



**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

**BLAKPAC**

Report Covering the Period: From:  /  /  To:  /  /

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2015"/>	<input type="text" value="1000.00"/>	<input type="text" value="1000.00"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="1000.00"/>	
(c) Total Receipts (from Line 19) .....	<input type="text" value="33200.00"/>	<input type="text" value="69920.00"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<input type="text" value="34200.00"/>	<input type="text" value="70920.00"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="33105.00"/>	<input type="text" value="69825.00"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="1095.00"/>	<input type="text" value="1095.00"/>
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<input type="text" value="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

## DETAILED SUMMARY PAGE of Receipts

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name

**BLAKPAC**

Report Covering the Period: From: M M / D D / Y Y Y Y Y Y  
07 / 01 / 2015 To: M M / D D / Y Y Y Y Y Y  
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).....	32705.00	68285.00
(ii) Unitemized .....	495.00	1635.00
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	33200.00	69920.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) .....	33200.00	69920.00
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received .....	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	0.00	0.00
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))..... ▶	33200.00	69920.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	33200.00	69920.00

**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 .....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures .....	33105.00	69825.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	33105.00	69825.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditures (use Schedule E) .....	0.00	0.00
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	0.00
(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 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements .....	0.00	0.00
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0.00	0.00
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	33105.00	69825.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	33105.00	69825.00

**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) .....	33200.00	69920.00
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	33200.00	69920.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	33105.00	69825.00
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	33105.00	69825.00

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 6 OF 15
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 16
		<input type="checkbox"/> 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)  
**BLAKPAC**

**A. Ms ANGELIA BOYNTON**  
Full Name (Last, First, Middle Initial)  
Mailing Address PO BOX 832082

City OCALA	State FL	Zip Code 34483
FEC ID number of contributing federal political committee. C		
Name of Employer INSTANT TAX GROUP & ASSOCIATES	Occupation TAX PROFESSIONAL	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 7750.00	

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
09 / 22 / 2015  
**Transaction ID : SA11AI.4231**

Amount of Each Receipt this Period  
100.00

DONATION

**B. Ms ANGELIA BOYNTON**  
Full Name (Last, First, Middle Initial)  
Mailing Address PO BOX 832082

City OCALA	State FL	Zip Code 34483
FEC ID number of contributing federal political committee. C		
Name of Employer INSTANT TAX GROUP & ASSOCIATES	Occupation TAX PROFESSIONAL	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 14250.00	

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
12 / 25 / 2015  
**Transaction ID : SA11AI.4232**

Amount of Each Receipt this Period  
6500.00

In-kind - FINANCIAL REPORTING

**C. George Farrell**  
Full Name (Last, First, Middle Initial)  
Mailing Address 1125 2nd Ave S

City TierraVerde	State FL	Zip Code 33715
FEC ID number of contributing federal political committee. C		
Name of Employer self-employed	Occupation Consultation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 19223.00	

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
10 / 14 / 2015  
**Transaction ID : SA11AI.4284**

Amount of Each Receipt this Period  
7505.00

In-kind - SERVICES

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	14105.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**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 7 OF 15
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**BLAKPAC**

**A. George Farrell**  
Full Name (Last, First, Middle Initial)

Mailing Address 1125 2nd Ave S

City State Zip Code  
TierraVerde FL 33715

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

Name of Employer Occupation  
self-employed Consultation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
26823.00

Date of Receipt  
10 / 23 / 2015  
Transaction ID : SA11AI.4286

Amount of Each Receipt this Period  
6700.00

DONATION

**B. ALVIN JONES Esq.**  
Full Name (Last, First, Middle Initial)

Mailing Address 8870 N. Himes Ave. #248

City State Zip Code  
TAMPA FL 33614

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

Name of Employer Occupation  
SELF EMPLOYED ATTORNEY

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
10 / 15 / 2015  
Transaction ID : SA11AI.4244

Amount of Each Receipt this Period  
5000.00

In-kind - ATTORNEY SERVICE

**C. SYSTECH SOLUTIONS LLC**  
Full Name (Last, First, Middle Initial)

Mailing Address 6014 SE 112TH AVE ROAD

City State Zip Code  
OCALA FL 34476

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

Name of Employer Occupation  
BUSINESS IT COMPUTER NETWORKING

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
12000.00

Date of Receipt  
12 / 30 / 2015  
Transaction ID : SA11AI.4280

Amount of Each Receipt this Period  
6000.00

INTERNET SOLUTIONS WEB

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	18600.00
<b>TOTAL</b> This Period (last page this line number only).....▶	32705.00

# 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)

<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

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NAME OF COMMITTEE (In Full)  
**BLAKPAC**

Full Name (Last, First, Middle Initial)  
**A. Ms ANGELIA BOYNTON**

Mailing Address PO BOX 832082

City Ocala State FL Zip Code 34483

Purpose of Disbursement In-kind - FINANCIAL REPORTING

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: MM / DD / YYYY  
12 / 25 / 2015

Transaction ID : **SB21B.4233**

Amount of Each Disbursement this Period: 6500.00

Category/Type

Full Name (Last, First, Middle Initial)  
**B. BRIGHOUSE NETWORK**

Mailing Address 233 31ST STREET N #120

City ST. PETERSBERG State FL Zip Code 33701

Purpose of Disbursement TELEPHONE

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: MM / DD / YYYY  
07 / 15 / 2015

Transaction ID : **SB21B.4264**

Amount of Each Disbursement this Period: 170.00

Category/Type: 001

Full Name (Last, First, Middle Initial)  
**C. BRIGHOUSE NETWORK**

Mailing Address 233 31ST STREET N #120

City ST. PETERSBERG State FL Zip Code 33701

Purpose of Disbursement TELEPHONE

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: MM / DD / YYYY  
08 / 17 / 2015

Transaction ID : **SB21B.4265**

Amount of Each Disbursement this Period: 170.00

Category/Type: 001

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 6840.00

**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)

<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

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NAME OF COMMITTEE (In Full)  
**BLAKPAC**

Full Name (Last, First, Middle Initial) <b>A. BRIGHOUSE NETWORK</b>		Date of Disbursement MM / DD / YYYY 09 / 16 / 2015
Mailing Address 233 31ST STREET N #120		Transaction ID : <b>SB21B.4266</b>
City ST. PETERSBERG	State FL	
Purpose of Disbursement TELEPHONE	Candidate Name	Amount of Each Disbursement this Period 170.00
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) ▼	Category/ Type 001
State: District:		

Full Name (Last, First, Middle Initial) <b>B. BRIGHOUSE NETWORK</b>		Date of Disbursement MM / DD / YYYY 10 / 16 / 2015
Mailing Address 233 31ST STREET N #120		Transaction ID : <b>SB21B.4268</b>
City ST. PETERSBERG	State FL	
Purpose of Disbursement TELEPHONE	Candidate Name	Amount of Each Disbursement this Period 200.00
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) ▼	Category/ Type 001
State: District:		

Full Name (Last, First, Middle Initial) <b>C. BRIGHOUSE NETWORK</b>		Date of Disbursement MM / DD / YYYY 11 / 19 / 2015
Mailing Address 233 31ST STREET N #120		Transaction ID : <b>SB21B.4269</b>
City ST. PETERSBERG	State FL	
Purpose of Disbursement TELEPHONE	Candidate Name	Amount of Each Disbursement this Period 170.00
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) ▼	Category/ Type 001
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	540.00
<b>TOTAL</b> 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)

<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

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NAME OF COMMITTEE (In Full)  
**BLAKPAC**

Full Name (Last, First, Middle Initial)

**A. BRIGHOUSE NETWORK**

Mailing Address 233 31ST STREET N  
#120

City ST. PETERSBERG State FL Zip Code 33701

Purpose of Disbursement  
TELEPHONE

001

Candidate Name

Category/  
Type

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
12 / 18 / 2015

Transaction ID : SB21B.4270

Amount of Each Disbursement this Period

270.00

Full Name (Last, First, Middle Initial)

**B. CAR TODAY**

Mailing Address 8350 PARKBLVD

City SEMINOLE State FL Zip Code 33777

Purpose of Disbursement  
TRANSPORTATION

002

Candidate Name

Category/  
Type

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
12 / 18 / 2015

Transaction ID : SB21B.4278

Amount of Each Disbursement this Period

200.00

Full Name (Last, First, Middle Initial)

**C. DUKE ENERGY**

Mailing Address 299 1ST AVE NORTH

City ST. PETERSBURG State FL Zip Code 33701

Purpose of Disbursement  
UTILITIES

001

Candidate Name

Category/  
Type

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
07 / 17 / 2015

Transaction ID : SB21B.4271

Amount of Each Disbursement this Period

250.00

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

720.00

**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)

<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

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NAME OF COMMITTEE (In Full)  
**BLAKPAC**

Full Name (Last, First, Middle Initial)

**A. DUKE ENERGY**

Mailing Address 299 1ST AVE NORTH

City ST. PETERSBURG State FL Zip Code 33701

Purpose of Disbursement UTILITIES

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 08 / 27 / 2015

Transaction ID : **SB21B.4275**

Amount of Each Disbursement this Period: 190.00

Category/Type: 001

Full Name (Last, First, Middle Initial)

**B. DUKE ENERGY**

Mailing Address 299 1ST AVE NORTH

City ST. PETERSBURG State FL Zip Code 33701

Purpose of Disbursement UTILITIES

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 09 / 30 / 2015

Transaction ID : **SB21B.4273**

Amount of Each Disbursement this Period: 250.00

Category/Type: 001

Full Name (Last, First, Middle Initial)

**C. DUKE ENERGY**

Mailing Address 299 1ST AVE NORTH

City ST. PETERSBURG State FL Zip Code 33701

Purpose of Disbursement UTILITIES

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 10 / 29 / 2015

Transaction ID : **SB21B.4274**

Amount of Each Disbursement this Period: 760.00

Category/Type: 001

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 1200.00

**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)

<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

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NAME OF COMMITTEE (In Full)  
**BLAKPAC**

Full Name (Last, First, Middle Initial)  
**A. DUKE ENERGY**

Date of Disbursement:  /  /

Mailing Address **299 1ST AVE NORTH**

City **ST. PETERSBURG** State **FL** Zip Code **33701**

Purpose of Disbursement **UTILITIES** Category/Type:

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Transaction ID : **SB21B.4276**

Amount of Each Disbursement this Period:

Full Name (Last, First, Middle Initial)  
**B. DUKE ENERGY**

Date of Disbursement:  /  /

Mailing Address **299 1ST AVE NORTH**

City **ST. PETERSBURG** State **FL** Zip Code **33701**

Purpose of Disbursement **UTILITIES** Category/Type:

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Transaction ID : **SB21B.4277**

Amount of Each Disbursement this Period:

Full Name (Last, First, Middle Initial)  
**C. George Farrell**

Date of Disbursement:  /  /

Mailing Address **1125 2nd Ave S**

City **TierraVerde** State **FL** Zip Code **33715**

Purpose of Disbursement **In-kind - SERVICES** Category/Type:

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Transaction ID : **SB21B.4285**

Amount of Each Disbursement this Period:

**SUBTOTAL** of Disbursements 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)

<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)  
**BLAKPAC**

Full Name (Last, First, Middle Initial)

**A. ALVIN JONES Esq.**

Mailing Address 8870 N. Himes Ave. #248

City TAMPA State FL Zip Code 33614

Purpose of Disbursement  
In-kind - ATTORNEY SERVICE

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
10 / 15 / 2015

Transaction ID : SB21B.4251

Amount of Each Disbursement this Period

5000.00

Full Name (Last, First, Middle Initial)

**B. SAWGRASS PROPERTIES**

Mailing Address 3035 66TH AVE N

City SAINT PETERSBURG State FL Zip Code 33701

Purpose of Disbursement  
RENT

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
07 / 01 / 2015

Transaction ID : SB21B.4256

Amount of Each Disbursement this Period

800.00

Full Name (Last, First, Middle Initial)

**C. SAWGRASS PROPERTIES**

Mailing Address 3035 66TH AVE N

City SAINT PETERSBURG State FL Zip Code 33701

Purpose of Disbursement  
RENT

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
08 / 01 / 2015

Transaction ID : SB21B.4257

Amount of Each Disbursement this Period

800.00

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

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

6600.00

**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)

<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)  
**BLAKPAC**

Full Name (Last, First, Middle Initial)

**A. SAWGRASS PROPERTIES**

Mailing Address 3035 66TH AVE N

City SAINT PETERSBURG State FL Zip Code 33701

Purpose of Disbursement  
RENT

Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify) ▼  
State: District:

Date of Disbursement

/  /

**Transaction ID : SB21B.4258**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**B. SAWGRASS PROPERTIES**

Mailing Address 3035 66TH AVE N

City SAINT PETERSBURG State FL Zip Code 33701

Purpose of Disbursement  
RENT

Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify) ▼  
State: District:

Date of Disbursement

/  /

**Transaction ID : SB21B.4259**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**C. SAWGRASS PROPERTIES**

Mailing Address 3035 66TH AVE N

City SAINT PETERSBURG State FL Zip Code 33701

Purpose of Disbursement  
RENT

Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify) ▼  
State: District:

Date of Disbursement

/  /

**Transaction ID : SB21B.4260**

Amount of Each Disbursement this Period

**SUBTOTAL** of Disbursements 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)

<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

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NAME OF COMMITTEE (In Full)  
**BLAKPAC**

Full Name (Last, First, Middle Initial)  
**A. SAWGRASS PROPERTIES**

Mailing Address 3035 66TH AVE N

City SAINT PETERSBURG State FL Zip Code 33701

Purpose of Disbursement RENT

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 12 / 01 / 2015

Transaction ID : **SB21B.4262**

Amount of Each Disbursement this Period: 800.00

Category/Type: 001

Full Name (Last, First, Middle Initial)  
**B. SYSTECH SOLUTIONS LLC**

Mailing Address 6014 SE 112TH AVE ROAD

City OCALA State FL Zip Code 34476

Purpose of Disbursement INTERNET SOLUTIONS WEB

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 12 / 30 / 2015

Transaction ID : **SB21B.4282**

Amount of Each Disbursement this Period: 6000.00

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

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 6800.00

**TOTAL** This Period (last page this line number only)..... ▶ 33105.00