

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS For Other Than An Authorized Committee

Office Use Only

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

ADDRESS (number and street) 3035 66 Ave N B3 Saint Petersburg FL 33702

2. FEC IDENTIFICATION NUMBER C C00571398 3. IS THIS REPORT NEW (N) OR AMENDED (A) x

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, Mar 20, Apr 20, May 20, Jun 20, Jul 20, Aug 20, Sep 20, Oct 20, Nov 20, Dec 20, Jan 31. (c) 12-Day PRE-Election Report for the: Primary, General, Runoff, Convention, Special. (d) 30-Day POST-Election Report for the: General, Runoff, Special. Election on 11/08/2016

5. Covering Period 10/20/2016 through 11/28/2016

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete. Lopez, Sandra, , , Type or Print Name of Treasurer

Signature of Treasurer Lopez, Sandra, , , [Electronically Filed] Date 05/10/2017

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 52 U.S.C. § 30109.

**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

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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="2016"/>	<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="8897.80"/>	
(c) Total Receipts (from Line 19) .....	<input type="text" value="53069.00"/>	<input type="text" value="383616.80"/>
(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="61966.80"/>	<input type="text" value="384616.80"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="50318.89"/>	<input type="text" value="372968.89"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="11647.91"/>	<input type="text" value="11647.91"/>
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

Write or Type Committee Name

**BlakPac**

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

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).....	40200.00	363748.80
(ii) Unitemized .....	12869.00	19868.00
(iii) TOTAL (add Lines 11(a)(i) and (ii).....▶	53069.00	383616.80
(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) .....	53069.00	383616.80
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)).....▶	53069.00	383616.80
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	53069.00	383616.80

**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 .....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures .....	25650.99	343800.99
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	25650.99	343800.99
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) .....	19000.00	23500.00
25. Coordinated Party Expenditures (52 U.S.C. § 30116(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 .....	5667.90	5667.90
(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)).....	5667.90	5667.90
29. Other Disbursements (Including Non-Federal Donations).....	0.00	0.00
30. Federal Election Activity (52 U.S.C. § 30101(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)) ..	50318.89	372968.89
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	50318.89	372968.89

**DETAILED SUMMARY PAGE**  
of Disbursements

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<b>III. Net Contributions/ Operating Expenditures</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Calendar Year-to-Date</b>
33. Total Contributions (other than loans) (from Line 11(d), page 3) .....	53069.00	383616.80
34. Total Contribution Refunds (from Line 28(d)) .....	5667.90	5667.90
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	47401.10	377948.90
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	25650.99	343800.99
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	25650.99	343800.99

**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 6 OF 21
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<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. Bailey, Mona L., , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 6200 Lake Way  
 City N Richlnd Hls State TX Zip Code 76180  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Retired Occupation (for Individual) Co-Chair of Public Policy Committee  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 10 / 20 / 2016  
**Transaction ID : SA11AI.4968**  
 Amount of Each Receipt this Period 500.00  
 Memo Item  
 Donation

**B. Chatterjee, Ellen, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2324 Willow Drop Way  
 City OVIEDO State FL Zip Code 32766  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Retired Occupation (for Individual) Retired  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 11 / 02 / 2016  
**Transaction ID : SA11AI.5019**  
 Amount of Each Receipt this Period 500.00  
 Memo Item  
 Donation

**C. Chilcutt, Trisha, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 127 Routt  
 City SAN ANTONIO State TX Zip Code 78209  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Chilcutt Properties Occupation (for Individual) Owner/Property Man  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 11 / 02 / 2016  
**Transaction ID : SA11AI.5020**  
 Amount of Each Receipt this Period 500.00  
 Memo Item  
 Donation

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1500.00
<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 21
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)  
**BlakPac**

**A. Clow, Eric, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 27660 Central Drive  
 City Los Altos Hills State CA Zip Code 94022  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Hina group Inc Occupation (for Individual) Chief Financial Officer  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 10 / 25 / 2016  
**Transaction ID : SA11AI.5025**  
 Amount of Each Receipt this Period 5000.00  
 Memo Item  
 Donation

**B. Cone Distributing Inc**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 500 NW 27th Ave  
 City Ocala State FL Zip Code 34475  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Occupation (for Individual)  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 2500.00

Date of Receipt 10 / 26 / 2016  
**Transaction ID : SA11AI.5027**  
 Amount of Each Receipt this Period 2500.00  
 Memo Item  
 Donation

**C. Farrell, George, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1125 2nd Ave S  
 City Saint Petersburg State FL Zip Code 33715  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) American Security Trust Occupation (for Individual) Consultant  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 170025.00

Date of Receipt 11 / 01 / 2016  
**Transaction ID : SA11AI.5072**  
 Amount of Each Receipt this Period 5000.00  
 Memo Item  
 In-kind - Management, Social Media Development

<b>SUBTOTAL</b> of Receipts This Page (optional).....	12500.00
<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 8 OF 21
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)  
**BlakPac**

**A. Gonzalez, Edward, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 610 West End Avenue  
 City NEW YORK State NY Zip Code 10024  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Self-Employee Occupation (for Individual) Attorney  
 Receipt For:  Primary  General  Other (specify)  Aggregate Year-to-Date 250.00

Date of Receipt 10 / 27 / 2016  
**Transaction ID : SA11AI.5090**  
 Amount of Each Receipt this Period 250.00  
 Memo Item  
 Donation

**B. Hetland, Donna, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address P.O. Box 876  
 City MONTGOMERY State TX Zip Code 77356  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Retired Occupation (for Individual) Retired  
 Receipt For:  Primary  General  Other (specify)  Aggregate Year-to-Date 1000.00

Date of Receipt 10 / 25 / 2016  
**Transaction ID : SA11AI.5117**  
 Amount of Each Receipt this Period 1000.00  
 Memo Item  
 Donation

**C. Hetland, Donna, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address P.O. Box 876  
 City MONTGOMERY State TX Zip Code 77356  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Retired Occupation (for Individual) Retired  
 Receipt For:  Primary  General  Other (specify)  Aggregate Year-to-Date 1500.00

Date of Receipt 10 / 25 / 2016  
**Transaction ID : SA11AI.5118**  
 Amount of Each Receipt this Period 500.00  
 Memo Item  
 Donation

**SUBTOTAL** of Receipts This Page (optional)..... 1750.00  
**TOTAL** 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:	PAGE 9 OF 21
	(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"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

**A. Hetland, Donna, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Mailing Address P.O. Box 876

City MONTGOMERY	State TX	Zip Code 77356
--------------------	-------------	-------------------

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

Name of Employer (for Individual) Retired	Occupation (for Individual) Retired
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2000.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		25		2016

**Transaction ID : SA11AI.5119**

Amount of Each Receipt this Period  
500.00

Memo Item  
Donation

**B. Hetland, Donna, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Mailing Address P.O. Box 876

City MONTGOMERY	State TX	Zip Code 77356
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Retired	Occupation (for Individual) Retired
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2350.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		29		2016

**Transaction ID : SA11AI.5120**

Amount of Each Receipt this Period  
350.00

Memo Item  
Donation

**C. Hetland, Donna, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Mailing Address P.O. Box 876

City MONTGOMERY	State TX	Zip Code 77356
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Retired	Occupation (for Individual) Retired
--	--

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
2850.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
11		02		2016

**Transaction ID : SA11AI.5121**

Amount of Each Receipt this Period  
500.00

Memo Item  
Donation

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1350.00
<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 10 OF 21
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

**A. Hetland, Donna, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address P.O. Box 876  
 City MONTGOMERY State TX Zip Code 77356  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Retired Occupation (for Individual) Retired  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 3350.00

Date of Receipt 11 / 03 / 2016  
**Transaction ID : SA11AI.5123**  
 Amount of Each Receipt this Period 500.00  
 Memo Item  
 Donation

**B. Kilgore, Manley, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 12904 Bay Plantation Drive  
 City JACKSONVILLE State FL Zip Code 32223  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Self-Employee Occupation (for Individual) Business  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 10 / 25 / 2016  
**Transaction ID : SA11AI.5161**  
 Amount of Each Receipt this Period 250.00  
 Memo Item  
 Donation

**C. Kilgore, Manley, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 12904 Bay Plantation Drive  
 City JACKSONVILLE State FL Zip Code 32223  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Self-Employee Occupation (for Individual) Business  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 10 / 27 / 2016  
**Transaction ID : SA11AI.5162**  
 Amount of Each Receipt this Period 100.00  
 Memo Item  
 Donation

<b>SUBTOTAL</b> of Receipts This Page (optional).....	850.00
<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 11 OF 21
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

**A. Lee, Michael, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 8600 Brodie Lane  
 City Austin State TX Zip Code 78745  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Self-Employee Occupation (for Individual) Lawyer  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 9200.00

Date of Receipt 11 / 09 / 2016  
**Transaction ID : SA11AI.5178**  
 Amount of Each Receipt this Period 9000.00  
 Memo Item  
 Donation

**B. Long, Charles, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1903 peyco drive north  
 City arlington State TX Zip Code 76001  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Reliable/Construction Occupation (for Individual) Real Estate  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 2500.00

Date of Receipt 11 / 04 / 2016  
**Transaction ID : SA11AI.5182**  
 Amount of Each Receipt this Period 2500.00  
 Memo Item  
 Donation

**C. Lopez, Sandra, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 3035 66 Ave N B3  
 City Saint Petersburg State FL Zip Code 33702  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) American Security Trust Occupation (for Individual) Consultant  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 57500.00

Date of Receipt 11 / 01 / 2016  
**Transaction ID : SA11AI.5185**  
 Amount of Each Receipt this Period 5000.00  
 Memo Item  
 In-kind - Web Design, Graphic Design, Media, accounting

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	16500.00
<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 12 OF 21
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

**A. Lyford, Laurie, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 9529 Lake Washington Blvd NE  
 City Bellevue State WA Zip Code 98004  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Retired Occupation (for Individual) Retired  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 10 / 26 / 2016  
**Transaction ID : SA11AI.5187**  
 Amount of Each Receipt this Period 500.00  
 Memo Item  
 Donation

**B. NDS USA LLC**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 512 E. Silver Springs Blvd  
 City Ocala State FL Zip Code 34470  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Occupation (for Individual)  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 4000.00

Date of Receipt 10 / 28 / 2016  
**Transaction ID : SA11AI.5231**  
 Amount of Each Receipt this Period 4000.00  
 Memo Item  
 Donation

**C. Oates, Kathleen, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 817 Tall Pines Dr  
 City MAGNOLIA State TX Zip Code 77354  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Retired Occupation (for Individual) Retired  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 10 / 25 / 2016  
**Transaction ID : SA11AI.5235**  
 Amount of Each Receipt this Period 500.00  
 Memo Item  
 Donation

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	5000.00
<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 13 OF 21
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

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

**A. Pell, Dolores, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 3703 Dustin Tr  
 City Arlington State TX Zip Code 76016  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Republican Women of Arlinton Occupation (for Individual) VP, Finance  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 10 / 20 / 2016  
**Transaction ID : SA11AI.5252**  
 Amount of Each Receipt this Period 250.00  
 Memo Item  
 Donation

**B. Tate, Stanley, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1175 NE 125th Street, Suite 102  
 City MIAMI State FL Zip Code 33161  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Self-Employee Occupation (for Individual) Business  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 10 / 26 / 2016  
**Transaction ID : SA11AI.5319**  
 Amount of Each Receipt this Period 250.00  
 Memo Item  
 Donation

**C. Zinke, Ernest, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1909 Armond Lane  
 City SILVER SPRING State MD Zip Code 20905  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Self-Employee Occupation (for Individual) Business  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 11 / 02 / 2016  
**Transaction ID : SA11AI.5385**  
 Amount of Each Receipt this Period 250.00  
 Memo Item  
 Donation

<b>SUBTOTAL</b> of Receipts This Page (optional).....	750.00
<b>TOTAL</b> This Period (last page this line number only).....	40200.00

**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"/> 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. Capital Square Funding Group, LLC**

Mailing Address P.O. Box 10853

City  
Raleigh

State  
NC

Zip Code  
27605

Purpose of Disbursement  
Mailing Fee and Fundraising Fee

003

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			28			2016			

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.5388

Amount of Each Disbursement this Period

14198.49
----------

Memo Item

Full Name (Last, First, Middle Initial)

**B. Farrell, George, , ,**

Mailing Address 1125 2nd Ave S

City  
Saint Petersburg

State  
FL

Zip Code  
33715

Purpose of Disbursement  
In-kind - Management, Social Media Development

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify)

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			01			2016			

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.5073

Amount of Each Disbursement this Period

5000.00
---------

Memo Item

Full Name (Last, First, Middle Initial)

**C. Lopez, Sandra, , ,**

Mailing Address 3035 66 Ave N  
B3

City  
Saint Petersburg

State  
FL

Zip Code  
33702

Purpose of Disbursement  
In-kind - Web Design, Graphic Design, Media, accounting

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			01			2016			

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.5188

Amount of Each Disbursement this Period

5000.00
---------

Memo Item

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

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

24198.49
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**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"/> 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**

**A. Righters Group, LLC**

Full Name (Last, First, Middle Initial)

Mailing Address 1807 South Church Street  
Suite 108, PMB #221

City Smithfield State VA Zip Code 23430

Purpose of Disbursement E-mail deploy-Share revenue

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2016  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 10 / 25 / 2016

FEC Identification Number: C

Transaction ID : SB21B.5389

Amount of Each Disbursement this Period: 452.50

Memo Item

**B. SPALDING, CARLA ARLENE, , ,**

Full Name (Last, First, Middle Initial)

Mailing Address 1095 MILITARY TRAIL #2191

City JUPITER State FL Zip Code 33468

Purpose of Disbursement Contribution

Candidate Name SPALDING, CARLA ARLENE, , ,

Office Sought:  House  Senate  President

Disbursement For: 2016  Primary  General  Other (specify) ▼

State: FL District: 18

Date of Disbursement: 10 / 29 / 2016

FEC Identification Number: C H6FL18121

Transaction ID : SB21B.5390

Amount of Each Disbursement this Period: 1000.00

Memo Item

**C.**

Full Name (Last, First, Middle Initial)

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:

FEC Identification Number: C

Amount of Each Disbursement this Period:

Memo Item

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	1452.50
<b>TOTAL</b> This Period (last page this line number only).....▶	25650.99

**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 type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" 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**

**A. Farrell, George, , ,**

Full Name (Last, First, Middle Initial)

Mailing Address 1125 2nd Ave S

City Saint Petersburg State FL Zip Code 33715

Purpose of Disbursement Reimbursement for Deposits and Rent of New Office Location

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 11 / 20 / 2016

FEC Identification Number: C

Transaction ID : SB28A.5404

Amount of Each Disbursement this Period: 5667.90

Memo Item

**B.**

Full Name (Last, First, Middle Initial)

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:

FEC Identification Number: C

Amount of Each Disbursement this Period:

Memo Item

**C.**

Full Name (Last, First, Middle Initial)

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:

FEC Identification Number: C

Amount of Each Disbursement this Period:

Memo Item

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	5667.90
<b>TOTAL</b> This Period (last page this line number only).....▶	5667.90



**SCHEDULE E (FEC Form 3X)  
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) <b>BlakPac</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px;"> <span style="font-size: 1.5em; font-weight: bold; border: 1px solid black; display: inline-block; width: 20px; height: 20px; text-align: center; vertical-align: middle;">C</span> <span style="margin-left: 5px;">C00571398</span> </div>
---	---

Check if  24-hour report  48-hour report ▶  New report  Amends report filed on M M / D D / Y Y Y Y Y Y

Full Name of Payee <input type="checkbox"/> Memo Item <b>Facebook</b>	Date of Public Distribution/Dissemination <span style="font-size: 1.2em;">M M / D D / Y Y Y Y Y Y</span> <div style="border: 1px solid black; padding: 2px; display: inline-block;">11 / 08 / 2016</div>			
Mailing Address <b>1 Hacker Way</b>	Amount <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px; text-align: right;">5000.00</div>			
<table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:33%; padding: 2px;">City <b>Menlo Park</b></td> <td style="width:17%; padding: 2px;">State <b>CA</b></td> <td style="width:50%; padding: 2px;">Zip Code <b>94025</b></td> </tr> </table>		City <b>Menlo Park</b>	State <b>CA</b>	Zip Code <b>94025</b>
City <b>Menlo Park</b>		State <b>CA</b>	Zip Code <b>94025</b>	
Purpose of Expenditure <b>2 Ads targeting minorities</b>	Category/Type <span style="border: 1px solid black; padding: 2px; display: inline-block;">004</span>			
Name of Federal Candidate: <b>TRUMP, DONALD J., ,</b>	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President District: <u>00</u> State: _____			
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px; text-align: right;">5000.00</div>	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____			

Full Name of Payee <input type="checkbox"/> Memo Item <b>Facebook</b>	Date of Public Distribution/Dissemination <span style="font-size: 1.2em;">M M / D D / Y Y Y Y Y Y</span> <div style="border: 1px solid black; padding: 2px; display: inline-block;">11 / 08 / 2016</div>			
Mailing Address <b>1 Hacker Way</b>	Amount <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px; text-align: right;">1000.00</div>			
<table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:33%; padding: 2px;">City <b>Menlo Park</b></td> <td style="width:17%; padding: 2px;">State <b>CA</b></td> <td style="width:50%; padding: 2px;">Zip Code <b>94025</b></td> </tr> </table>		City <b>Menlo Park</b>	State <b>CA</b>	Zip Code <b>94025</b>
City <b>Menlo Park</b>		State <b>CA</b>	Zip Code <b>94025</b>	
Purpose of Expenditure <b>2 Ad targeting district 18</b>	Category/Type <span style="border: 1px solid black; padding: 2px; display: inline-block;">004</span>			
Name of Federal Candidate: <b>BARTLEY, LORI ANITA MRS., ,</b>	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President District: <u>18</u> State: <u>TX</u>			
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px; text-align: right;">1000.00</div>	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____			

<b>(a) SUBTOTAL</b> of Itemized Independent Expenditures ..... ▶	<div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px; text-align: right;">6000.00</div>
<b>(a) SUBTOTAL</b> of Unitemized Independent Expenditures ..... ▶	<div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px; text-align: right;"> </div>
<b>(a) TOTAL</b> Independent Expenditures ..... ▶	<div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px; text-align: right;"> </div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

\_\_\_\_\_  
 Signature
 

 [Electronically Filed]
 

 Date M M / D D / Y Y Y Y Y Y  

05 / 10 / 2017

**SCHEDULE E (FEC Form 3X)  
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) <b>BlakPac</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <b>C</b> C00571398
---	--

Check if  24-hour report  48-hour report  New report Amends report filed on  /  /

Full Name of Payee <b>Facebook</b> <input type="checkbox"/> Memo Item	Date of Public Distribution/Dissemination <input type="text"/> / <input type="text"/> / <input type="text"/>
Mailing Address <b>1 Hacker Way</b>	Amount <input type="text"/> 1000.00 <b>Transaction ID : SE.5394</b> Date of Disbursement or Obligation <input type="text"/> / <input type="text"/> / <input type="text"/>
City <b>Menlo Park</b> State <b>CA</b> Zip Code <b>94025</b>	
Purpose of Expenditure <b>2 Ads targeting Colorado</b> Category/Type <input type="text"/> <b>004</b>	

Name of Federal Candidate: <b>Glenn, Darryl, , ,</b> <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <b>CO</b>
Calendar Year-To-Date Per Election for Office Sought <input type="text"/> 1000.00	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____

Full Name of Payee <b>Facebook</b> <input type="checkbox"/> Memo Item	Date of Public Distribution/Dissemination <input type="text"/> / <input type="text"/> / <input type="text"/>
Mailing Address <b>1 Hacker Way</b>	Amount <input type="text"/> 1000.00 <b>Transaction ID : SE.5395</b> Date of Disbursement or Obligation <input type="text"/> / <input type="text"/> / <input type="text"/>
City <b>Menlo Park</b> State <b>CA</b> Zip Code <b>94025</b>	
Purpose of Expenditure <b>2 Ads targeting district 1</b> Category/Type <input type="text"/> <b>004</b>	

Name of Federal Candidate: <b>Stockham, Casper, , ,</b> <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House District: <b>01</b> <input type="checkbox"/> President <input type="checkbox"/> Senate State: <b>CO</b>
Calendar Year-To-Date Per Election for Office Sought <input type="text"/> 3000.00	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____

<b>(a) SUBTOTAL</b> of Itemized Independent Expenditures .....	<input type="text"/> 2000.00
<b>(a) SUBTOTAL</b> of Unitemized Independent Expenditures .....	<input type="text"/>
<b>(a) TOTAL</b> Independent Expenditures .....	<input type="text"/>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

*Lopez, Sandra, , ,*

**[Electronically Filed]**

Date

05 /  10 /  2017

Signature

**SCHEDULE E (FEC Form 3X)  
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) <b>BlakPac</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px;"> <span style="font-size: 1.2em; font-weight: bold; border: 1px solid black; display: inline-block; width: 20px; height: 20px; text-align: center; vertical-align: middle;">C</span> <span style="margin-left: 5px;">C00571398</span> </div>
---	---

Check if  24-hour report     48-hour report     New report    Amends report filed on   /  /  

Full Name of Payee <input type="checkbox"/> Memo Item <b>Facebook</b>	Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">  /  /  </span>			
Mailing Address    1 Hacker Way	Amount <div style="border: 1px solid black; padding: 2px; text-align: right;"> <span style="font-size: 1.2em;">1000.00</span> </div>			
<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:33%;">City Menlo Park</td> <td style="width:17%;">State CA</td> <td style="width:50%;">Zip Code 94025</td> </tr> </table>		City Menlo Park	State CA	Zip Code 94025
City Menlo Park		State CA	Zip Code 94025	
Purpose of Expenditure 2 Ads targeting district 7				
Name of Federal Candidate: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose VAUGHN, CORROGAN R, , ,	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> President <input type="checkbox"/> Senate    District: <u>07</u> State: <u>MD</u>			
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;"> <span style="font-size: 1.2em;">1000.00</span> </div>	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____			

Full Name of Payee <input type="checkbox"/> Memo Item <b>Twitter</b>	Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">  /  /  </span>			
Mailing Address    1355 Market Street	Amount <div style="border: 1px solid black; padding: 2px; text-align: right;"> <span style="font-size: 1.2em;">5000.00</span> </div>			
<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:33%;">City San Francisco</td> <td style="width:17%;">State CA</td> <td style="width:50%;">Zip Code 94103</td> </tr> </table>		City San Francisco	State CA	Zip Code 94103
City San Francisco		State CA	Zip Code 94103	
Purpose of Expenditure 1 ad targeting minorities nationwide				
Name of Federal Candidate: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose TRUMP, DONALD J., , ,	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate    District: <u>00</u> State: _____			
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;"> <span style="font-size: 1.2em;">10000.00</span> </div>	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____			

<b>(a) SUBTOTAL</b> of Itemized Independent Expenditures ..... ▶	<div style="border: 1px solid black; padding: 2px; text-align: right;"> <span style="font-size: 1.2em;">6000.00</span> </div>
<b>(a) SUBTOTAL</b> of Unitemized Independent Expenditures ..... ▶	<div style="border: 1px solid black; padding: 2px; text-align: right;"> <span style="font-size: 1.2em;"> </span> </div>
<b>(a) TOTAL</b> Independent Expenditures ..... ▶	<div style="border: 1px solid black; padding: 2px; text-align: right;"> <span style="font-size: 1.2em;"> </span> </div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Signature Lopez, Sandra, , ,    *[Electronically Filed]*    Date   /  /

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full)
BlakPac
FEC IDENTIFICATION NUMBER
C C00571398

Check if 24-hour report 48-hour report
New report Amends report filed on

Full Name of Payee: Twitter
Mailing Address: 1355 Market Street
City: San Francisco, State: CA, Zip Code: 94103
Purpose of Expenditure: 4 Ads targeting District 1
Category/Type: 004
Name of Federal Candidate: Stockham, Casper, ,
Support: [X]
Office Sought: House
District: 01, State: CO
Amount: 2000.00
Transaction ID: SE.5399
Date of Disbursement or Obligation: 11/01/2016
Disbursement For: General 2016

Full Name of Payee: Twitter
Mailing Address: 1355 Market Street
City: San Francisco, State: CA, Zip Code: 94103
Purpose of Expenditure: 2 ads targeting District 7
Category/Type: 004
Name of Federal Candidate: VAUGHN, CORROGAN R, ,
Support: [X]
Office Sought: House
District: 07, State: MD
Amount: 1000.00
Transaction ID: SE.5398
Date of Disbursement or Obligation: 11/06/2016
Disbursement For: General 2016

(a) SUBTOTAL of Itemized Independent Expenditures: 3000.00
(a) SUBTOTAL of Unitemized Independent Expenditures
(a) TOTAL Independent Expenditures

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Lopez, Sandra, ,

[Electronically Filed]

Date

05 / 10 / 2017

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full)
BlakPac
FEC IDENTIFICATION NUMBER
C C00571398

Check if 24-hour report 48-hour report
New report Amends report filed on

Full Name of Payee
Twitter
Mailing Address
1355 Market Street
City
San Francisco State
CA Zip Code
94103
Purpose of Expenditure
2 Ads targeting Colorado
Category/Type
004

Date of Public Distribution/Dissemination
11 / 08 / 2016
Amount
1000.00
Transaction ID : SE.5400
Date of Disbursement or Obligation
11 / 06 / 2016

Name of Federal Candidate:
Glenn, Darryl, ,
Support
Oppose
Office Sought:
House
Senate
District:
State: CO

Disbursement For:
Primary
General
Other (specify)

Full Name of Payee
Twitter
Mailing Address
1355 Market Street
City
San Francisco State
CA Zip Code
94103
Purpose of Expenditure
2 Ads targeting district 18
Category/Type
004

Date of Public Distribution/Dissemination
11 / 08 / 2016
Amount
1000.00
Transaction ID : SE.5402
Date of Disbursement or Obligation
11 / 06 / 2016

Name of Federal Candidate:
BARTLEY, LORI ANITA MRS., ,
Support
Oppose
Office Sought:
House
Senate
District: 18
State: TX

Disbursement For:
Primary
General
Other (specify)

Table with 2 columns: Description and Amount.
(a) SUBTOTAL of Itemized Independent Expenditures 2000.00
(a) SUBTOTAL of Unitemized Independent Expenditures
(a) TOTAL Independent Expenditures 19000.00

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Lopez, Sandra, ,
Signature

[Electronically Filed]

Date 05 / 10 / 2017