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(Revised 1/2001)

## Image# 202009039267076774 NOTIFICATION OF MULTICANDIDATE STATUS

(See reverse side for instructions)

This form should be filed after the Committee qualifies as a multicandidate committee.

1. (a) NAME OF COMMITTEE IN FULL Block By Block PAC			
(b) Number and Street Address PO Box 6578			2. FEC IDENTIFICATION NUMBER C00630541
(c) City, State and ZIP Code Philadelphia	PA	19138	3. TYPE OF COMMITTEE (check one) STATE PARTY OTHER OTHER

I certify that **one** of the following situations is correct (complete line 4 *or* 5):

4. STATUS BY AFFILIATION: The committee submitted its Statement of Organization (FEC FORM 1) on \_\_\_\_\_\_ and simultaneously qualified as a multicandidate committee through its affiliation with:

Committee Name: \_\_\_\_\_

FEC Identification Number: \_\_\_\_\_

## 5. STATUS BY QUALIFICATION:

(a) **Candidates:** The committee has made contributions to the five (5) federal candidates listed below (ONLY State party committees may leave this blank.):

	Name	Office Sought	State/District		Date
(i)	Coleman, Linda, , ,	House	NC	02	09/24/2018
(ii)	Lamb, Conor, , ,	House	PA	17	09/24/2018
(iii)	Lawson, Alfred, , , Jr.	House	FL	05	08/03/2018
(iv)	Soto, Darren, , ,	House	FL	09	08/03/2018
(v)	Wild, Susan, , ,	House	PA	07	09/07/2018

(b) **Contributors:** The committee received a contribution from its 51st contributor on: <u>09/03/2020</u>.

Local 202-694-1100

- (c) Registration: The committee has been registered for at least 6 months. FEC FORM 1 was submitted on: \_\_\_\_\_\_\_.
- (d) Qualification: The committee met the above requirements on: \_\_\_\_\_09/03/2020

I certify that I have examined this Statement and to the best of my knowledge and belief it is true, correct and complete.									
TYPE OR PRINT NAME OF TREASURER		SIGNATURE OF TREASURE	ER [Electronically Filed]	DATE					
Lawton, Ma	ry, , ,		Lawton, Mary, , ,		09/03/2020				
NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to the penalties of 2 U.S.C. §437g. ANY CHANGE IN INFORMATION SHOULD BE REPORTED WITHIN 10 DAYS.									
		Fee	r further information contact: deral Election Commission, Was Il-free 800-424-9530	shington, DC 20463	EC FORM 1M				