

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT Example: If typing, type over the lines. 12FE4M5 COMMONWEALTH FORWARD

ADDRESS (number and street) PO BOX 10906 SAN JUAN PR 00922

2. FEC IDENTIFICATION NUMBER C C00573170 3. IS THIS REPORT NEW (N) OR AMENDED (A) X

4. TYPE OF REPORT (Choose One) (a) Quarterly Reports: April 15, July 15, October 15, January 31, July 31 Mid-Year Report (X), Termination Report. (b) Monthly Report Due On: Feb 20, Mar 20, Apr 20, May 20, Jun 20, Jul 20, Aug 20, Sep 20, Oct 20, Nov 20, Dec 20, Jan 31. (c) 12-Day PRE-Election Report for the: Primary, General, Runoff, Convention, Special. (d) 30-Day POST-Election Report for the: General, Runoff, Special.

5. Covering Period 01 / 01 / 2015 through 06 / 30 / 2015

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 Milton Alexie Colon

Signature of Treasurer Milton Alexie Colon [Electronically Filed] Date 05 / 27 / 2016

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

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name

COMMONWEALTH FORWARD

Report Covering the Period: From: / / To: / /

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2015"/>	<input type="text" value="0.00"/>	<input type="text" value="0.00"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="0.00"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="104496.00"/>	<input type="text" value="104496.00"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<input type="text" value="104496.00"/>	<input type="text" value="104496.00"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="21908.46"/>	<input type="text" value="21908.46"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="82587.54"/>	<input type="text" value="82587.54"/>
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....	<input type="text" value="0.00"/>	

This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

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 3X (Rev. 06/2004)

Write or Type Committee Name

COMMONWEALTH FORWARD

Report Covering the Period: From: / / To: / /

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	101996.00	101996.00
(ii) Unitemized	0.00	0.00
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	101996.00	101996.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	2500.00	2500.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	104496.00	104496.00
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))..... ▶	104496.00	104496.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	104496.00	104496.00

DETAILED SUMMARY PAGE
of Disbursements

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures	0.00	0.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	0.00	0.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(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 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements	21908.46	21908.46
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	21908.46	21908.46
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	21908.46	21908.46

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	104496.00	104496.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	104496.00	104496.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	0.00	0.00
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	0.00	0.00

: 97 `A-G79 @G B9CI G`H9LH`F9 @H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: F3XA
Transaction ID :

Commonwealth Forward was created under the laws of Puerto Rico on July 2014. On February 17, 2015 the committee was federally registered. The initial cash amount of \$40,496 on the report for the period from January 01, 2015 to June 30, 2015 was the results of the operation and contributions during year 2014. For Detailed transactions see Memo Texts for Beginning Cash On Hand

Form/Schedule:
Transaction ID:

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 19
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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)
COMMONWEALTH FORWARD

Full Name (Last, First, Middle Initial) A. 50 State LLC		Date of Receipt MM / DD / YYYY 04 / 27 / 2015 Transaction ID : SA11AI.4110
Mailing Address 1401 H Street NW Suite 875		Amount of Each Receipt this Period 1000.00
City Washington	State DC	Zip Code 20005
FEC ID number of contributing federal political committee.	C	<input type="checkbox"/> Memo Item Direct Contribution
Name of Employer	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

Full Name (Last, First, Middle Initial) B. Blandfort V. Blandfort		Date of Receipt MM / DD / YYYY 04 / 01 / 2015 Transaction ID : SA11AI.4102
Mailing Address 5716 N Kings HWY		Amount of Each Receipt this Period 500.00
City Alexandria	State VA	Zip Code 22303
FEC ID number of contributing federal political committee.	C	<input type="checkbox"/> Memo Item Direct Contribution
Name of Employer Self-Employed	Occupation Entrepreneur	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

Full Name (Last, First, Middle Initial) C. CH2M Hill Enginners Inc		Date of Receipt MM / DD / YYYY 01 / 01 / 2015 Transaction ID : SA11AI.4199
Mailing Address 9191 South Jamaica St.		Amount of Each Receipt this Period 500.00
City Englewood	State CO	Zip Code 80112
FEC ID number of contributing federal political committee.	C	<input type="checkbox"/> Memo Item Beginning Balance
Name of Employer	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

SUBTOTAL of Receipts This Page (optional).....▶	2000.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 OF 19
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
COMMONWEALTH FORWARD

A. Jorge L Figueroa
Full Name (Last, First, Middle Initial)

Mailing Address A-6 Calle Taine
Urb Parque de Bucare II

City San Juan State PR Zip Code 00926

FEC ID number of contributing federal political committee. **C**

Name of Employer Entrepreneur Occupation Entrepreneur

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1666.00

Date of Receipt
MM / DD / YYYY
01 / 01 / 2015

Transaction ID : SA11AI.4198

Amount of Each Receipt this Period
1666.00

Memo Item
Beginning Balance

B. Ironworker Political Education Fund
Full Name (Last, First, Middle Initial)

Mailing Address 1750 NY Avenue

City Washington State DC Zip Code 20006

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2500.00

Date of Receipt
MM / DD / YYYY
04 / 27 / 2015

Transaction ID : SA11AI.4119

Amount of Each Receipt this Period
2500.00

Memo Item
Direct Contribution

C. LSN Partners LLC
Full Name (Last, First, Middle Initial)

Mailing Address 801 W 41 Street
Suite 401

City Miami State PR Zip Code 33140

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2500.00

Date of Receipt
MM / DD / YYYY
04 / 27 / 2015

Transaction ID : SA11AI.4108

Amount of Each Receipt this Period
2500.00

Memo Item
Direct Contribution

SUBTOTAL of Receipts This Page (optional).....	6666.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 OF 19
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
COMMONWEALTH FORWARD

A. Jose Mangual
Full Name (Last, First, Middle Initial)

Mailing Address 1720 Calle Geranio
Urb San Francisco

City San Juan State PR Zip Code 00926

FEC ID number of contributing federal political committee. **C**

Name of Employer Entrepreneur Occupation Entrepreneur

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1666.00

Date of Receipt 01 / 01 / 2015
Transaction ID : SA11AI.4196

Amount of Each Receipt this Period 1666.00

Memo Item
Beginning Balance

B. Edith Melendez
Full Name (Last, First, Middle Initial)

Mailing Address 1720 Calle Geranio
Urb San Francisco

City San Juan State PR Zip Code 00926

FEC ID number of contributing federal political committee. **C**

Name of Employer Self-Employed Occupation Self Employed

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1666.00

Date of Receipt 01 / 01 / 2015
Transaction ID : SA11AI.4191

Amount of Each Receipt this Period 1666.00

Memo Item
Beginning Balance

C. Francisca Morales
Full Name (Last, First, Middle Initial)

Mailing Address A-6 Calle Taine
Urb Parque de Bucare II

City San Juan State PR Zip Code 00926

FEC ID number of contributing federal political committee. **C**

Name of Employer Self-Employed Occupation Self-Employed

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1666.00

Date of Receipt 01 / 01 / 2015
Transaction ID : SA11AI.4197

Amount of Each Receipt this Period 1666.00

Memo Item
Beginning Balance

SUBTOTAL of Receipts This Page (optional)..... ▶ 4998.00

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

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`ZG7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SA11AI

Transaction ID : SA11AI.4196

Jose MangualUrb. San Francisco1720 Calle GeranioSan Juan, PR 00926Employer: EntrepreneurOccupation:
Entrepreneur Date: 10/21/2014Amount: \$1,666

Form/Schedule: SA11AI

Transaction ID: SA11AI.4191

Edith MelendezUrb. San Francisco1720 Calle GeranioSan Juan, PR 00926Employer: Self-EmployedOccupation:
Self-Employed Date: 10/21/2014Amount: \$1,666

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`ZG7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SA11AI

Transaction ID : SA11AI.4197

Francisca MoralesUrb. Parque de Bucare IIA-6 Calle TaineSan Juan, PR 00926Employer: Self-EmployedOccupation:
Self-Employed Date: 10/21/2014Amount: \$1,666

Form/Schedule:

Transaction ID:

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 OF 19
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
COMMONWEALTH FORWARD

Full Name (Last, First, Middle Initial) A. Carlos Perez		Date of Receipt MM / DD / YYYY 01 / 01 / 2015
Mailing Address 8 calle Margarita Urb Parque Monteverde II		Transaction ID : SA11AI.4192
City San Juan	State PR	Zip Code 00926
FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period 1666.00
Name of Employer Self-Employed	Occupation Self-Employed	<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1666.00	Beginning Balance

Full Name (Last, First, Middle Initial) B. Policom Group, LLC		Date of Receipt MM / DD / YYYY 01 / 01 / 2015
Mailing Address PO Box 16871		Transaction ID : SA11AI.4189
City San Juan	State PR	Zip Code 00918
FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period 30000.00
Name of Employer	Occupation	<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 30000.00	Beginning Balance

Full Name (Last, First, Middle Initial) C. Policom Group, LLC		Date of Receipt MM / DD / YYYY 01 / 05 / 2015
Mailing Address PO Box 16871		Transaction ID : SA11AI.4101
City San Juan	State PR	Zip Code 00918
FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period 45000.00
Name of Employer	Occupation	<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 75000.00	Direct Contribution

SUBTOTAL of Receipts This Page (optional).....▶	76666.00
TOTAL This Period (last page this line number only).....▶	

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SA11AI

Transaction ID : SA11AI.4192

Carlos R. PerezUrb. Parque Monteverde II8 Calle MargaritaSan Juan, PR 00926Employer: Self-EmployedOccupation: Self-Employed Date: 10/21/2014Amount: \$1,666

Form/Schedule: SA11AI

Transaction ID: SA11AI.4189

Policom Group, LLCPO Box 16871San Juan, PR 00908Date: 10/30/2014Amount: \$30,000

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 14 OF 19
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
COMMONWEALTH FORWARD

A. Southland Gaming Of The VI
 Full Name (Last, First, Middle Initial)
 Mailing Address 1003 Estate Ross, #8
 City St. Thomas State VI Zip Code 00803
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 5000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 27 / 2015
Transaction ID : SA11AI.4106
 Amount of Each Receipt this Period
 5000.00
 Memo Item
 Direct Contribution

B. Sunovion Operations
 Full Name (Last, First, Middle Initial)
 Mailing Address 84 Waterford Drive
 City Malborough State MA Zip Code 01752
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 5000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 27 / 2015
Transaction ID : SA11AI.4104
 Amount of Each Receipt this Period
 5000.00
 Memo Item
 Direct Contribution

C. Maria R Veve
 Full Name (Last, First, Middle Initial)
 Mailing Address 8 calle Margarita
 Urb Parque Monteverde II
 City San Juan State PR Zip Code 00926
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Self-Employed Self-Employed
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 1666.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 01 / 01 / 2015
Transaction ID : SA11AI.4193
 Amount of Each Receipt this Period
 1666.00
 Memo Item
 Beginning Balance

SUBTOTAL of Receipts This Page (optional).....	11666.00
TOTAL This Period (last page this line number only).....	101996.00

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SA11AI

Transaction ID : SA11AI.4193

Maria R VeveUrb. Parque Monteverde I18 Calle MargaritaSan Juan, PR 00926Employer: Self-EmployedOccupation:
Self-Employed Date: 10/21/2014Amount: \$1,666

Form/Schedule:

Transaction ID:

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 16 OF 19
(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
COMMONWEALTH FORWARD

A. INTERNATIONAL GAME TECHNOLOGY (IGT) PAC
Full Name (Last, First, Middle Initial)
Mailing Address 10 MEMORIAL BLVD.
City Providence State RI Zip Code 02903
FEC ID number of contributing federal political committee. **C** C00473025
Name of Employer Occupation
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 2500.00

Date of Receipt 04 / 27 / 2015
Transaction ID : SA11C.4115
Amount of Each Receipt this Period 2500.00
 Memo Item
Direct Contribution

B.
Full Name (Last, First, Middle Initial)
Mailing Address
City State Zip Code
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼

Date of Receipt
Amount of Each Receipt this Period
 Memo Item

C.
Full Name (Last, First, Middle Initial)
Mailing Address
City State Zip Code
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼

Date of Receipt
Amount of Each Receipt this Period
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	2500.00
TOTAL This Period (last page this line number only).....▶	2500.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
COMMONWEALTH FORWARD

Full Name (Last, First, Middle Initial)

A. Banco Popular de PR

Mailing Address 208 Ponce de Leon Ave
Popular Center

City San Juan State PR Zip Code 00918

Purpose of Disbursement
Reimbursements to individuals for travel - Edwin Quinones

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : SB29.4130

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

B. Colleen M Turrentine Consulting

Mailing Address 3928 Benton ST NW

City Washington State DC Zip Code 20007

Purpose of Disbursement
Professional Services

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : SB29.4124

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

C. Colleen M Turrentine Consulting

Mailing Address 3928 Benton ST NW

City Washington State DC Zip Code 20007

Purpose of Disbursement
Professional Services

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : SB29.4125

Amount of Each Disbursement this Period

Memo Item

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

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

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
COMMONWEALTH FORWARD

Full Name (Last, First, Middle Initial)

A. Colleen M Turrentine Consulting

Mailing Address 3928 Benton ST NW

City Washington State DC Zip Code 20007

Purpose of Disbursement
Professional Services

001

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
04 / 15 / 2015

Transaction ID : SB29.4126

Amount of Each Disbursement this Period

3000.00

Memo Item

Full Name (Last, First, Middle Initial)

B. Colleen M Turrentine Consulting

Mailing Address 3928 Benton ST NW

City Washington State DC Zip Code 20007

Purpose of Disbursement
Professional Services

001

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
05 / 21 / 2015

Transaction ID : SB29.4127

Amount of Each Disbursement this Period

3000.00

Memo Item

Full Name (Last, First, Middle Initial)

C. Edwin Quinones

Mailing Address 33 Calle Resolucion Suite 701-A
Doral Bank Plaza

City San Juan State PR Zip Code 00920

Purpose of Disbursement
Reimbursements to individuals for travel

002

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
04 / 22 / 2015

Transaction ID : SB29.4132

Amount of Each Disbursement this Period

2141.74

Memo Item

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

8141.74

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

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
COMMONWEALTH FORWARD

Full Name (Last, First, Middle Initial) A. Quinones and Arbona Law Offices PSC		Date of Disbursement MM / DD / YYYY 05 / 21 / 2015
Mailing Address PO Box 10906		Transaction ID : SB29.4128
City San Juan State PR Zip Code 00922	Amount of Each Disbursement this Period 3000.00	
Purpose of Disbursement Professional Services	Category/Type 001	<input type="checkbox"/> Memo Item
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B.		Date of Disbursement MM / DD / YYYY
Mailing Address		Amount of Each Disbursement this Period
City State Zip Code	Category/Type	
Purpose of Disbursement		<input type="checkbox"/> Memo Item
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C.		Date of Disbursement MM / DD / YYYY
Mailing Address		Amount of Each Disbursement this Period
City State Zip Code	Category/Type	
Purpose of Disbursement		<input type="checkbox"/> Memo Item
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional)..... ▶	3000.00
TOTAL This Period (last page this line number only)..... ▶	21908.46