

FEC FORM 3

REPORT OF RECEIPTS AND DISBURSEMENTS For An Authorized Committee

RECORDED SECRETARY OF THE SENATE PUBLIC RECORDS

16 JAN 28 AM 10:59

Office Use Only

1. NAME OF COMMITTEE (in full)

TYPE OR PRINT

Example: If typing, type over the lines.

12FE4M5

Ernie Rivera For Florida

ADDRESS (number and street)

P.O. Box 9

Check if different than previously reported. (ACC)

Land O Lakes FL 34639

CITY

STATE

ZIP CODE

2. FEC IDENTIFICATION NUMBER

C Applied For

3. IS THIS REPORT



NEW (N)

OR



AMENDED (A)

STATE DISTRICT

FL

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

MM/DD/YYYY

MM/DD/YYYY

MM/DD/YYYY

in the State of

FL

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



General (30G)



Runoff (30R)



Special (30S)

Election on

MM/DD/YYYY

MM/DD/YYYY

MM/DD/YYYY

in the State of

FL

5. Covering Period

MM/DD/YYYY 1/1

MM/DD/YYYY 1/2

MM/DD/YYYY 2/01/5

through

MM/DD/YYYY 1/2

MM/DD/YYYY 3/1

MM/DD/YYYY 2/01/5

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 Alan K. Geer, CPA

Signature of Treasurer

[Handwritten Signature]

Date

MM/DD/YYYY 01/29/16

MM/DD/YYYY 01/29/16

MM/DD/YYYY 01/29/16

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 3 (Revised 02/2003)

201601280200003883

DETAILED SUMMARY PAGE
of Disbursements

II. DISBURSEMENTS

COLUMN A
Total This Period

COLUMN B
Election Cycle-to-Date

17. OPERATING EXPENDITURES...	9,500.64	9,500.64
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES ..		
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate...		
(b) Of All Other Loans		
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b))...		
20. 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 20(a), (b), and (c))...		
21. OTHER DISBURSEMENTS ...		
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ▶	9,500.64	9,500.64

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD...	
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3)...	1,000.00
25. SUBTOTAL (add Line 23 and Line 24)...	1,000.00
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22)...	9,500.64
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25)...	499.36

201601280200003886

**SCHEDULE A (FEC Form 3)
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"/> 11d	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input checked="" type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14	

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)
Ernie Rivera For Florida

Full Name (Last, First, Middle Initial)
A. Ernie Rivera

Mailing Address
P.O. Box 9

City: **Land O' Lakes** State: **FL.** Zip Code: **34639**

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

Name of Employer: **Las Americas** Occupation: **CEO**

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date: **1,0,0,0,0,0**

Date of Receipt: **11 / 12 / 2015**

Amount of Each Receipt this Period: **1,0,0,0,0,0**

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)

Election Cycle-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)

Election Cycle-to-Date

Date of Receipt

Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional)..... **1,0,0,0,0,0**

TOTAL This Period (last page this line number only)..... **1,0,0,0,0,0**

201601280200003887

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

PAGE OF

<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21
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NAME OF COMMITTEE (In Full)

Ernie Rivera For Florida

Full Name (Last, First, Middle Initial)

A. Moses Cavazos

Mailing Address
105 Bent Creek Ct.

City **Waxahachie** State **TX** Zip Code **75165**

Purpose of Disbursement

Travel Expense

Candidate Name

Ernie Rivera

Office Sought:

House
 Senate
 President

Disbursement For:

Primary General
 Other (specify)

State:

District:

Date of Disbursement

/ /

Amount of Each Disbursement this Period

Category/
Type

B. Moses Cavazos

Mailing Address
105 Bent Creek Ct

City **Waxahachie** State **TX** Zip Code **75165**

Purpose of Disbursement

Meeting/Administrative Expenses

Candidate Name

Ernie Rivera

Office Sought:

House
 Senate
 President

Disbursement For:

Primary General
 Other (specify)

State:

District:

Date of Disbursement

/ /

Various Dates

Amount of Each Disbursement this Period

Category/
Type

C.

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

/ /

Amount of Each Disbursement this Period

Category/
Type

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

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

201601280200003888

SCHEDULE C (FEC Form 3)

LOANS

Use separate schedule(s) for each category of the Detailed Summary Page	PAGE OF
FOR LINE NUMBER: (check only one)	<input checked="" type="checkbox"/> 13a <input type="checkbox"/> 13b

NAME OF COMMITTEE (In Full)
Ernie Rivera For Florida

LOAN SOURCE Full Name (Last, First, Middle Initial) Ernie Rivera	Election: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address P.O. Box 9	
City Land O' Lakes	State FL.
ZIP Code 34639	
Original Amount of Loan 1,000.00	Cumulative Payment To Date 0.00
Balance Outstanding at Close of This Period 1,000.00	

TERMS

Date Incurred: **11/12/2015** Date Due: **06/30/2016** Interest Rate: **3.00** % (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: 0.00
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: 0.00
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: 0.00
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: 0.00

SUBTOTALS This Period This Page (optional)...	1,000.00
TOTALS This Period (last page in this line only) ..	1,000.00

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

201601280200003889

2011 12 8 0 2 0 0 5 8 9 0

FIRST-CLASS

FIRST-CLASS

FIRST-CLASS

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ALAN K. GEER, P. A.
CERTIFIED PUBLIC ACCOUNTANTS
7401 D TEMPLE TERRACE HWY
TAMPA, FL 33637

First Class Mail FIRST CLASS MAIL

U. S. SENATE
TRACKING NUMBER

10-016400

Office of Public Records
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Washington, DC 20013-7578

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FIRST CLASS

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01/22/2016

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2016012802000003891

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United States Senate

OFFICE OF THE SECRETARY

OFFICE OF PUBLIC RECORDS

THE PRECEDING DOCUMENT WAS:

HAND DELIVERED _____
Date of Receipt

USPS FIRST CLASS MAIL 1-28-16
Date of Receipt

1-22-16
Postmark

USPS REGISTERED/CERTIFIED _____
Postmark

USPS PRIORITY MAIL _____
Postmark

DELIVERY CONFIRMATION OR SIGNATURE CONFIRMATION LABEL

USPS EXPRESS MAIL _____
Postmark

OVERNIGHT DELIVERY SERVICE:

	SHIPPING DATE	NEXT BUSINESS DAY DELIVERY
FEDERAL EXPRESS	_____	<input type="checkbox"/>
UPS	_____	<input type="checkbox"/>
DHL	_____	<input type="checkbox"/>
AIRBORNE EXPRESS	_____	<input type="checkbox"/>

RECEIVED FROM FEDERAL ELECTION COMMISSION _____
Date of Receipt

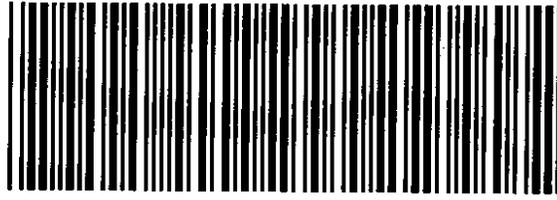
POSTMARK ILLEGIBLE POSTMARK

FAX _____
Date of Receipt

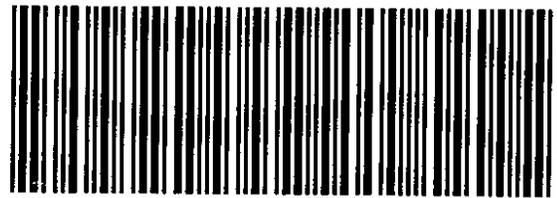
OTHER _____
Date of Receipt or Postmark

PREPARER DH DATE PREPARED 1-28-16

201601280200003892



SEN PATCH



SEN PATCH

201601280200003893