13031080817

FE6AN026

FEC FORM 3X

REPORT OF RECEIPTS **AND DISBURSEMENTS**

For Other Than An Authorized Committee

RECEIVED

2013 JUN 24 AM 8: 53
Office Use Only
FEC MAIL CENTER

1.	NAME OF		
	COMMITTEE	(in	full)

TYPE OR PRINT ▼

Example: If typing, type

COMMITTEE (in full)			ove	r the lines.	J. 3.	12FE4M5		
LURBAN PRO	GRES	5 Pour	TICAC F	TCTION	Course	TTEE		
<u>L</u>			<u> </u>		1.1.1.1		1111	
ADDRESS (number and street)	Po	- BOX	257	7	111!			لسنسا
Check if different than previously reported. (ACC)	WA	TERR	ORO.			SC (2948	<u>8-L</u>
2. FEC IDENTIFICATION NU	JMBER ▼		CITY A			STATE A	ZIP	CODE A
c005286	6 [3	IS THIS REPORT	1 /	NEW (N) OR	AM (A)	ENDED	
4. TYPE OF REPORT (Choose One)	(b) Mor Rep	-	Feb 20 (M2)	144 (F. 15 Tel 147)	May 20 (M5)	Aug	20 (M8)	Nov 20 (M11) (Non-Election Year Only)
(a) Quarterly Reparts:			Mar 20 (M3)		Jun 20 (M6)	Sep	20 (M9)	Dec 20 (M12) (Non-Election Year Only)
April 15			Apr 20 (M4)		Jul 20 (M7)	Oct 2	20 (M10)	Jan 31 (YE)
Quarterly Report (Q July 15	(c)	12-Day		Primary (12F	?)	General (12G)	Runoff (12R)
Quarterly Report (C October 15	Q2)	Report for the		Convention ((12C)	Special (128)	
Quarterly Report (C January 31 Year-End Report (Y	Ì	Ek	ection on	, M M /	D D /	Y Y Y	in t Sta	he te of
July 31 Mid-Year Report (Non-electio Year Only) (MY)	n (d)	30-Day POST-Election	-	General (300	3)	Runoff (3	0R)	Special (30S)
Termination Report (TER)		Report for the	e: ection on	0 5 ′	هُ [*] دُّ	ŽŎ 3	in (Sta	the SC
5. Covering Period O	5 ′ 2°	[†] , Žδ	1'3'	through	06	′ රීරි ′	201	З З
I certify that I have examined th	is Report a	and to the bes	st of my kno	wledge and	belief it is tru	e, correct and	complete.	
Type or Print Name of Treasure	' B	RIDGE	T L.	Mul	RRAY			
Signature of Treasurer	ridg	ret W	lurs	ey	D	ate 🖔 🖔	o' 06	2013
NOTE: Submission of false, errone	eous, or inc	omplete inform	ation may si	ubject the per	son signing th	is Report to th	e penalties of	f 2 U.S.C. §437g.
Office Use Only								ORM 3X 12/2004

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Nam URBAU	PRO	GLESS	Polit	TICAL I	ACTION	War	ue 776	E	
Report Covering the Period:	From:	0 5′	27	žŏi	ĬŽ	То:	86'	66	ŽČ
<u> </u>				COLUMN	A	1		COLUMN	 В

		This Period	Colomn B Calendar Year-to-Date
6.	(a) Cash on Hand January 1,		, , 00.00
	(b) Cash on Hand at Beginning of Reporting Period	, , 00.00	
	(c) Total Receipts (from Line 19)	, , 00.00	, , 2000
	(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	, , 00.00	, , 00.00
7.	Total Disbursements (from Line 31)	, , 0000	, , ∞,∞
8.	Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	, , 00.00	, , 0000
9.	Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	, , 0000	
10.	Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	, , 0000	
-			

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 809-424-9530 Local 202-694-1100

FE6AN026

13031080818

DETAILED SUMMARY PAGE

of Receipts

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

URBAN PROGRESS POLITICAL ACTION COMMITTEE

Report Covering the Period:

From: 05'27'2013

To: 06'06'201'3'

	i. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11.	Contributions (other than loans) From: (a) Individuals/Persons Other		
	Than Political Committees (i) Itemized (use Schedule A)	, , 00.00	, , 00.00
		0000	200
	(ii) Unitemized(iii) TOTAL (add	, , 0000	, , 000
	Lines 11(a)(i) and (ii)	, , <i>00.0</i> 0	, , 00.00
		0000	\sim
	(b) Political Party Committees	, , 0000	, , , ,
	(c) Other Political Committees (such as PACs)	, , <i>00.0</i> 0	0000
	(d) Total Contributions (add Lines	, , ,	, , ,
	11(a)(iii), (b), and (c)) (Carry	00.00	$\Delta \Delta \Delta \Delta$
12	Totals to Line 33, page 5) Transfers From Affiliated/Other	, , 00.00	, , , ,
	Party Committees	, , <i>00.00</i>	, , <i>OOOO</i>
		$\frac{1}{2}$	() ()
13.	All Loans Received	, , , ,	, , 0000
14.	Loan Repayments Received	<i>000</i> 0	$\partial \partial \partial O$
	Offsets To Operating Expenditures	, , , , , ,	, , , , ,
	(Refunds, Rebates, etc.)	\sim	\sim
16	(Carry Totals to Line 37, page 5) Refunds of Contributions Made	, , ,	, , <i>W</i>
	to Federal Candidates and Other	n c 35	30.00
	Political Committees	, , O O O O	, <i>c</i> ooo
17.	Other Federal Receipts	<i>ለ</i> ስሎን	\sim
18.	(Dividends, Interest, etc.) Transfers from Non-Federal and Levin Funds	, , 00.00	, , ,
	(a) Non-Federal Account	0420	222
	(from Schedule H3)	, , 00.00	, , 00,00
	(b) Lovin Franch (from Oakontida US)	<i>ስስ</i> ርስ	\sim
	(b) Levin Funds (from Schedule H5)	, , , , , ,	, , , ,
	(c) Total Transfers (add 18(a) and 18(b))	, , 0000	, , , ,
19.	Total Receipts (add Lines 11(d),	0000	
	12, 13, 14, 15, 16, 17, and 18(c))▶	, , <i>00.00</i>	, , 0000
20.	Total Federal Receipts		, , 000
	(subtract Line 18(c) from Line 19)▶	, , 00.00	, , <i>00.0</i> 00

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

	II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21.	Operating Expenditures: —— (a) Allocated Federal/Non-Federal	1000 1000	Calcinda Teal-to-Date
	Activity (from Schedule H4)	α	\sim
	(i) Federal Share	, , , ,	, , 2000
	(ii) Non-Federal Share	, , 00,00	, , 00.00
	(b) Other Federal Operating Expenditures	0000	$\alpha \alpha $
	(c) Total Operating Expenditures	, 5000	, , 00:00
	(add 21(a)(l), (a)(ii), and (b))▶	, , 00 <u>00</u>	$, , \mathcal{O}$
22.	Trænsfers to Affillated/Other Party Committees	0000	<i>0</i> 000
23.	Contributions to Federal Candidates/Committees	, , , ,	, , , , , , , , , , , , , , , , , , , ,
24	and Other Political Committees Independent Expenditures	, , , ,	, , 00.00
	(use Schedule E)	, , <i>C</i> O,CO	, , 0000
23.	Ceordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F)	$\infty \infty$	0000
	(355 651135216 1)	, , , , , , , , , , , , , , , , , , , ,	, , , ,
26.	Loan Repayments Made	, , 0000	, ,
27.	Loans Made	, , 0000	, , 0000
28.	Refunds of Contributions To: (a) Individuats/Persons Other Than Political Committees	, , 0000	, , 0000
•	(b) Political Party Committees	2000	$\alpha \alpha \alpha \alpha \alpha$
	(c) Other Political Committees	, , , ,	, , , ,
	(such as PACs)	, , 00,00	, , aw
	(d) Total Contribution Refunds	20 80	00 FO
	(add Lines 28(a), (b), and (c))▶	, , 00.00	, , <i>O</i> OOO
29.	Other Disbursements	, , 20,00	, , 0000
30	Federal Election Activity (2 U.S.C. §431(20))	•	•
50.	(a) Allocated Federal Election Activity		
	(from Schedule H6)	\sim	
	(i) Federal Share	, , , ,	, , , ,
	(ii) "Levin" Share	, , <i>00.0</i> 0	, , 0000
	(b) Federai Election Activity Paid Entirely With Federal Funds	0000	<i>202</i> 0
	(c) Total Federal Election Activity (add	, , ,	, , , , , , , , , , , , , , , , , , , ,
	Lines 30(a)(i), 30(a)(ii) and 30(b))▶	, , caa	, au
31.	Total Disbursements (add Lines 21(c), 22,	2220	
	23, 24, 25, 26, 27, 28(d), 29 and 30(c))	, , <i>OOO</i>	, , , , ,
32.	Total Federal Disbursements		
	(subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31)	\sim	25500
		, , ,	, , 22,02

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003) Page 5 **COLUMN B** III. Net Contributions/Operating Ex-**COLUMN A** penditures **Total This Period** Calendar Year-to-Date 33. Total Contributions (other than loans) (from Line 11(d), page 3) 34. Total Contribution Refunds (from Line 28(d)) 35. Net Contributions (other than loans) (subtract Line 34 from Line 33) 36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) 37. Offsets to Operating Expenditures (from Line 15, page 3)..... 38. Net Operating Expenditures (subtract Line 37 from Line 36)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE OF (check only one) 11a 11b 11c 12 13 14 15 16 17				
Any information copied from such Reports and Statements or for commercial purposes, other than using the name and NAME OF COMMITTEE (In Full) URBAN PROSESS POLI	d_address_of any political committee	erson for the purpose of soliciting contributions to solicit contributions from such committee.				
Full Name (Last, First, Middle Initial) A. Mailing Address	7-0-1-	Date of Receipt M M / D D / Y Y Y				
FEC ID number of contributing tederal political committee.	Zip Code	Amount of Each Receipt this Period				
Name of Employnr Occupation	ion ite Year-to-Date ▼					
Full Name (Last, First, Middle Inifial) B. Mailing Address	, , ,	Date of Receipt				
FEC ID number of contributing						
Name of Employer Occupation	ion	5. 3 *				
Receipt For: Primary General Other (specify) ▼	tte Year-to-Date ♥					
Full Name (Last, First, Middle Initial) C. Mailing Address		Date of Receipt M M / D D / Y Y Y Y				
City State FEC ID number of contributing	Zip Code	Amount of Each Receipt this Period				
federal political committee. C Name of Employer Occupat	ion	, , ,				
Receipt For: Primary General Other (specify) ▼	te Year-to-Date ▼					
SUBTOTAL of Receipts This Page (optional)		. , , 00.00				

SCHEDULE B (FEC Form 3X)

it!	EMIZED DISBURSEMEN	TS	Use separate schedule(s) (check only				IE NUMBER: PAGE OF nly one)						
		. •	for each category of the Detailed Summary Page			21b	22	2	ı	24	25		26 20b
Δ-	ny information copied from such Repor	ts and Statem	ents may not be sold or ::	sed by	, any	27 person	28a		8b se of	28c	29 contri		30b
	for commercial purposes, other than i												-
\	NAME OF COMMITTEE (In Full)	_				^	-	_	_		_	_	
[URBAN PROG	sress	POLITICAL AC	770	Ŋ	Cc	>MM	171	6	E		_	
	Full Name (Last, First, Middle Initial)					T	D-4-	- P:		nc=*			
A.							Date of				v ···	, .	
	Mailing Address						m M	,	. I	D / Y	, ,	. T	
	City	S	State Zip Code			\top	·						
	Purpose of Disbursement					\neg	Amount	of Ea	ich F	Disbursen	nent thi	s Peric	od
	Candidate Name				tegor Type	у/	Amount of Each Disbursement this Period						
	Office Sought: House	Disbursen	nent For:		. Jhg			,		,		•	
	Senate		Primary General										
	State: District:		Other (specify) ▼										
	Full Name (Last, First, Middle Initial)	1			•	\dashv	·		_			—	
В.	, , ,						Date of						
	Mailing Address				\dashv	. W W	1	ם נ	D , / , Y	Y 1	, A		
Mailing Address													
	City	S	state Zip Code			T							
	Purpose of Disbussement												
	Condidate News			I			Amount of Each Disbursement this Period				od		
	Candidate Name				tegor Type	y/		,		,			
	Office Saught: Honse	Disbursen		<u> </u>	,,,,,			,		,			
	Senate President	·	Primary General Other (specify)										
	State: District:		Curoi (apoully) 🔻										
	Full Name (Last, First, Middle Initial)												
C.							Date of						
	Mailing Address						M M	1	D I	D / Y	Y 1	7 Y.	
	City	S	State Zip Code			\dashv	·						
	Purpose of Disbursement					\dashv			. •			- -	
	Candidate Name		Ca	tegor Type	y/	Amount of Each Disbursement this Period							
Office Sought: House Disbursement For:								,		,			
	Senate President	1 1 1	Primary General Other (specify) ▼										
_	State: District:	\perp			_								
s	SUBTOTAL of Disbursements This Pag	je (optional)				>		,		,	00	20	0
Т	FOTAL This Period (last page this line	number only)				-	<u>.</u>	,	٠	,	α	20	\bigcirc

SCHEDULE C (FEC Form 3X) LOANS

Use separate schedule(s) for each category of the Detailed Summary Page FOR

PAGE OF

	Detailed Summary Page	FOR LINE 13 OF FORM 3X
IAME OF COMMITTEE (IN FUII) URBAN PROGRESS POLITICAL AC	TON COMMITTEE	=
LOAN SOURCE Full Name (Last, First, Middle Initial)		Primary General
Mailing Address		Other (specify)
City State ZIF	Code	
Original Amount of Loan Cumulative Paymer	nt To Date Balance	Outstanding at Close of This Period
, , ,	,	, , .
TERMS Date Incurred Date M M / D D / Y Y Y Y M M / D D /	Due Interest Rate	Secured:
		% (apr) Yes No
List All Endorsers or Guarantors (if any) to Loan Source		
Full Name (Last, First, Middle Initial)	Name of Employer	
Mailing Address	Occupation	
City State ZIP Code	Amount Guaranteed Outstanding:	,
2. Full Name (Last, First, Middle Initial)	Name of Employer	
Mailing Address	Occupation	
City State ZIP Code	Amount Guaranteed Outstanding:	,
3. Full Name (Last, First, Middle Initial)	Name of Employer	
Mailing Address	Occupation	
City State ZIP Code	Amount Guaranteed Outstanding:	,
4. Full Name (Last, First, Middle Initial)	Name of Employer	
Mailing Address	Occupation	
	Amount	48-4-4-4-4-4-4-4-4-4-4-4-4-4-4-4-4-4-4-
City State ZIP Code	Guaranteed Outstanding:	7
SUBTOTALS This Period This Page (optional)		0000
TOTALS This Period (last page in this line only)		, , 0000
Carry outstanding balance only to LINE 3, Schedule D, for this lin	e. If no Schedule D, carry forward	to appropriate line of Summary.

SCHEDULE C-1 (FEC Form 3X)

Supplementary for Information found on Page

LOANS AND LINES OF CREDIT FROM LENDING INSTITUTIONS of Schedule C Federal Election Commission, Washington, D.C. 20463 NAME OF COMMITTEE (In Full) FEC IDENTIFICATION NUMBER C00528661 IRBAN PROGRESS POLITICAL ACTION COMMITTEE **LENDING INSTITUTION (LENDER)** Amount of Loan Interest Rate (APR) Full Name % • Mailing Address Date Incurred or Established City State Zip Code Date Due A. Has loan been restructured? \(\int\) If yes, date originally incurred B. If line of credit. Total Outstanding Amount of this Draw: Balance: C. Are other parties secondarily liable for the debt incurred? Yes (Endorsers and guarantors must be reported on Schedule C.) What is the value of this collateral? D. Are any of the following pledged as collateral for the loan: real estate, personal property, goods, negotiable instruments, certificates of deposit, chattel papers, stocks, accounts receivable, cash on deposit, or other similar traditional collateral? If yes, specify: Yes Does the lender have a perfected security interest in it? No E. Are any future contributions or future receipts of interest income, pledged as What is the estimated value? collateral for the loan? No Yes If yes, specify: Location of account: A depository account must be established pursuant to 11 CFR 100.82(e)(2) and 100.142(e)(2). Address: Date account established: M W / D D / Y Y City, State, Zip: F. If neither of the types of collateral described above was pledged for this loan, or if the amount pledged does not equal or exceed the loan amount, state the basis upon which this loan was made and the basis on which it assures repayment. G. COMMITTEE TREASURER DATE Typed Name Signature Attach a signed copy of the loan agreement. TO BE SIGNED BY THE LENDING INSTITUTION: To the best of this institution's knowledge, the terms of the loan and other information regarding the extension of the loan are accurate as stated above. The loan was made on terms and conditions (including interest rate) no more favorable at the time than those imposed for similar extensions of credit to other borrowers of comparable credit worthiness. This institution is aware of the requirement that a loan must be made on a basis which assures repayment, and has complied with the requirements set forth at 11 CFR 100.82 and 100.142 in making this loan. AUTHORIZED REPRESENTATIVE

Title

Typed Name Signature

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

Excluding Loans

(Use separate schedule(s) for each

PAGE FOR LINE NUMBER: (check only one)

OF

9

numbered line) 10 NAME OF COMMITTEE (In Full) PREBRUS POLITICAL ACTION COMMITTEE A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): Mailing Address City State Zip Code Outstanding Balance Beginning This Period Outstanding Balance at Close of This Period Amount Incurred This Period Payment This Period B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): Mailing Address Zip Code State Outstanding Balance Beginning This Period **Amount Incurred This Period Payment This Period** Outstanding Balance at Close of This Period C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): Mailing Address City State Zip Code Outstanding Balance Beginning This Period **Amount Incurred This Period Payment This Period** Outstanding Balance at Close of This Period 1) SUBTOTALS This Period This Page (optional)..... 2) TOTALS This Period (last page this line number only)......

3) TOTAL OUTSTANDING LOANS from Schedule C (last page only)

4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

						FOR LINE 2	24 OF FORM 3X
NAÑ	ME OF COMMITTEE (In Full)				FEC II	DENTIFICATION	ON NUMBER W
(IRBAN PROGRESS POLITICAL ACTU	ON COMMICT	TEE	•	CC	052	8661
Che	ck if 24-hour report 48-hour report New	report Amends	report file	d on			
Т	Full Name (Last, First, Middle Initial) of Payee			Date			
ı				1		/ Chillen i /	"Ϋ́Υ :. Υ "ΥΥ
ŀ	Mailing Address						
1				Amou	nt		
ŀ	City State	Zip Code		1: 0	7, 27	F., 1	a-u ineg
ı				1.00		e 195 eps	in a simensi ji
ŀ	Purpose of Expenditure	Category/	Off	ice Sough	nt:	House	State:
ĺ		Туре				Senate	District:
Ī	Name of Federal Candidate Supported or Opposed by Expendi	ture:			Ļ	_ Pre≃ident	
L			Ch	eck One:	L	Support	Oppose
	Calendar Year-To-Date Per Election for Office Sought 5		.		1	Primary	General
ŀ	Full Name (Last, First, Middle Initial) of Payee			Date			
Ì					i w.,	/ .D .D . /	[[Y]] Y = Y = Y []
ł	Mailing Address					: 	
ı	·			Amou	nt		
İ	City State	Zip Code			" "	1	
İ	Purpose of Expenditure	Category/ Type	Off	ice Sougi	ht:	House Senate	State: District:
ł	Name of Federal Candidate Supported or Opposed by Expendi	ture:	\dashv		Ľ	President	
1			Ch	eck One:		Support	Oppose
ŀ	Calendar Year-To-Date Per Election		Dis	sburseme	nt For:	Primary	General
ı	for Office Sought	ÿ		Πо	ther (sp	ecify)	
(a) SUBTOTAL of Itemized Independent Expenditures		······ >		,	ing in the s a ge. Applications s ag e.	0000
	b) CUDTOTAL of United and Independent Europediture			1. 1.	J 1015	er Dember so	0000
(b) SUBTOTAL of Uniternized Independent Expenditures		·····				
	c) TOTAL Independent Expenditures					· · · · · · · · · · · · · · · ·	∞
`	-,, ,,,,,,,,			1 - 3	198 j. 3 1		س.ب
W	Inder penalty of perjury I certify that the independent expendituith, or at the request or suggestion of, any candidate or authorarty committee) any political party committee or its agent.	•				-	•
	Budget Murray	<u>)</u>	Date C	6	06	' Ž Ŏ	じる

PAGE

OF

SCHEDULE F (FEC Form 3X)

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

ON BEHALF OF CANDIDATES FOR FEDERAL OFFICE

(2 U.S.C. §441a(d))

(70 be used only by Political Committees in the General Election)

PAGE	:		OF	=		_
FOR	LINE	25	OF	FORM	3X	Ċ

2 U.S.C. §441a(d))	be used only	by Political Comm	ittees in the Ge	neral Election)	FOR LINE 25	OF FORM 3X
NAME OF COMMITTEE (IN FUII) URBAN PROGRESS	Pour	TICAL AC	TION C	sumitte	E	
Has your committee been designated to ma coordinated expenditures by a political party YES VOC		Full Name of Subo	rdinate Committe	9		
If YEB, name the designating committee:		Maining Address				
		City		Sta	ite ZIP C	ode
Full Name (Last, First, Middle Initial) of	Each Payee			Purpose of Exp	enditure	Category/
Mailing Address				Date		Туре
City	State	Zip Code		M M /	י Y א ס ס א	, A A
Name of Federal Candidate Supported	Office Sough	t: House Senate Presidential	State:	Amount	,	•
Aggrogate General Election Expenditure for this Candidate ▶	7	, .				
Full Name (Last, First, Middle Initial) of	Each Payee		· · · · · · · · · · · · · · · · · · ·	Purpose of Exp	enditure	Category/
Mailing Address				Date		Туре
City	State	Zip Code		M M /	י אי סיס	
Name of Federal Candidate Supported	Office Sough	House Senate Presidential	State:	Amount	,	•
Aggregate General Election Expenditure for this Candidate ▶	,	, .				
Full Name (Last, First, Middle Initial) of	Each Payee			Purpose of Exp	enditure	Category/
Mailing Address				Date		Туре
City	State	Zip Code	***********		י א / ס ס	, A A
Name of Federal Candidate Supported	Office Sough	House Senate Presidential	State:	Amount		_
Aggregate General Election Expenditure for this Candidate ▶	,	,		,	,	-
SUBTOTAL of Expenditures This Page (or	otional)			•	, 4	0000
TOTAL This Period (last page this line nur	nber only)			- · ,	. , (2000

SCHEDULE H1 (FEC Form 3X)

METHOD OF ALLOCATION FOR:

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

NAME OF COMMITTEE (In Full)	The second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second secon			
URBAN PROGRESS POLITICAL ACTION	COMMITTEE			
USE ONLY ONE SECT	ION, A or B			
A. State and Local Party Committees				
Fixed Percentage (select one)				
Presidential-Only Election Year (28% Federal)	-			
Presidential and Senate Election Year (36% Fe	deral)			
Senate-Only Election Year (21% Federal)				
Non-Presidential and Non-Senate Election Year	(15% Federal)			
B. Separate Segregated Funds and Nonco	onnected Committees			
Flat Minimum Federal Percentage	recented of EOO/ federal funds about			
If the committee will allocate using the flat minimum percentage of 50% federal funds, check or				
If the committee is spending more than 50% federal full	nds, indicate ratio below			
Federal	%			
Nonfederal	······································			
This ratio applies to (check all that apply):				
	· · · · · · · · · · · · · · · · · · ·			

SCHEDULE H2 (FEC Form 3X) ALLOCATION RATIOS

NAME OF COMMITTEE (In Full)

ļ	PAGE	OF

URBAN PROGRESS POLITICAL ACTION COMM	NTIE	
RATIOS FOR ALLOCABLE FUNDRAISING EVENTS AND DIRECT CANDIDA ACTIVITIES APPEARING ON THIS REPORT.	TE SUPPORT	
Mathods of allocation:		
FUNDRAISING activities are allocated using the "funds received met expenses must equal the federal proportion of monies raised.	hod" where the federal	proportion of
II. Shared DIRECT CANDIDATE SUPPORT activities are allocated accommon where the federal proportion of disbursements is based on the benefitivity. Fer PACs Only: Direct dandidate support includes public commisted and nonfederal candidates, regardless of whether there is a reallocated using a time/space method.	it derived by federal can nunications or voter dri	andidates from the acves that refer to both
ACTIVITY OR EVENT IDENTIFIER		
ACTIVITY IS:	FEDERAL %	NONFEDERAL %
Fundraising Direct Candidate Support CHECK IF THE RATIO IS:	. 9	. %
New Revised Same as Previously Reported		
ACTIVITY OR EVENT IDENTIFIER	FEDERAL %	NONFEDERAL %
ACTIVITY IS: Fundraising Direct Candidate Support		% . %
CHECK IF THE RATIO IS: New Revised Same as Previously Reported	•	
ACTIVITY OR EVENT IDENTIFIER		
ACTIVITY ON EVENT IDENTIFIER	FEDERAL %	NONFEDERAL %
ACTIVITY IS: Fundraising Direct Candidate Support		. %
CHECK IF THE RATIO IS: New Revised Same as Previously Reported		·
ACTIVITY OR EVENT IDENTIFIER	FEDERAL %	NONFEDERAL %
ACTIVITY IS:	TEDERAL /6	NON EDERAL %
Fundraising Direct Candidate Support CHECK IF THE RATIO IS:		% . %
New Revised Same as Previously Reported		
ACTIVITY OR EVENT IDENTIFIER	FEDERAL %	NONFEDERAL %
ACTIVITY IS: Fundraising Direct Candidate Support		. %
CHECK IF THE RATIO IS: New Revised Same as Previously Reported	-	
ACTIVITY OR EVENT IDENTIFIER	FEDERAL %	NONFEDERAL %
ACTIVITY IS: Fundraising Direct Candidate Support		% - %
CHECK IF THE RATIO IS: New Revised Same as Previously Reported		

13031080831

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

PA	GE		С	F		
FC	B I	INF	189	OF	FORM	3)

NAME OF COMMITTEE (In Full)	_	_	
URBAN PROGRETS PO	LITICAL ACTION COMM	ITTEE	
NAME OF ACCOUNT	DATE OF RECEIPT	TOTAL AMOUNT	TRANSFERRED
	M M / D D / Y Y Y		
	·	7.	, •
BREAKDOWN OF TRANSFER RECEIVED			
i) Total Administrative			
ii) Generic Voter Drive		····	,
iii) Exempt Activities		,	,
iv) Direct Fundralsing (List Activity or Event I	dentifier)		
a)	, , ,		
		•	
b)	_ ; , ,		
c) Total Amount Transferred For Direct Fund	draising	7	,
v) Direct Candidate Support (List Activity or	Event Identifier)		
a)	_ , , ,	×I	
	·		
b)	- , , ,		
a) Table American Transferred For Direct Country	didata Compani		
c) Total Amount Transferred For Direct Can	aldate Support	;	,
vi) Public Communications Referring Only t	o Party (Made by PAC)		
	· · · · · · · · · · · · · · · · · · ·		,
TOTALS	FOR BREAKDOWN OF TRANSFER RECE	IVED	
TOTAL This Period (Administrative)		. 00.00	
		, 	
TOTAL This Period (Generic Voter Drive)		, 0000	
		\sim	\sim
TOTAL This Period (Exempt Activities)		$,$ $,$ $\omega \omega$	O.
		A C	3
TOTAL This Period (Direct Fundraising)		, , ,	
	·	•	1000)·
TOTAL This Period (Direct Candidate Support)		, ,	, 0,00
TOTAL This Period (Public Communications Referri	ng Only to Parh	, ,	0000
TOTAL This Period (Public Communications Referri	ng Only W Farty)	, ,	· · · · · · · · · · · · · · · · · · ·
TOTAL This Period (Total Amount Transferred)		,	, 00,00
		•	•

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

PAGE	OF		
FOR LINE	OF	50014	

N/	AME OF COMMITTEE (IN FUIT) URBAN PROGRESS POLITICA	AL A	CTION C	DMMCT78	
A.	Full Name (Last, First, Middle Initial)			-	Allocated Activity or Event:
	Mailing Address				Administrative Fundraising Exempt
					Voter Drive Direct Candidate Support
	City	State	Zip Code		Public Comm (ref to party only) by PAC
	Purpose of Disbursement:		1		Allocated Activity or Event Year-To-Date
	Activity or Event Identifier:			Category/	9 9 °
				Type	Date
	FEDERAL SHARE -	+	NONFEDERAL	SHARE	■ TOTAL AMOUNT
	5 5 -		y 9	•	y -
В.	Full Name (Last, First, Middle Initial)				Allocated Activity or Event:
	Mailing Address			·	Administrative Fundraising Exempt
	maining Addition				Voter Drive Direct Candidate Support
	City	State	Zip Code		Public Comm (ref to party only) by PAC
	Purpose of Disbursement:				Allocated Activity or Event Year-To-Date
	Activity or Event Identifier:				9 9
	rostiny of Event designed.			Category/ Type	M M / D D / Y Y Y Y Date
	FEDERAL SHARE	+	NONFEDERAL ,	SHARE	= TOTAL AMOUNT
<u>c.</u>	Full Name (Last, First, Middle Initial)				Allocated Activity or Event:
•				· · · · · · · · · · · · · · · · · · ·	Administrative Fundraising Exempt
	Mailing Address				Voter Drive Direct Candidate Support
	City	State	Zip Code		Public Comm (ref to party only) by PAC Allocated Activity or Event Year-To-Date
	Purpose of Disbursement:				
	Activity or Event Identifier:			Ontonous	9 9 °
				Category/ Type	Date
	FEDERAL SHARE -	+	NONFEDERAL	SHARE	= TOTAL AMOUNT
	, g 9 °		ÿ ;	•	, ,
SI	JBTOTAL of Allocated Federal and NonFederal A	-	s Page NONFEDERAL	SHARE	= TOTAL AMOUNT
	0000			000	$\sigma = \sigma =$
TC	OTAL This Period (last page for each line only)(Fo	ederal sha	, , , , , , , , , , , , , , , , , , ,	NonFederal sh	are to 21(a)(ii))
	FEDERAL SHARE		NONFEDERAL	SHARE	TOTAL AMOUNT
	, , 00,00		5 9	00 <u>0</u>	

SCHEDULE H5 (FEC Form 3X)

TRANSFERS OF LEVIN FUNDS RECEIVED FOR ALLOCATED FEDERAL ELECTION ACTIVITY

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

PAGI	=	C	F		
FOR	LINE	18b	OF	FORM	3X

N	IAME OF COMMITTEE (In Full) URBAN PLOSRESS (POLITICAL ACTION C	brum(TTEE
	NAME OF ACCOUNT	DATE OF RECEIPT	TOTAL AMOUNT TRANSFERRED
1		M M / D D / Y Y Y	٧
1			, , ,
	BREAKDOWN OF THIS TRANSFER		
	i) Voter Registration	VOTER RE	EGISTRATION
	Total Amount Transferred for \	/oter Registration	_
1		,	VOTER ID
	ii) Voter ID Total Amount Transferred for \	fator ID	
	total Amount Translerred for V	, voter iD	
ł	iii) GOTV		GOTV
	Total Amount Transferred for (GOTV	. , ,
	iv) Generic Campaign Activity		GENERIC CAMPAIGN ACTIVITY
		Generic Campaign Activity	<u></u>
		, ,	. , ,
	NAME OF ACCOUNT	DATE OF RECEIPT	TOTAL AMOUNT TRANSFERRED
		M M / D D / Y Y	Y
			, , .
	BREAKDOWN OF THIS TRANSFER		
		VOTER RE	EGISTRATION
	 i) Voter Registration Total Amount Transferred for Y 	Voter Registration	
	iolai Amount Transierieu ioi	voter negistration	, · · VOTER ID
	li) Voter ID		VOTER ID
	Total Amount Transferred for	Voter ID	, ,
	iii) GOTV		GOTV
		GOTV	
			GENERIC CAMPAIGN ACTIVITY
	iv) Generic Campaign Activity	a tagan and a karata	
	lotal Amount Transferred for (Generic Campaign Activity	····· , , ·
	TOTALS FOR	R BREAKDOWN OF TRANSFER RECEIVE	ED (Last Page Only)
	TOTAL This Period (Voter Registration	on),	, 00.00
	TOTAL This Period (Voter ID)	······································	, 00.00
	TOTAL This Period (GOTV)		, , 00.00
	TOTAL This Period (Generic Campai	ign Activity)	, <u>, 00.00</u>
	TOTAL This Period (Total Amount of	Transfers Received)	, , , ,

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

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

PAGI	=		UF		
FOR	LINE	30a	OF	FORM	зх

NAME OF COMMITTEE (In Fuil)	
URBAN PROGRESS POLITICAL ACTION COM	MITTEE
A. Full Name (Last, First, Middle Initial) / Full Organization Name	Type of Allocated Activity or Event: Voter Registration GOTV Voter ID.
	Voter ID Generic Campaign
Mailing Address	Allocated Activity or Event Year-To-Date
City State Zip Code	, , .
Purpose of Disbursement C	ategory/ Type M M / D D / Y Y Y Y Date
FEDERAL SHARE + LEVIN SHARE	= TOTAL AMOUNT
, , , ,	. , , .
B. Full Name (Last, First, Middle Initial) / Full Organization Name	Type of Allocated Activity or Event:
	Voter Registration GOTV Voter ID Generic Campaign
Mailing Address	Allocated Activity or Event Year-To-Date
City State Zip Code	y y .
Purpose of Disbursement C.	ategory/ Type M M / D D / Y Y Y Y Type
FEDERAL SHARE + LEVIN SHARE	= TOTAL AMOUNT
, , , ,	. , , .
C. Full Name (Last, First, Middle Initial) / Full Organization Name	Type of Allocated Activity or Event:
	Voter Registration GOTV Voter ID Generic Campaign
Mailing Address	Allocated Activity or Event Year-To-Date
City State Zip Code	, , .
Purpose of Disbursement C	ategory/ Date Date
FEDERAL SHARE + LEVIN SHARE	= TOTAL AMOUNT
, , , ,	, , ,
SUBTOTAL of Shared Federal and Levin Activity This Page	
FEDERAL SHARE + LEVIN SHARE	TOTAL AMOUNT
TOTAL This Period (last page for each line only)(Federal share to 30(a)(i) and Lev	in share to 30(a)(ii))
FEDERAL SHARE	TOTAL AMOUNT
, , OOOO LEVIN SHARE	$, , \infty $
TOTAL This Period for the Levin Share	20.00
COANIDOR	FEC Schedule H6 (Form 3X) Rev 02/2003

SCHEDULE L (FEC Form 3X)

AGGREGATION PAGE: LEVIN FUNDS

NAME OF COMMITTEE (IN FUII)

URBAN PROGRESS POLITICAL ACTION COMMITTEE

NAME OF ACCOUNT

		COLUMN A TOTAL THIS PERIOD	COLUMN B YEAR-TO-DATE
1.	RECEIPTS FROM PERSONS (a) Itemized	, , 00.00	, , 0000
	(Use Schedule L-A)	, , <u>00.0</u> 0	, , 00.00
	(c) Total	, , <u>00</u> .00	, , 00,00
2.	OTHER RECEIPTS	, , 00,00	, , 00.00
3.	TOTAL RECEIPTS(Add Lines 1c and 2)	, , 0000	, , 0000
4.	TRANSFERS TO FEDERAL OR ALLOCATION ACCOUNT (Use Schedule L-B)		
	(a) Voter Registration	, <i>0</i> 0.00	, , 00.00
	(b) Voter ID	, , 0000	, , 0000
	(c) GOTV		, , 00,00
	(d) Generic Campaign	$, \alpha \alpha \alpha \alpha \alpha \beta \beta \beta \beta \alpha \alpha \alpha \beta \beta \beta \alpha \alpha \alpha \beta \beta \alpha \alpha \alpha \beta \beta \alpha \alpha \alpha \beta \alpha \beta \alpha \alpha \beta \alpha \beta \alpha \alpha \beta \beta \alpha \beta \alpha \beta \alpha \beta \alpha \beta \beta \alpha \beta \alpha \beta \alpha \beta \beta \alpha \beta \alpha \beta \alpha \beta \beta \alpha \beta \alpha \beta \beta \beta \alpha \beta \beta \beta \beta \alpha \beta \beta \beta \alpha \beta \beta \beta \alpha \beta \beta \beta \beta \beta \beta \beta \beta \alpha \beta	, , 0000
	(e) Total	, , 00.00	, , 00.00
5.	OTHER DISBURSEMENTS	, , 0000	, , 0000
6.	TOTAL DISBURSEMENTS(Add Lines 4e and 5)	, , 00,000	, , 0000
7.	BEGINNING CASH ON HAND (for Column B, use cash as of January 1st)	, , 00.00	, , 0000
8.	RECEIPTS(from Line 3)	, <i>, 20.6</i> 0	, , 20,00
9.	SUBTOTAL(Add Lines 7 and 8)	, , <u>00.</u> 00	, , <i>00.</i> 00
١٥.	DISBURSEMENTS	0000	, , 00,00
1.	ENDING CASH ON HAND(Subtract Line 10 From Line 9)	0000	, , <i>0</i> 000

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

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

	PAGE	OF
OR LINE NUMBER: chack only one)	1a	2

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NAME OF COMMITTEE (In Full)

1. DROA POO GOEST DOI (TOOM ACTION) COMMITTEE

\backslash	URBAN PROGRESS POLITICAL	ACTION C	DMAITTEE
	Full Name (Last, First, Middle Initial) / Full Organization Name		Date of Receipt
A.		M M / D D / Y Y Y	
	Mailing Address		
	City State	Zip Code	Amount of Each Receipt this Period
	Name of Employer or Principal Place of Business		, , .
			Aggregate Year-to-Date
	Occupation		, , .
	Full Name (Last, First, Middle Initial) / Full Organization Name		Date of Receipt
В.	·		M M / D D / Y Y Y
	Mailing Address		
	City State	Zip Code	Amount of Each Receipt this Period
	Name of Employer or Principal Place of Business		, , .
			Aggregate Year-to-Date
	Occupation		, ,
	Full Name (Last, First, Middle Initial) / Full Organization Name		Date of Receipt
C.			M M / D D / Y Y Y
	Mailing Address		
	City State	Zip Code	Amount of Each Receipt this Period
	Name of Employer or Principal Place of Business		- , , .
			Aggregate Year-to-Date
	Occupation	_	, ,
	Full Name (Last, First, Middle Initial) / Full Organization Name		Date of Receipt
D.			M M / D D / Y Y Y
	Mailing Address		
	City State	Zip Code	Amount of Each Receipt this Period
	Name of Employer or Principal Place of Business		-, , .
	Decumentar		Aggregate Year-to-Date
	Occupation		, , ,
s	UBTOTAL of Receipts This Page (optional)		
┢			, , <i>00.</i> 60
T,	OTAL This Period (last page this line number only)	······	, , 0.00

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

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

FOR LINE NUMB	ER: [PAGE	Ε	OF
(check only one)		a [4c	5

	ny information copied from such Reports and State for commercial purposes, other than using the na			
_	NAME OF COMMITTEE (In Full)			
\rangle	URBAN PROGRESS		CAL ACTION CO	DMM:TTEE
_	Full Name (Last, First, Middle Initial) / Full Organ			
A.				Date of Disbursement
	Mailing Address			M M / D D / Y Y Y
	City	State	Zip Code	Amount of Each Disbursement this Period
	Purpose of Disbursement			, , .
	Full Name (Last, First, Middle Initial) / Full Organ	nization Name	;	
В.	, · · ·9-			Date of Disbursement
	Mailing Address			M M / D D / Y Y Y
	City	State	Zip Code	Amount of Each Disbursement this Period
	Purpose of Disbursement			, , .
	Full Name (Last, First, Middle Initial) / Full Organ	nization Name	e	Date of Dichurcoment
C.				Date of Disbursement
	Mailing Address			
	City	State	Zip Code	Amount of Each Disbursement this Period
	Purpose of Disbursement			, , .
	Full Name (Last, First, Middle Initial) / Full Organ	nization Name	9	
D.				Date of Disbursement
	Mailing Address			M M / D D / Y Y Y
	City	State	Zip Code	Amount of Each Disbursement this Period
	Purpose of Disbursement			, , .
				<u> </u>
E.	Full Name (Last, First, Middle Initial) / Full Organ	inization Nam	e	Date of Disbursement
	Mailing Address		· ·	M M / D D / Y Y Y
	City	State	Zip Code	Amount of Each Disbursement this Period
	Purpose of Disbursement			, , ,
_	SUBTOTAL of Disbursements This Page (optional)	1		0000
	FOTAL This Period (last page this line number only	~		
ť	CINE TIME I GROW (IGS) Page this line number of		•••••••••••••••••••••••••••••••••••••••	, , , , , , , , , , , , , , , , , , , ,

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