

**FEC
FORM 3****REPORT OF RECEIPTS
AND DISBURSEMENTS**

For An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines.

12FE4M5

Committee to Elect Stephen A. Labate, Inc.

ADDRESS (number and street) ▼

P.O. Box 6177



Check if different than previously reported. (ACC)

North Babylon

NY

11703

2. FEC IDENTIFICATION NUMBER ▼

C C00473777

CITY ▲

STATE ▲

ZIP CODE ▲

STATE ▼ DISTRICT

3. IS THIS REPORT



NEW (N)

OR



AMENDED (A)

NY

03

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:



April 15 Quarterly Report (Q1)



July 15 Quarterly Report (Q2)



October 15 Quarterly Report (Q3)



January 31 Year-End Report (YE)



Termination Report (TER)

(b) 12-Day PRE-Election Report for the:



Primary (12P)



General (12G)



Runoff (12R)



Convention (12C)



Special (12S)

Election on

M M / D D / Y Y Y Y

in the State of

(c) 30-Day POST-Election Report for the:



General (30G)



Runoff (30R)



Special (30S)

Election on

M M / D D / Y Y Y Y

in the State of

5. Covering Period

M M / D D / Y Y Y Y

04

D D / Y Y Y Y

01

Y Y Y Y

2013

through

M M / D D / Y Y Y Y

06

D D / Y Y Y Y

30

Y Y Y Y

2013

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Nancy Marks

Signature of Treasurer Nancy Marks

[Electronically Filed]

Date

M M / D D / Y Y Y Y

07

D D / Y Y Y Y

15

Y Y Y Y

2013

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

Office
Use
Only**FEC FORM 3**
(Revised 02/2003)

SUMMARY PAGE

of Receipts and Disbursements

FEC Form 3 (Revised 02/2003)

PAGE 2 / 10

Write or Type Committee Name

Committee to Elect Stephen A. Labate, Inc.

Report Covering the Period:

From:

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	1		2	0	1	3

To:

M	M	/	D	D	/	Y	Y	Y	Y
0	6		3	0		2	0	1	3

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e))....	0.00	282097.50
(b) Total Contribution Refunds (from Line 20(d))	0.00	3400.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a))	0.00	278697.50
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	664.85	286263.51
(b) Total Offsets to Operating Expenditures (from Line 14)	0.00	0.00
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a))	664.85	286263.51
8. Cash on Hand at Close of Reporting Period (from Line 27)	468.71	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	4000.00	

For further information contact:

Federal Election Commission
999 E Street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE of Receipts

FEC Form 3 (Revised 12/2003)

PAGE 3 / 10

Write or Type Committee Name

Committee to Elect Stephen A. Labate, Inc.

Report Covering the Period:

From:

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	1		2	0	1	3

To:

M	M	/	D	D	/	Y	Y	Y	Y
0	6		3	0		2	0	1	3

I. RECEIPTS
COLUMN A
Total This Period

COLUMN B
Election Cycle-to-Date
11. CONTRIBUTIONS (other than loans) FROM:

(a) Individuals/Persons Other Than Political Committees

(i) Itemized (use Schedule A).....

0.00

216090.00

(ii) Unitemized.....

0.00

58207.50

(iii) TOTAL of contributions from individuals ▶

0.00

274297.50

(b) Political Party Committees.....

0.00

500.00

(c) Other Political Committees (such as PACs).....

0.00

7300.00

(d) The Candidate.....

0.00

0.00

(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..

0.00

282097.50

12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES

0.00

0.00

13. LOANS:

(a) Made or Guaranteed by the Candidate.....

0.00

5500.00

(b) All Other Loans.....

0.00

0.00

(c) TOTAL LOANS (add Lines 13(a) and (b)).....

0.00

5500.00

14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.)

0.00

0.00

15. OTHER RECEIPTS (Dividends, Interest, etc.)

0.00

100.00

16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶

0.00

287697.50

DETAILED SUMMARY PAGE of Disbursements

FEC Form 3 (Revised 02/2003)

PAGE 4 / 10

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	664.85	286263.51
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	0.00
(b) Of All Other Loans	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees	0.00	3400.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	0.00	3400.00
21. OTHER DISBURSEMENTS	0.00	90.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ►	664.85	289753.51

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	1133.56
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	0.00
25. SUBTOTAL (add Line 23 and Line 24).....	1133.56
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	664.85
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	468.71

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 5 OF 10

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Committee to Elect Stephen A. Labate, Inc.

Full Name (Last, First, Middle Initial)

A. CCC Enterprises

Mailing Address 349 W. 19th Street

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		10		2013

City	State	Zip Code
Deer Park	NY	11729

Amount of Each Disbursement this Period

250.00

Purpose of Disbursement
Services

001

Transaction ID : SB17.7351

Candidate Name

Committee to Elect Stephen A. Labate, Inc.

Category/
Type

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State: NY District: 03

Full Name (Last, First, Middle Initial)

B. Cynergy Data

Mailing Address 30-30 47th Avenue 9th Fl

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		01		2013

City	State	Zip Code
Long Island City	NY	11101

Amount of Each Disbursement this Period

2.00

Purpose of Disbursement
CC Merchant Fee

001

Transaction ID : SB17.7336

Candidate Name

Committee to Elect Stephen A. Labate, Inc.

Category/
Type

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State: NY District: 03

Full Name (Last, First, Middle Initial)

c. Cynergy Data

Mailing Address 30-30 47th Avenue 9th Fl

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		02		2013

City	State	Zip Code
Long Island City	NY	11101

Amount of Each Disbursement this Period

2.00

Purpose of Disbursement
CC Merchant Fee

001

Transaction ID : SB17.7341

Candidate Name

Committee to Elect Stephen A. Labate, Inc.

Category/
Type

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State: NY District: 03

SUBTOTAL of Disbursements This Page (optional).....

TOTAL This Period (last page this line number only).....

254.00

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 6 OF 10

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Committee to Elect Stephen A. Labate, Inc.

Full Name (Last, First, Middle Initial)

A. Cynergy Data

Mailing Address 30-30 47th Avenue 9th Fl

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		03		2013

City	State	Zip Code
Long Island City	NY	11101

Amount of Each Disbursement this Period

2.00

Purpose of Disbursement
CC Merchant Fee

001

Transaction ID : SB17.7342

Candidate Name

Committee to Elect Stephen A. Labate, Inc.

Category/
Type

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State: NY District: 03

Full Name (Last, First, Middle Initial)

B. Hess

Mailing Address 1800 Deer Park Avenue

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		16		2013

City	State	Zip Code
Deer Park	NY	11729

Amount of Each Disbursement this Period

52.04

Purpose of Disbursement
Gas

001

Transaction ID : SB17.7335

Candidate Name

Committee to Elect Stephen A. Labate, Inc.

Category/
Type

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State: NY District: 03

Full Name (Last, First, Middle Initial)

C. Hess

Mailing Address 1800 Deer Park Avenue

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		24		2013

City	State	Zip Code
Deer Park	NY	11729

Amount of Each Disbursement this Period

20.28

Purpose of Disbursement
Gas

001

Transaction ID : SB17.7334

Candidate Name

Committee to Elect Stephen A. Labate, Inc.

Category/
Type

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State: NY District: 03

SUBTOTAL of Disbursements This Page (optional).....

TOTAL This Period (last page this line number only).....

74.32

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 7 OF 10

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Committee to Elect Stephen A. Labate, Inc.

Full Name (Last, First, Middle Initial)

A. Hess

Mailing Address 1800 Deer Park Avenue

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		03		2013

City	State	Zip Code
Deer Park	NY	11729

Amount of Each Disbursement this Period

62.01

Purpose of Disbursement
Gas

001

Transaction ID : SB17.7333

Candidate Name

Committee to Elect Stephen A. Labate, Inc.

Category/
Type

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State: NY District: 03

Full Name (Last, First, Middle Initial)

B. Hess

Mailing Address 1800 Deer Park Avenue

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		17		2013

City	State	Zip Code
Deer Park	NY	11729

Amount of Each Disbursement this Period

25.01

Purpose of Disbursement
Gas

001

Transaction ID : SB17.7332

Candidate Name

Committee to Elect Stephen A. Labate, Inc.

Category/
Type

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State: NY District: 03

Full Name (Last, First, Middle Initial)

c. Nation Builder

Mailing Address No Address on Billing or Web Site

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		06		2013

City	State	Zip Code
	CA	

Amount of Each Disbursement this Period

24.00

Purpose of Disbursement
Web Site

001

Transaction ID : SB17.7343

Candidate Name

Committee to Elect Stephen A. Labate, Inc.

Category/
Type

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State: NY District: 03

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

111.02

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 8 OF 10

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Committee to Elect Stephen A. Labate, Inc.

Full Name (Last, First, Middle Initial)

A. Nation Builder

Mailing Address No Address on Billing or Web Site

City	State CA	Zip Code
------	-------------	----------

Purpose of Disbursement
Web Site

001

Category/
Type

Candidate Name

Committee to Elect Stephen A. Labate, Inc.

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State: NY

District: 03

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		06		2013

Amount of Each Disbursement this Period

24.00

Transaction ID : SB17.7344

B.

Mailing Address

City	State	Zip Code
------	-------	----------

Purpose of Disbursement

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
-----	---	-----	---	---------

Amount of Each Disbursement this Period

--

C.

Mailing Address

City	State	Zip Code
------	-------	----------

Purpose of Disbursement

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
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Amount of Each Disbursement this Period

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SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

24.00

463.34

SCHEDULE C (FEC Form 3)
LOANSUse separate schedule(s)
for each category of the
Detailed Summary Page

PAGE 9 OF 10

FOR LINE NUMBER:
(check only one)☒ 13a
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.4476

Committee to Elect Stephen A. Labate, Inc.

LOAN SOURCE Full Name (Last, First, Middle Initial)

[PERSONAL FUNDS]

Election: 2012

Stephen A Labate

☒ Primary☐ General☐ Other (specify) ▼

Mailing Address

P.O. Box 6177

City

State

ZIP Code

North Babylon

NY

11703

Original Amount of Loan

3000.00

Cumulative Payment To Date

1500.00

Balance Outstanding at Close of This Period

1500.00

TERMS

Date Incurred

M M / D D / Y Y
03 / 07 / 2011

Date Due

M M / D D / Y Y
on demand

Interest Rate

0.00

% (apr)

Secured:

☐ Yes☒ No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:**SUBTOTALS** This Period This Page (optional)..... ►

1500.00

TOTALS This Period (last page in this line only)..... ►

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3)
LOANSUse separate schedule(s)
for each category of the
Detailed Summary Page

PAGE 10 OF 10

FOR LINE NUMBER:
(check only one)☒ 13a
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.6668

Committee to Elect Stephen A. Labate, Inc.

LOAN SOURCE Full Name (Last, First, Middle Initial)

Stephen A Labate

[PERSONAL FUNDS]

Election: 2012

☐ Primary☒ General☐ Other (specify) ▼Mailing Address
P.O. Box 6177

City

State

ZIP Code

North Babylon

NY

11703

Original Amount of Loan

2500.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

2500.00

TERMS

Date Incurred

M M / D D / Y Y Y Y
09 / 14 / 2012

Date Due

M M / D D / Y Y Y Y
12/31/2012

Interest Rate

0.00 % (apr)

Secured:

☐ Yes ☒ No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:**SUBTOTALS** This Period This Page (optional)..... ►

2500.00

TOTALS This Period (last page in this line only)..... ►

4000.00

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.