

**FEC
FORM 3X**

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

RECEIVED
Office Use Only

1. NAME OF COMMITTEE (in full)

TYPE OR PRINT ▼

Example: If typing, type over the lines.

2015 JAN 12 AM 11:58
12 FEB 4 5
FEC MAIL CENTER

MAISON CONTRACTORS ASSN OF AMERICA
M.A.C.P.A.C.

ADDRESS (number and street)

1481 MERCHANT DRIVE

Check if different than previously reported. (ACC)

ALGONQUIN IL 60102

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C00291799

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

(c) 12-Day PRE-Election Report for the:

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

Election on

MM / DD / YYYY

in the State of

CA

(d) 30-Day POST-Election Report for the:

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

Election on

MM / DD / YYYY

in the State of

CA

5. Covering Period

MM / DD / YYYY
10 / 01 / 2014

through

MM / DD / YYYY
12 / 31 / 2014

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

Jeff Buczkiewicz

Signature of Treasurer

Jeff Buczkiewicz

Date

MM / DD / YYYY
01 / 07 / 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

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

Mason Contractors Assn of America

Report Covering the Period: From:

M	M
10	01

 /

Y	Y	Y	Y
2	0	1	4

 To:

M	M
12	31

 /

Y	Y	Y	Y
2	0	1	4

COLUMN A
This Period

COLUMN B
Calendar Year-to-Date

6. (a) Cash on Hand January 1,	<table border="1" style="width: 100%; border-collapse: collapse;"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>1</td><td>4</td></tr></table>	Y	Y	Y	Y	2	0	1	4	<table border="1" style="width: 100%; border-collapse: collapse;"><tr><td>1</td><td>2</td><td>0</td><td>4</td><td>4</td><td>7</td><td>9</td></tr></table>	1	2	0	4	4	7	9
Y	Y	Y	Y														
2	0	1	4														
1	2	0	4	4	7	9											
(b) Cash on Hand at Beginning of Reporting Period.....	<table border="1" style="width: 100%; border-collapse: collapse;"><tr><td>1</td><td>7</td><td>6</td><td>4</td><td>4</td><td>7</td><td>9</td></tr></table>	1	7	6	4	4	7	9	<table border="1" style="width: 100%; border-collapse: collapse;"><tr><td>1</td><td>7</td><td>6</td><td>4</td><td>4</td><td>7</td><td>9</td></tr></table>	1	7	6	4	4	7	9	
1	7	6	4	4	7	9											
1	7	6	4	4	7	9											
(c) Total Receipts (from Line 19).....	<table border="1" style="width: 100%; border-collapse: collapse;"><tr><td>3</td><td>0</td><td>0</td><td>0</td><td>0</td><td>0</td><td>0</td></tr></table>	3	0	0	0	0	0	0	<table border="1" style="width: 100%; border-collapse: collapse;"><tr><td>2</td><td>1</td><td>4</td><td>0</td><td>0</td><td>0</td><td>0</td></tr></table>	2	1	4	0	0	0	0	
3	0	0	0	0	0	0											
2	1	4	0	0	0	0											
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<table border="1" style="width: 100%; border-collapse: collapse;"><tr><td>1</td><td>7</td><td>9</td><td>4</td><td>4</td><td>7</td><td>9</td></tr></table>	1	7	9	4	4	7	9	<table border="1" style="width: 100%; border-collapse: collapse;"><tr><td>3</td><td>3</td><td>4</td><td>4</td><td>4</td><td>7</td><td>9</td></tr></table>	3	3	4	4	4	7	9	
1	7	9	4	4	7	9											
3	3	4	4	4	7	9											
7. Total Disbursements (from Line 31).....	<table border="1" style="width: 100%; border-collapse: collapse;"><tr><td>4</td><td>5</td><td>0</td><td>0</td><td>0</td><td>0</td><td>0</td></tr></table>	4	5	0	0	0	0	0	<table border="1" style="width: 100%; border-collapse: collapse;"><tr><td>2</td><td>0</td><td>0</td><td>0</td><td>0</td><td>0</td><td>0</td></tr></table>	2	0	0	0	0	0	0	
4	5	0	0	0	0	0											
2	0	0	0	0	0	0											
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<table border="1" style="width: 100%; border-collapse: collapse;"><tr><td>1</td><td>3</td><td>4</td><td>4</td><td>4</td><td>7</td><td>9</td></tr></table>	1	3	4	4	4	7	9	<table border="1" style="width: 100%; border-collapse: collapse;"><tr><td>1</td><td>3</td><td>4</td><td>4</td><td>4</td><td>7</td><td>9</td></tr></table>	1	3	4	4	4	7	9	
1	3	4	4	4	7	9											
1	3	4	4	4	7	9											
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....	<table border="1" style="width: 100%; border-collapse: collapse;"><tr><td>0</td><td>0</td><td>0</td><td>0</td><td>0</td><td>0</td><td>0</td></tr></table>	0	0	0	0	0	0	0	<table border="1" style="width: 100%; border-collapse: collapse;"><tr><td>0</td><td>0</td><td>0</td><td>0</td><td>0</td><td>0</td><td>0</td></tr></table>	0	0	0	0	0	0	0	
0	0	0	0	0	0	0											
0	0	0	0	0	0	0											
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....	<table border="1" style="width: 100%; border-collapse: collapse;"><tr><td>0</td><td>0</td><td>0</td><td>0</td><td>0</td><td>0</td><td>0</td></tr></table>	0	0	0	0	0	0	0	<table border="1" style="width: 100%; border-collapse: collapse;"><tr><td>0</td><td>0</td><td>0</td><td>0</td><td>0</td><td>0</td><td>0</td></tr></table>	0	0	0	0	0	0	0	
0	0	0	0	0	0	0											
0	0	0	0	0	0	0											

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 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		
(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		
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)) ..	4,500.00	20,000.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	4,500.00	20,000.00

11030101

**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	OF
<input 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	

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)

MACPAC Mason Contractors Association of America

Full Name (Last, First, Middle, Initial)

A. Odom, Paul

Mailing Address

PO Box 793

City
Hamilton

State Zip Code
TX 76531

FEC ID number of contributing federal political committee.

C

Name of Employer

Pand S Masonry

Occupation

Receipt For:

Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

12 / 31 / 2014

Amount of Each Receipt this Period

300.00

Full Name (Last, First, Middle Initial)

B.

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

Full Name (Last, First, Middle Initial)

C.

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

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

\$ 300.00

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	OF
	<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 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)
MACPAC Mason Contractors Association of America

A. Full Name (Last, First, Middle Initial) **Boehner, John**

Mailing Address **7908 Cincinnati-Dayton Rd, Suite 1-2**

City **West Chester** State **OH** Zip Code **45069**

Purpose of Disbursement **Contribution** Category/Type **011**

Candidate Name **Friends of John Boehner**

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: **OH** District: **08**

Date of Disbursement **10/07/2014**

Amount of Each Disbursement this Period **1,000.00**

B. Full Name (Last, First, Middle Initial) **Luetkemeyer, Blaine**

Mailing Address **150 Long Road Suite 50**

City **Chesterfield** State **MO** Zip Code **63005**

Purpose of Disbursement **Contribution** Category/Type **011**

Candidate Name **Blaine for Congress**

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: **MO** District: **03**

Date of Disbursement **10/07/2014**

Amount of Each Disbursement this Period **2,500.00**

C. Full Name (Last, First, Middle Initial) **Moran, Jerry**

Mailing Address **Po Box 1151**

City **Hays** State **KS** Zip Code **67601**

Purpose of Disbursement **Contribution** Category/Type **011**

Candidate Name **Moran for Kansas**

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: **KS** District: **00**

Date of Disbursement **12/04/2014**

Amount of Each Disbursement this Period **1,000.00**

SUBTOTAL of Disbursements This Page (optional) **\$ 4,500.00**

TOTAL This Period (last page this line number only)

2014-10-07 10:00 AM

PF U.S. Postage Paid Per

CPU U.S. POSTAGE
PB 1P 000 \$ 7.190
3661339 JAN 08 2015
FCMF MAILED 60102

Non-Stop SCRAPOLDING
oidcastle

RETURN RECEIPT
REQUESTED

RECEIVED
2015 JAN 12 AM 11:58
REC MAIL CENTER

*Federal Election Commission
999 E. St. NW
Washington, DC 20463*

MAIL
7010 1670 0001 1343 2022

MCA
MASON CONTRACTORS ASSOCIATION OF AMERICA
1481 Merchant Drive
Algonquin, IL 60102

