

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 PAC

ADDRESS (number and street) 1800 Massachusetts Ave NW

Check if different than previously reported. (ACC) Washington DC 20036

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

C C00609388

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 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 M M / D D / Y Y Y Y Y Y in the State of

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

Election on M M / D D / Y Y Y Y Y Y in the State of DC

5. Covering Period M M / D D / Y Y Y Y Y Y 10 / 20 / 2016 through M M / D D / Y Y Y Y Y Y 11 / 28 / 2016

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

Hudson, Gerald, , ,

Type or Print Name of Treasurer _____

Signature of Treasurer Hudson, Gerald, , , [Electronically Filed] Date M M / D D / Y Y Y Y Y Y 12 / 08 / 2016

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

| | | | | | | | | | |
|-----------------|--|--|--|--|--|--|--|--|--|
| Office Use Only | | | | | | | | | |
|-----------------|--|--|--|--|--|--|--|--|--|

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 05/2016)

Write or Type Committee Name

Black 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="2016"/> | <input type="text" value="0.00"/> | <input type="text" value="0.00"/> |
| (b) Cash on Hand at Beginning of Reporting Period..... | <input type="text" value="857245.56"/> | |
| (c) Total Receipts (from Line 19) | <input type="text" value="1095425.55"/> | <input type="text" value="3710113.70"/> |
| (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="1952671.11"/> | <input type="text" value="3710113.70"/> |
| 7. Total Disbursements (from Line 31)..... | <input type="text" value="1509437.06"/> | <input type="text" value="3266879.65"/> |
| 8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))..... | <input type="text" value="443234.05"/> | <input type="text" value="443234.05"/> |
| 9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D) | <input type="text" value="0.00"/> | |
| 10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D) | <input type="text" value="0.00"/> | |

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

For further information contact:

Federal Election Commission
999 E Street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE of Receipts

FEC Form 3X (Rev. 05/2016)

Write or Type Committee Name

Black PAC

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

| I. Receipts | COLUMN A Total This Period | COLUMN B Calendar Year-to-Date |
|---|---------------------------------------|---|
| 11. Contributions (other than loans) From: | | |
| (a) Individuals/Persons Other Than Political Committees | | |
| (i) Itemized (use Schedule A)..... | 50000.00 | 903116.47 |
| (ii) Unitemized | 194.99 | 220.87 |
| (iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶ | 50194.99 | 903337.34 |
| (b) Political Party Committees | 0.00 | 0.00 |
| (c) Other Political Committees (such as PACs)..... | 1045230.56 | 2806776.36 |
| (d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) | 1095425.55 | 3710113.70 |
| 12. Transfers From Affiliated/Other Party Committees..... | 0.00 | 0.00 |
| 13. All Loans Received | 0.00 | 0.00 |
| 14. Loan Repayments Received..... | 0.00 | 0.00 |
| 15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)..... | 0.00 | 0.00 |
| 16. Refunds of Contributions Made to Federal Candidates and Other Political Committees..... | 0.00 | 0.00 |
| 17. Other Federal Receipts (Dividends, Interest, etc.)..... | 0.00 | 0.00 |
| 18. Transfers from Non-Federal and Levin Funds | | |
| (a) Non-Federal Account (from Schedule H3)..... | 0.00 | 0.00 |
| (b) Levin Funds (from Schedule H5) | 0.00 | 0.00 |
| (c) Total Transfers (add 18(a) and 18(b)).. | 0.00 | 0.00 |
| 19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)).....▶ | 1095425.55 | 3710113.70 |
| 20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶ | 1095425.55 | 3710113.70 |

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 | 103197.06 | 276879.54 |
| (c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) | 103197.06 | 276879.54 |
| 22. Transfers to Affiliated/Other Party Committees..... | 0.00 | 0.00 |
| 23. Contributions to Federal Candidates/Committees and Other Political Committees..... | 0.00 | 10000.00 |
| 24. Independent Expenditures (use Schedule E) | 1406240.00 | 2980000.11 |
| 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)) .. | 1509437.06 | 3266879.65 |
| 32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31)..... | 1509437.06 | 3266879.65 |

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 5

| III. Net Contributions/ Operating Expenditures | COLUMN A Total This Period | COLUMN B Calendar Year-to-Date |
|--|---------------------------------------|---|
| 33. Total Contributions (other than loans) (from Line 11(d), page 3) | 1095425.55 | 3710113.70 |
| 34. Total Contribution Refunds (from Line 28(d)) | 0.00 | 0.00 |
| 35. Net Contributions (other than loans) (subtract Line 34 from Line 33) | 1095425.55 | 3710113.70 |
| 36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) | 103197.06 | 276879.54 |
| 37. Offsets to Operating Expenditures (from Line 15, page 3)..... | 0.00 | 0.00 |
| 38. Net Operating Expenditures (subtract Line 37 from Line 36) | 103197.06 | 276879.54 |

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

| | |
|---|------------------------------|
| FOR LINE NUMBER: (check only one) | PAGE 6 OF 21 |
| <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)
Black PAC

A. SEIU Florida State Council

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

Mailing Address 14645 NW 77th Ave
Suite 201

| | | |
|-----------------|-------------|-------------------|
| City Hialeah | State FL | Zip Code 33014 |
|-----------------|-------------|-------------------|

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 ▼
50000.00

Date of Receipt

| | | | | |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 11 | | 07 | | 2016 |

Transaction ID : C7204574

Amount of Each Receipt this Period
50000.00

Memo Item

In-Kind Received: Digital Advertising

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:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

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

Amount of Each Receipt this Period

Memo Item

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 | / | D D | / | Y Y Y Y |
| | | | | |

Amount of Each Receipt this Period

Memo Item

| | |
|--|----------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 50000.00 |
| TOTAL This Period (last page this line number only).....▶ | 50000.00 |

**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 21 |
| <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)
Black PAC

A. PRIORITIES USA ACTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 601 13TH STREET NW
SUITE 610N

| | | |
|--------------------|-------------|-------------------|
| City WASHINGTON | State DC | Zip Code 20005 |
|--------------------|-------------|-------------------|

FEC ID number of contributing federal political committee. **C** C00495861

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1750000.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 11 | / | 06 | / | 2016 |

Transaction ID : C7204575

Amount of Each Receipt this Period
250000.00

Memo Item

In-Kind Received: Canvassing Services

B.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
SEIU COPE (SERVICE EMPLOYEES INTERNATIONAL UNION COMMITTEE ON POLITICAL EDUCATION)

Mailing Address 1800 MASSACHUSETTS AVE NW

| | | |
|--------------------|-------------|-------------------|
| City WASHINGTON | State DC | Zip Code 20036 |
|--------------------|-------------|-------------------|

FEC ID number of contributing federal political committee. **C** C00004036

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
40536.36

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 10 | / | 25 | / | 2016 |

Transaction ID : C7204576

Amount of Each Receipt this Period
12500.00

Memo Item

* In-Kind: Campaign Consulting Services

C.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
SEIU COPE (SERVICE EMPLOYEES INTERNATIONAL UNION COMMITTEE ON POLITICAL EDUCATION)

Mailing Address 1800 MASSACHUSETTS AVE NW

| | | |
|--------------------|-------------|-------------------|
| City WASHINGTON | State DC | Zip Code 20036 |
|--------------------|-------------|-------------------|

FEC ID number of contributing federal political committee. **C** C00004036

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

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
40536.36

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 11 | / | 22 | / | 2016 |

Transaction ID : C7204577

Amount of Each Receipt this Period
16490.56

Memo Item

* In-Kind: Campaign Consulting Services

| | |
|---|-----------|
| SUBTOTAL of Receipts This Page (optional)..... | 278990.56 |
| TOTAL This Period (last page this line number only)..... | |

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

| | | | |
|---|------------------------------|---|---|
| Use separate schedule(s) for each category of the Detailed Summary Page | | FOR LINE NUMBER: (check only one) | PAGE 8 OF 21 |
| <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)
Black PAC

A. SENATE MAJORITY PAC
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 700 13TH STREET, NW
SUITE 600

City WASHINGTON State DC Zip Code 20005

FEC ID number of contributing federal political committee. **C** C00484642

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
566240.00

Date of Receipt
10 / 28 / 2016
Transaction ID : C7204570

Amount of Each Receipt this Period
247500.00

Memo Item

B. SENATE MAJORITY PAC
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 700 13TH STREET, NW
SUITE 600

City WASHINGTON State DC Zip Code 20005

FEC ID number of contributing federal political committee. **C** C00484642

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
566240.00

Date of Receipt
10 / 28 / 2016
Transaction ID : C7204571

Amount of Each Receipt this Period
118740.00

Memo Item

C. SENATE MAJORITY PAC
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 700 13TH STREET, NW
SUITE 600

City WASHINGTON State DC Zip Code 20005

FEC ID number of contributing federal political committee. **C** C00484642

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

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
566240.00

Date of Receipt
11 / 04 / 2016
Transaction ID : C7204572

Amount of Each Receipt this Period
200000.00

Memo Item

| | |
|---|-----------|
| SUBTOTAL of Receipts This Page (optional)..... | 566240.00 |
| TOTAL This Period (last page this line number only)..... | |

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

| | | | |
|---|------------------------------|---|---|
| Use separate schedule(s) for each category of the Detailed Summary Page | | FOR LINE NUMBER: (check only one) | PAGE 9 OF 21 |
| <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)
Black PAC

A. WOMEN VOTE!

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

Mailing Address 1800 M STREET, NW
STE 375N

City WASHINGTON State DC Zip Code 20036

FEC ID number of contributing federal political committee. **C** C00473918

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
11 / 04 / 2016

Transaction ID : C7204573

Amount of Each Receipt this Period
200000.00

Memo Item

In-Kind Received: Digital Advertising

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:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt
MM / DD / YYYY

Amount of Each Receipt this Period

Memo Item

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
MM / DD / YYYY

Amount of Each Receipt this Period

Memo Item

| | |
|--|------------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 200000.00 |
| TOTAL This Period (last page this line number only).....▶ | 1045230.56 |

**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)
Black PAC

| | | | |
|---|-------------|--|--|
| Full Name (Last, First, Middle Initial) A. Andre Banks | | Date of Disbursement MM / DD / YYYY 10 / 28 / 2016 | |
| Mailing Address 295 Park Avenue S | | | |
| City New York | State NY | Zip Code 10010 | |
| Purpose of Disbursement Digital Strategy Consulting Services | | <input type="checkbox"/> Category/Type | |
| Candidate Name | | FEC Identification Number C | |
| 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: | Transaction ID : D369666 Amount of Each Disbursement this Period 7500.00 | |
| | | <input type="checkbox"/> Memo Item | |

| | | | |
|---|-------------|--|--|
| Full Name (Last, First, Middle Initial) B. Andre Banks | | Date of Disbursement MM / DD / YYYY 11 / 22 / 2016 | |
| Mailing Address 295 Park Avenue S | | | |
| City New York | State NY | Zip Code 10010 | |
| Purpose of Disbursement Digital Strategy Consulting Services | | <input type="checkbox"/> Category/Type | |
| Candidate Name | | FEC Identification Number C | |
| 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: | Transaction ID : D369667 Amount of Each Disbursement this Period 7500.00 | |
| | | <input type="checkbox"/> Memo Item | |

| | | | |
|---|-------------|--|--|
| Full Name (Last, First, Middle Initial) C. Ashley Bryant | | Date of Disbursement MM / DD / YYYY 11 / 03 / 2016 | |
| Mailing Address 1147 W Ohio St #402 | | | |
| City Chicago | State IL | Zip Code 60642 | |
| Purpose of Disbursement Digital Strategy Consulting Services | | <input type="checkbox"/> Category/Type | |
| Candidate Name | | FEC Identification Number C | |
| 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: | Transaction ID : D369668 Amount of Each Disbursement this Period 6000.00 | |
| | | <input type="checkbox"/> Memo Item | |

| | |
|--|----------|
| SUBTOTAL of Disbursements This Page (optional).....▶ | 21000.00 |
| 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)
Black PAC

Full Name (Last, First, Middle Initial)

A. Big Bowl of Ideas

Mailing Address 110 E 9th St.
Ste. B-237

City Los Angeles State CA Zip Code 90079

Purpose of Disbursement
Creative Production Services

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
10 / 27 / 2016

FEC Identification Number

C []

Transaction ID : D369664

Amount of Each Disbursement this Period

[] 45100.00

Memo Item

Full Name (Last, First, Middle Initial)

B. Big Bowl of Ideas

Mailing Address 110 E 9th St.
Ste. B-237

City Los Angeles State CA Zip Code 90079

Purpose of Disbursement
Creative Production Services

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
11 / 01 / 2016

FEC Identification Number

C []

Transaction ID : D369665

Amount of Each Disbursement this Period

[] 8000.00

Memo Item

Full Name (Last, First, Middle Initial)

C. SEIU COPE (SERVICE EMPLOYEES INTERNATIONAL UNION COMMITTEE ON POLITICAL EDUCATION)

Mailing Address 1800 MASSACHUSETTS AVE NW

City WASHINGTON State DC Zip Code 20036

Purpose of Disbursement
Campaign Consulting Services

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
10 / 25 / 2016

FEC Identification Number

C C00004036

Transaction ID : D369673

Amount of Each Disbursement this Period

[] 12500.00

* In-Kind Received

Memo Item

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

[] 65600.00

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 |

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)
Black PAC

A. Full Name (Last, First, Middle Initial)
SEIU COPE (SERVICE EMPLOYEES INTERNATIONAL UNION COMMITTEE ON POLITICAL EDUCATION)

Mailing Address 1800 MASSACHUSETTS AVE NW

City WASHINGTON State DC Zip Code 20036

Purpose of Disbursement Campaign Consulting Services

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
11 / 22 / 2016

FEC Identification Number
C C00004036
Transaction ID : D369674

Amount of Each Disbursement this Period
16490.56

Memo Item * In-Kind Received

B. Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement
M M / D D / Y Y Y Y Y Y

FEC Identification Number
C

Amount of Each Disbursement this Period

Memo Item

C. Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement
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).....▶ | 16490.56 |
| TOTAL This Period (last page this line number only).....▶ | 103090.56 |

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

| | |
|---|---|
| NAME OF COMMITTEE (In Full) Black PAC | FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px;"> C C00609388 </div> |
|---|---|

Check if 24-hour report 48-hour report ▶ New report Amends report filed on M M / D D / Y Y Y Y Y Y

| | | | |
|--|-------------|---|---|
| Full Name of Payee <input type="checkbox"/> Memo Item Resonance Campaigns LLC | | Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 10 / 26 / 2016 | |
| Mailing Address 7612 14th St NW | | Amount <div style="border: 1px solid black; padding: 2px; text-align: right;"> 25000.00 </div> | |
| City Washington | State DC | Zip Code 20012 | Transaction ID : D368807 |
| Purpose of Expenditure Direct Mail | | Category/Type 004 | Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 10 / 26 / 2016 |
| Name of Federal Candidate: TRUMP, DONALD J, , | | <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose | Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____ |
| Calendar Year-To-Date Per Election for Office Sought 2775630.11 | | Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____ | |

| | | | |
|--|-------------|---|---|
| Full Name of Payee <input type="checkbox"/> Memo Item Resonance Campaigns LLC | | Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 10 / 31 / 2016 | |
| Mailing Address 7612 14th St NW | | Amount <div style="border: 1px solid black; padding: 2px; text-align: right;"> 18750.00 </div> | |
| City Washington | State DC | Zip Code 20012 | Transaction ID : D369023 |
| Purpose of Expenditure Direct Mail | | Category/Type 006 | Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 10 / 31 / 2016 |
| Name of Federal Candidate: TRUMP, DONALD J, , | | <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose | Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____ |
| Calendar Year-To-Date Per Election for Office Sought 2775630.11 | | Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____ | |

| | |
|--|---|
| (a) SUBTOTAL of Itemized Independent Expenditures ▶ | <div style="border: 1px solid black; padding: 2px; text-align: right;"> 43750.00 </div> |
| (a) SUBTOTAL of Unitemized Independent Expenditures ▶ | <div style="border: 1px solid black; padding: 2px; text-align: right;"> _____ </div> |
| (a) TOTAL Independent Expenditures ▶ | <div style="border: 1px solid black; padding: 2px; text-align: right;"> _____ </div> |

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Hudson, Gerald, , ,

[Electronically Filed]

Date

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

Signature

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

| | | |
|---|--|---|
| NAME OF COMMITTEE (In Full) Black PAC | | FEC IDENTIFICATION NUMBER ▼ C C00609388 |
|---|--|---|

Check if 24-hour report 48-hour report New report Amends report filed on / /

| | | |
|---|-------------|---|
| Full Name of Payee Resonance Campaigns LLC <input type="checkbox"/> Memo Item | | Date of Public Distribution/Dissemination <input type="text"/> / <input type="text"/> / <input type="text"/> |
| Mailing Address 7612 14th St NW | | Amount <input type="text"/> |
| City Washington | State DC | Zip Code 20012 |
| Purpose of Expenditure Direct Mail | | Category/Type <input type="text"/> |
| Name of Federal Candidate: CLINTON, HILLARY RODHAM, , , | | Date of Disbursement or Obligation <input type="text"/> / <input type="text"/> / <input type="text"/> |

| | |
|---|---|
| <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose | Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____ |
| Calendar Year-To-Date Per Election for Office Sought <input type="text"/> 2775630.11 | Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____ |

| | | |
|---|-------------|---|
| Full Name of Payee Resonance Campaigns LLC <input type="checkbox"/> Memo Item | | Date of Public Distribution/Dissemination <input type="text"/> / <input type="text"/> / <input type="text"/> |
| Mailing Address 7612 14th St NW | | Amount <input type="text"/> |
| City Washington | State DC | Zip Code 20012 |
| Purpose of Expenditure Direct Mail | | Category/Type <input type="text"/> |
| Name of Federal Candidate: TRUMP, DONALD J, , , | | Date of Disbursement or Obligation <input type="text"/> / <input type="text"/> / <input type="text"/> |

| | |
|---|---|
| <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose | Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____ |
| Calendar Year-To-Date Per Election for Office Sought <input type="text"/> 2775630.11 | Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____ |

| | |
|---|-------------------------------|
| (a) SUBTOTAL of Itemized Independent Expenditures | <input type="text"/> 75830.00 |
| (a) SUBTOTAL of Unitemized Independent Expenditures | <input type="text"/> |
| (a) TOTAL Independent Expenditures | <input type="text"/> |

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Hudson, Gerald, , ,
Signature

[Electronically Filed]

Date / /

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full)
Black PAC
FEC IDENTIFICATION NUMBER
C C00609388

Check if 24-hour report 48-hour report
New report Amends report filed on

Full Name of Payee: Resonance Campaigns LLC
Mailing Address: 7612 14th St NW
City: Washington State: DC Zip Code: 20012
Purpose of Expenditure: Direct Mail Category/Type: 006
Name of Federal Candidate: TRUMP, DONALD J, , Support: [], Oppose: [x]
Office Sought: [x] President [] House [] Senate State:
Disbursement For: [] Primary [x] General 2016 [] Other (specify)

Full Name of Payee: Resonance Campaigns LLC
Mailing Address: 7612 14th St NW
City: Washington State: DC Zip Code: 20012
Purpose of Expenditure: Direct Mail Category/Type: 006
Name of Federal Candidate: CLINTON, HILLARY RODHAM, , Support: [x] Oppose: []
Office Sought: [x] President [] House [] Senate State:
Disbursement For: [] Primary [x] General 2016 [] Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 183540.00
(a) SUBTOTAL of Unitemized Independent Expenditures
(a) TOTAL Independent Expenditures

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.
Signature: Hudson, Gerald, , [Electronically Filed] Date: 12 / 08 / 2016

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

| | |
|---|--|
| NAME OF COMMITTEE (In Full) Black PAC | FEC IDENTIFICATION NUMBER ▼ C C00609388 |
|---|--|

Check if 24-hour report 48-hour report New report Amends report filed on / /

| | | | |
|---|-------------|--|---|
| Full Name of Payee <input type="checkbox"/> Memo Item Resonance Campaigns LLC | | Date of Public Distribution/Dissemination <input type="text"/> / <input type="text"/> / <input type="text"/> | |
| Mailing Address 7612 14th St NW | | Amount <input type="text"/> | |
| City Washington | State DC | Zip Code 20012 | Transaction ID : D369093 |
| Purpose of Expenditure Direct Mail | | Category/ Type <input type="text"/> | Date of Disbursement or Obligation <input type="text"/> / <input type="text"/> / <input type="text"/> |
| Name of Federal Candidate: ROSS, DEBORAH K, , | | <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose | Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: NC |
| Calendar Year-To-Date Per Election for Office Sought <input type="text"/> | | Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ _____ | |

| | | | |
|---|-------------|--|---|
| Full Name of Payee <input type="checkbox"/> Memo Item Resonance Campaigns LLC | | Date of Public Distribution/Dissemination <input type="text"/> / <input type="text"/> / <input type="text"/> | |
| Mailing Address 7612 14th St NW | | Amount <input type="text"/> | |
| City Washington | State DC | Zip Code 20012 | Transaction ID : D369106 |
| Purpose of Expenditure Direct Mail | | Category/ Type <input type="text"/> | Date of Disbursement or Obligation <input type="text"/> / <input type="text"/> / <input type="text"/> |
| Name of Federal Candidate: TRUMP, DONALD J, , | | <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose | Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____ |
| Calendar Year-To-Date Per Election for Office Sought <input type="text"/> | | Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ _____ | |

| | |
|--|----------------------|
| (a) SUBTOTAL of Itemized Independent Expenditures | <input type="text"/> |
| (a) SUBTOTAL of Unitemized Independent Expenditures | <input type="text"/> |
| (a) TOTAL Independent Expenditures | <input type="text"/> |

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Hudson, Gerald, ,

[Electronically Filed]

Date

/ /

Signature

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

| | |
|---|--|
| NAME OF COMMITTEE (In Full) Black PAC | FEC IDENTIFICATION NUMBER ▼ C C00609388 |
|---|--|

Check if 24-hour report 48-hour report New report Amends report filed on / /

| | | |
|---|---|--|
| Full Name of Payee <input type="checkbox"/> Memo Item Resonance Campaigns LLC | | Date of Public Distribution/Dissemination <input type="text"/> / <input type="text"/> / <input type="text"/> |
| Mailing Address 7612 14th St NW | | Amount <input type="text"/> 69580.00 Transaction ID : D369107 Date of Disbursement or Obligation <input type="text"/> / <input type="text"/> / <input type="text"/> |
| City Washington | State DC | |
| Zip Code 20012 | Category/ Type <input type="text"/> 006 | |
| Purpose of Expenditure Direct Mail | | Name of Federal Candidate: ROSS, DEBORAH K, , <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose |
| Name of Federal Candidate: ROSS, DEBORAH K, , <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose | | Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President <input type="checkbox"/> State: NC |
| Calendar Year-To-Date Per Election for Office Sought <input type="text"/> 204370.00 | | Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ _____ |

| | | |
|---|---|---|
| Full Name of Payee <input type="checkbox"/> Memo Item 270 Strategies Inc | | Date of Public Distribution/Dissemination <input type="text"/> / <input type="text"/> / <input type="text"/> |
| Mailing Address 626 W Jackson Blvd Suite 600 | | Amount <input type="text"/> 150000.00 Transaction ID : D369138 Date of Disbursement or Obligation <input type="text"/> / <input type="text"/> / <input type="text"/> |
| City Chicago | State IL | |
| Zip Code 60661 | Category/ Type <input type="text"/> 004 | |
| Purpose of Expenditure Actual Cost for Digital Advertising (Originally Disclosed as \$148k on 24-HR Report) | | Name of Federal Candidate: CLINTON, HILLARY RODHAM, , , <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose |
| Name of Federal Candidate: CLINTON, HILLARY RODHAM, , , <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose | | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> State: _____ |
| Calendar Year-To-Date Per Election for Office Sought <input type="text"/> 2775630.11 | | Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ _____ |

| | |
|--|--------------------------------|
| (a) SUBTOTAL of Itemized Independent Expenditures | <input type="text"/> 219580.00 |
| (a) SUBTOTAL of Unitemized Independent Expenditures | <input type="text"/> |
| (a) TOTAL Independent Expenditures | <input type="text"/> |

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Hudson, Gerald, , ,

[Electronically Filed]

Date

/ /

Signature

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

| | |
|---|--|
| NAME OF COMMITTEE (In Full) Black PAC | FEC IDENTIFICATION NUMBER ▼ C C00609388 |
|---|--|

Check if 24-hour report 48-hour report New report Amends report filed on / /

| | |
|---|--|
| Full Name of Payee <input type="checkbox"/> Memo Item 270 Strategies Inc | Date of Public Distribution/Dissemination <input type="text"/> / <input type="text"/> / <input type="text"/> |
| Mailing Address 626 W Jackson Blvd Suite 600 | Amount <input type="text"/> |
| City Chicago State IL Zip Code 60661 | Transaction ID : D369139 Date of Disbursement or Obligation <input type="text"/> / <input type="text"/> / <input type="text"/> |
| Purpose of Expenditure Digital Advertising Category/Type <input type="text"/> | |
| Name of Federal Candidate: ROSS, DEBORAH K, , <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose | Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: _____ State: NC |
| Calendar Year-To-Date Per Election for Office Sought <input type="text"/> 204370.00 | Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____ |

| | |
|---|--|
| Full Name of Payee <input type="checkbox"/> Memo Item WOMEN VOTE! | Date of Public Distribution/Dissemination <input type="text"/> / <input type="text"/> / <input type="text"/> |
| Mailing Address 1120 Connecticut Ave NW Ste 1100 | Amount <input type="text"/> |
| City Washington State DC Zip Code 20036 | Transaction ID : D369140 Date of Disbursement or Obligation <input type="text"/> / <input type="text"/> / <input type="text"/> |
| Purpose of Expenditure In-Kind Received: Digital Advertising Category/Type <input type="text"/> | |
| Name of Federal Candidate: CLINTON, HILLARY RODHAM, , , <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose | Office Sought: <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate District: _____ State: _____ |
| Calendar Year-To-Date Per Election for Office Sought <input type="text"/> 2775630.11 | Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____ |

| | |
|--|--------------------------------|
| (a) SUBTOTAL of Itemized Independent Expenditures | <input type="text"/> 200000.00 |
| (a) SUBTOTAL of Unitemized Independent Expenditures | <input type="text"/> |
| (a) TOTAL Independent Expenditures | <input type="text"/> |

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Hudson, Gerald, , ,

[Electronically Filed]

Date

/ /

Signature

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

| | |
|---|---|
| NAME OF COMMITTEE (In Full) Black PAC | FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px;"> C C00609388 </div> |
|---|---|

Check if 24-hour report 48-hour report ▶ New report Amends report filed on M M / D D / Y Y Y Y Y Y

| | |
|---|---|
| Full Name of Payee <input type="checkbox"/> Memo Item WOMEN VOTE! | Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 11 / 04 / 2016 |
| Mailing Address 1120 Connecticut Ave NW Ste 1100 | Amount <div style="border: 1px solid black; padding: 2px; text-align: right;"> M M / D D / Y Y Y Y Y Y 50000.00 </div> Transaction ID : D369141 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 11 / 04 / 2016 |
| City Washington State DC Zip Code 20036 | |
| Purpose of Expenditure In-Kind Received: Digital Advertising Category/Type 004 | |
| Name of Federal Candidate: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose ROSS, DEBORAH K, , | Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President State: NC |
| Calendar Year-To-Date Per Election for Office Sought 204370.00 | Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____ |

| | |
|--|--|
| Full Name of Payee <input type="checkbox"/> Memo Item 270 Strategies Inc | Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 11 / 05 / 2016 |
| Mailing Address 626 W Jackson Blvd Suite 600 | Amount <div style="border: 1px solid black; padding: 2px; text-align: right;"> M M / D D / Y Y Y Y Y Y 150000.00 </div> Transaction ID : D369185 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 11 / 05 / 2016 |
| City Chicago State IL Zip Code 60661 | |
| Purpose of Expenditure Digital Advertising Category/Type 004 | |
| Name of Federal Candidate: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose CLINTON, HILLARY RODHAM, , | Office Sought: <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate District: _____ State: _____ |
| Calendar Year-To-Date Per Election for Office Sought 2775630.11 | Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____ |

| | |
|--|--|
| (a) SUBTOTAL of Itemized Independent Expenditures ▶ | <div style="border: 1px solid black; padding: 2px; text-align: right;"> M M / D D / Y Y Y Y Y Y 200000.00 </div> |
| (a) SUBTOTAL of Unitemized Independent Expenditures ▶ | <div style="border: 1px solid black; padding: 2px; text-align: right;"> M M / D D / Y Y Y Y Y Y _____ </div> |
| (a) TOTAL Independent Expenditures ▶ | <div style="border: 1px solid black; padding: 2px; text-align: right;"> M M / D D / Y Y Y Y Y Y _____ </div> |

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Signature Hudson, Gerald, , , **[Electronically Filed]** Date M M / D D / Y Y Y Y Y Y 12 / 08 / 2016

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

| | |
|---|---|
| NAME OF COMMITTEE (In Full) Black PAC | FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px;"> C C00609388 </div> |
|---|---|

Check if 24-hour report 48-hour report ▶ New report Amends report filed on M M / D D / Y Y Y Y Y Y

| | | | |
|---|-------------|---|---|
| Full Name of Payee <input type="checkbox"/> Memo Item PRIORITIES USA ACTION | | Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 11 / 06 / 2016 | |
| Mailing Address 1101 15TH STREET NW 2ND FLOOR | | Amount M M M M / D D D D / Y Y Y Y Y Y 165000.00 | |
| City Washington | State DC | Zip Code 20005 | Transaction ID : D369187 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 11 / 06 / 2016 |
| Purpose of Expenditure Canvassing Services | | Category/Type 001 | |
| Name of Federal Candidate: TRUMP, DONALD J, , | | <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate District: _____ State: _____ | |
| Calendar Year-To-Date Per Election for Office Sought 2775630.11 | | Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____ | |

| | | | |
|---|-------------|---|---|
| Full Name of Payee <input type="checkbox"/> Memo Item PRIORITIES USA ACTION | | Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 11 / 06 / 2016 | |
| Mailing Address 1101 15TH STREET NW 2ND FLOOR | | Amount M M M M / D D D D / Y Y Y Y Y Y 85000.00 | |
| City Washington | State DC | Zip Code 20005 | Transaction ID : D369188 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 11 / 06 / 2016 |
| Purpose of Expenditure Canvassing Services | | Category/Type 001 | |
| Name of Federal Candidate: CLINTON, HILLARY RODHAM, , | | <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate District: _____ State: _____ | |
| Calendar Year-To-Date Per Election for Office Sought 2775630.11 | | Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____ | |

| | |
|--|---|
| (a) SUBTOTAL of Itemized Independent Expenditures ▶ | M M M M / D D D D / Y Y Y Y Y Y 250000.00 |
| (a) SUBTOTAL of Unitemized Independent Expenditures ▶ | M M M M / D D D D / Y Y Y Y Y Y |
| (a) TOTAL Independent Expenditures ▶ | M M M M / D D D D / Y Y Y Y Y Y |

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Hudson, Gerald, , , **[Electronically Filed]** Date M M / D D / Y Y Y Y Y Y
Signature 12 / 08 / 2016

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

| | |
|---|--|
| NAME OF COMMITTEE (In Full) Black PAC | FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px;"> C C00609388 </div> |
|---|--|

Check if 24-hour report 48-hour report ▶ New report Amends report filed on M M / D D / Y Y Y Y Y Y

| | |
|--|--|
| Full Name of Payee <input type="checkbox"/> Memo Item SEIU Florida State Council | Date of Public Distribution/Dissemination <div style="border: 1px solid black; padding: 2px;"> M M / D D / Y Y Y Y Y Y </div> |
| Mailing Address 14645 NW 77th Ave Suite 201 | Amount <div style="border: 1px solid black; padding: 2px; text-align: right;"> 25000.00 </div> |
| City Hialeah State FL Zip Code 33014 | Transaction ID : D369143 Date of Disbursement or Obligation <div style="border: 1px solid black; padding: 2px;"> M M / D D / Y Y Y Y Y Y </div> |
| Purpose of Expenditure Phone Banking Category/Type 001 | Name of Federal Candidate: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose CLINTON, HILLARY RODHAM, , , Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____ |
| Calendar Year-To-Date Per Election for Office Sought 2775630.11 | Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____ |

| | |
|--|--|
| Full Name of Payee <input type="checkbox"/> Memo Item SEIU Florida State Council | Date of Public Distribution/Dissemination <div style="border: 1px solid black; padding: 2px;"> M M / D D / Y Y Y Y Y Y </div> |
| Mailing Address 14645 NW 77th Ave Suite 201 | Amount <div style="border: 1px solid black; padding: 2px; text-align: right;"> 25000.00 </div> |
| City Hialeah State FL Zip Code 33014 | Transaction ID : D369186 Date of Disbursement or Obligation <div style="border: 1px solid black; padding: 2px;"> M M / D D / Y Y Y Y Y Y </div> |
| Purpose of Expenditure Phone Banking Category/Type 001 | Name of Federal Candidate: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose TRUMP, DONALD J, , , Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____ |
| Calendar Year-To-Date Per Election for Office Sought 2775630.11 | Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____ |

| | |
|--|--|
| (a) SUBTOTAL of Itemized Independent Expenditures ▶ | <div style="border: 1px solid black; padding: 2px; width: 100%;"> 50000.00 </div> |
| (a) SUBTOTAL of Unitemized Independent Expenditures ▶ | <div style="border: 1px solid black; padding: 2px; width: 100%; height: 20px;"> </div> |
| (a) TOTAL Independent Expenditures ▶ | <div style="border: 1px solid black; padding: 2px; width: 100%;"> 1406240.00 </div> |

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Hudson, Gerald, , ,

[Electronically Filed]

Date

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

Signature