FE6ANQ26

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS For Other Than An Authorized Committee

RECEIVED

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Office-Use Only II OFFICE

1.	NAME (OF ITEE (in full)	TYPE	OR PRINT	Γ ♥		mple: If typii r the lines.	ng, type	12FE4) i irail	- OF141 F1/	
L	URBI	m PRUG	ees	5 po	4110	AL A	CTION	S COP	4417	TEE			
		1 1 1 1 1	1 1 1	1.1.1	1 1 1	.1 1 1	1 1 1 1	1 1 1 1		111			
AD	DRESS (r	number and street)) TQ-1	BOX	125	5,7, , ,	1.1.1.					
	thai	eck if different n previously orted. (ACC)	W	ALTE	RBOR	6	1-1-1-1		SC	294	88-		
2.	FEC ID	ENTIFICATION N	NUMBEI	R▼	C	iTY ▲			STATE A		ZIP COD	DE A	
	c o	05286	61		3.	IS THIS REPORT	1/	NEW (N) OR		AMENDED (A)			
4.	TYPE (Choose	OF REPORT One)	(b)	Monthly Report Due On:	Fe	eb 20 (M2)		May 20 (M5)	. Д	ug 20 (M8)		Nov 20 (M11) (Non-Election Year Only)	
	(a) Qua	arterly Reports:		540 O	Ma	ar 20 (M3)	•	Jun 20 (M6)	S	ep 20 (M9)		Dec 20 (M12) (Non-Election Year Only)	
		April 15			Ar	or 20 (M4)		Jul 20 (M7)	<u> </u>	ct 20 (M10)		Jan 31 (YE)	
		Quarterly Report July 15	(Q1)	(c) 12-E	ay E-Election		Primary (12F	?)	Gene	al (12G)	1	Runoff (12R)	
		Quarterly Report (Q2) October 15 Quarterly Report (Q3) January 31 Year-End Report (YE)	, , , , ,		Report for the:			Convention (12C)		Speci	Special (12S)		
	V		leport (Q3)		Elec	tion on	M M /	D 0 /	Y Y Y	Y	in the State of		
		July 31 Mid-Year Report (Non-elect Year Only) (MY)	ion		Day T-Election ort for the:		General (300	3)	Runo	f (30R)	,	Special (30S)	
		Termination Repo (TER)	rt	пер		tion on	M M /	, פ מ	y y y	Y	in the State of		
5.	Covering	Period O	7	16′	201	う	through	ÖĞ	['] දී්	źŏ	13		
	•	I have examined Name of Treasur	-	ort and to BRI	the best	of my kno T	wledge and I	belief it is tro	ue, correct	and comple	te.		
Sig	nature of	Treasurer	rú	dget	t gr	Jur	ray	_ (Date /	Ö', "/	o'2	Žở 13	
NO	TE: Subm	ission of false, erro	neous, o	r incomple	te informat	ion may su	abject the per	son signing t	his Report t	o the penalti	es of 2 U	.S.C. §437g.	
ı		fice se									FORI Rev. 12/20		

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

POLITICAL ACTION COMMITTEE

Report Covering the Period:

From:

07 16 2013 To: 09 30 2013

	<u> </u>	COLUMN A This Period	COLUMN B Calendar Year-to-Date		
6.	(a) Cash on Hand January 1,		, , 00.00		
	(b) Cash on Hand at Beginning of Reporting Period	, , 00.00			
	(c) Total Receipts (from Line 19)	, , 00.00	, , DO.OO		
	(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	, , 00.00	, , <i>00</i> .00		
7 .	Total Disbursements (from Line 31)	, 0.000	, , 00.00		
8.	Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	, , 00.00	, , <i>0</i> 0.00		
9.	Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	, , 00 <u>.0</u> 0			
10.	Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	, , 00.00			

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

FE6AN026

DETAILED SUMMARY PAGE

of Receipts

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name

LIRBAN PROGRESS POLITICAL ACTION COMMITTEE

Report Covering the Period:

From:

07'16'2013

то: 09′30′2013

Page 3

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)	, , 00.00	, , 00.00
	(ii) Unitemized	, , 0000	, , 00.00
	(iii) TOTAL (add Lines 11(a)(i) and (ii)▶	, , 00.00	, , 00.00
	(b) Political Party Committees	, , 0000	, , 0000
	(c) Other Political Committees (such as PACs)	, , 00.00	, , 00.00
	(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry		
12	Totals to Line 33, page 5) Transfers From Affiliated/Other	, , 00.00	, , 0000
l Gas	Party Committees	, , 00.00	, , 00.00
13.	All Loans Received	, , 00.00	, , 00.00
	Loan Repayments Received	, , 00.00	, , 00.00
15.	Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)	, , 00.00	, , 00.00
16.	Refunds of Contributions Made to Federal Candidates and Other Political Committees	0000	0000
•	Other Federal Receipts (Dividends, Interest, etc.)	, , 00.00	, , 00.00
18.	Transfers from Non-Federal and Levin Funds (a) Non-Federal Account (from Schedule H3)	, , 00.00	, , 00.00
	(b) Levin Funds (from Schedule H5)	, , 00.00	, , 00.00
	(c) Total Transfers (adri 18(a) and 18(b))	, , 00.00	, , 00.00
19.	Total Receipts (add Lines 11(d),	- B - B - B	^ ^^
	12, 13, 14, 15, 16, 17, and 18(c))▶	, , 00.00	, , 00.00
20.	Total Federal Receipts (subtract Line 18(c) from Line 19)▶	, , OD.OO , , OO.DO	, , OO.DO , , OO.DO

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		Caronaa Tourito Dato
	Activity (from Schedule H4)	000	2000
	(i) Federal Share	, , 0000	, , 00.00
	(ii) Non-Federal Share	, <i>, 00.0</i> 0	, , <i>000</i> 0
	(b) Other Federal Operating		\sim
	Expenditures(c) Total Operating Expenditures	, , 0000	, , 000
	(add 21(a)(i), (a)(ii), and (b))▶	, , OO.OO	, , 00.00
22.	Transfers to Affiliated/Other Party	A A	
23.	Committees Contributions to	, , 00.00	, , 42.00
	Federal Candidates/Committees and Other Political Committees	, , 00.00	, , 00.00
24.	Independent Expenditures	ለ ለ ሉ እ	, ለለለን
25.	(use Schedule E)	, , 00.00	, , 00.00
	(2 U.S.C. §441a(d)) (use Schedule F)	, , 00,00	, , 00.00
		$\lambda \lambda \lambda \lambda$, , ,
26.	Loan Repayments Made	, , 0000	, , 0000
27.	Loans Made	, , 00.00	, , 0000
28.	Refunds of Contributions To: (a) Individuats/Persons Other	\uparrow	
	Than Political Committees	, , 0000	, , , , , ,
	(b) Political Party Committees	00.00	00.00
	(c) Other Political Committees	$\lambda \wedge \lambda$, , , , ,
	(such as PACs)	, , , , , , , , , , , , , , , , , , , ,	, , 20.00
	(d) Total Contribution Refunds		
	(add Lines 28(a), (b), and (c))▶	, , <i>OO</i> .OU	, , 00.00
20	Other Dishurasments	\wedge	0
29.	Other Disbursements	, , 50.00	, , , ,
30.	Federal Election Activity (2 U.S.C. §431(20))		
	(a) Allocated Federal Election Activity (from Schedule H6)		
	(i) Federal Share	, , DO.OO	, , 00.00
		0000	
	(ii) "Levin" Share(b) Federal Election Activity Paul Entirely	, ,	, , , , , , , , , , , , , , , , , ,
	With Federal Funds	, , <i>00.</i> 00	, , 00.00
	(c) Total Federal Election Activity (add		ን አር
	Lines 30(a)(i), 30(a)(ii) and 30(b))▶	, , <i>O</i> 0.00	, , , , , ,
31.	Total Disbursements (add Lines 21(c), 22,		
	23, 24, 25, 26, 27, 28(d), 29 and 30(c))	, , 00.00	, , 0 <i>00</i> 0
32.	Total Federal Disbursements		
	(subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31)▶	$\mathcal{D} \wedge \mathcal{D} \wedge$	\sim
	non Line 01/	, , , , , , , , , , , , , , , , , , , ,	, , 000

DETAILED SUMMARY PAGE

of Disbursements

	FEC Form 3X (Hev. 02/2003)		Page 5		
111.	. 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)	, , 00,00	, , 00.00		
34.	Total Contribution Refunds (from Line 28(d))	, , 00.00	, , 0000		
35.	Net Contributions (other than loans) (subtract Line 34 from Line 33)	, , 00.00	, , 00,000		
36.	Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))▶	, , 00.00	, 00.00		
37.	Offsets to Operating Expenditures (from Line 15, page 3)	, , 0000	0000		
38.	Net Operating Expenditures (subtract Line 37 from Line 36)	, , 0000	, , , , , , , , , , , , , , , , , , , ,		

SCHEDULE A (FEC Form 3X)

SCHEDULE A (FEC FORM 3A)		Use separate schedule(s)	(check only one)
TEMIZED RECEIPTS		for each category of the Detailed Summary Page	11a 11b 11c 12
		летаней этипалу гаде	13 14 15 16 17
Any information copied from such Reports and State or for commercial purposes, other than using the na			
NAME OF COMMITTEE (In Full)			
	LITTC	ACTION CE	MMM77E
Full Name (Last, First, Middle Initial)			Date of Receipt
Mailing Address	· · · · · · · · · · · · · · · · · · ·		M M / D D / Y Y Y
	 -		
City	State	Zip Code	Amount of Each Receipt this Period
FEC ID number of contributing	С		
federal political committee.	J		, , .
Name of Employer	Occupation		
Receipt For:	Aggregate	Year-to-Date ▼	1
Primary General	aa. ~a		
Other (specify) ▼		, ,	
Full Name (Last, First, Middle Initial)			<u> </u>
3.			Date of Réceipt
Mailing Address			M M / D D / Y Y Y
City	State	Zip Code	
SEC ID number of sectionis			Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		, ,
Name of Employer	Occupation		
Receipt For:	Aggregate	Year-to-Date ▼	1
Primary General	33.23		
Other (specify) W		, ,	
Full Name (Last, First, Middle Initial)			Date of Receipt
Mailing Address			M M / D D / Y Y Y
City	State	Zip Code	
·			Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		, ,
Name of Employer	Occupation		-
Receipt For:			4
Primary General	Aggregate	Year-to-Date ▼	
Other (specify)		, ,	
CHRTOTAL of Descints This Date (actional)			\sim
SUBTOTAL of Receipts This Page (optional)	***************************************	_	, , 22.00
TOTAL This Period (last page this line number on	ly)	_	, , <i>00.00</i> , , <i>00.00</i>

SCHEDULE B. (FEC Form 3X)

	CHEDOLL B (I LO FOIIII 3X)	Use separate schedule(s)	FOR LINE		PAGE OF
T	EMIZED DISBURSEMENTS	for each category of the	(check only	/one) □ 22 □ 23 □	
		Detailed Summary Page	27	28a 28b	28c 29 30b
	ny information copied from such Reports and Staterr for commercial ourooses, other than using the nam				
\setminus	NAME OF COMMITTEE (In Full)				
<u>/</u>	URBAN PROGRESS PO	LITICAL ACTI	on Cua	UMITTEE	
A.	Full Name (Last, First, Middle Initial)			Date of Disbursem	ent
				M M / D D	
	Mailing Address				
	City	itate Zip Code			
	Purpose of Disbursement				
	Candidate Name			Amount of Each Di	isbursement this Period
	Carrieratio (Marito		Category/ Type	,	9 "
	Office Sought: House Disburserr			-	
	<u> </u>	Primary ☐ General Other (specify) ▼			
	State: District:	· · · · · ·			
	Full Name (Last, First, Middle Initial)			Date of Disbursem	ont
В.					
	Mailing Address		;	,	
	City	state Zip Code	· · · · · · · · · · · · · · · · · · ·		
	Purpose of Disbursement			• • • • • • •	
	Candidate Name			Amount of Each Di	isbursement this Period
		İ	Category/ Type	7	,
	Office Sought: Honse Disburser				
		Primary General Other (specify) ▼			
	State: District:	(-F)/ ¥			
_	Full Name (Last, First, Middle Initial)			Date of District	
C.				Date of Disbursem	
	Mailing Address				
	City	State Zip Code			· · · · · · · · · · · · · · · · · · ·
	Purpose of Disbursement				
Candidate Name			Category/	Amount of Each D	isbursement this Period
	Office Sought: House Disbursen	ent For	Туре	9	2
	_ _ _ _ _ _	Primary General			
	President	Other (specify)			
_	State: District:				
S	SUBTOTAL of Disbursements This Page (optional)			9	, 00.00
_			·	,	, 0000
T	OTAL This Period (last page this line number only).		·····	5	, 00,00

CHEDULE C (FEC Form	JAJ		PAGE OF
DANS		Use separate schedule(s) for each category of the	
		Detailed Summary Page	FOR LINE 13 OF FORM 3X
ME OF COMMITTEE (In Full)		4	
URBAN PROGRESS	s Poutical Ac	CTION COMMITTE	Ě
LOAN SOURCE Full Name (Last,	First, Middle Initial)	E	lection:
		-	Primary General
Mailing Address	· · · · · · · · · · · · · · · · · · ·		Other (specify)
maining / tourous		-	
City	State ZIP	Code	
Original Amount of Loan	Cumulative Payment	t To Date Balance	Outstanding at Close of This Per
•	•		
, , -	,	,	, , .
TERMS Date Incurred	Date D	Due Interest Rate	Secured:
M M / D D / Y Y Y			
•		•	% (apr) Yes
List All Endorsers or Guarantors (if any) to Loan Source		
1. Full Name (Last, First, Middle In	nitial)	Name of Employer	
Mailing Address		Occupation	
		Amount	
City	State ZIP Code	Guaranteed	
		Outstanding: 3	, ,
2. Full Name (Last, First, Middle Init	tial)	Name of Employer	
Mailing Address		Occupation	· · · · · · · · · · · · · · · · · · ·
maming Addition		Cooupaion	
		Amount	
City	State ZIP Code	Guaranteed Outstanding:	,
3. Full Name (Last, First, Middle Ini	tial)	Name of Employer	
3. I dii Haite (Last, 1 list, Widdle III	uai)	Name of Employer	
Mailing Address		Occupation	
		Amount	
City	State ZIP Code	Guaranteed Outstanding:	,
4. Full Name (Last, First, Middle Ini	tial)	Name of Employer	
		· · · · · · · · · · · · · · · · · · ·	
Mailing Address		Occupation	
	State ZIP Code	Amount Guaranteed	
Oity	State ZIF COUR	Outstanding: 5	, .

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

SUBTOTALS This Period This Page (optional).....

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

SCHEDULE C-1 (FEC Form 3X)

Supplementary for

LOANS AND LINES OF CREDIT FROM L Federal Election Commission, Washington, D.C. 20463	ENDING INSTITUTIONS	S	Information found on Page of Schedule
NAME OF COMMITTEE (In Full)		FEC II	DENTIFICATION NUMBI
URBAN PROGRESS POLITICAL	ACTION COMMITTEE	0.0	0528661
LENDING INSTITUTION (LENDER)	Amount of Loan		Interest Rate (APR)
Full Name			
	, ,	•	. %
Mailing Address	Date Incurred or Established	R1 M /	D D / Y Y Y Y
City State Zip Code	Date Due	M DI /	D D / Y Y Y
A. Has loan been restructured? No Yes	If yes, date originally incurre	ed n n /	D D / Y Y Y
B. If line of credit,	Total Outstanding		
Amount of this Draw:	Balance:	,	7
C. Are other parties secondarily liable for the debt incu	rred? nust be reported on Schedule C.)		
D. Are any of the following pledged as collateral for the property, goods, negotiable instruments, certificates of stocks, accounts receivable, cash on deposit, or other	of deposit, chattel papers,	What is the va	alue of this collateral?
No Yes If yes, specify:		Does the lend	er have a perfected secu
E. Are any future contributions or future receipts of inte	rest income. pledged as		No Yes Stimated value?
collateral for the loan? Ne Yes If yes,	l l	Wildt is uie ea	ilindleu value:
		5	,
A depository account must be established pursuant to 11 CFR 100.82(e)(2) and 100.142(e)(2).	Lecation of account:		
Date account established:	Address:		
M M / D D / Y Y Y	City, State, Zip:		
F. If neither of the types of collateral described above we the loan amount, state the basis upon which this loan			
G. COMMITTEE TREASURER		DATE	
Typed Name Signature		ta ta /	D D / Y Y Y
H. Attach a signed copy of the loan agreement.			
I. TO BE SIGNED BY THE LENDING INSTITUTION:			
To the best of this institution's knowledge, the sare accurate as stated above. The least was made an terms and conditions (i)			
The loan was made on terms and conditions (i similar extensions of credit to other borrowers of III. This institution is aware of the requirement that	of comparable credit worthiness. t a loan must be made on a basi	is which assures	-
complied with the requirements set forth at 11 AUTHORIZED REPRESENTATIVE	CFR 100.82 and 100.142 in mak		
Typed Name		DATE	
	Title	W M /	ע א / Y Y Y Y

SCHEDULE D. (FEC Form 3X) DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)

PAGE OF

FOR LINE NUMBER: (check only one) 9

10

xcluding Loa	ns		numi	pered line)			10
NAME OF COMM URBA		OLLTICAL ACTION CO.	MMI	TTEE			
A. Full Name	A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Mailing Address				Nature of Debt (Purpose):		
Mailing Addres							
City	State	Zip Code					
Outstanding	Balance Beginning This Perio	od					
	unt Incurred This Period	Payment This Period		Outstanding	Balance at C	close of This Pe	eriod
•	, , .	, ,		,	,	•	
B. Full Name	(Last, First, Middle Initial) of D	Debtor or Creditor		Nature of Debt	(Purpose):		
Mailing Addres	SS						
City	State	Zip Code					
	Balance Beginning This Perio						
Arno	unt Incurred This Period	Payment This Period		Outstanding	Balance at C	lose of This Po	eriod
	, , .	, , ,	,	,	,	•	
C. Full Name	(Last, First, Middle Initial) of I	Debtor or Creditor		Nature of Debt	(Purpose):		
Mailing Addres	SS						
City		State Zip Code					
Outstanding	Balance Beginning This Perio	od .					
•	unt Incurred This Period	Payment This Period		Outstanding	Balance at C	Close of This Po	eriod
	, , .	. , ,		,	,	•	
1) SUBTOTALS	This Period This Page (option	nal)	>	,	5	000	0
2) TOTALS This	s Period (last page this line nu	imber only)	•	,	,	999	0
3) TOTAL OUTS	STANDING LOANS from Sche	edule C (last page only)	>	,	,	000	0
4) ADD 2) and	3) and carry forward to approp	priate line of Summary Page (last page o	nly) 🕨	,	3		U

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

				FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)				FEC IDENTIFICATION NUMBER ▼
URBAN PROGRES.	S POLITICAL ACTION	N CommiTTO	£	C 00 5 2 8 6 6 1
Check if 24-hour report 48	-hour report New report	ort Amends repo	t filed on	M M / D J / Y Y Y
Full Name of Payee			Da	te of Public Distribution/Dissemination
				M M / D D / Y Y Y
Mailing Address			Am	nount
City	State	Zip Code		, ,
			Da	te of Disbursement or Obligation
Purpose of Expenditure		Category/ Type		M M / D D / Y Y Y
Name of Federal Candidate		Support	Office Sou	ught: House District:
		Oppose	_	sident Senate State:
Calendar Year-To-Date			Disbursen	nent For: Primary General
Per Election for Office Sough	t , , ,	•		Other (specify)
Full Name of Payee			Da	te of Public Distribution/Dissemination
Mailing Address				
Maining Address			An	nount
City	State	Zip Code		, , .
			Da	te of Disbursement or Obligation
Purpose of Expenditure		Category/ Type		M M / D D / Y Y Y
Name of Federal Candidate		Support	Office So	ught: House District:
		Oppose	Pre	sident Senate State:
Calendar Year-To-Date Per Election for Office Sough	· ·		Disburser	nent For: Primary General
Ter Election for Cines cough	" , ,	•		Other (specify) ▶
(a) SUBTOTAL of Itemized Indepe	ndent Expenditures		•	9
(b) SUBTOTAL of Uniternized Inde	pendent Expenditures	***************************************	•	, ,
(c) TOTAL Independent Expenditu	res		•	, , , ,
	n of, any candidate or authorized			in cooperation, consultation, or concert (if the reporting entity is not a political
Bridget 9	nurray	Date	70	10 2013
				FEC Schedule E (Farm 3X) Pav. 09/2013

PAGE

OF

SCHEDULE F (FEC Form 3X)

ITEMIZED COORDINATED PARTY EXPENDITURES MADE BY POLITICAL PARTY COMMITTEES OR DESIGNATED AGENT(S)

PAGE ON BEHALF OF CANDIDATES FOR FEDERAL OFFICE (2 U.S.C. §441a(d)) FOR LINE 25 OF FORM 3X (To be used only by Political Committees in the General Election) NAME OF COMMITTEE (In Full) URBAN PROGRESS POLITICAL ACTION COMMITTEE Full Name of Subordinate Committee

coordinated expenditures by a political party	committee?				
YES, name the designating committee:	ļī	Mailing Address			
	ŀ	City	·····	State ZIP C	ode
Full Name (Last, First, Middle Initial) of	Each Payee			Purpose of Expenditure	
Mailing Address					Category/ Type
maining records				Date	
City	State	Zip Code		мм/оо/чч	, A A
Name of Federal Candidate Supported	Office Sought:	House Senate Presidential	State:	Amount	
Aggregate General Election Expenditure for this Candidate ▶	,	. 7			-
Full Name (Last, First, Middle Initial) of	Each Payee			Purpose of Expenditure	
Mailing Address					Category/ Type
				Date	
City	State	Zip Code		M M / O O / Y Y	, A A
Name of Federal Candidate Supported	Office Sought	House Senate Presidential	State:	Amount	
Aggregate General Election Expenditure for this Candidate	,	, .		, ,	•
Full Name (Last, First, Middle Initial) of	Each Payee		· · · · · · · · · · · · · · · · · · ·	Purpose of Expenditure	
Mailing Address				·	Category/ Type
City	State	Zip Code		Date M M / D J / Y Y	, A A
Name of Federal Candidate Supported	Office Sought	House Senate Presidential	State:	Amount	
Aggregate General Election Expenditure for this Candidate ▶	, ,	,		, ,	<u>.</u>
SUBTOTAL of Expenditures This Page (o	otional)			, , C	00,00
MOTAL This Period (last page this line ru				·	00 <u>0</u> 00

OF

SCHEDULE H1 (FEC Form 3X)

METHOD OF ALLOCATION FOR:

- ALLOCATED FEDERAL AND NONFEDERAL ADMINISTRATIVE, GENERIC VOTER DRIVE AND EXEMPT ACTIVITY COSTS
- ALLOCATED FEDERAL AND LEVIN FUNDS FEDERAL ELECTION ACTIVITY EXPENSES (State, District and Local Party Committees Only)
- ALLOCATED PUBLIC COMMUNICATIONS THAT REFER TO ANY POLITICAL PARTY (BUT NOT A CANDIDATE) (Separate Segregated Funds And Nonconnected Committees Only)

NAME OF COMMITTEE (In Full)	NAME OF COMMITTEE (In Full)				
URBAN PROGRESS POLITICAL ACTION COMMITTEE					
	USE ONLY ONE SEC	ΓΙΟΝ, A or B			
A. State and Local Party Committees					
Fixed Percentage (select one)				
Presidential-	Only Election Year (28% Federal)				
Presidential	and Senate Election Year (36% F	ederal)			
Senate-Only	Election Year (21% Federal)				
Non-Preside	Non-Presidential and Non-Senate Election Year (15% Federal)				
B. Separate Segre	gated Funds and Nonc	onnected Committees			
B. Separate Segreç		onnected Committees			
Flat Minimum Fede	ral Percentage	onnected Committees ercentage of 50% federal funds, check			
Flat Minimum Fede If the committee will Or	ral Percentage	ercentage of 50% federal funds, check			
Flat Minimum Fede If the committee will Or If the committee is s	ral Percentage allocate using the flat minimum p	percentage of 50% federal funds, check unds, indicate ratio below			
Flat Minimum Fede If the committee will Or If the committee is s Federal	ral Percentage allocate using the flat minimum p pending more than 50% federal f	ercentage of 50% federal funds, check unds, indicate ratio below			
Flat Minimum Fede If the committee will Or If the committee is s Federal Nonfederal	ral Percentage allocate using the flat minimum p pending more than 50% federal f	ercentage of 50% federal funds, check unds, indicate ratio below			

SCHEDULE H2 (FEC Form 3X)			PAGE OF
ALLOCATION RATIOS			
NAME OF COMMITTEE (IN FUII) URBAN PLOGRESS POLITICAL ACTION COM	UMITTEE		
RATIOS FOR ALLOCABLE FUNDRAISING EVENTS AND DIRECT CANDIDA ACTIV!TIES APPEARING ON THIS REPORT.	ATE SUPPORT		
Methods of allocation:			
 FUNDRAISING activities are allocated using the "funds received met expenses must equal the federal proportion of monies raised. 	hod" where the fede	erai pro	oportion of
II. Shared DIRECT CANDIDATE SUPPORT activities are allocated accommon where the federal proportion of disbursements is based on the beneficivity. For PACs Only: Direct candidate support includes public common federal and nonfederal candidates, regardless of whether there is a reallocated using a time/space method.	fit derived by federa nu¤ications or voter	cand drives	lidates from the ac- s that refer to both
ACTIVITY OR EVENT IDENTIFIER			
ACTIVITY IS:	FEDERAL %		NONFEDERAL %
Fundraising Direct Candidate Support		%	. %
CHECK IF THE RATIO IS: New Revised Same as Previously Reported			
ACTIVITY OR EVENT IDENTIFIER	FEDERAL %		NONFEDERAL %
ACTIVITY IS:			
Fundraising Direct Candidate Support CHECK IF THE RATIO IS:	•	%	- %
New Revised Same as Previously Reported			
ACTIVITY OR EVENT IDENTIFIER	FEDERAL %		NONFEDERAL %
ACTIVITY IS:			
Fundraising Direct Candidate Support CHECK IF THE RATIO IS:		%	. %
New Revised Same as Previously Reported			
ACTIVITY OR EVENT IDENTIFIER	FEDERAL %		NONFEDERAL %
ACTIVITY IS:	I EDENAL 78		NOW EDENAL /8
Fundraising Direct Candidate Support CHECK IF THE RATIO IS:	•	%	. %
New Revised Same as Previously Reported			
ACTIVITY OR EVENT IDENTIFIER	555501.0		NONESSES
ACTIVITY IS:	FEDERAL %		NONFEDERAL %
Fundraising Direct Candidate Support		%	. %
CHECK IF THE RATIO IS: New Revised Same as Previously Reported			
ACTIVITY OR EVENT IDENTIFIER	FEDERAL %		NONFEDERAL %
ACTIVITY IS:	, , , , , , , , , , , , , , , , , , , ,	ļ	
Fundraising Direct Candidate Support		%	. %

Same as Previously Reported

CHECK IF THE RATIO IS:

New

Revised

SCHEDULE H3 (FEC Form 3X) TRANSFERS FROM NONFEDERAL ACCOUNTS FOR ALLOCATED FEDERAL / NONFEDERAL ACTIVITY

FOR	LINE	182	ΩE	EORM	3
PAGI	Ξ	С	F		

NAME OF COMMITTEE (In Full)					
URBAN PROGRESS POLITICAL ACTION COMMITTEE					
NAME OF ACCOUNT	DATE OF RECEIPT	TOTAL AMOUNT TRANSFERRED			
	M M / D D / Y Y Y	, , .			
		, ,			
BREAKDOWN OF TRANSFER RECEIVED					
i) Total Administrative		, · , ·			
ii) Generic Voter Drive		, ,			
iii) Exempt Activities		, , .			
iv) Direct Fundralsing (List Activity or Event Ide	ntifier)				
2)					
a)	, ,				
b)	, ,				
c) Total Amount Transferred For Direct Fundra		, ,			
v) Direct Candidate Support (List Activity or Ev	rent Identifier)				
a)	, ,				
	, ,				
b)	, ,				
c) Total Amount Transferred For Direct Candid	date Support	, ,			
6, 10.12 / 11.100.11 11.21.100.100.100.100.100.100.100.100.10	·				
vi) Public Communications Referring Only to	Party (Made by PAC)	., , ,			
TOTALS FO	OR BREAKDOWN OF TRANSFER RECEIVE	ED			
TOTAL This Period (Administrative)		00.00			
,		^^^			
TOTAL This Period (Generic Voter Drive)	· · · · · · · · · · · · · · · · · · ·	, 00,00			
TOTAL This Period (Exempt Activities)		∞ 00			
TOTAL THIS FORDU (Exempt Activities)	· ,	,			
TOTAL This Period (Direct Fundraising)		, , Wigo			
TOTAL TIP Device (Direct Constitute Constitute		0000			
TOTAL This Period (Direct Candidate Support)		, , , , , , , , , , , , , , , , , , , ,			
TOTAL This Period (Public Communications Referring	Only to Party)	, , 00,00			
		$\Delta \Omega \Delta$			
TOTAL This Period (Total Amount Transferred)		, , , ,			

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

-					
N	AME OF COMMITTEE THE FULLY !	BUTICAL	ACTION CO	ism 177tE	-
A .	Full Name (Last, First, Middle Initial)				Allocated Activity or Event:
	Marillan Address				Administrative Fundraising Exempt
	Mailing Address				Voter Drive Direct Candidate Support
	City	State	Zip Code		Public Comm (ref to party only) by PAC
	Purpose of Disbursement:				Allocated Activity or Event Year-To-Date
	Activitie or Event Identifier				, , ,
	Activity or Event Identifier:			Category/ Type	M M / D D / Y Y Y Y Date
	FEDERAL SHARE	+	NONFEDERAL	SHARE	= TOTAL AMOUNT
_	, , ,	 	, ,		, , ,
B.	Full Name (Last, First, Middle Initial)				Allocated Activity or Event:
	Mailing Address		· · · · · · · · · · · · · · · · · · ·		Administrative Fundraising Exempt Voter Drive Direct Candidate Support
	City	State	Zip Code		Public Comm (ref to party only) by PAC
				,	Allocated Activity or Event Year-To-Date
	Purpose of Disbursement:				
	Activity or Event Identifier:	······································			, , ,
				Category/ Type	M M / D D / Y Y Y Y Date
	FEDERAL SHARE	+	NONFEDERAL	SHARE	= TOTAL AMOUNT
	, , ,		, ,		, , .
c.	Full Name (Last, First, Middle Initial)	 -		·	Allocated Activity or Event:
	Mailing Address				Administrative Fundraising Exempt
					Voter Drive Direct Candidate Support
	City	State	Zip Code		Public Comm (ref to party only) by PAC Allocated Activity or Event Year-To-Date
	Purpose of Disbursement:				Allocated Activity of Event Total To Sale
	Activity or Event Identifier:				, , ,
				Category/ Type	M M / D D / Y Y Y Y Date
	FEDERAL SHARE	+	NONFEDERAL	SHARE	= TOTAL AMOUNT
	, ,		, ,		, , <i>00<u>,</u>00</i>
	UBTOTAL of Allocated Federal and NonF	odoral Activity Thi	s Page		
3	FEDERAL SHARE	+	s rage NONFEDERAL	SHARE	= TOTAL AMOUNT
		•			0000
T	, , , OTAL This Period (last page for each line	only)(Federal sha	; ; ; ; ; ; ; ; ; ; ; ; ; ; ; ; ; ; ;	I NonFederal st	nare to 21(a)(ii))
	FEDERAL SHARE	***	NONFEDERAL		TOTAL AMOUNT
	, ,		, ,		, , <i>OO</i> OO

SCHEDULE H5 (FEC Form 3X)

TRANSFERS OF LEV ALLOCATED FEDERA

be used by State, District and	FOR LINE 186 OF FORM	
ME OF COMMITTEE (In Full) URBAN PRESENTS	POLITICAL ACTION COMA	MITTEE
NAME OF ACCOUNT	DATE OF RECEIPT M M / D D / Y Y Y Y	TOTAL AMOUNT TRANSFERRED
		, ,
BREAKDOWN OF THIS TRANSFER i) Voter Registration	VOTER REGIST	RATION
Total Amount Transferred to	r Voter Registration	•
ii) Voter ID	r Voter ID	voter id
iii) GOTV	,	GOTV
•	r GOTV	, , .
iv) Generic Campaign Activity		GENERIC CAMPAIGN ACTIVITY
Total Amount Transferred to	r Generic Campaign Activity	, , , , , , , , , , , , , , , , , , ,
NAME OF ACCOUNT	DATE OF RECEIPT	TOTAL AMOUNT TRANSFERRED
		, , .
BREAKDOWN OF THIS TRANSFER		
i) Voter Registration	VOTER REGIST	RAHON
Total Amount Transferred to	• , ,	• VOTER ID
ii) Voter ID Total Ambunt Transferred to	r Voter ID	
iii) GOTV	, , ,	GOTV
•	r GOTV	· · · · · · · · · · · · · · · · · · ·
lv) Generic Campaign Activity		GENERIC CAMPAIGN ACTIVITY
Total Amount Transferred to	r Generic Campaign Activity	, ,
TOTALS F	OR BREAKDOWN OF TRANSFER RECEIVED (I	Last Page Only)
, TOTAL This Period (Voter Registre	ition)	00.00
TOTAL This Period (Voter ID)	. ,	0000 , 0000 , , 0000 , , 0000
TOTAL This Period (GOTV)	· · · · · · · · · · · · · · · · · · ·	, , 00.00
TOTAL This Period (Generic Camp	paign Activity)	, , 0000
TOTAL This Davied (Total America)	of Transfers Received)	$\partial \partial \Delta C$

SCHEDULE H6 (FEC Form 3X) DISBURSEMENTS OF FEDERAL AND LEVIN FUNDS FOR ALLOCATED FEDERAL ELECTION ACTIVITY

(To be used by State, District and Local Party Committees Only)

PAGE		OF		
FOR LINE	30a	OF	FORM	зх

NAME OF COMMITTEE (In Full)	
· · ·	1.
URBAN PRESCRESS POLITICAL PETION	Committee
A. Full Name (Last, First, Middle Initial) / Full Organization Name	Type of Allocated Activity or Event:
	Voter Registration GOTV Voter ID Generic Campaign
·	Voter ID Generic Campaign
Mailing Address	Allocated Activity or Event Year-To-Date
trialing / table 555	
City State Zip Code	, , .
	M M / D D / Y Y Y
Purpose of Disbursement	Category/ Type Date
ECDEDAL QUADE LEGISLA CU	<u> </u>
FEDERAL SHARE + LEVIN SH	ARE = TOTAL AMOUNT
, , , , ,	. , , .
B. Full Name (Last, First, Middle Initial) / Full Organization Name	Type of Allocated Activity or Event:
D. Folk Halifo (Last, Filot, Middle Hillary Filot Significant Halifo	☐ Voter Registration ☐ GOTV
	Voter ID Generic Campaign
	Allocated Activity or Event Year-To-Date
Mailing Address	Allocated Activity of Evert Teal-10-Date
City State Zip Code	, , .
Purpose of Disbursement	Category/ Date
	Туре
FEDERAL SHARE + LEVIN SH	ARE = TOTAL AMOUNT
, , , , ,	
C. Full Name (Last, First, Middle Initial) / Full Organization Name	Type of Allocated Activity or Event:
	Voter Registration GOTV Voter ID Generic Campaign
Mailing Address	Allocated Activity or Event Year-To-Date
City State Zip Code	, , .
Dumana of Dichuranmort	M M / D / Y Y Y
Purpose of Disbursement	Category/ Type Date
FEDERAL SHARE + LEVIN SH	
FEDERAL SHARE T LEVIN SH	ANE - TOTAL AMOUNT
, , , ,	, , ,
SUBTOTAL of Shared Federal and Levin Activity This Page	ADE - TOTAL AMOUNT
FEDERAL SHARE + LEVIN SH	ARE = TOTAL AMOUNT
, , , , ,	, , 00.00
TOTAL This Period (last page for each line only)(Federal share to 30(a)(i) an	
FEDERAL SHARE	TOTAL AMOUNT
, , . LEVIN SH	AHE , ,
TOTAL This Period for the Levin Share	•

SCHEDULE L (FEC Form 3X)

AGGREGATION PAGE: LEVIN FUNDS

NAME OF COMMITTEE (IN FUIL)
URBAN PROBRESS POLITICAL ACTION COMMITTEE

NAME OF ACCOUNT

1		COLUMN A TOTAL THIS PERIOD	COLUMN B YEAR-TO-DATE
1.	RECEIPTS FROM PERSONS (a) Itemized(Use Schedule L-A)	, , 00,00	, , 00.00
	(b) Uniternized	, , 0000	, , 00,00
	(c) Total	, , 00.00	, , 2000
2.	OTHER RECEIPTS	, , 00.00	, , 0000
3.	TOTAL RECEIPTS(Add Lines 1c and 2)	, , 00.00	, , co.co
4.	TRANSFERS TO FEDERAL OR ALLOCATION ACCOUNT (Use Schedule L-B)		
	(a) Voter Registration	, , <i>00<u>.</u>00</i>	, , <i>00.00</i>
	(b) Voter ID	, , 0000	, , 0000
	(c) GOTV	, , <i>OD<u>.</u>O</i> O	, , 0000
	(d) Generic Campaign	, , <i>00<u>.0</u>0</i>	, , oo <u>.</u> co
	(e) Total	, , 00.00	, , 00.00
5.	OTHER DISBURSEMENTS	, , 00.00	, , 0000
6.	TOTAL DISBURSEMENTS(Add Lines 4e and 5)	, , 0000	, , 00,00
7.	BEGINNING CASH ON HAND(for Column B, use cash as of January 1st)	, , 00,00	, , 00.00
8.	RECEIPTS(from Line 3)	, , 00.00	, , 00.00
9.	SUBTOTAL(Add Lines 7 and 8)	, , 00.00	, , 00,00
10.	DISBURSEMENTS(From Line 6)	0000	, , 00.00 , , 00.00
11.	ENDING CASH ON HAND(Subtract Line 10 From Line 9)	0000	, , 00.00

SCHEDULE L-A (FEC Form 3X) ITEMIZED RECEIPTS OF LEVIN FUNDS

PAGE OF Use separate schedule(s) FOR LINE NUMBER: for each category of the 2 (check only one) Aggregation Page Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or fer commercial purposes, other than using the name end address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) PROGRESS POLITICAL ACTION COMMITTEE Full Name (Last, First, Middle Initial) / Full Organization Name D Mailing Address Amount of Each Receipt this Period City State Zip Code Name of Employer or Principal Place of Business Aggregate Year-to-Date Occupation Full Name (Last, First, Middle Initial) / Full Organization Name Date of Receipt В. Mailing Address Amount of Each Receipt this Period City State Zip Code Name of Employer or Principal Place of Business Aggregate Year-to-Date Occupation Full Name (Last, First, Middle Initial) / Full Organization Name Date of Receipt C. Mailing Address Amount of Each Receipt this Period City State Zip Code Name of Employer or Principal Place of Business Aggregate Year-to-Date Occupation Full Name (Last, First, Middle Initial) / Full Organization Name Date of Receipt D. Mailing Address Amount of Each Receipt this Period City State Zip Code Name of Employer or Principal Place of Business Aggregate Year-to-Date Occupation SUBTOTAL of Receipts This Page (optional).....

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

SCHEDULE L-B (FEC Form 3X) ITEMIZED DISBURSEMENTS OF LEVIN FUNDS

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

FOR LINE NUMBER: PAGE OF

(check only one)

4a 4c 5

OF LEVIN FUNDS	4b 4d 3	
Any information copied from such Reports and Statements may nor for commercial numoses, other than using the name and addr		
NAME OF COMMITTEE (IN FUII) URBAN PROGRESS POLITICA	AL ACTION COMA	u 17EE
Full Name (Last, First, Middle Initial) / Full Organization Name 1.		Date of Disbursement
Mailing Address		
City State	Zip Code	Amount of Each Disbursement this Period
Purpose of Disbursement		, , .
Full Name (Last, First, Middle Initial) / Full Organization Name 3.		Date of Disbursement
Mailing Address		
City State	Zip Code	Amount of Each Disbursement this Period
Purpose of Disbursement		, ,
Full Name (Last, First, Middle Initial) / Full Organization Name 2.		Date of Disbursement
Mailing Address		, M M / D D / Y Y Y
City State	Zip Code	Amount of Each Disbursement this Period
Purpose of Disbursement		, , .
Full Name (Last, First, Middle Initial) / Full Organization Name O.		Date of Disbursement
Mailing Address		M M / D D / Y Y Y Y .
City State	Zip Code	Amount of Each Disbursement this Period
Purpose of Disbursement		, , .
Full Name (Last, First, Middle Initial) / Full Organization Name	•	Date of Disbursement
Mailing Address		им / оо / ччч
City State	Zip Code	Amount of Each Disbursement this Period
Purpose of Disbursement		3 , .
SUBTOTAL of Disbursements This Page (optional)		, , <i>00.</i> d0
TOTAL This Period (last page this line number only)		0000

Walterboro, SC 29488

P.O. Box 257

Urban Progress PAC

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Federal Election Commission Washington, DC 20463 999 E Street NW

Form 3x

(8/2013)

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