

**FEC
FORM 3****REPORT OF RECEIPTS
AND DISBURSEMENTS**
For An Authorized Committee

Office Use Only

1. NAME OF
COMMITTEE (in full)

TYPE OR PRINT ▼

Example: If typing, type
over the lines.

12FE4M5

David Rivera for Congress

ADDRESS (number and street)

P. O. Box 520633

Check if different
than previously
reported. (ACC)

Miami

FL

33152

2. FEC IDENTIFICATION NUMBER ▼

C

C00477356

CITY ▲

STATE ▲

ZIP CODE ▲

STATE ▼ DISTRICT

3. IS THIS
REPORTNEW
(N)

OR

AMENDED
(A)

FL

26

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)



Termination Report (TER)

(b) 12-Day **PRE**-Election Report for the:

Primary (12P)



General (12G)



Runoff (12R)



Convention (12C)



Special (12S)

Election on

M M / D D / Y Y Y Y

in the
State of(c) 30-Day **POST**-Election Report for the:

General (30G)



Runoff (30R)



Special (30S)

Election on

M M / D D / Y Y Y Y

in the
State of

5. Covering Period

M M / D D / Y Y Y Y

01

D D / Y Y Y Y

01

Y Y Y Y

2013

through

M M / D D / Y Y Y Y

03

D D / Y Y Y Y

31

Y Y Y Y

2013

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 Nancy H. Watkins

Signature of Treasurer

Nancy H. Watkins

[Electronically Filed]

Date

M M / D D / Y Y Y Y

04

D D / Y Y Y Y

10

Y Y Y Y

2013

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 3**
(Revised 02/2003)

SUMMARY PAGE

of Receipts and Disbursements

FEC Form 3 (Revised 02/2003)

PAGE 2 / 11

Write or Type Committee Name

David Rivera for Congress

Report Covering the Period:

From:

M	M	/	D	D	/	Y	Y	Y	Y
0	1		0	1		2	0	1	3

To:

M	M	/	D	D	/	Y	Y	Y	Y
0	3		3	1		2	0	1	3

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e))....	0.00	200.00
(b) Total Contribution Refunds (from Line 20(d))	0.00	1000.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a))	0.00	-800.00
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	939.11	13865.20
(b) Total Offsets to Operating Expenditures (from Line 14).....	0.00	0.00
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a))	939.11	13865.20
8. Cash on Hand at Close of Reporting Period (from Line 27).....	3238.29	
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)	128573.58	

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 3 (Revised 12/2003)

PAGE 3 / 11

Write or Type Committee Name

David Rivera for Congress

Report Covering the Period:

From:

M	M	/	D	D	/	Y	Y	Y	Y
0	1		0	1		2	0	1	3

To:

M	M	/	D	D	/	Y	Y	Y	Y
0	3		3	1		2	0	1	3

I. RECEIPTS
COLUMN A
Total This Period

COLUMN B
Election Cycle-to-Date
11. CONTRIBUTIONS (other than loans) FROM:

(a) Individuals/Persons Other Than Political Committees

(i) Itemized (use Schedule A).....

(ii) Unitemized.....

(iii) TOTAL of contributions from individuals ▶

(b) Political Party Committees.....

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

(d) The Candidate.....

(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..

12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES**13. LOANS:**

(a) Made or Guaranteed by the Candidate.....

(b) All Other Loans.....

(c) TOTAL LOANS (add Lines 13(a) and (b)).....

14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.)**15. OTHER RECEIPTS (Dividends, Interest, etc.)****16. TOTAL RECEIPTS** (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶

DETAILED SUMMARY PAGE of Disbursements

FEC Form 3 (Revised 02/2003)

PAGE 4 / 11

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	939.11	13865.20
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	0.00
(b) Of All Other Loans	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees	0.00	1000.00
(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 20(a), (b), and (c)).....	0.00	1000.00
21. OTHER DISBURSEMENTS	0.00	0.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ►	939.11	14865.20

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	4177.24
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	0.16
25. SUBTOTAL (add Line 23 and Line 24).....	4177.40
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	939.11
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	3238.29

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 5 OF 11

☐ 11a 12	☐ 11b 13a	☐ 11c 13b	☐ 11d 14	☒ 15
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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)

David Rivera for Congress

Full Name (Last, First, Middle Initial)

The Bank of Tampa

Mailing Address P. O. Box 1

City

Tampa

State

FL

Zip Code

33601

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2012

☐ Primary
☐ Other (specify)
☒ General

Election Cycle-to-Date

0.33

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
01		31		2013

Transaction ID : C-3-007r0Y

Amount of Each Receipt this Period

0.06

Full Name (Last, First, Middle Initial)

The Bank of Tampa

Mailing Address P. O. Box 1

City

Tampa

State

FL

Zip Code

33601

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2012

☐ Primary
☐ Other (specify)
☒ General

Election Cycle-to-Date

0.33

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02		28		2013

Transaction ID : C-4-007r0Z

Amount of Each Receipt this Period

0.05

Full Name (Last, First, Middle Initial)

The Bank of Tampa

Mailing Address P. O. Box 1

City

Tampa

State

FL

Zip Code

33601

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2012

☐ Primary
☐ Other (specify)
☒ General

Election Cycle-to-Date

0.33

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		29		2013

Transaction ID : C-5-007r0a

Amount of Each Receipt this Period

0.05

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

0.16

0.16

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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☒ 17	☐ 18	☐ 19a	☐ 19b
☐ 20a	☐ 20b	☐ 20c	☐ 21

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NAME OF COMMITTEE (In Full)

David Rivera for Congress

Full Name (Last, First, Middle Initial)

A. Visa

Mailing Address P. O. Box 30131

City	State	Zip Code
Tampa	FL	33630

Purpose of Disbursement
see memo entries

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2012

☐ Primary ☒ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		30		2013

Amount of Each Disbursement this Period

445.67

Transaction ID : D53-00CC0x

B. AT&T

Mailing Address P. O. Box 105262

City	State	Zip Code
Atlanta	GA	30348

Purpose of Disbursement
telephone

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2012

☐ Primary ☒ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		20		2012

Amount of Each Disbursement this Period

113.94

Transaction ID : D1-008e0I

[MEMO ITEM]

Credit Card Item

c. Sprint

Mailing Address P. O. Box 105243

City	State	Zip Code
Atlanta	GA	30348

Purpose of Disbursement
telephone

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2012

☐ Primary ☒ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		17		2013

Amount of Each Disbursement this Period

331.73

Transaction ID : D2-00BL0M

[MEMO ITEM]

Credit Card Item

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

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

445.67

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 7 OF 11

☒ 17	☐ 18	☐ 19a	☐ 19b
☐ 20a	☐ 20b	☐ 20c	☐ 21

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NAME OF COMMITTEE (In Full)

David Rivera for Congress

Full Name (Last, First, Middle Initial)

A. Visa

Mailing Address P. O. Box 30131

City	State	Zip Code
Tampa	FL	33630

Purpose of Disbursement
see memo entries

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2012

☐ Primary ☒ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		28		2013

Amount of Each Disbursement this Period

113.94

Transaction ID : D54-00CC0y

B. AT&T

Mailing Address P. O. Box 105262

City	State	Zip Code
Atlanta	GA	30348

Purpose of Disbursement
telephone

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2012

☐ Primary ☒ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		20		2013

Amount of Each Disbursement this Period

113.94

Transaction ID : D1-008e0J

[MEMO ITEM]

Credit Card Item

C. Visa

Mailing Address P. O. Box 30131

City	State	Zip Code
Tampa	FL	33630

Purpose of Disbursement
see memo entries

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2012

☐ Primary ☒ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		28		2013

Amount of Each Disbursement this Period

379.50

Transaction ID : D55-00CC0z

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

493.44

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 8 OF 11

☒ 17	☐ 18	☐ 19a	☐ 19b
☐ 20a	☐ 20b	☐ 20c	☐ 21

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NAME OF COMMITTEE (In Full)

David Rivera for Congress

Full Name (Last, First, Middle Initial)

A. AT&T

Mailing Address P. O. Box 105262

City	State	Zip Code
Atlanta	GA	30348

Purpose of Disbursement
telephone

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2012

☐ Primary ☒ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		20		2013

Amount of Each Disbursement this Period

113.88

Transaction ID : D1-008e0K

[MEMO ITEM]

Credit Card Item

B. Sprint

Full Name (Last, First, Middle Initial)

Mailing Address P. O. Box 105243

City	State	Zip Code
Atlanta	GA	30348

Purpose of Disbursement
telephone

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2012

☐ Primary ☒ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		17		2013

Amount of Each Disbursement this Period

265.62

Transaction ID : D2-00BL0N

[MEMO ITEM]

Credit Card Item

C.

Full Name (Last, First, Middle Initial)

Mailing Address

City	State	Zip Code
------	-------	----------

Purpose of Disbursement

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
-----	---	-----	---	---------

Amount of Each Disbursement this Period

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

0.00

939.11

SCHEDULE C (FEC Form 3)
LOANS

PAGE 9 OF 11

Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)☒ 13a
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : SC24

David Rivera for Congress

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

David Rivera

[PERSONAL FUNDS]

Election: 2010

☒ Primary☐ General☐ Other (specify) ▼

Primary 2010

Mailing Address
P. O. Box 520633

City

State

ZIP Code

Miami

FL

33152

Original Amount of Loan

6000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

6000.00

TERMS

Date Incurred

M / D / Y
05 / 10 / 2010

Date Due

M / D / Y
05 / 10 / 2014

Interest Rate

0.00

% (apr)

Secured:

☐ 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)..... ►

6000.00

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

6000.00

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

SCHEDULE D (FEC Form 3)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 10 OF 11

FOR LINE NUMBER:
(check only one)☐ 9
☒ 10

NAME OF COMMITTEE (In Full)

David Rivera for Congress

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Capital Strategies DC, LLCNature of Debt (Purpose):
fundraising consulting

Mailing Address P. O. Box 1605

City State

Zip Code

Alexandria

VA

22313

Outstanding Balance Beginning This Period

24352.50

Transaction ID : 20

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

24352.50

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

The Victory Group, Inc.Nature of Debt (Purpose):
media expense

Mailing Address 122- Hillshire Road

City State

Zip Code

Baltimore

MD

21222

Outstanding Balance Beginning This Period

79221.08

Transaction ID : 22

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

79221.08

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

The Factor, Inc.Nature of Debt (Purpose):
media consulting

Mailing Address 501 Brickell Key Drive, #602

City

State

Zip Code

Miami

FL

33131

Outstanding Balance Beginning This Period

5000.00

Transaction ID : 24

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

5000.00

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

108573.58

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 3)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 11 OF 11

FOR LINE NUMBER:
(check only one)☐ 9
☒ 10

NAME OF COMMITTEE (In Full)

David Rivera for Congress

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

GF Strategies, LLC

Nature of Debt (Purpose):

fundraising consulting-G2010

Mailing Address 3720 39th Street, N.W., #163-A

City State

Zip Code

Washington

DC

20016

Outstanding Balance Beginning This Period

14000.00

Transaction ID : 34

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

14000.00

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)

14000.00

2) **TOTALS** This Period (last page this line number only)

122573.58

3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only)

6000.00

4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

128573.58