

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS For Other Than An Authorized Committee

RECEIVED
FEC MAIL CENTER

2015 OCT 21 AM 6:49

1. NAME OF COMMITTEE (in full) TYPE OR PRINT Example: If typing, type over the lines.
 RI BRICKLAYERS POLITICAL ACTION COMMITTEE

12FE4M5

ADDRESS (number and street) POST OFFICE PLAZA
 150 MIDWAY ROAD, SUITE 157
 CRANSTON RI 02920-1573

Check if different than previously reported. (ACC)

2. FEC IDENTIFICATION NUMBER CITY STATE ZIP CODE

C00151837

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 07 01 2015 through 09 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 Richard Pacheco

Signature of Treasurer Richard Pacheco Date 10 13 2015

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

Office Use Only							
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FEC FORM 3X Rev. 12/2004

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

RI Bricklayers Political Action Committee

Report Covering the Period: From:

MEMBER MONTH DAY YEAR
07 01 2013

To:

MEMBER MONTH DAY YEAR
09 30 2013

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, 2013		906098
(b) Cash on Hand at Beginning of Reporting Period.....	4809.98	
(c) Total Receipts (from Line 19)	1000	11000
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	4819.98	9170.98
7. Total Disbursements (from Line 31)	113400	548500
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	3685.98	3685.98
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	 	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	 	

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. 02/2003)

Page 3

Write or Type Committee Name

RI Bricklayers Political Action Committee

Report Covering the Period: From:

07 01 2013

To:

09 30 2013

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).....

1000

11000

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)).....▶

1000

11000

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

1000

11000

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

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		
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))		
22. Transfers to Affiliated/Other Party Committees		
23. Contributions to Federal Candidates/Committees and Other Political Committees		
24. Independent Expenditures (use Schedule E)		
25. Coordinated Party Expenditures (2 U.S.C. §441a(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	1,134.00	548,300
30. Federal Election Activity (2 U.S.C. §431(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)) ..	1,134.00	548,300
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31)	1,134.00	548,300

NATIONWIDE INFORMATION

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

**III. Net Contributions/Operating Ex-
penditures**

COLUMN A
Total This Period

COLUMN B
Calendar Year-to-Date

33. Total Contributions (other than loans) (from Line 11(d), page 3)		
34. Total Contribution Refunds (from Line 28(d))		
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)		
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) ▶		
37. Offsets to Operating Expenditures (from Line 15, page 3)	1000	11000
38. Net Operating Expenditures (subtract Line 37 from Line 36) ▶		

INFORMATION LINE ON THE

**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 1 OF 3

<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

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)

RI Bricklayers Political Action Committee

Full Name (Last, First, Middle Initial)

A. <u>Committee to Elect Mike Corcia</u>		Date of Disbursement
Mailing Address <u>15 Sisson Street</u>		<input type="checkbox"/> 08 / <input type="checkbox"/> 14 / <input type="checkbox"/> 2013
City	State	Zip Code
<u>Providence</u>	<u>RI</u>	<u>02909</u>
Purpose of Disbursement <u>donation</u>		Amount of Each Disbursement this Period <input type="checkbox"/> 10000
Candidate Name		
Office Sought:	Disbursement For:	Category/ Type
<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State:	District:	

AUGUST 14 2013 10:00 AM

B. <u>IBEW Local #99</u>		Date of Disbursement
Mailing Address <u>22 Amflex Drive</u>		<input type="checkbox"/> 08 / <input type="checkbox"/> 14 / <input type="checkbox"/> 2013
City	State	Zip Code
<u>Cranston</u>	<u>RI</u>	<u>02921</u>
Purpose of Disbursement <u>donation</u>		Amount of Each Disbursement this Period <input type="checkbox"/> 12500
Candidate Name		
Office Sought:	Disbursement For:	Category/ Type
<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State:	District:	

C. <u>Pro. Central Federated Council</u>		Date of Disbursement
Mailing Address <u>514 Colwell Road</u>		<input type="checkbox"/> 08 / <input type="checkbox"/> 31 / <input type="checkbox"/> 2013
City	State	Zip Code
<u>Harrisville</u>	<u>RI</u>	<u>02830</u>
Purpose of Disbursement <u>donation</u>		Amount of Each Disbursement this Period <input type="checkbox"/> 25000
Candidate Name		
Office Sought:	Disbursement For:	Category/ Type
<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State:	District:	

SUBTOTAL of Disbursements This Page (optional).....	<input type="checkbox"/> 47500
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)						PAGE 2 OF 3
	<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input checked="" 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)
RI Bricklayers Political Action Committee

Full Name (Last, First, Middle Initial)

A. <u>RI Democratic Party</u>		Date of Disbursement
Mailing Address <u>P.O. Box 6004</u>		<input type="text" value="09"/> <input type="text" value="03"/> <input type="text" value="2013"/>
City <u>Providence</u>	State <u>RI</u>	Zip Code <u>02940</u>
Purpose of Disbursement		Amount of Each Disbursement this Period
Candidate Name		<input type="text" value="13000"/>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

B. <u>Twin Rivers I Joe Iaffrate</u>		Date of Disbursement
Mailing Address <u>1808 Elmwood Avenue</u>		<input type="text" value="08"/> <input type="text" value="31"/> <input type="text" value="2013"/>
City <u>Warwick</u>	State <u>RI</u>	Zip Code <u>02888</u>
Purpose of Disbursement <u>donation</u>		Amount of Each Disbursement this Period
Candidate Name		<input type="text" value="10000"/>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

C. <u>St. Pat's Day Parade Committee</u>		Date of Disbursement
Mailing Address <u>381 Smith Street</u>		<input type="text" value="09"/> <input type="text" value="10"/> <input type="text" value="2013"/>
City <u>Providence</u>	State <u>RI</u>	Zip Code <u>02908</u>
Purpose of Disbursement <u>donation</u>		Amount of Each Disbursement this Period
Candidate Name		<input type="text" value="10000"/>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....▶	<input type="text" value="35000"/>
TOTAL This Period (last page this line number only).....▶	<input type="text" value=""/>

UNION BROTHERHOOD

**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 3 OF 3
	<input type="checkbox"/> 21b <input type="checkbox"/> 27	<input type="checkbox"/> 22 <input type="checkbox"/> 28a	<input type="checkbox"/> 23 <input type="checkbox"/> 28b	<input type="checkbox"/> 24 <input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 25 <input checked="" type="checkbox"/> 29	<input type="checkbox"/> 26 <input type="checkbox"/> 30b	

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NAME OF COMMITTEE (In Full)
RI Bricklayers Political Action Committee

A. West Warwick Angels
Mailing Address: 187 Arnold Road
City: Coventry RI State: RI Zip Code: 02816
Purpose of Disbursement: donation
Candidate Name: _____
Office Sought: House Senate President
Disbursement For: Primary General Other (specify) _____
State: _____ District: _____
Date of Disbursement: 09 / 18 / 2013
Amount of Each Disbursement this Period: 5000

B. Believe Breakfast RI BCTC
Mailing Address: 1808 Elmwood Avenue
City: Warwick RI State: RI Zip Code: 02888
Purpose of Disbursement: donation
Candidate Name: _____
Office Sought: House Senate President
Disbursement For: Primary General Other (specify) _____
State: _____ District: _____
Date of Disbursement: 09 / 18 / 2013
Amount of Each Disbursement this Period: 25000

C. Bank of America
Mailing Address: _____
City: _____ State: _____ Zip Code: _____
Purpose of Disbursement: fees
Candidate Name: _____
Office Sought: House Senate President
Disbursement For: Primary General Other (specify) _____
State: _____ District: _____
Date of Disbursement: _____ / _____ / _____
Amount of Each Disbursement this Period: 9.00

SUBTOTAL of Disbursements This Page (optional)..... 309.00
TOTAL This Period (last page this line number only)..... 1134.00

11-01-13 10:00 AM

Federal Election Commission
ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS
 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
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<input type="checkbox"/> USPS Priority Mail	Postmarked
<input type="checkbox"/> USPS Priority Mail Express	Postmarked
<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


 PREPARER

10/21/15
 DATE PREPARED

20151021 10:01:01 AM