

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 EUGENE LORENZO signature of Treasurer Date
NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 52 U.S.C. § 3010 S


Write or Type Committee Name
BRANCH 193 NATIONAL ASSCIATICN OF LETTER CARRIERS POLITICAL ACTION COMMITTEE

Report Covering the Period:


6. (a) Cash on Hand

(b) Cash on Hand at Beginning of Reporting Period............
(c) Total Receipts (from Line 19) $\qquad$
(d) Subtotal (add Lines 6(b) and 6(c) for Column $A$ and Lines 6 (a) and 6(c) for Column B).
7. Total Disbursements (from Line 31) $\qquad$
8. Cash on Hand at Close of

Reporting Period
(subtract Line 7 from Line 6(d)) $\qquad$
9. Debts and Obligations Owed TO
the Committee (Itemize all on
Schedule C and/or Schedule D). $\qquad$
10. Debts and Obligations Owed BY
the Committee (Itemize all on Schedule C and/or Schedule D).

COLUMN B Calendar Year-to-Date

$$
, 18,96476
$$

$$
\theta \cdots 1233.00
$$

$$
\therefore 189646 \quad-12.12576
$$

$\cdots, 3,161.00$
$\therefore 189646$


- $\quad, \quad \rightarrow \infty$

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

For further information contact:
Federal Election Commission
1050 First Street, N.E.
Washington, DC 20463
Toll Free 800-424-9530
Local 202-694-1100

Write or Type Committee Name
BRANCH 193 NATIONAL ASSOCIATION OF LETTER CARRIERS POLITICAL ACTION COMMITTEE

11. Contributions (other than loans) From:
(a) Individuals/Persons Other

Than Political Committees
(i) Itemized (use Schedule A). $\qquad$

(b) Political Party Committees
(c) Other Political Committees (such as MACs). $\qquad$
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) 12. Transfers From Affiliated/Other Party Committees. $\qquad$
13. All Loans Received $\qquad$
14. Loan Repayments Received $\qquad$
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5). $\qquad$

, $\quad, \quad, \quad$
(b) Levin Funds (rom Schedule H5) $\qquad$


$\theta$
$\theta$.
19. Total Receipts (add Lines 11 (d),
$12,13,14,15,16,17$, and 18(c)) $\qquad$
20. Total Federal Receipts (subtract Line 18(c) from Line 19). $\qquad$ Q

FEC Form 3X (Rev. 05/2016)




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