

**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

BLACK MEN VOTE

ADDRESS (number and street)

6301 CHAUCER LANE

Check if different  
than previously  
reported. (ACC)

ALEXANDRIA

VA

22304

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C C00528950

3. IS THIS  
REPORTNEW  
(N)

OR

AMENDED  
(A)

## 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)☐ May 20 (M5)☐ Aug 20 (M8)☐ Nov 20 (M11)  
(Non-Election  
Year Only)☐ Mar 20 (M3)☐ Jun 20 (M6)☐ Sep 20 (M9)☐ Dec 20 (M12)  
(Non-Election  
Year Only)☐ Apr 20 (M4)☐ Jul 20 (M7)☐ Oct 20 (M10)☐ Jan 31 (YE)(c) 12-Day  
PRE-Election  
Report for the:☐ Primary (12P)☐ General (12G)☐ Runoff (12R)☐ Convention (12C)☐ Special (12S)

Election on

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

in the  
State of(d) 30-Day  
POST-Election  
Report for the:☐ General (30G)☐ Runoff (30R)☐ Special (30S)

Election on

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

in the  
State of

5. Covering Period

M M M / D D D / Y Y Y Y Y Y  
07 01 2020

through

M M M / D D D / Y Y Y Y Y Y  
09 30 2020

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

KIRK, WILLIAM, , , Jr.

Type or Print Name of Treasurer

Signature of Treasurer

KIRK, WILLIAM, , , Jr.

[Electronically Filed]

Date

M M M / D D D / Y Y Y Y Y Y  
10 15 2020

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

Office  
Use  
Only**FEC FORM 3X**  
Rev. 05/2016

# SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 05/2016)

Page 2

Write or Type Committee Name

**BLACK MEN VOTE**

Report Covering the Period:

From:

M M	/	D D	/	Y Y Y Y Y
07		01		2020

To:

M M	/	D D	/	Y Y Y Y Y
09		30		2020

	COLUMN A This Period	COLUMN B Calendar Year-to-Date																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																															
6. (a) Cash on Hand January 1, <table><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td colspan="5">2020</td></tr></table>	Y	Y	Y	Y	Y	2020						<table><tr><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><t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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)

Page 3

Write or Type Committee Name

**BLACK MEN VOTE**

Report Covering the Period:

From:

M M	/	D D	/	Y Y Y Y Y
07	/	01	/	2020

To:

M M	/	D D	/	Y Y Y Y Y
09	/	30	/	2020

**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).....

231000.00

231300.00

(ii) Unitemized .....

61.07

61.07

(iii) TOTAL (add

Lines 11(a)(i) and (ii).....▶

231061.07

231361.07

(b) Political Party Committees .....

0.00

0.00

(c) Other Political Committees

(such as PACs).....

1100000.00

1100000.00

(d) Total Contributions (add Lines

11(a)(iii), (b), and (c)) (Carry

Totals to Line 33, page 5).....▶

1331061.07

1331361.07

## 12. Transfers From Affiliated/Other

Party Committees.....

0.00

0.00

## 13. All Loans Received .....

100000.00

100000.00

## 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)).....▶

1431061.07

1431361.07

## 20. Total Federal Receipts

(subtract Line 18(c) from Line 19).....▶

1431061.07

1431361.07

**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 4

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 .....	250455.22	250455.22
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	250455.22	250455.22
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) .....	0.00	0.00
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 .....	0.00	0.00
(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)).....	0.00	0.00
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)) ..	250455.22	250455.22
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	250455.22	250455.22

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 5

<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) .....	1331061.07	1331361.07
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	1331061.07	1331361.07
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	250455.22	250455.22
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	250455.22	250455.22

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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

FOR LINE NUMBER: PAGE 6 OF 21  
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**BLACK MEN VOTE**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. Conway, Ron, , ,**

Mailing Address 588 Sutter St  
#299

City  
San Francisco

State  
CA

Zip Code  
94102

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SV Angel LLC

Occupation (for Individual)  
Investor

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

25000.00

Date of Receipt

MM / DD / YYYY  
09 / 01 / 2020

Transaction ID : SA11AI.4207

Amount of Each Receipt this Period

25000.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. Gund, Agnes, , ,**

Mailing Address 765 Park Avenue

City  
New York

State  
NY

Zip Code  
10021

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 ▼

5000.00

Date of Receipt

MM / DD / YYYY  
09 / 23 / 2020

Transaction ID : SA11AI.4216

Amount of Each Receipt this Period

5000.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. Jordan/Delaney Family Trust**

Mailing Address

City  
Oakland

State  
CA

Zip Code  
94612

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 ▼

200000.00

Date of Receipt

MM / DD / YYYY  
08 / 13 / 2020

Transaction ID : SA11AI.4141

Amount of Each Receipt this Period

200000.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

230000.00

# SCHEDULE A (FEC Form 3X)

## ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 7 OF 21

(check only one)

<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)

BLACK MEN VOTE

<b>A. White, Frank, , ,</b> Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Mailing Address 13613 Sir Tyomas Way City Silver Spring State MD Zip Code 20904 FEC ID number of contributing federal political committee. C Name of Employer (for Individual) Retired Occupation (for Individual) Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 100000.00			Date of Receipt M M / D D / Y Y Y Y Y Y 09 / 30 / 2020 <b>Transaction ID : SA11AI.4199</b> Amount of Each Receipt this Period 70320.00 <input checked="" type="checkbox"/> Memo Item In-kind - Website/Ads/Vehicle
<b>B. Zoller, Ann, , ,</b> Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Mailing Address 1400 Chagrin River Rd City Gates Mills State OH Zip Code 44040 FEC ID number of contributing federal political committee. C Name of Employer (for Individual) Self Occupation (for Individual) Consultant Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1000.00			Date of Receipt M M / D D / Y Y Y Y Y Y 09 / 03 / 2020 <b>Transaction ID : SA11AI.4218</b> Amount of Each Receipt this Period 1000.00 <input type="checkbox"/> Memo Item
<b>C.</b> Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Mailing Address City State Zip Code FEC ID number of contributing federal political committee. C Name of Employer (for Individual) Occupation (for Individual) Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Aggregate Year-to-Date ▼			Date of Receipt M M / D D / Y Y Y Y Y Y Amount of Each Receipt this Period Memo Item
<b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶			1000.00
<b>TOTAL</b> This Period (last page this line number only)..... ▶			231000.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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

FOR LINE NUMBER: PAGE 8 OF 21

(check only one)

☐ 11a ☐ 11b ☒ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**BLACK MEN VOTE**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **A. CONGRESSIONAL BLACK CAUCUS PAC**

Mailing Address PO BOX 75357

City  
WASHINGTON

State  
DC

Zip Code  
20013

FEC ID number of contributing  
federal political committee.

**C** C00147512

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

100000.00

Date of Receipt

**09** / **24** / **2020**

**Transaction ID : SA11C.4145**

Amount of Each Receipt this Period

100000.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **B. DEMOCRACY PAC**

Mailing Address 700 13TH STREET, NW  
SUITE 600

City  
WASHINGTON

State  
DC

Zip Code  
20005

FEC ID number of contributing  
federal political committee.

**C** C00693382

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750000.00

Date of Receipt

**09** / **11** / **2020**

**Transaction ID : SA11C.4143**

Amount of Each Receipt this Period

750000.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **C. LCV VICTORY FUND**

Mailing Address 740 15TH ST NW  
7TH FLOOR

City  
WASHINGTON

State  
DC

Zip Code  
20005

FEC ID number of contributing  
federal political committee.

**C** C00486845

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

250000.00

Date of Receipt

**09** / **18** / **2020**

**Transaction ID : SA11C.4147**

Amount of Each Receipt this Period

250000.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

1100000.00

1100000.00



# **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)

☐ 11a ☐ 11b ☐ 11c ☐ 12  
☒ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**BLACK MEN VOTE**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. White, Frank, , ,**

Mailing Address 13613 Sir Tyhomas Way

City  
Silver Spring

State  
MD

Zip Code  
20904

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 ▼

50000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 / 14 / 2020

**Transaction ID : SA13.4139**

Amount of Each Receipt this Period

50000.00

☐ Memo Item  
Loan

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. White, Frank, , ,**

Mailing Address 13613 Sir Tyhomas Way

City  
Silver Spring

State  
MD

Zip Code  
20904

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 ▼

100000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
08 / 04 / 2020

**Transaction ID : SA13.4140**

Amount of Each Receipt this Period

50000.00

☐ Memo Item  
Loan

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C.**

Mailing Address

City

State

Zip Code

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 ▼

Date of Receipt

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

Amount of Each Receipt this Period

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

100000.00

100000.00

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 10 OF 21

<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)

**BLACK MEN VOTE**

Full Name (Last, First, Middle Initial)

**A. eviPLIST**

Mailing Address

City  
WashingtonState  
DC

Zip Code

Purpose of Disbursement  
Entertainment Consulting

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			1	7			2	0	2	0		

FEC Identification Number

**C****Transaction ID : SB21B.4183**

Amount of Each Disbursement this Period

8500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Facebook**

Mailing Address 1 Hacker Way

City  
Menlo ParkState  
CAZip Code  
94025Purpose of Disbursement  
Internet Advertising

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify)

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			0	1			2	0	2	0		

FEC Identification Number

**C****Transaction ID : SB21B.4175**

Amount of Each Disbursement this Period

249.87

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Facebook**

Mailing Address 1 Hacker Way

City  
Menlo ParkState  
CAZip Code  
94025Purpose of Disbursement  
Internet Advertising

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			1	8			2	0	2	0		

FEC Identification Number

**C****Transaction ID : SB21B.4186**

Amount of Each Disbursement this Period

49.99

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►

8799.86

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

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 11 OF 21

<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)

**BLACK MEN VOTE**

Full Name (Last, First, Middle Initial)

**A. Facebook**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09		24		2020

Mailing Address 1 Hacker Way

City  
Menlo ParkState  
CAZip Code  
94025Purpose of Disbursement  
Internet Advertising

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

FEC Identification Number

**C****Transaction ID : SB21B.4192**

Amount of Each Disbursement this Period

350.01

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. INDUSTRIAL BANK OF WASHINGTON**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09		17		2020

Mailing Address 1317 F STREET, NW

City  
WASHINGTONState  
DCZip Code  
20004

Purpose of Disbursement

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

FEC Identification Number

**C****Transaction ID : SB21B.4182**

Amount of Each Disbursement this Period

12.50

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. INDUSTRIAL BANK OF WASHINGTON**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09		18		2020

Mailing Address 1317 F STREET, NW

City  
WASHINGTONState  
DCZip Code  
20004

Purpose of Disbursement

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

FEC Identification Number

**C****Transaction ID : SB21B.4185**

Amount of Each Disbursement this Period

10.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

372.51

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 12 OF 21

<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)

**BLACK MEN VOTE**

Full Name (Last, First, Middle Initial)

**A. INDUSTRIAL BANK OF WASHINGTON**

Mailing Address 1317 F STREET, NW

City  
WASHINGTONState  
DCZip Code  
20004

Purpose of Disbursement

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		21		2020

FEC Identification Number

**C****Transaction ID : SB21B.4187**

Amount of Each Disbursement this Period

12.50

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. INDUSTRIAL BANK OF WASHINGTON**

Mailing Address 1317 F STREET, NW

City  
WASHINGTONState  
DCZip Code  
20004

Purpose of Disbursement

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		23		2020

FEC Identification Number

**C****Transaction ID : SB21B.4189**

Amount of Each Disbursement this Period

25.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. INDUSTRIAL BANK OF WASHINGTON**

Mailing Address 1317 F STREET, NW

City  
WASHINGTONState  
DCZip Code  
20004

Purpose of Disbursement

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		24		2020

FEC Identification Number

**C****Transaction ID : SB21B.4191**

Amount of Each Disbursement this Period

10.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

47.50

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 13 OF 21

<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)

**BLACK MEN VOTE**

Full Name (Last, First, Middle Initial)

**A. INDUSTRIAL BANK OF WASHINGTON**

Mailing Address 1317 F STREET, NW

City  
WASHINGTONState  
DCZip Code  
20004

Purpose of Disbursement

Candidate Name

 Office Sought: ☐ House  
☐ Senate  
☐ President

 Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		25		2020

FEC Identification Number

**C****Transaction ID : SB21B.4193**

Amount of Each Disbursement this Period

25.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. INDUSTRIAL BANK OF WASHINGTON**

Mailing Address 1317 F STREET, NW

City  
WASHINGTONState  
DCZip Code  
20004

Purpose of Disbursement

Candidate Name

 Office Sought: ☐ House  
☐ Senate  
☐ President

 Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		25		2020

FEC Identification Number

**C****Transaction ID : SB21B.4194**

Amount of Each Disbursement this Period

2.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Kur8ted**

Mailing Address 210 Clinton Ave

City  
BrooklynState  
NYZip Code  
11205Purpose of Disbursement  
Merchandise

Candidate Name

 Office Sought: ☐ House  
☐ Senate  
☐ President

 Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		26		2020

FEC Identification Number

**C****Transaction ID : SB21B.4168**

Amount of Each Disbursement this Period

17500.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

17527.00
----------

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 14 OF 21

<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)

**BLACK MEN VOTE**

Full Name (Last, First, Middle Initial)

**A. Kur8ted**

Mailing Address 210 Clinton Ave

City  
BrooklynState  
NYZip Code  
11205Purpose of Disbursement  
Merchandise

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		10		2020

FEC Identification Number

**C****Transaction ID : SB21B.4180**

Amount of Each Disbursement this Period

17400.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Kur8ted**

Mailing Address 210 Clinton Ave

City  
BrooklynState  
NYZip Code  
11205Purpose of Disbursement  
Merchandise

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		23		2020

FEC Identification Number

**C****Transaction ID : SB21B.4190**

Amount of Each Disbursement this Period

14250.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Riebling PPLC**Mailing Address 1717 Pennsylvania Ave. NW  
Suite 1025City  
WashingtonState  
DCZip Code  
20006Purpose of Disbursement  
Legal Services

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		21		2020

FEC Identification Number

**C****Transaction ID : SB21B.4163**

Amount of Each Disbursement this Period

2268.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

33918.00

# **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)

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☒ 21b ☐ 22 ☐ 23 ☐ 26 ☐ 27  
☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

**BLACK MEN VOTE**

Full Name (Last, First, Middle Initial)

## **A. Social Expressions**

Mailing Address 1806 Waternere Ln

City  
Winddermere

State  
FL

Zip Code  
34786

Purpose of Disbursement  
Data Analysis/Website and Social Media Consulting

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
08 / 11 / 2020

FEC Identification Number

C [REDACTED]

**Transaction ID : SB21B.4157**

Amount of Each Disbursement this Period

[REDACTED] 25000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

## **B. Social Expressions**

Mailing Address 1806 Waternere Ln

City  
Winddermere

State  
FL

Zip Code  
34786

Purpose of Disbursement  
Data Analysis/Website and Social Media Consulting

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
08 / 21 / 2020

FEC Identification Number

C [REDACTED]

**Transaction ID : SB21B.4162**

Amount of Each Disbursement this Period

[REDACTED] 25000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

## **C. Social Expressions**

Mailing Address 1806 Waternere Ln

City  
Winddermere

State  
FL

Zip Code  
34786

Purpose of Disbursement  
Data Analysis/Website and Social Media Consulting

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
09 / 01 / 2020

FEC Identification Number

C [REDACTED]

**Transaction ID : SB21B.4173**

Amount of Each Disbursement this Period

[REDACTED] 25000.00

☐ Memo Item

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

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

[REDACTED] 75000.00

[REDACTED]

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 16 OF 21

<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)

**BLACK MEN VOTE**

Full Name (Last, First, Middle Initial)

**A. Social Expressions**

Mailing Address 1806 Waternere Ln

City  
WinndermereState  
FLZip Code  
34786Purpose of Disbursement  
Data Analysis/Website and Social Media Consulting

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			2	1			2	0	2	0		

FEC Identification Number

**C****Transaction ID : SB21B.4188**

Amount of Each Disbursement this Period

35000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. White, Frank, , ,**

Mailing Address 13613 Sir Tythomas Way

City  
Silver SpringState  
MDZip Code  
20904Purpose of Disbursement  
In-kind - Website/Ads/Vehicle

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify)

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			3	0			2	0	2	0		

FEC Identification Number

**C****Transaction ID : SB21B.4200**

Amount of Each Disbursement this Period

70320.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

**C. World Management Group Agency**

Mailing Address 14 Cambridge Pl

City  
BrooklynState  
NYZip Code  
11238Purpose of Disbursement  
Social Media/Website Consulting

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	7			3	0			2	0	2	0		

FEC Identification Number

**C****Transaction ID : SB21B.4152**

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).....▶

40000.00



**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 17 OF 21

<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)

**BLACK MEN VOTE**

Full Name (Last, First, Middle Initial)

**A. World Management Group Agency**

Mailing Address 14 Cambridge Pl

City  
BrooklynState  
NYZip Code  
11238Purpose of Disbursement  
Social Media/Website Consulting

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Category/  
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	8			0	3			2	0	2	0		

FEC Identification Number

**C****Transaction ID : SB21B.4154**

Amount of Each Disbursement this Period

6500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. World Management Group Agency**

Mailing Address 14 Cambridge Pl

City  
BrooklynState  
NYZip Code  
11238Purpose of Disbursement  
Social Media/Website Consulting

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Category/  
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	8			1	7			2	0	2	0		

FEC Identification Number

**C****Transaction ID : SB21B.4160**

Amount of Each Disbursement this Period

8400.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. World Management Group Agency**

Mailing Address 14 Cambridge Pl

City  
BrooklynState  
NYZip Code  
11238Purpose of Disbursement  
Social Media/Website Consulting

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Category/  
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			0	1			2	0	2	0		

FEC Identification Number

**C****Transaction ID : SB21B.4174**

Amount of Each Disbursement this Period

53700.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

68600.00

# **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)

PAGE 18 OF 21

☒ 21b ☐ 22 ☐ 23 ☐ 26 ☐ 27  
☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

**BLACK MEN VOTE**

Full Name (Last, First, Middle Initial)

## **A. World Management Group Agency**

Mailing Address 14 Cambridge Pl

City  
Brooklyn

State  
NY

Zip Code  
11238

Purpose of Disbursement  
Social Media/Website Consulting

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
09 / 29 / 2020

FEC Identification Number

C

**Transaction ID : SB21B.4197**

Amount of Each Disbursement this Period

6000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

## **B.**

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

☐ Memo Item

Full Name (Last, First, Middle Initial)

## **C.**

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y 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)..... ►

6000.00

250264.87

**SCHEDULE C (FEC Form 3X)****LOANS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

PAGE 19 OF 21

FOR LINE 13 OF FORM 3X

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.4139

**BLACK MEN VOTE****LOAN SOURCE** Full Name (Last, First, Middle Initial)  
White, Frank, , ,☒ Memo Item

Election:

☐ Primary☐ General☐ Other (specify) ▼

Mailing Address 13613 Sir Tyhomas Way

City

Silver Spring

State

MD

ZIP Code

20904

Original Amount of Loan

50000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

50000.00

**TERMS**

Date Incurred

M M / D D / Y Y Y Y  
07 / 14 / 2020

Date Due

M M / D D / Y Y Y Y

None

Interest Rate

0.00

% (apr)

Secured:

☐ Yes☒ No**List All Endorsers or Guarantors (if any) to Loan Source**

1. 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

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:**SUBTOTALS** This Period This Page (optional)..... ►

50000.00

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

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

**SCHEDULE C (FEC Form 3X)****LOANS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

PAGE 20 OF 21

FOR LINE 13 OF FORM 3X

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.4140

**BLACK MEN VOTE****LOAN SOURCE** Full Name (Last, First, Middle Initial)  
White, Frank, , ,**N** ☐ Memo Item

Election:

☐ Primary☐ General☐ Other (specify) ▼

Mailing Address 13613 Sir Tyhomas Way

City

Silver Spring

State

MD

ZIP Code

20904

Original Amount of Loan

50000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

50000.00

**TERMS**

Date Incurred

M M / D D / Y Y Y Y  
08 / 04 / 2020

Date Due

M M / D D / Y Y Y Y

None

Interest Rate

0.00

% (apr)

Secured:

☐ Yes☒ No

## List All Endorsers or Guarantors (if any) to Loan Source

1. 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

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:**SUBTOTALS** This Period This Page (optional)..... ►

50000.00

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

100000.00

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

**SCHEDULE D (FEC Form 3X)****DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate  
schedule(s)  
for each  
numbered line)

PAGE 21 OF 21

FOR LINE NUMBER:  
(check only one)
☐ 9  
☒ 10

NAME OF COMMITTEE (In Full)

**BLACK MEN VOTE**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

**Riebling PPLC**Nature of Debt (Purpose):  
Legal ServicesMailing Address 1717 Pennsylvania Ave. NW  
Suite 1025City  
WashingtonState  
DCZip Code  
20006

Outstanding Balance Beginning This Period

0.00

Transaction ID : SD10.4195

Amount Incurred This Period

10038.82

Payment This Period

0.00

Outstanding Balance at Close of This Period

10038.82

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

**White, Frank, , ,**Nature of Debt (Purpose):  
Fundraising Consultant/Event  
Consultant/Website

Mailing Address 13613 Sir Tyhomias Way

City  
Silver SpringState  
MDZip Code  
20904

Outstanding Balance Beginning This Period

19000.00

Transaction ID : SD10.4135

Amount Incurred This Period

70320.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

89320.00

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)..... ►

99358.82

2) **TOTALS** This Period (last page this line number only)..... ►

99358.82

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

100000.00

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

199358.82