

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS For Other Than An Authorized Committee

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1. NAME OF COMMITTEE (in full) TYPE OR PRINT Example: If typing, type over the lines. 12FE4M5

BRANCH 193 NATIONAL ASSOCIATION OF LETTER CARRIERS POLITICAL ACTION COMMITTEE

ADDRESS (number and street) 2864 HAUGHTON DRIVE

Check if different than previously reported. (ACC)

SAN JOSE CA 95148-3008

2. FEC IDENTIFICATION NUMBER CITY STATE ZIP CODE

C00213645

3. IS THIS REPORT NEW OR AMENDED



4. TYPE OF REPORT (Choose One) (a) Quarterly Reports: April 15, July 15, October 15, January 31, July 31 Mid-Year Report, Termination Report

(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), Dec 20 (M12), Jan 31 (YE)

(c) 12-Day PRE-Election Report for the: Primary (12P), General (12G), Runoff (12R), Convention (12C), Special (12S)

(d) 30-Day POST-Election Report for the: General (30G), Runoff (30R), Special (30S)

5. Covering Period 07 01 2015 through 12 31 2015

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 EUGENE LORENZO

Signature of Treasurer Eugene Lorenzo Date 01 19 2016

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 52 U.S.C. § 30105

NON-FUNCTIONAL INFORMATION

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name **BR. 193 NATIONAL ASSOCIATION OF LETTER
CARRIERS POLITICAL ACTION COMMITTEE**

Report Covering the Period: From: **07 01 2015** To: **12 31 2015**

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, 2015		19,261.77
(b) Cash on Hand at Beginning of Reporting Period.....	19,201.60	
(c) Total Receipts (from Line 19).....	4,540.00	5,619.00
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	23,741.60	24,880.77
7. Total Disbursements (from Line 31).....	2,681.00	3,820.17
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	21,060.60	21,060.60
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....	0	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....	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

NON-PROFIT ORGANIZATION

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name **BR. 193 NATIONAL ASSOCIATION OF LETTER
CARRIERS POLITICAL ACTION COMMITTEE**

Report Covering the Period: From: **07 01 2015** To: **12 31 2015**

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
(ii) Unitemized.....	4,540.00	5,619.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	4,540.00	5,619.00
(b) Political Party Committees.....	0	0
(c) Other Political Committees (such as PACs).....	0	0
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5).....▶	4,540.00	5,619.00
12. Transfers From Affiliated/Other Party Committees.....	0	0
13. All Loans Received.....	0	0
14. Loan Repayments Received.....	0	0
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0	0
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0	0
17. Other Federal Receipts (Dividends, Interest, etc.).....	0	0
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	0	0
(b) Levin Funds (from Schedule H5).....	0	0
(c) Total Transfers (add 18(a) and 18(b))..	0	0
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)).....▶	4,540.00	5,619.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	4,540.00	5,619.00

NON-FEDERAL RECEIPTS

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	1,481.00	1,870.17
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	1,481.00	1,870.17
22. Transfers to Affiliated/Other Party Committees.....	,	,
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	1,000.00	1,000.00
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	200.00	950.00
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))..	2,681.00	3,820.17
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	2,681.00	3,820.17

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DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

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)	4,540.00	5,619.00
34. Total Contribution Refunds (from Line 28(d))	0	0
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	4,540.00	5,619.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	1,481.00	1,870.17
37. Offsets to Operating Expenditures (from Line 15, page 3)	0	0
38. Net Operating Expenditures (subtract Line 37 from Line 36)	1,481.00	1,870.17

NOTICE: ON 10-1-01 0000000000

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 checked="" 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) **BR. 193 NATIONAL ASSOCIATION OF LETTER CARRIERS POLITICAL ACTION COMMITTEE**

A. Full Name (Last, First, Middle Initial) **BRANCH 193 NATIONAL ASSOCIATION OF LETTER CARRIERS**

Mailing Address **1060 MINNESOTA AVENUE**

City **SAN JOSE** State **CA** Zip Code **95125**

Purpose of Disbursement **REIMBURSEMENT FOR PART OF COSTS OF FUNDRAISING CALENDAR SALES FOR THIS PAC**

Candidate Name

Of/Ace Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement **11 30 2015**

Amount of Each Disbursement this Period **1,481.00**

Category/Type **003**

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

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Of/Ace Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

Amount of Each Disbursement this Period

Category/Type

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

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Of/Ace Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

Amount of Each Disbursement this Period

Category/Type

SUBTOTAL of Disbursements This Page (optional) **1,481.00**

TOTAL This Period (last page this line number only) **1,481.00**

NON-FUNCTIONAL DOCUMENT

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 27	<input type="checkbox"/> 22 28a	<input checked="" type="checkbox"/> 23 28b	<input type="checkbox"/> 24 28c	<input type="checkbox"/> 25 29	<input type="checkbox"/> 26 30b	

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NAME OF COMMITTEE (In Full) **BR. 193 NATIONAL ASSOCIATION OF LETTER CARRIERS POLITICAL ACTION COMMITTEE**

Full Name (Last, First, Middle Initial) A. LOFGREEN FOR CONGRESS		Date of Disbursement 08 / 14 / 2015
Mailing Address PO BOX 913		Amount of Each Disbursement this Period 1,000.00
City SAN JOSE	State CA	
Purpose of Disbursement CONTRIBUTION	Zip Code 95113	
Candidate Name ZOE LOFGREEN	Category/Type 011	
Of/Ace Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CA District: 19	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B.		Date of Disbursement
Mailing Address		
City	State	Zip Code
Purpose of Disbursement		Amount of Each Disbursement this Period
Candidate Name	Category/Type	
Of/Ace Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C.		Date of Disbursement
Mailing Address		
City	State	Zip Code
Purpose of Disbursement		Amount of Each Disbursement this Period
Candidate Name	Category/Type	
Of/Ace Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional).....▶	1,000.00
TOTAL This Period (last page this line number only).....▶	1,000.00

NON-FUNCTIONAL DOCUMENT

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 1
	<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) **BR. 193 NATIONAL ASSOCIATION OF LETTER CARRIERS POLITICAL ACTION COMMITTEE**

Full Name (Last, First, Middle Initial) A. JIM BEALL FOR SENATE 2016		Date of Disbursement 10 05 20 15
Mailing Address 1127 11TH STREET, SUITE 331		
City SACRAMENTO	State CA	Zip Code 95814
Purpose of Disbursement CONTRIBUTION TO NONFEDERAL CANDIDATE		Amount of Each Disbursement this Period , 200.00
Candidate Name		
Of/Ace 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:	

Full Name (Last, First, Middle Initial) B.		Date of Disbursement M M / D D / Y Y Y Y
Mailing Address		
City	State	Zip Code
Purpose of Disbursement		Amount of Each Disbursement this Period
Candidate Name		
Of/Ace 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:	

Full Name (Last, First, Middle Initial) C.		Date of Disbursement M M / D D / Y Y Y Y
Mailing Address		
City	State	Zip Code
Purpose of Disbursement		Amount of Each Disbursement this Period
Candidate Name		
Of/Ace 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).....▶	, 200.00
TOTAL This Period (last page this line number only).....▶	, 200.00

NON-FEDERAL CANDIDATE

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Other (Specify): Date of Receipt or Postmarked

PREPARER
(3/2015)



2/1/16

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