

# 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.

Building Relationships in Diverse Geographic Environments PAC

ADDRESS (number and street)   
  
 Check if different than previously reported. (ACC)

2. FEC IDENTIFICATION NUMBER ▼ CITY ▲ STATE ▲ ZIP CODE ▲

3. IS THIS REPORT  NEW (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:
- |                                      |                                      |                                       |  |
|--------------------------------------|--------------------------------------|---------------------------------------|--|
| <input type="checkbox"/> Feb 20 (M2) | <input type="checkbox"/> May 20 (M5) | <input type="checkbox"/> Aug 20 (M8)  | <input type="checkbox"/> Nov 20 (M11) (Non-Election Year Only) |
| <input type="checkbox"/> Mar 20 (M3) | <input type="checkbox"/> Jun 20 (M6) | <input type="checkbox"/> Sep 20 (M9)  | <input type="checkbox"/> Dec 20 (M12) (Non-Election Year Only) |
| <input type="checkbox"/> Apr 20 (M4) | <input type="checkbox"/> Jul 20 (M7) | <input type="checkbox"/> Oct 20 (M10) | <input checked="" type="checkbox"/> Jan 31 (YE)                |

- (c) 12-Day PRE-Election Report for the:
- |   |  |                                       |
|---|--|---------------------------------------|
| <input type="checkbox"/> Primary (12P)    | <input type="checkbox"/> General (12G) | <input type="checkbox"/> Runoff (12R) |
| <input type="checkbox"/> Convention (12C) | <input type="checkbox"/> Special (12S) |                                       |

Election on  /  /  in the State of

- (d) 30-Day POST-Election Report for the:
- |  |                                       |  |
|--|---------------------------------------|--|
| <input type="checkbox"/> General (30G) | <input type="checkbox"/> Runoff (30R) | <input type="checkbox"/> Special (30S) |
|--|---------------------------------------|--|

Election on  /  /  in the State of

5. Covering Period  /  /  through  /  /

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

Clyburn, John, , ,

Type or Print Name of Treasurer \_\_\_\_\_

Signature of Treasurer Clyburn, John, , , [Electronically Filed] Date  /  /

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									
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**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 05/2016)

Write or Type Committee Name

**Building Relationships in Diverse Geographic Environments PAC**

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="2020"/>	<input type="text" value="94702.72"/>	<input type="text" value="94702.72"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="154545.43"/>	
(c) Total Receipts (from Line 19) .....	<input type="text" value="29500.00"/>	<input type="text" value="752725.00"/>
(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="184045.43"/>	<input type="text" value="847427.72"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="28281.04"/>	<input type="text" value="691663.33"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="155764.39"/>	<input type="text" value="155764.39"/>
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<input type="text" value="2500.00"/>	

This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

**For further information contact:**  
  
Federal Election Commission  
999 E Street, NW  
Washington, DC 20463  
  
Toll Free 800-424-9530  
Local 202-694-1100

## DETAILED SUMMARY PAGE of Receipts

Write or Type Committee Name

**Building Relationships in Diverse Geographic Environments PAC**

Report Covering the Period: From: M M / D D / Y Y Y Y 11 / 24 / 2020 To: M M / D D / Y Y Y Y 12 / 31 / 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).....	500.00	64800.00
(ii) Unitemized .....	0.00	25.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	500.00	64825.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	29000.00	685900.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) .....	29500.00	750725.00
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	2000.00
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)).....▶	29500.00	752725.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	29500.00	752725.00

**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 .....	23281.04	135163.33
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	23281.04	135163.33
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	5000.00	554000.00
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	2500.00
(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	2500.00
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)) ..	28281.04	691663.33
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	28281.04	691663.33

**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) .....	29500.00	750725.00
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	2500.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	29500.00	748225.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	23281.04	135163.33
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	23281.04	135163.33

**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 16  
(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

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)  
**Building Relationships in Diverse Geographic Environments PAC**

**A. Venable, Nicole, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1214 C St NE

City Washington	State DC	Zip Code 20002-6332
--------------------	-------------	------------------------

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

Name of Employer (for Individual) Bockorny Group	Occupation (for Individual) Government Affairs
---	---

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	20	/	2020

**Transaction ID : C11052092A**

Amount of Each Receipt this Period  
500.00

Memo Item

\* Earmarked Contribution: See Below

**B. ACTBLUE**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address P.O. Box 382110

City Cambridge	State MA	Zip Code 02238
-------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00401224

Name of Employer (for Individual)	Occupation (for Individual) Conduit total listed in Agg. field
-----------------------------------	---

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	20	/	2020

**Transaction ID : C11052092AB**

Amount of Each Receipt this Period  
500.00

Memo Item

Note: Above Contribution earmarked through this organization.

**C.**  
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:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt  

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

Amount of Each Receipt this Period

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	500.00
<b>TOTAL</b> This Period (last page this line number only).....	500.00

**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 16
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" 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)  
**Building Relationships in Diverse Geographic Environments PAC**

**A. AECOM PAC**

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

Mailing Address 2450 CRYSTAL DRIVE  
SUITE 500

City ARLINGTON State VA Zip Code 22202

FEC ID number of contributing federal political committee. **C** C00374447

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2500.00

Date of Receipt  
12 / 31 / 2020  
**Transaction ID : C11050589**

Amount of Each Receipt this Period  
2500.00

Memo Item

**B. DIAGEO NORTH AMERICA INC. EMPLOYEES' POLITICAL PA**

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

Mailing Address 801 MAIN AVENUE  
PO BOX 778

City NORWALK State CT Zip Code 06851

FEC ID number of contributing federal political committee. **C** C00034470

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1500.00

Date of Receipt  
12 / 31 / 2020  
**Transaction ID : C11050587**

Amount of Each Receipt this Period  
1500.00

Memo Item

**C. INT'L. ASSOCIATION OF BRIDGE, STRUCTURAL, ORNAMENTAL & REINFORCING IRON WORKERS (IPAL)**

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

Mailing Address 1750 NEW YORK AVE. NW  
SUITE 400

City WASHINGTON State DC Zip Code 20006

FEC ID number of contributing federal political committee. **C** C00027359

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

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
12 / 18 / 2020  
**Transaction ID : C11052094**

Amount of Each Receipt this Period  
5000.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	9000.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 8 OF 16
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" 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)  
**Building Relationships in Diverse Geographic Environments PAC**

**A. LIBERTY MUTUAL INSURANCE COMPANY-PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Mailing Address 175 BERKELEY STREET

City BOSTON	State MA	Zip Code 02116
----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00171843

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
12		31		2020

**Transaction ID : C11050593**

Amount of Each Receipt this Period  
5000.00

Memo Item

**B. NATIONAL ELECTRICAL CONTRACTORS ASSOCIATION POLITICAL ACTION COMMITTEE (NECAPAC)**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Mailing Address 3 BETHESDA METRO CENTER SUITE 1100

City BETHESDA	State MD	Zip Code 20814
------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00113811

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2500.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
12		31		2020

**Transaction ID : C11050586**

Amount of Each Receipt this Period  
2500.00

Memo Item

**C. POLITICAL ACTION COMMITTEE OF THE AMERICAN ASSOCIATION OF ORTHOPAEDIC SURGEONS**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Mailing Address 317 MASSACHUSETTS AVENUE, NE 1ST FLOOR

City WASHINGTON	State DC	Zip Code 20002
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00343137

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

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
2500.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
12		31		2020

**Transaction ID : C11052091**

Amount of Each Receipt this Period  
2500.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	10000.00
<b>TOTAL</b> This Period (last page this line number only).....	



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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 9 OF 16
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" 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)  
**Building Relationships in Diverse Geographic Environments PAC**

**A. POWERPAC OF THE EDISON ELECTRIC INSTITUTE**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Mailing Address 701 PENNSYLVANIA AVENUE NW

City WASHINGTON	State DC	Zip Code 20004
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00095869

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	17	/	2020

**Transaction ID : C11052093**

Amount of Each Receipt this Period  
5000.00

Memo Item

**B. S&P GLOBAL INC. POLITICAL ACTION COMMITTEE**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Mailing Address 55 WATER STREET

City NEW YORK	State NY	Zip Code 10041
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FEC ID number of contributing federal political committee. **C** C00494682

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2500.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	31	/	2020

**Transaction ID : C11050591**

Amount of Each Receipt this Period  
2500.00

Memo Item

**C. US ONCOLOGY NETWORK PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Mailing Address 10101 WOODLOCH FOREST DRIVE

City THE WOODLANDS	State TX	Zip Code 77380
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FEC ID number of contributing federal political committee. **C** C00339655

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

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	31	/	2020

**Transaction ID : C11050588**

Amount of Each Receipt this Period  
2500.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	10000.00
<b>TOTAL</b> This Period (last page this line number only).....	29000.00

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**Building Relationships in Diverse Geographic Environments PAC**

Full Name (Last, First, Middle Initial)

**A. ActBlue Technical Services**

Mailing Address 366 Summer Street

City  
Somerville

State  
MA

Zip Code  
02144

Purpose of Disbursement  
Bank Fee

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12	/	20	/	2020

FEC Identification Number

C

**Transaction ID : D562304**

Amount of Each Disbursement this Period

19.75

Memo Item

Full Name (Last, First, Middle Initial)

**B. Angerholzer Broz Consulting, LLC**

Mailing Address 499 S Capitol St SW  
Suite 422

City  
Washington

State  
DC

Zip Code  
20003-4013

Purpose of Disbursement  
Fundraising Consulting

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12	/	16	/	2020

FEC Identification Number

C

**Transaction ID : D562306**

Amount of Each Disbursement this Period

6000.00

Memo Item

Full Name (Last, First, Middle Initial)

**C. Angerholzer Broz Consulting, LLC**

Mailing Address 499 S Capitol St SW  
Suite 422

City  
Washington

State  
DC

Zip Code  
20003-4013

Purpose of Disbursement  
Office Telephone & Internet

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12	/	16	/	2020

FEC Identification Number

C

**Transaction ID : D562307**

Amount of Each Disbursement this Period

25.00

Memo Item

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

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

6044.75

**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)

**Building Relationships in Diverse Geographic Environments PAC**

Full Name (Last, First, Middle Initial)

**A. Angerholzer Broz Consulting, LLC**

Mailing Address 499 S Capitol St SW  
Suite 422

City  
Washington

State  
DC

Zip Code  
20003-4013

Purpose of Disbursement  
Fundraising Consulting

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Category/  
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
12			02			2020			

FEC Identification Number

C [REDACTED]

**Transaction ID : D562314**

Amount of Each Disbursement this Period

[REDACTED] 6000.00

Memo Item

Full Name (Last, First, Middle Initial)

**B. Angerholzer Broz Consulting, LLC**

Mailing Address 499 S Capitol St SW  
Suite 422

City  
Washington

State  
DC

Zip Code  
20003-4013

Purpose of Disbursement  
Fundraising Consulting

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify)

State: District:

Category/  
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
12			02			2020			

FEC Identification Number

C [REDACTED]

**Transaction ID : D562315**

Amount of Each Disbursement this Period

[REDACTED] 6000.00

Memo Item

Full Name (Last, First, Middle Initial)

**C. Angerholzer Broz Consulting, LLC**

Mailing Address 499 S Capitol St SW  
Suite 422

City  
Washington

State  
DC

Zip Code  
20003-4013

Purpose of Disbursement  
Office Telephone & Internet

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Category/  
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
12			02			2020			

FEC Identification Number

C [REDACTED]

**Transaction ID : D562316**

Amount of Each Disbursement this Period

[REDACTED] 25.00

Memo Item

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

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

[REDACTED] 12025.00

[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)

**Building Relationships in Diverse Geographic Environments PAC**

Full Name (Last, First, Middle Initial)

**A. Angerholzer Broz Consulting, LLC**

Mailing Address 499 S Capitol St SW  
Suite 422

City Washington State DC Zip Code 20003-4013

Purpose of Disbursement  
Office Telephone & Internet

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
12 / 02 / 2020

FEC Identification Number

C

Transaction ID : D562317

Amount of Each Disbursement this Period

25.00

Memo Item

Full Name (Last, First, Middle Initial)

**B. Bank of America**

Mailing Address 100 N. Tryon Street

City Charlotte State NC Zip Code 28255

Purpose of Disbursement  
Bank Fees

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify)

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
12 / 15 / 2020

FEC Identification Number

C

Transaction ID : D562303

Amount of Each Disbursement this Period

78.35

Memo Item

Full Name (Last, First, Middle Initial)

**C. Angerholzer Broz Consulting, LLC**

Mailing Address 499 S Capitol St SW  
Suite 422

City Washington State DC Zip Code 20003-4013

Purpose of Disbursement  
New Member Reception

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
12 / 16 / 2020

FEC Identification Number

C

Transaction ID : D562308

Amount of Each Disbursement this Period

2021.76

Memo Item

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

2125.11

**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 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)

**Building Relationships in Diverse Geographic Environments PAC**

Full Name (Last, First, Middle Initial)

**A. KLH Group**

Mailing Address 78 Line Street

City Charleston State SC Zip Code 29403

Purpose of Disbursement  
New Member Reception

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 Y Y  
12 / 16 / 2020

FEC Identification Number

C [ ]

**Transaction ID : D562310**

Amount of Each Disbursement this Period

[ ] 2021.76

Memo Item

Full Name (Last, First, Middle Initial)

**B. Angerholzer Broz Consulting, LLC**

Mailing Address 499 S Capitol St SW  
Suite 422

City Washington State DC Zip Code 20003-4013

Purpose of Disbursement  
Office Expenses

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 Y Y  
12 / 16 / 2020

FEC Identification Number

C [ ]

**Transaction ID : D562309**

Amount of Each Disbursement this Period

[ ] 88.28

Memo Item

Full Name (Last, First, Middle Initial)

**C. Dell Technologies**

Mailing Address PO Box 5292

City Carol Stream State IL Zip Code 60197

Purpose of Disbursement  
Computer Software

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 Y Y  
12 / 16 / 2020

FEC Identification Number

C [ ]

**Transaction ID : D562311**

Amount of Each Disbursement this Period

[ ] 30.07

Memo Item

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

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

[ ] 88.28

[ ]

**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)  
**Building Relationships in Diverse Geographic Environments PAC**

Full Name (Last, First, Middle Initial)  
**A. Angerholzer Broz Consulting, LLC**

Date of Disbursement: 12 / 02 / 2020

Mailing Address: 499 S Capitol St SW, Suite 422

City: Washington, State: DC, Zip Code: 20003-4013

Purpose of Disbursement: Office Supplies & Expenses

Candidate Name: \_\_\_\_\_

Office Sought:  House,  Senate,  President

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

State: \_\_\_\_\_ District: \_\_\_\_\_

FEC Identification Number: **C**

Transaction ID: **D562325**

Amount of Each Disbursement this Period: 260.40

Memo Item

Full Name (Last, First, Middle Initial)  
**B. Dell Technologies**

Date of Disbursement: 12 / 02 / 2020

Mailing Address: PO Box 5292

City: Carol Stream, State: IL, Zip Code: 60197

Purpose of Disbursement: Computer Software

Candidate Name: \_\_\_\_\_

Office Sought:  House,  Senate,  President

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

State: \_\_\_\_\_ District: \_\_\_\_\_

FEC Identification Number: **C**

Transaction ID: **D562330**

Amount of Each Disbursement this Period: 30.07

Memo Item

Full Name (Last, First, Middle Initial)  
**C. Angerholzer Broz Consulting, LLC**

Date of Disbursement: 12 / 02 / 2020

Mailing Address: 499 S Capitol St SW, Suite 422

City: Washington, State: DC, Zip Code: 20003-4013

Purpose of Disbursement: Data Processing

Candidate Name: \_\_\_\_\_

Office Sought:  House,  Senate,  President

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

State: \_\_\_\_\_ District: \_\_\_\_\_

FEC Identification Number: **C**

Transaction ID: **D562326**

Amount of Each Disbursement this Period: 2737.50

Memo Item

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	2997.90
<b>TOTAL</b> This Period (last page this line number only).....	23281.04

**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)  
**Building Relationships in Diverse Geographic Environments PAC**

Full Name (Last, First, Middle Initial)  
**A. TROY CARTER FOR CONGRESS**

Date of Disbursement  

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
1	2		3	1		2	0	2	0		

Mailing Address PO BOX 50730

City: New Orleans  
 State: LA  
 Zip Code: 70150

FEC Identification Number  
**C** C00763649  
**Transaction ID : D562305**  
 Amount of Each Disbursement this Period  
 5000.00

Purpose of Disbursement  
Contribution

Candidate Name  
**CARTER, TROY, A., , SR.**

Office Sought:  House  
 Senate  
 President  
 State: LA District: 02  
 Disbursement For: 2021  
 Primary  General  
 Other (specify) **Special General**

Memo Item

**B.**

Date of Disbursement  

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

Mailing Address

City: \_\_\_\_\_  
 State: \_\_\_\_\_  
 Zip Code: \_\_\_\_\_

FEC Identification Number  
**C** \_\_\_\_\_  
 Amount of Each Disbursement this Period  
 \_\_\_\_\_

Purpose of Disbursement

Candidate Name

Office Sought:  House  
 Senate  
 President  
 State: \_\_\_\_\_ District: \_\_\_\_\_  
 Disbursement For: \_\_\_\_\_  
 Primary  General  
 Other (specify) \_\_\_\_\_

Memo Item

**C.**

Date of Disbursement  

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

Mailing Address

City: \_\_\_\_\_  
 State: \_\_\_\_\_  
 Zip Code: \_\_\_\_\_

FEC Identification Number  
**C** \_\_\_\_\_  
 Amount of Each Disbursement this Period  
 \_\_\_\_\_

Purpose of Disbursement

Candidate Name

Office Sought:  House  
 Senate  
 President  
 State: \_\_\_\_\_ District: \_\_\_\_\_  
 Disbursement For: \_\_\_\_\_  
 Primary  General  
 Other (specify) \_\_\_\_\_

Memo Item

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

5000.00

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

5000.00

**SCHEDULE D (FEC Form 3X)**

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

(Use separate schedule(s) for each numbered line)	PAGE 16 OF 16
	FOR LINE NUMBER: (check only one)
<input type="checkbox"/> 9	<input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)  
**Building Relationships in Diverse Geographic Environments PAC**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Well &amp; Lighthouse LLC</b>			Nature of Debt (Purpose): Digital Communications
Mailing Address 1130 Connecticut Avenue NW Suite 675			
City Washington	State DC	Zip Code 20036	

Outstanding Balance Beginning This Period		Transaction ID : D562318	
0.00			
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	
2500.00	0.00	2500.00	

B. 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	

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) <b>SUBTOTALS</b> This Period This Page (optional)..... ▶	2500.00
2) <b>TOTALS</b> This Period (last page this line number only)..... ▶	2500.00
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only) ..... ▶	0.00
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) ▶	2500.00