

FEC
FORM 3X

REPORT OF RECEIPTS
AND DISBURSEMENTS
For Other Than An Authorized Committee

RECEIVED

2014 JUL 16 AM 8:43

1. NAME OF COMMITTEE (in full) TYPE OR PRINT Example: If typing, type over the lines. 12 FE 4 REC MAIL CENTER

RI BRICKLAYERS POLITICAL ACTION COMMITTEE

ADDRESS (number and street) POST OFFICE PLAZA
150 MIDWAY ROAD SUITE 157
CRANSTON RI 02920-5743

2. FEC IDENTIFICATION NUMBER CITY STATE ZIP CODE

000151837

3. IS THIS REPORT NEW OR AMENDED
REPORT (N) OR (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 [] / [] / [] 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 04 01 2014 through 06 30 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 Richard Pacheco

Signature of Treasurer *Richard Pacheco* Date 07 09 2014

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

**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: 04 01 2014 To: 06 30 2014

**COLUMN A
This Period**

**COLUMN B
Calendar Year-to-Date**

6. (a) Cash on Hand January 1, <u>2014</u>		<u>1889624</u>
(b) Cash on Hand at Beginning of Reporting Period.....	<u>1559624</u>	
(c) Total Receipts (from Line 19).....	<u>58974</u>	<u>58974</u>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<u>1618598</u>	<u>1948598</u>
7. Total Disbursements (from Line 31).....	<u>197500</u>	<u>527500</u>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<u>1421098</u>	<u>1421098</u>
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 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	197500	327500
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)) ..	197500	327500
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31)	0	0

DETAILED SUMMARY PAGE
of Disbursements

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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)
- 38. Net Operating Expenditures
(subtract Line 37 from Line 36)▶

58974
0

58974
0

SECRET

**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 5

<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. Friends of Michael Solomon		Date of Disbursement
Mailing Address P.O. Box 6021		04 ' 10 ' 2014
City Providence	State RI	Zip Code 02940
Purpose of Disbursement Fundraiser	Category/ Type	Amount of Each Disbursement this Period 25000
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. McCaffrey for State Senate		Date of Disbursement
Mailing Address 115 Twin Oak Drive		04 ' 23 ' 2014
City Warwick	State RI	Zip Code 02889
Purpose of Disbursement Fundraiser	Category/ Type	Amount of Each Disbursement this Period 20000
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. Institute for Labor Studies		Date of Disbursement
Mailing Address 99 Bald Hill Road		04 ' 24 ' 2014
City Warwick	State RI	Zip Code
Purpose of Disbursement 34th annual awards dinner	Category/ Type	Amount of Each Disbursement this Period 15000
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).....	60000
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 5

<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

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NAME OF COMMITTEE (In Full)

RI Bricklayers Political Action Committee

Full Name (Last, First, Middle Initial)

A. Friends of Daniel DaPonte

Mailing Address

City: East Providence State: RI Zip Code

Purpose of Disbursement: Fundraiser

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement

04 ' 29 ' 2014

Amount of Each Disbursement this Period

10000

B. Helio Melo

Mailing Address

1187 South Broadway

City: East Providence State: RI Zip Code: 02914

Purpose of Disbursement: Fundraiser

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement

04 ' 29 ' 2014

Amount of Each Disbursement this Period

10000

C. Friends of Scott Guthrie

Mailing Address

31 Maplewood Drive

City: Coventry RI Zip Code: 02816

Purpose of Disbursement: Fundraiser

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement

03 ' 07 ' 2014

Amount of Each Disbursement this Period

7500

SUBTOTAL of Disbursements This Page (optional):

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

27500

**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"/> 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	

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

A. *friends of Wilbur Jennings*

Mailing Address: *25 Dorrance Street*

City: *Providence* State: *RI* Zip Code: *02903*

Purpose of Disbursement: *Fundraiser*

Candidate Name: _____

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: _____ District: _____

Date of Disbursement: *03' 09' 2014*

Amount of Each Disbursement this Period: *5000*

B. *friends of Nick Mattiello*

Mailing Address: *681 Park Ave, Suite 27*

City: *Cranston* State: *RI* Zip Code: *02910*

Purpose of Disbursement: *Fundraiser*

Candidate Name: _____

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: _____ District: _____

Date of Disbursement: *03' 09' 2014*

Amount of Each Disbursement this Period: *20000*

C. *friends of Paula McFarland*

Mailing Address: _____

City: *Cranston* State: *RI* Zip Code: _____

Purpose of Disbursement: *Fundraiser*

Candidate Name: _____

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: _____ District: _____

Date of Disbursement: *03' 13' 2014*

Amount of Each Disbursement this Period: *10000*

SUBTOTAL of Disbursements This Page (optional).....▶ *35000*

TOTAL This Period (last page this line number only).....▶ *35000*

**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 4 OF 5
	<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 type="checkbox"/> 29	<input type="checkbox"/> 30b	

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

A. *Friends of David Salvatore*

Full Name (Last, First, Middle Initial)

Mailing Address
25 Dorrance Street

City *Providence* State *RI* Zip Code *02903*

Purpose of Disbursement
Fundraiser

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement
03 / 26 / 2014

Amount of Each Disbursement this Period
100.00

B. *Friends of Sabina Mats*

Full Name (Last, First, Middle Initial)

Mailing Address
100 Pomham Street

City *Warren* State *RI* Zip Code *02910*

Purpose of Disbursement
Fundraiser

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement
03 / 27 / 2014

Amount of Each Disbursement this Period
100.00

C. *Friends of Louis Aponte*

Full Name (Last, First, Middle Initial)

Mailing Address
25 Dorrance Street

City *Providence* State *RI* Zip Code *02903*

Purpose of Disbursement
Fundraiser

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement
03 / 27 / 2014

Amount of Each Disbursement this Period
100.00

SUBTOTAL of Disbursements 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 5 OF 5	
	<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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b
	<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c				

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NAME OF COMMITTEE (In Full)

RI Bricklayers Political Action Committee

Full Name (Last, First, Middle Initial)

A. Teamsters Driving for A Cure

Mailing Address
121 Brightbridge Avenue

City: East Providence RI State: RI Zip Code: 02914

Purpose of Disbursement
Fundraiser

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

06 / 02 / 2014

Amount of Each Disbursement this Period

250.00

B. Rep. Craven

Mailing Address
25 Highland Road

City: Saunderson RI State: RI Zip Code: 02874

Purpose of Disbursement
Fundraiser

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

06 / 27 / 2014

Amount of Each Disbursement this Period

200.00

C.

Mailing Address

City: State: Zip Code:

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY

Amount of Each Disbursement this Period

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

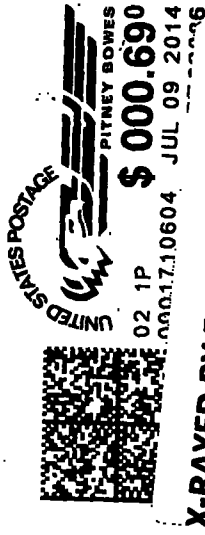
TOTAL This Period (last page this line number only).....▶

450.00
197.00

Ward, Fisher & Company, LLP

CERTIFIED PUBLIC ACCOUNTANTS

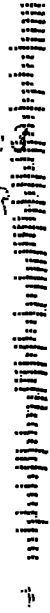
WARWICK EXECUTIVE PARK
250C CENTERVILLE ROAD
WARWICK, RHODE ISLAND 02886-4353



X-RAYED BY FEC SECURITY

Federal Election Commission
999 E. Street, N.W.
Washington, DC 20463

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2014 JUL 16 AM 8:45
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Federal Election Commission
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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

7/16/14
DATE PREPARED