

# 48 HOUR NOTICE OF CONTRIBUTIONS/LOANS RECEIVED

(See Reverse Side for Instructions)

To be used to report all contributions (including loans) of \$1000 or more, received within 20 days of the election.

<b>1. NAME OF COMMITTEE IN FULL</b> Blakeman 2014 Inc.			
<b>ADDRESS</b> (number and street) 108 S. Franklin Avenue Suite 1			
<b>CITY, STATE, and ZIP CODE</b> Valley Stream NY 11580			
<b>2. NAME OF CANDIDATE</b> Bruce A Blakeman		<b>3. OFFICE SOUGHT</b> (State and District) House NY 04	
<b>4. FEC IDENTIFICATION NUMBER</b> C00558189			
<b>5. IS THIS AN AMENDMENT?</b> <input checked="" type="checkbox"/> NO, THIS IS A NEW FILING <input type="checkbox"/> YES, IT AMENDS THE NOTICE FILED ON _____ / _____ / _____			
<b>A. FULL NAME, MAILING ADDRESS AND ZIP CODE</b>			
Sean Acosta  3515 So. Ocean Blvd.  Highland FL 33487		Name of Employer Requested  <b>Transaction ID : F6.4532</b> Occupation Requested	Date (month, day, year) 06/13/2014  Amount 1000.00
<b>B. FULL NAME, MAILING ADDRESS AND ZIP CODE</b>			
Frank Califano Sr.  19 Sherwood Gate  Oyster Bay NY 11771		Name of Employer FJC Security  <b>Transaction ID : F6.4525</b> Occupation Chairman of the Board	Date (month, day, year) 06/13/2014  Amount 1000.00
<b>C. FULL NAME, MAILING ADDRESS AND ZIP CODE</b>			
Stephen Cuchel  333 Earle Ovington Blvd.  Uniondale NY 11553		Name of Employer Healthplex, Inc.  <b>Transaction ID : F6.4536</b> Occupation Chairman	Date (month, day, year) 06/13/2014  Amount 2500.00
<b>D. FULL NAME, MAILING ADDRESS AND ZIP CODE</b>			
Ann M. Demichael  36 Centre Street  Woodmere NY 11598		Name of Employer Requested  <b>Transaction ID : F6.4529</b> Occupation Requested	Date (month, day, year) 06/13/2014  Amount 1000.00
<b>E. FULL NAME, MAILING ADDRESS AND ZIP CODE</b>			
Joseph Leone  10 Libby Drive  Glen Cove NY 11542		Name of Employer Requested  <b>Transaction ID : F6.4526</b> Occupation Requested	Date (month, day, year) 06/13/2014  Amount 1500.00
<b>SIGNATURE (optional)</b> Vincent DeVito  <i>[Electronically Filed]</i>		<b>DATE</b> 06/13/2014	<b>For further information contact:</b> Federal Election Commission 999 E Street, NW, Washington, DC 20463 Toll Free 800-424-9530, Local 202-694-1100

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Any information copied from reports and statements filed under the Federal Election Campaign Act 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.

**FEC FORM 6**  
(Revised 07/2011)

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A. FULL NAME, MAILING ADDRESS AND ZIP CODE	Name of Employer	Date (month, day, year)	Amount
Bob N. Lipari  44 Oxford Road  East Rockaway NY 11518	Requested  <b>Transaction ID : F6.4539</b> Occupation Requested	06/13/2014	1000.00
B. FULL NAME, MAILING ADDRESS AND ZIP CODE Thomas McKeivitt  147 Betty Road  East Meadow NY 11554	Requested  <b>Transaction ID : F6.4541</b> Occupation Requested	06/12/2014	1250.00
C. FULL NAME, MAILING ADDRESS AND ZIP CODE	Name of Employer  Occupation	Date (month, day, year)	Amount
D. FULL NAME, MAILING ADDRESS AND ZIP CODE	Name of Employer  Occupation	Date (month, day, year)	Amount
E. FULL NAME, MAILING ADDRESS AND ZIP CODE	Name of Employer  Occupation	Date (month, day, year)	Amount