

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.
Building Bridges, Not Walls

ADDRESS (number and street)
 Check if different than previously reported. (ACC)

2. FEC IDENTIFICATION NUMBER ▼ CITY ▲ STATE ▲ ZIP CODE ▲
 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 / / through / /

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 Rita Copeland

Signature of Treasurer Rita Copeland [Electronically Filed] Date / /

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

Building Bridges, Not Walls

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="2016"/>	<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="21463.00"/>	<input type="text" value="21463.00"/>
(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="21463.00"/>	<input type="text" value="21463.00"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="1932.80"/>	<input type="text" value="1932.80"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="19530.20"/>	<input type="text" value="19530.20"/>
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="69342.21"/>	

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)

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Write or Type Committee Name

Building Bridges, Not Walls

Report Covering the Period: From: M M / D D / Y Y Y Y 01 / 01 / 2016 To: M M / D D / Y Y Y Y 06 / 30 / 2016

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).....	21000.00	21000.00
(ii) Unitemized	463.00	463.00
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	21463.00	21463.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	21463.00	21463.00
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))..... ▶	21463.00	21463.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	21463.00	21463.00

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	1932.80	1932.80
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	1932.80	1932.80
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	0.00	0.00
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)) ..	1932.80	1932.80
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	1932.80	1932.80

DETAILED SUMMARY PAGE
of Disbursements

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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)	21463.00	21463.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	21463.00	21463.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	1932.80	1932.80
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	1932.80	1932.80

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 6 OF 10
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<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)
Building Bridges, Not Walls

A. David Blonder
Full Name (Last, First, Middle Initial)

Mailing Address 429 N. Mansfield Avenue

City Los Angeles State CA Zip Code 90036

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

Name of Employer TwinMed, LLC Occupation Medical Sales

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
20000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 03 / 2016

Transaction ID : INCA1

Amount of Each Receipt this Period
 20000.00

Memo Item

B. Antonio Villaraigosa
Full Name (Last, First, Middle Initial)

Mailing Address 2742 Creston Drive

City Los Angeles State CA Zip Code 90068

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

Name of Employer Antonio Villaraigosa Occupation Consultant

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 01 / 2016

Transaction ID : IDTA6

Amount of Each Receipt this Period
 1000.00

Memo Item

C. Actblue
Full Name (Last, First, Middle Initial)

Mailing Address 14 Arrow Street

City Cambridge State MA Zip Code 02138

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1463.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 05 / 2016

Transaction ID : INCA3IDTA6

Amount of Each Receipt this Period
 1000.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	21000.00
TOTAL This Period (last page this line number only).....▶	21000.00

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

Form/Schedule: SA11AI

Transaction ID : IDTA6

Earmarked through ActBlue

Form/Schedule: SA11AI

Transaction ID: INCA3IDTA6

Total Earmarked through conduit PAC limit not affected

**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 checked="" 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 type="checkbox"/> 29	<input type="checkbox"/> 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)
Building Bridges, Not Walls

Full Name (Last, First, Middle Initial)

A. River City Business Services

Mailing Address 5429 Madison Avenue

City Sacramento State CA Zip Code 95841

Purpose of Disbursement
Bookkeeping, Postage, Copies, Supplies and Software Fee

Category/
Type

Candidate Name

Office Sought: House Senate President
State: District: Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : EXPB2

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

B. Sandler, Reiff, Lamb, Rosenstein & Birkenstock, P.C.

Mailing Address 1025 Vermont Avenue, NW, Suite 300

City Washington State DC Zip Code 20005

Purpose of Disbursement
Legal Services

Category/
Type

Candidate Name

Office Sought: House Senate President
State: District: Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : EXPB7

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City State Zip Code

Purpose of Disbursement

Category/
Type

Candidate Name

Office Sought: House Senate President
State: District: Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

/ /

Amount of Each Disbursement this Period

Memo Item

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

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

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 9 OF 10
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)
Building Bridges, Not Walls

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor ALZA Strategies	Nature of Debt (Purpose): General Campaign Consulting
Mailing Address 10234 Sorenstam Drive	
City State Zip Code Sacramento CA 95829	

Outstanding Balance Beginning This Period 0.00	Transaction ID : PAYD12	
Amount Incurred This Period 10000.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 10000.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Ground Floor Public Affairs Corp.	Nature of Debt (Purpose): General Campaign Consulting and Postage
Mailing Address 20920 Outer Zayante Road	
City State Zip Code Los Gatos CA 95033	

Outstanding Balance Beginning This Period 0.00	Transaction ID : PAYD15	
Amount Incurred This Period 37581.50	Payment This Period 0.00	Outstanding Balance at Close of This Period 37581.50

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor River City Business Services	Nature of Debt (Purpose): Bookkeeping, Postage, Copies, Supplies and Software Fee
Mailing Address 5429 Madison Avenue	
City State Zip Code Sacramento CA 95841	

Outstanding Balance Beginning This Period 0.00	Transaction ID : PAYD9	
Amount Incurred This Period 1550.71	Payment This Period 0.00	Outstanding Balance at Close of This Period 1550.71

1) SUBTOTALS This Period This Page (optional)..... ▶	49132.21
2) TOTALS This Period (last page this line number only)..... ▶	
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) ▶	
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 10 OF 10
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)
Building Bridges, Not Walls

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Trilogy Interactive, LLC	Nature of Debt (Purpose): General Campaign Consulting, Website Design and Development
Mailing Address Post Office Box 4177	
City State Zip Code Mountain View CA 94040	

Outstanding Balance Beginning This Period 0.00	Transaction ID : PAYD14	
Amount Incurred This Period 20210.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 20210.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor	Nature of Debt (Purpose):
Mailing Address	
City State Zip Code	

Outstanding Balance Beginning This Period		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor	Nature of Debt (Purpose):
Mailing Address	
City State Zip Code	

Outstanding Balance Beginning This Period		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period

1) SUBTOTALS This Period This Page (optional)..... ▶	20210.00
2) TOTALS This Period (last page this line number only)..... ▶	69342.21
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) ▶	0.00
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	69342.21