

**FEC  
FORM 3X**

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

RECEIVED  
FEC MAIL CENTER

2016 APR 14 PM 12:15  
Office Use Only

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

12FE4M5

Bulldog Democrats PAC

ADDRESS (number and street)

248 ELM STREET

Check if different than previously reported. (ACC)

NEW HAVEN

CT

06511-

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C00419754

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

MM / DD / YYYY

in the State of

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

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

Election on

MM / DD / YYYY

in the State of

5. Covering Period

MM / DD / YYYY 01 / 01 / 2016

through

MM / DD / YYYY 03 / 31 / 2016

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

Laura Estela Leon

Signature of Treasurer

*[Signature]*

Date

MM / DD / YYYY 04 / 09 / 2016

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. 12/2004

**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

Bulldog Democrats PAC

Report Covering the Period:

From:

01 / 01 / 2016

To:

03 / 31 / 2016

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, 2016		573.96
(b) Cash on Hand at Beginning of Reporting Period.....	573.96	
(c) Total Receipts (from Line 19) .....	0.00	0.00
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	573.96	573.96
7. Total Disbursements (from Line 31) .....	9.99	9.99
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	563.97	563.97
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	



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

2016-01-01 14:01:00

# **DETAILED SUMMARY PAGE** of Receipts

FEC Form 3X (Rev. 02/2003)

Page 3

Write or Type Committee Name

Report Covering the Period:

From:

01 / 01 / 2016

To:

03 / 31 / 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).....

0 0 0

0 0 0

(ii) Unitemized .....

0 0 0

0 0 0

(iii) TOTAL (add

Lines 11(a)(i) and (ii).....▶

0 0 0

0 0 0

**(b) Political Party Committees .....**

0 0 0

0 0 0

**(c) Other Political Committees**

(such as PACs).....

0 0 0

0 0 0

**(d) Total Contributions (add Lines**

11(a)(iii), (b), and (c)) (Carry  
Totals to Line 33, page 5).....▶

0 0 0

0 0 0

**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)).....▶

0 0 0

0 0 0

**20. Total Federal Receipts**

(subtract Line 18(c) from Line 19).....▶

20160331 15:41:00

# **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**  
(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 .....**

**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)) ..**

**32. Total Federal Disbursements**  
(subtract Line 21(a)(ii) and Line 30(a)(ii)  
from Line 31) .....

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## 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) .....	0 0 0	0 0 0
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) .....		
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....		

**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

☐ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 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)

Full Name (Last, First, Middle Initial)

**A.**

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

☐ Memo Item

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

☐ Memo Item

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

☐ Memo Item

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

**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

☐ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26  
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

**Bulldog Democrats PAC**

Full Name (Last, First, Middle Initial)

Date of Disbursement

01 / 31 / 2016

A.

**Citizen's Bank**

Mailing Address

**209 Church St.**

City

**New Haven**

State

**CT**

Zip Code

**06510**

Purpose of Disbursement

**Bank Service Fee**

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

999

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

☐ Memo Item

B.

Full Name (Last, First, Middle Initial)

Date of Disbursement

MM / DD / YYYY

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

☐ Memo Item

C.

Full Name (Last, First, Middle Initial)

Date of Disbursement

MM / DD / YYYY

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

☐ Memo Item

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

999

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

999

2016-04-14 PM 00:00:00

**SCHEDULE C (FEC Form 3X)**  
**LOANS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

PAGE       OF  
FOR LINE 13 OF FORM 3X

NAME OF COMMITTEE (In Full)

**LOAN SOURCE** Full Name (Last, First, Middle Initial)

☐ Memo Item

Election:

☐ Primary

☐ General

☐ Other (specify) ▼

Mailing Address

City

State

ZIP Code

Original Amount of Loan

Cumulative Payment To Date

Balance Outstanding at Close of This Period

**TERMS**

Date Incurred

Date Due

Interest Rate

Secured:

MM / DD / YYYY

MM / DD / YYYY

MM / DD / YYYY

MM / DD / YYYY

MM / DD / YYYY

MM / DD / YYYY

\_\_\_\_\_% (apr)

☐ Yes ☐ No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

**SUBTOTALS** This Period This Page (optional).....▶

**TOTALS** This Period (last page in this line only).....▶

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.



P

9505 5124 5062 6102 1740 61



USPS TRACKING NUMBER

Expected Delivery Day: 04/13/2016

3

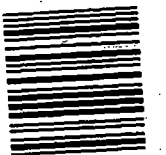
**FLAT RATE ENVELOPE**

ONE RATE \* ANY WEIGHT\*

APPLY PRIORITY MAIL POSTAGE HERE



1006



20463

U.S. POSTAGE  
PAID  
NEW HAVEN, CT  
06511  
APR 11 '16  
AMOUNT  
**\$6.45**  
R2304M110906-03

RECEIVED  
FEC MAIL CENTER  
2016 APR 14 PM 12:15

EP14H July 2013 Outer Dimension: 10 x 5

\* For international shipments, the maximum weight is 4 lbs.

NO-10 04 14 01 0000000014

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.

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<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  
(3/2015)

*[Signature]*

4/14/16  
DATE PREPARED