

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) 14910 N Dale Mabry Hwy Suite 340162 Tampa FL 33694

Check if different than previously reported. (ACC)

2. FEC IDENTIFICATION NUMBER CITY STATE ZIP CODE

C C00571398

3. IS THIS REPORT NEW OR AMENDED

4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

- April 15 Quarterly Report (Q1)
July 15 Quarterly Report (Q2)
October 15 Quarterly Report (Q3)
January 31 Year-End Report (YE)
July 31 Mid-Year Report (Non-election Year Only) (MY)
Termination Report (TER)

- (b) Monthly Report Due On: Feb 20 (M2), Mar 20 (M3), Apr 20 (M4), May 20 (M5), Jun 20 (M6), Jul 20 (M7), Aug 20 (M8), Sep 20 (M9), Oct 20 (M10), Nov 20 (M11), Dec 20 (M12), Jan 31 (YE)

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

Election on MM/DD/YYYY in the State of

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

Election on 11/08/2016 in the State of FL

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 12/08/2016

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

Table with 10 columns for Office Use Only

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 05/2016)

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="5740.00"/>	<input type="text" value="5740.00"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="5529.00"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="53419.00"/>	<input type="text" value="117523.00"/>
(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="58948.00"/>	<input type="text" value="123263.00"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="53418.89"/>	<input type="text" value="117733.89"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="5529.11"/>	<input type="text" value="5529.11"/>
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed BY 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. 05/2016)

Write or Type Committee Name

BlakPac

Report Covering the Period: From: M M / D D / Y Y Y Y Y Y
10 / 20 / 2016 To: M M / D D / Y Y Y Y Y Y
11 / 28 / 2016

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	99975.00
(ii) Unitemized	13219.00	17548.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	53419.00	117523.00
(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)	53419.00	117523.00
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)).....▶	53419.00	117523.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	53419.00	117523.00

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	27750.99	86250.99
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	27750.99	86250.99
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	1000.00	1000.00
24. Independent Expenditures (use Schedule E)	19000.00	23000.00
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	7482.90
(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	7482.90
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)) ..	53418.89	117733.89
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	53418.89	117733.89

DETAILED SUMMARY PAGE
of Disbursements

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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)	53419.00	117523.00
34. Total Contribution Refunds (from Line 28(d))	5667.90	7482.90
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	47751.10	110040.10
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	27750.99	86250.99
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	27750.99	86250.99

**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 22
	<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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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) Self Employee Occupation (for Individual) Business
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 10 / 20 / 2016
Transaction ID : SA11AI.5450
 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) Self-Employee Occupation (for Individual) Business
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 11 / 02 / 2016
Transaction ID : SA11AI.5283
 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) Self-Employee Occupation (for Individual) Business
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 11 / 02 / 2016
Transaction ID : SA11AI.5304
 Amount of Each Receipt this Period 500.00
 Memo Item
 Donation

SUBTOTAL of Receipts This Page (optional).....	1500.00
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: (check only one)	PAGE 7 OF 22
	<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) Self-Employee Occupation (for Individual) Business
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date **5000.00**

Date of Receipt **10 / 25 / 2016**
Transaction ID : SA11AI.4844
 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.5454
 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 14910 N Dale Mabry Hwy Suite 340162
 City Tampa State FL Zip Code 33694
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self-Employee Occupation (for Individual) Consultant
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date **33336.00**

Date of Receipt **11 / 01 / 2016**
Transaction ID : SA11AI.5512
 Amount of Each Receipt this Period **5000.00**
 Memo Item
 In-kind - Management

SUBTOTAL of Receipts This Page (optional).....	12500.00
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: (check only one)	PAGE 8 OF 22
	<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) Businessman
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 10 / 27 / 2016
Transaction ID : SA11AI.4898
 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) Self-Employee Occupation (for Individual) Business
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 10 / 25 / 2016
Transaction ID : SA11AI.4823
 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) Self-Employee Occupation (for Individual) Business
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1500.00

Date of Receipt 10 / 25 / 2016
Transaction ID : SA11AI.4845
 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: (check only one)	PAGE 9 OF 22
	<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. 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) Self-Employee Occupation (for Individual) Business
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1850.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 29 / 2016
Transaction ID : SA11AI.5045
 Amount of Each Receipt this Period 350.00
 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) Self-Employee Occupation (for Individual) Business
 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
 11 / 02 / 2016
Transaction ID : SA11AI.5294
 Amount of Each Receipt this Period 500.00
 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) Self-Employee Occupation (for Individual) Business
 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 / 03 / 2016
Transaction ID : SA11AI.5364
 Amount of Each Receipt this Period 500.00
 Memo Item
 Donation

SUBTOTAL of Receipts This Page (optional).....	1350.00
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: (check only one)	PAGE 10 OF 22
	<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. 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.4805
 Amount of Each Receipt this Period 250.00
 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 ▼ 350.00

Date of Receipt 10 / 27 / 2016
Transaction ID : SA11AI.4897
 Amount of Each Receipt this Period 100.00
 Memo Item
 Donation

C. Lee, Michael, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8600 Brodie Lane #928
 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 ▼ 9150.00

Date of Receipt 11 / 09 / 2016
Transaction ID : SA11AI.5464
 Amount of Each Receipt this Period 9000.00
 Memo Item
 Donation

SUBTOTAL of Receipts This Page (optional).....	9350.00
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: (check only one)	PAGE 11 OF 22
	<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. 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) Self-Employee Occupation (for Individual) Businessman
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date 2500.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11AI.5416
 Amount of Each Receipt this Period 2500.00
 Memo Item
 Donation

B. Lopez, Sandra, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 14910 N Dale Mabry Hwy
 City Tampa State FL Zip Code 33694
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self-Employee Occupation (for Individual) Consultant
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date 19874.00

Date of Receipt 11 / 01 / 2016
Transaction ID : SA11AI.5513
 Amount of Each Receipt this Period 5000.00
 Memo Item
 In-kind - Management

C. 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) Self-Employee Occupation (for Individual) Business
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date 500.00

Date of Receipt 10 / 26 / 2016
Transaction ID : SA11AI.4602
 Amount of Each Receipt this Period 500.00
 Memo Item
 Donation

SUBTOTAL of Receipts This Page (optional).....	8000.00
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: (check only one)	PAGE 12 OF 22
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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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) Self-Employee Occupation (for Individual) Business
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 10 / 26 / 2016
Transaction ID : SA11AI.4872
 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.5456
 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) Self-Employee Occupation (for Individual) Business
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 10 / 25 / 2016
Transaction ID : SA11AI.4803
 Amount of Each Receipt this Period 500.00
 Memo Item
 Donation

SUBTOTAL of Receipts This Page (optional).....	5000.00
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: (check only one)	PAGE 13 OF 22
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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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) Self-Employee Occupation (for Individual) Business
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 10 / 20 / 2016
Transaction ID : SA11AI.5451
 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.4869
 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.5290
 Amount of Each Receipt this Period 250.00
 Memo Item
 Donation

SUBTOTAL of Receipts This Page (optional).....	750.00
TOTAL 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

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. Capital Square Funding Group, LLC

Mailing Address P.O. Box 10853

City
Raleigh

State
NC

Zip Code
27605

Purpose of Disbursement
Mailing List Fee

003

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2017
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	1		2	8		2	0	1	6

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.5494

Amount of Each Disbursement this Period

[REDACTED] 14198.49

Memo Item

Full Name (Last, First, Middle Initial)

B. Farrell, George, , ,

Mailing Address 14910 N Dale Mabry Hwy
Suite 340162

City
Tampa

State
FL

Zip Code
33694

Purpose of Disbursement
In-kind - Management

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
1	1		0	1		2	0	1	6

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.5516

Amount of Each Disbursement this Period

[REDACTED] 5000.00

Memo Item

Full Name (Last, First, Middle Initial)

C. Gravis Marketing

Mailing Address 910 Belle Ave
#1180

City
Winter Springs

State
FL

Zip Code
32708

Purpose of Disbursement
Media Advertisement

004

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
1	1		0	2		2	0	1	6

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.5501

Amount of Each Disbursement this Period

[REDACTED] 3100.00

Memo Item

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

[REDACTED] 22298.49

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

[REDACTED]

**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. Lopez, Sandra, , ,

Mailing Address 14910 N Dale Mabry Hwy

City
Tampa

State
FL

Zip Code
33694

Purpose of Disbursement
In-kind - Management

Candidate Name

Office Sought: House
 Senate
 President

State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

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

FEC Identification Number

C []
Transaction ID : SB21B.5515
Amount of Each Disbursement this Period
[] 5000.00

Memo Item

Full Name (Last, First, Middle Initial)

B. Righters Group, LLC

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

State: District:

Disbursement For: 2016
 Primary General
 Other (specify)

003
Category/
Type

Date of Disbursement

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

FEC Identification Number

C []
Transaction ID : SB21B.4661
Amount of Each Disbursement this Period
[] 452.50

Memo Item

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House
 Senate
 President

State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y

FEC Identification Number

C []
Amount of Each Disbursement this Period
[]

Memo Item

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

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

5452.50

27750.99

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 checked="" 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. 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 : SB23.5482

Amount of Each Disbursement this Period: 1000.00

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

SUBTOTAL of Disbursements This Page (optional).....▶	1000.00
TOTAL This Period (last page this line number only).....▶	1000.00

**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 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)

Date of Disbursement: / /

Mailing Address: 14910 N Dale Mabry Hwy Suite 340162

City: Tampa State: FL Zip Code: 33694

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: _____

FEC Identification Number: _____

Transaction ID : **SB28A.5519**

Amount of Each Disbursement this Period:

Memo Item

B.

Full Name (Last, First, Middle Initial)

Date of Disbursement: / /

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: _____ District: _____

FEC Identification Number: _____

Amount of Each Disbursement this Period:

Memo Item

C.

Full Name (Last, First, Middle Initial)

Date of Disbursement: / /

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: _____ District: _____

FEC Identification Number: _____

Amount of Each Disbursement this Period:

Memo Item

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

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

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

NAME OF COMMITTEE (In Full) BlakPac	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px;"> C C00571398 </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 Facebook	Date of Public Distribution/Dissemination <div style="border: 1px solid black; padding: 2px;"> M M / D D / Y Y Y Y Y Y 11 / 11 / 2016 </div>						
Mailing Address 1 Hacker Way	Amount <div style="border: 1px solid black; padding: 2px; text-align: right;"> 5000.00 </div> Transaction ID : SE.5510 Date of Disbursement or Obligation <div style="border: 1px solid black; padding: 2px;"> M M / D D / Y Y Y Y Y Y 10 / 24 / 2016 </div>						
<table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:33%;">City</td> <td style="width:33%;">State</td> <td style="width:34%;">Zip Code</td> </tr> <tr> <td>Menlo Park</td> <td>CA</td> <td>94025</td> </tr> </table>		City	State	Zip Code	Menlo Park	CA	94025
City		State	Zip Code				
Menlo Park	CA	94025					
Purpose of Expenditure Donald Trump Presidential Race							
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;"> 10000.00 </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 Facebook	Date of Public Distribution/Dissemination <div style="border: 1px solid black; padding: 2px;"> M M / D D / Y Y Y Y Y Y 11 / 08 / 2016 </div>						
Mailing Address 1 Hacker Way	Amount <div style="border: 1px solid black; padding: 2px; text-align: right;"> 1000.00 </div> Transaction ID : SE.5476 Date of Disbursement or Obligation <div style="border: 1px solid black; padding: 2px;"> M M / D D / Y Y Y Y Y Y 11 / 06 / 2016 </div>						
<table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:33%;">City</td> <td style="width:33%;">State</td> <td style="width:34%;">Zip Code</td> </tr> <tr> <td>Menlo Park</td> <td>CA</td> <td>94025</td> </tr> </table>		City	State	Zip Code	Menlo Park	CA	94025
City		State	Zip Code				
Menlo Park	CA	94025					
Purpose of Expenditure Ads							
Name of Federal Candidate: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose BARTLEY, LORI ANITA MRS. , , ,	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> President <input type="checkbox"/> Senate 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; text-align: right;"> 2500.00 </div>	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____						

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

Lopez, Sandra, , ,
 Signature

 [Electronically Filed]

 Date M M / D D / Y Y Y Y Y Y
 12 / 08 / 2016

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: Facebook
Mailing Address: 1 Hacker Way
City: Menlo Park, State: CA, Zip Code: 94025
Purpose of Expenditure: Ads, Category/Type: 004
Date of Public Distribution/Dissemination: 11/06/2016
Amount: 1000.00
Transaction ID: SE.5477

Name of Federal Candidate: Glenn, Darryl,
Support checked, Oppose unchecked
Office Sought: House unchecked, Senate checked, State: CO
Disbursement For: Primary unchecked, General checked, Other unchecked
Calendar Year-To-Date Per Election for Office Sought: 2000.00

Full Name of Payee: Facebook
Mailing Address: 1 Hacker Way
City: Menlo Park, State: CA, Zip Code: 94025
Purpose of Expenditure: Ads, Category/Type: 004
Date of Public Distribution/Dissemination: 11/06/2016
Amount: 1000.00
Transaction ID: SE.5478

Name of Federal Candidate: Stockham, Casper,
Support checked, Oppose unchecked
Office Sought: House checked, Senate unchecked, State: CO
Disbursement For: Primary unchecked, General checked, Other unchecked
Calendar Year-To-Date Per Election for Office Sought: 3000.00

(a) SUBTOTAL of Itemized Independent Expenditures: 2000.00
(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: 12/08/2016
Signature

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

NAME OF COMMITTEE (In Full) BlakPac	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px;"> C C00571398 </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 twitter	Date of Public Distribution/Dissemination <div style="border: 1px solid black; padding: 2px;"> M M / D D / Y Y Y Y Y Y 11 / 08 / 2016 </div>
Mailing Address 1355 Market St. Ste. 900	Amount <div style="border: 1px solid black; padding: 2px;"> 2000.00 </div>
City State Zip Code San Francisco CA 94103	Transaction ID : SE.5472 Date of Disbursement or Obligation <div style="border: 1px solid black; padding: 2px;"> M M / D D / Y Y Y Y Y Y 11 / 01 / 2016 </div>
Purpose of Expenditure Ads Category/Type 004	Name of Federal Candidate: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Stockham, Casper, , , Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> President <input type="checkbox"/> Senate District: <u>01</u> State: <u>CO</u>
Calendar Year-To-Date Per Election for Office Sought 2000.00	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 twitter	Date of Public Distribution/Dissemination <div style="border: 1px solid black; padding: 2px;"> M M / D D / Y Y Y Y Y Y 11 / 08 / 2016 </div>
Mailing Address 1355 Market St. Ste. 900	Amount <div style="border: 1px solid black; padding: 2px;"> 1000.00 </div>
City State Zip Code San Francisco CA 94103	Transaction ID : SE.5469 Date of Disbursement or Obligation <div style="border: 1px solid black; padding: 2px;"> M M / D D / Y Y Y Y Y Y 11 / 06 / 2016 </div>
Purpose of Expenditure Twitter Adds Category/Type 004	Name of Federal Candidate: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose BARTLEY, LORI ANITA MRS., , , Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> President <input type="checkbox"/> Senate District: <u>18</u> State: <u>TX</u>
Calendar Year-To-Date Per Election for Office Sought 1500.00	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px;"> 3000.00 </div>
(a) SUBTOTAL of Unitemized Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px; height: 20px;"> [Empty] </div>
(a) TOTAL Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px; height: 20px;"> [Empty] </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.

Lopez, Sandra, , , **[Electronically Filed]** Date M M / D D / Y Y Y Y Y Y
 Signature 12 / 08 / 2016

