient's occupation	Amount of each expenditure reported for this period \$
Recipient's name, mailing address and ZIP code	Name of recipient's employer Recipient's occupation	Amount of each expenditure reported for this period \$
Recipient's name, mailing address and ZIP code	Name of recipient's employer Recipient's occupation	Amount of each expenditure reported for this period \$
Recipient's name, mailing address and ZIP code	Name of recipient's employer Recipient's occupation	Amount of each expenditure reported for this period \$
Recipient's name, mailing address and ZIP code	Name of recipient's employer Recipient's occupation	Amount of each expenditure reported for this period \$
Recipient's name, mailing address and ZIP code	Name of recipient's employer Recipient's occupation	Amount of each expenditure reported for this period \$
Recipient's name, mailing address and ZIP code	Name of recipient's employer Recipient's occupation	Amount of each expenditure reported for this period \$
Recipient's name, mailing address and ZIP code	Name of recipient's employer Recipient's occupation	Amount of each expenditure reported for this period \$
Subtotal of expenditures reported on this page only. Enter here and also include this amount in the total on line 10 of Form 8872		\$ <i>— 0 —</i>

