

**FEC  
FORM 3X**

**REPORT OF RECEIPTS  
AND DISBURSEMENTS**  
For Other Than An Authorized Committee

RECEIVED  
FEC MAIL CENTER

Office Use Only

1. NAME OF  
COMMITTEE (in full)

TYPE OR PRINT ▼

Example: If typing, type  
over the lines.

12FE4M5

2019 FEB -1 PM 12:27

GRASSROOTS EAST-FEDERAL

ADDRESS (number and street)

356 WESTCHESTER RD

PO Box 747

COLCHESTER

CT 06415-0747

☐ Check if different  
than previously  
reported. (ACC)

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

000492280

3. IS THIS  
REPORT ☒ NEW  
(N) OR ☐ AMENDED  
(A)

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)
- ☐ July 31 Mid-Year  
Report (Non-election  
Year Only) (MY)
- ☐ Termination Report  
(TER)

(b) Monthly  
Report  
Due On:

- ☐ Feb 20 (M2) ☐ May 20 (M5) ☐ Aug 20 (M8) ☐ Nov 20 (M11)  
(Non-Election  
Year Only)
- ☐ Mar 20 (M3) ☐ Jun 20 (M6) ☐ Sep 20 (M9) ☐ Dec 20 (M12)  
(Non-Election  
Year Only)
- ☐ Apr 20 (M4) ☐ Jul 20 (M7) ☐ Oct 20 (M10) ☐ Jan 31 (YE)

(c) 12-Day

PRE-Election  
Report for the:

- ☐ Primary (12P) ☐ General (12G) ☐ Runoff (12R)
- ☐ Convention (12C) ☐ Special (12S)

Election on

in the  
State of

(d) 30-Day

POST-Election  
Report for the:

- ☐ General (30G) ☐ Runoff (30R) ☐ Special (30S)

Election on

in the  
State of

5. Covering Period

1/1 / 26 / 2018

through

1/2 / 31 / 2019

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

Denise Q. mizla

Signature of Treasurer

Denise Q. Mizla

Date

01 / 13 / 2019

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 52 U.S.C. § 30109.

Office  
Use  
Only

**FEC FORM 3X**  
Rev. 05/2016

**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 05/2016)

Page 2

Write or Type Committee Name

Grassroots East Federal

Report Covering the Period:

From:

MM / DD / YYYY  
11 / 26 / 2018

To:

MM / DD / YYYY  
12 / 31 / 2018

**COLUMN A  
This Period**

**COLUMN B  
Calendar Year-to-Date**

6. (a) Cash on Hand January 1, 2018	8751.13
(b) Cash on Hand at Beginning of Reporting Period.....	9198.33
(c) Total Receipts (from Line 19).....	815.54
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	16896.12
7. Total Disbursements (from Line 31).....	10014.37
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	25647.25
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....	50.00
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....	15682.88
	9964.37
	9964.37

☒ 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

**DETAILED SUMMARY PAGE**  
of Receipts

FEC Form 3X (Rev. 05/2016)

Page 3

Write or Type Committee Name

*Grassroots East Federal*

Report Covering the Period:

From:

11 / 26 / 2018

To:

12 / 31 / 2018

**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).....

(ii) Unitemized.....

(iii) TOTAL (add

Lines 11(a)(i) and (ii).....▶

(b) Political Party Committees.....

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

(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.....

13. All Loans Received.....

14. Loan Repayments Received.....

15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....

16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....

17. Other Federal Receipts (Dividends, Interest, etc.).....

18. Transfers from Non-Federal and Levin Funds

(a) Non-Federal Account (from Schedule H3).....

(b) Levin Funds (from Schedule H5).....

(c) Total Transfers (add 18(a) and 18(b))..

19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)).....▶

20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶

-0-

815.54

815.54

815.54

815.54

815.54

95.84

16,896.12

16,991.96

16,991.96

16,991.96

16,991.96

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 4

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 .....		
(ii) Non-Federal Share .....		
(b) Other Federal Operating Expenditures .....	50.00	14,682.88
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	50.00	14,682.88
22. Transfers to Affiliated/Other Party Committees .....		
23. Contributions to Federal Candidates/Committees and Other Political Committees .....		1,000.00
24. Independent Expenditures (use Schedule E) .....		
25. Coordinated Party Expenditures (52 U.S.C. § 30116(d)) (use Schedule F) .....		
26. Loan Repayments Made .....		
27. Loans Made .....		
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....		
(b) Political Party Committees .....		
(c) Other Political Committees (such as PACs) .....		
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)) .....		
29. Other Disbursements (Including Non-Federal Donations) .....		
30. Federal Election Activity (52 U.S.C. § 30101(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share .....		
(ii) "Levin" Share .....		
(b) Federal Election Activity Paid Entirely With Federal Funds .....		
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b)) .....		
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	50.00	15,682.88
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31) .....	50.00	15,682.88

## DETAILED SUMMARY PAGE of Disbursements

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) .....	815.54	1699.66
34. Total Contribution Refunds (from Line 28(d)) .....		
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	815.54	1699.66
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	50.00	14682.88
37. Offsets to Operating Expenditures (from Line 15, page 3) .....		
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	50.00	14682.88

00-000000-000000

**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)

PAGE / OF /

☒ 21b ☐ 22 ☐ 23 ☐ 26 ☐ 27  
☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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)

*Grassroots East Federal*

Full Name (Last, First, Middle Initial)

A. *Donald Kivela*

Mailing Address

*122 Goshen Rd.*

City

*Moosup*

State

*CT*

Zip Code

*06354*

Purpose of Disbursement

*error on credit card pmt*

Candidate Name

*003*

Category/  
Type

Office Sought:

☐ House

☐ Senate

☐ President

Disbursement For:

☐ Primary

☐ General

☐ Other (specify) ▼

State:

District:

Date of Disbursement

*12 / 31 / 2018*

FEC Identification Number

*C*

Amount of Each Disbursement this Period

*50.00*

☐ Memo Item

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

*C*

Category/  
Type

Office Sought:

☐ House

☐ Senate

☐ President

Disbursement For:

☐ Primary

☐ General

☐ Other (specify) ▼

State:

District:

Date of Disbursement

*MM / DD / YYYY*

FEC Identification Number

*C*

Amount of Each Disbursement this Period

*50.00*

☐ Memo Item

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

*C*

Category/  
Type

Office Sought:

☐ House

☐ Senate

☐ President

Disbursement For:

☐ Primary

☐ General

☐ Other (specify) ▼

State:

District:

Date of Disbursement

*MM / DD / YYYY*

FEC Identification Number

*C*

Amount of Each Disbursement this Period

*50.00*

☐ Memo Item

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

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

*50.00*

*50.00*

UNRECORDED COPY OF DISBURSEMENT

PRESS FIRMLY TO SEAL

MAIL  
PRESS<sup>TM</sup>

FAST SERVICE IN THE U.S.

INTERNATIONALLY,  
A POSTAGE DECLARATION  
FORM MAY BE REQUIRED.



013 OD: 12.5 x 9.5



PRESS FIRMLY TO SEAL

U.S. POSTAGE PAID  
PMF 1-Day  
COLCHESTER, CT  
06415  
JAN 31, 19  
AMOUNT  
**\$28.40**  
R2304H108465-07



1007

20463

<b>CUSTOMER USE ONLY</b>	
FROM: (PLEASE PRINT) <b>Grassroots East Federal</b> <b>P.O. Box 747</b> <b>Colchester, CT 06415</b>	
PHONE ( ) _____	
FEDERAL AGENCY ACCT. NO. OR POSTAL SERVICE <sup>SM</sup> ACCT. NO. _____	
<b>DELIVERY OPTIONS (Customer Use Only)</b> <input checked="" type="checkbox"/> SIGNATURE REQUIRED (Note: The addressee must check the "Signature Required" box if the addressee is not the addressee's signature, OR 2) Purchases additional insurance; OR 3) Purchases COD service; OR 4) Purchases Return Receipt service. If the addressee's signature is not checked, the Postal Service will leave the item in the addressee's mail receptacle or gateway location without attempting to obtain the addressee's signature on delivery. <b>Delivery Options</b> <input type="checkbox"/> Next Business Day Delivery (delivered next business day) <input type="checkbox"/> Sunday/Holiday Delivery Required (additional fee, where available) <input type="checkbox"/> 10:30 AM Delivery Required (additional fee, where available) *Refer to USPS.com <sup>SM</sup> or local Post Office <sup>SM</sup> for availability.	
TO: (PLEASE PRINT) <b>Federal Election Comm.</b> <b>1050 First Street, N.E.</b> <b>Washington, DC</b>	
ZIP + 4 <sup>®</sup> (U.S. ADDRESSES ONLY) <b>20463</b>	

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ZIP + 4 <sup>®</sup> (U.S. ADDRESSES ONLY) <b>20463</b>	

<b>ORIGIN (POSTAL SERVICE USE ONLY)</b>	
PO ZIP Code <b>06415</b>	Scheduled Delivery Date (MMDDYY) <b>2-1</b>
Date Accepted (MMDDYY) <b>1-31-19</b>	Scheduled Delivery Time <input checked="" type="checkbox"/> 10:30 AM <input type="checkbox"/> 3:00 PM <input type="checkbox"/> 10:30 AM <input type="checkbox"/> 2 NOON
Time Accepted <b>1:36 PM</b>	10:30 AM Delivery Fee \$
Special Handling/Fragile \$	Sunday/Holiday Premium Fee \$
Weight lbs. ozs.	Acceptance Employee Initials <b>G</b>
Total Postage & Fees <b>28.40</b>	
Postage \$ <b>28.40</b>	
Insurance Fee \$	Return Receipt Fee \$ <b>2.80</b>
COD Fee \$	Live Animal Transportation Fee \$

<b>DELIVERY (POSTAL SERVICE USE ONLY)</b>	
Delivery Attempt (MMDDYY) Time <b>T</b>	Employee Signature _____
Delivery Attempt (MMDDYY) Time <b>T</b>	Employee Signature _____

LABEL 11-B, OCTOBER 2016 PSN 7690-02-000-9996 1-ORIGIN POST OFFICE COPY

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Federal Election Commission  
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The FEC added this page to the end of this filing to indicate how it was received.

<input type="checkbox"/> Hand Delivered	Date of Receipt
<input type="checkbox"/> USPS First Class Mail	Postmarked Date of Receipt
<input type="checkbox"/> USPS Registered/Certified	Postmarked (R/C)
<input type="checkbox"/> USPS Priority Mail	Postmarked
<input checked="" type="checkbox"/> USPS Priority Mail Express	Postmarked 1/31/19
<input type="checkbox"/> Postmark Illegible	
<input type="checkbox"/> No Postmark	
<input type="checkbox"/> Overnight Delivery Service (Specify):	Shipping Date
	Next Business Day Delivery <input type="checkbox"/>
<input type="checkbox"/> Received from House Records & Registration Office	Date of Receipt
<input type="checkbox"/> Received from Senate Public Records Office	Date of Receipt
<input type="checkbox"/> Received from Electronic Filing Office	Date of Receipt
<input type="checkbox"/> Other (Specify):	Date of Receipt or Postmarked
<div style="display: flex; justify-content: space-between;"> <div> <i>ES</i>  <b>PREPARER</b>  (3/2015) </div> <div> 2/1/19  <b>DATE PREPARED</b> </div> </div>	