

# 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 Americans to Re-elect the President

ADDRESS (number and street) 2713 Edinberg Drive

Check if different than previously reported. (ACC)

Winston-Salem

NC

27103

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C C00668517

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:
- Feb 20 (M2)
  - Mar 20 (M3)
  - Apr 20 (M4)
  - May 20 (M5)
  - Jun 20 (M6)
  - Jul 20 (M7)
  - Aug 20 (M8)
  - Sep 20 (M9)
  - Oct 20 (M10)
  - Nov 20 (M11) (Non-Election Year Only)
  - Dec 20 (M12) (Non-Election Year Only)
  - Jan 31 (YE)

- (c) 12-Day PRE-Election Report for the:
- Primary (12P)
  - Convention (12C)
  - General (12G)
  - Special (12S)
  - Runoff (12R)

Election on [MM] / [DD] / [YYYY] in the State of [ ]

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

Election on [MM] / [DD] / [YYYY] in the State of [ ]

5. Covering Period

[MM] / [DD] / [YYYY] 04 / 01 / 2019

through

[MM] / [DD] / [YYYY] 06 / 30 / 2019

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

Robinson, Vernon, , ,

Type or Print Name of Treasurer

Signature of Treasurer

Robinson, Vernon, , ,

[Electronically Filed]

Date

[MM] / [DD] / [YYYY] 07 / 15 / 2021

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)

Write or Type Committee Name

**Black Americans to Re-elect the President**

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="2019"/>	<input type="text" value="16883.30"/>	<input type="text" value="16883.30"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="40195.60"/>	
(c) Total Receipts (from Line 19) .....	<input type="text" value="243947.81"/>	<input type="text" value="307344.63"/>
(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="284143.41"/>	<input type="text" value="324227.93"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="225624.69"/>	<input type="text" value="265709.21"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="58518.72"/>	<input type="text" value="58518.72"/>
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="134766.88"/>	

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

Black Americans to Re-elect the President

Report Covering the Period: From: 04 / 01 / 2019 To: 06 / 30 / 2019

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).....	46704.00	56154.00
(ii) Unitemized .....	196481.81	250290.63
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	243185.81	306444.63
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) .....	243185.81	306444.63
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).....	762.00	900.00
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)).....▶	243947.81	307344.63
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	243947.81	307344.63

**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 .....	225624.69	265709.21
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	225624.69	265709.21
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)) ..	225624.69	265709.21
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	225624.69	265709.21

**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) .....	243185.81	306444.63
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	243185.81	306444.63
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	225624.69	265709.21
37. Offsets to Operating Expenditures (from Line 15, page 3).....	762.00	900.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	224862.69	264809.21

**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 81
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<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 Americans to Re-elect the President**

**A. Amenson, Chris, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 620 Forest View Way  
 City Monument State CO Zip Code 80132  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) None Occupation (for Individual) retired  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 22 / 2019  
**Transaction ID : SA11AI.32234**  
 Amount of Each Receipt this Period  
 1000.00  
 Memo Item

**B. Bankson, Allen, T, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 14 Saint Claire Ln NE  
 City Atlanta State GA Zip Code 30324-2960  
 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 ▼ 1000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 05 / 01 / 2019  
**Transaction ID : SA11AI.24301**  
 Amount of Each Receipt this Period  
 1000.00  
 Memo Item

**C. Bauer, William, L, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1713 El Trinidad Dr E  
 City Clearwater State FL Zip Code 33759-1907  
 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 ▼ 500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 29 / 2019  
**Transaction ID : SA11AI.23250**  
 Amount of Each Receipt this Period  
 500.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	2500.00
<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 7 OF 81
<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 Americans to Re-elect the President**

**A. Beeck, David, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 3917 110th St  
 City Miles State IA Zip Code 52064-9615  
 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 ▼ 250.00

Date of Receipt **04 / 29 / 2019**  
**Transaction ID : SA11AI.23215**  
 Amount of Each Receipt this Period 250.00  
 Memo Item

**B. Bickle, Don, G, Mr,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 3511 Fairway Dr B  
 City Hays State KS Zip Code 67601-1546  
 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 ▼ 400.00

Date of Receipt **05 / 06 / 2019**  
**Transaction ID : SA11AI.26772**  
 Amount of Each Receipt this Period 250.00  
 Memo Item

**C. Boukather, George, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO Box 10578  
 City Newport Beach State CA Zip Code 92658-5001  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Boukather and Associates Occupation (for Individual) Boukather and Associates  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt **05 / 01 / 2019**  
**Transaction ID : SA11AI.24366**  
 Amount of Each Receipt this Period 250.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	750.00
<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 81
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**Black Americans to Re-elect the President**

**A. Browning, Robert, S, Mr,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 309 Greenwich Ave  
Apt C212

City Warwick	State RI	Zip Code 02886-1639
-----------------	-------------	------------------------

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  

M M M	/	D D D	/	Y Y Y Y Y Y
06		26		2019

**Transaction ID : SA11AI.31563**

Amount of Each Receipt this Period  
5000.00

Memo Item

**B. Bueschel, Howard, A, Mr,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 107 Upper Ferry Rd

City Trenton	State NJ	Zip Code 08628-1527
-----------------	-------------	------------------------

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 ▼  
250.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
06		11		2019

**Transaction ID : SA11AI.30555**

Amount of Each Receipt this Period  
250.00

Memo Item

**C. Burt, Charles, T, Mr,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 8S041 Creek Dr

City Naperville	State IL	Zip Code 60540-9326
--------------------	-------------	------------------------

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 ▼  
250.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
04		29		2019

**Transaction ID : SA11AI.23196**

Amount of Each Receipt this Period  
100.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	5350.00
<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 81
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**Black Americans to Re-elect the President**

**A. Callen, Janice, S, Mrs,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 9952 County Road 54

City Milliken	State CO	Zip Code 80543-9607
------------------	-------------	------------------------

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
05		01		2019

**Transaction ID : SA11AI.24422**

Amount of Each Receipt this Period  
250.00

Memo Item

**B. Capital Rental Agency Inc**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1497 NW 7th St

City Miami	State FL	Zip Code 33125-3640
---------------	-------------	------------------------

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 ▼  
250.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
05		28		2019

**Transaction ID : SA11AI.29827**

Amount of Each Receipt this Period  
250.00

Memo Item

**C. Cardenas, Mike, , Mr,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1634 Laramie Ave

City Casper	State WY	Zip Code 82604-3010
----------------	-------------	------------------------

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

Name of Employer (for Individual) Drake's Landscaping Co	Occupation (for Individual) owner
-------------------------------------------------------------	--------------------------------------

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
400.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
05		09		2019

**Transaction ID : SA11AI.27735**

Amount of Each Receipt this Period  
400.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	900.00
<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 10 OF 81
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**Black Americans to Re-elect the President**

**A. Cathcart, Robert, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 200 Reserve Blvd  
 Ste 300  
 City Charlottesville State VA Zip Code 22901-3233  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Cathcart Group Occupation (for Individual) Cathcart Group  
 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  
 05 / 06 / 2019  
**Transaction ID : SA11AI.26719**  
 Amount of Each Receipt this Period  
 500.00  
 Memo Item

**B. Christen, Fred, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO Box 829  
 City Kittitas State WA Zip Code 98934-0829  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Farmer Occupation (for Individual) Farmer  
 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  
 05 / 28 / 2019  
**Transaction ID : SA11AI.29758**  
 Amount of Each Receipt this Period  
 500.00  
 Memo Item

**C. Clark, Colleen, E, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 923 E Kilbourn Ave  
 City Milwaukee State WI Zip Code 53202-3493  
 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 ▼ 500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 05 / 03 / 2019  
**Transaction ID : SA11AI.25549**  
 Amount of Each Receipt this Period  
 500.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1500.00
<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 11 OF 81
<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 Americans to Re-elect the President**

**A. Cort, George, E, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 16960 Wildwood Dr  
 City Montrose State CO Zip Code 81403-9504  
 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 ▼ 350.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 10 / 2019  
**Transaction ID : SA11AI.30491**  
 Amount of Each Receipt this Period  
 200.00  
 Memo Item

**B. Culpepper, Robert, C, Dr, MD**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 525 Park Place Dr  
 City Alexandria State LA Zip Code 71301-3947  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Self Occupation (for Individual) Physician  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 05 / 28 / 2019  
**Transaction ID : SA11AI.29741**  
 Amount of Each Receipt this Period  
 250.00  
 Memo Item

**C. Donner, Richard, A, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 3223 Santa Barbara Blvd  
 City Cape Coral State FL Zip Code 33914-5057  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Donner & Co CPA Occupation (for Individual) CPA  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 05 / 01 / 2019  
**Transaction ID : SA11AI.24529**  
 Amount of Each Receipt this Period  
 250.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	700.00
<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 12 OF 81
	<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 Americans to Re-elect the President**

**A. Drawe, Beverly, A, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 4800 Interlachen Ln  
 City Austin State TX Zip Code 78747-1452  
 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 ▼ 250.00

Date of Receipt 05 / 07 / 2019  
**Transaction ID : SA11AI.26977**  
 Amount of Each Receipt this Period 250.00  
 Memo Item

**B. Eberle Communications Group**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1420 Spring Hill Road Suite 490  
 City McLean State VA Zip Code 22102  
 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 ▼ 5000.00

Date of Receipt 04 / 25 / 2019  
**Transaction ID : SA11AI.21794**  
 Amount of Each Receipt this Period 5000.00  
 Memo Item

**C. Edwards, Martha, T, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1005 Forrest Hills Rd  
 City Saluda State SC Zip Code 29138-7786  
 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 ▼ 250.00

Date of Receipt 04 / 29 / 2019  
**Transaction ID : SA11AI.23419**  
 Amount of Each Receipt this Period 250.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	5500.00
<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 13 OF 81
<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 Americans to Re-elect the President**

**A. Elmont, Albert, E, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 4630 S Lipan St  
 City Englewood State CO Zip Code 80110-5510  
 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 ▼ 500.00

Date of Receipt 05 / 07 / 2019  
**Transaction ID : SA11AI.26983**  
 Amount of Each Receipt this Period 500.00  
 Memo Item

**B. Ferguson, Robert, A, Mr,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1600 W 7th St Ste 100  
 City Fort Worth State TX Zip Code 76102-2505  
 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 ▼ 500.00

Date of Receipt 05 / 14 / 2019  
**Transaction ID : SA11AI.28957**  
 Amount of Each Receipt this Period 500.00  
 Memo Item

**C. Freeman, Thomas, M, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1525 Scotch Ridge Rd  
 City Schenectady State NY Zip Code 12306-6318  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) State Univ of New York Occupation (for Individual) Professor  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 06 / 11 / 2019  
**Transaction ID : SA11AI.30569**  
 Amount of Each Receipt this Period 250.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1250.00
<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 14 OF 81
	<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 Americans to Re-elect the President**

**A. Froelker, Virginia, J, Mrs,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 4496 Big Creek Rd  
 City Gerald State MO Zip Code 63037-2616  
 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 ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 05 / 07 / 2019  
**Transaction ID : SA11AI.27018**  
 Amount of Each Receipt this Period  
 250.00  
 Memo Item

**B. Galkin, Warren, B, Mr,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 29 Sage Dr  
 City Warwick State RI Zip Code 02886-6826  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Nat Products Corp Occupation (for Individual) Vice Chairman  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 2000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 05 / 06 / 2019  
**Transaction ID : SA11AI.26582**  
 Amount of Each Receipt this Period  
 1000.00  
 Memo Item

**C. Garst, Lynn, F, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 200 S Oklahoma Ave Apt 201  
 City Oklahoma City State OK Zip Code 73104-2485  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Regulus Group LLC. Occupation (for Individual) Regulus Group LLC.  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 05 / 07 / 2019  
**Transaction ID : SA11AI.27009**  
 Amount of Each Receipt this Period  
 250.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1500.00
<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 15 OF 81
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**Black Americans to Re-elect the President**

**A. Gearhart, Marilyn, V, Ms,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 817 Briarwood Dr  
 City East Wenatchee State WA Zip Code 98802-8302  
 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 ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 29 / 2019  
**Transaction ID : SA11AI.23406**  
 Amount of Each Receipt this Period  
 250.00  
 Memo Item

**B. Gearhart, Marilyn, V, Ms,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 817 Briarwood Dr  
 City East Wenatchee State WA Zip Code 98802-8302  
 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 ▼ 500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 17 / 2019  
**Transaction ID : SA11AI.30753**  
 Amount of Each Receipt this Period  
 250.00  
 Memo Item

**C. Haggarty, Judith, F, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 66 Belvidere Rd Unit 102  
 City Falmouth State MA Zip Code 02540-3831  
 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 ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 28 / 2019  
**Transaction ID : SA11AI.32103**  
 Amount of Each Receipt this Period  
 250.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	750.00
<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 16 OF 81
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**Black Americans to Re-elect the President**

**A. Hajra, Amitav, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 773 Greenfield St  
 City Daleville State VA Zip Code 24083-2937  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Intellix Occupation (for Individual) Intellix  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 05 / 02 / 2019  
**Transaction ID : SA11AI.25450**  
 Amount of Each Receipt this Period  
 250.00  
 Memo Item

**B. Hazel, John, T, Mr, Jr**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 6254 Huntley Rd  
 City Broad Run State VA Zip Code 20137-1830  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) William A Hazel Inc Occupation (for Individual) Contractor/Owner  
 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  
 06 / 14 / 2019  
**Transaction ID : SA11AI.30713**  
 Amount of Each Receipt this Period  
 250.00  
 Memo Item

**C. Hines, Billy, B, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 3815 Mintwood Dr  
 City Mint Hill State NC Zip Code 28227-8233  
 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 ▼ 300.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 05 / 31 / 2019  
**Transaction ID : SA11AI.29959**  
 Amount of Each Receipt this Period  
 150.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	650.00
<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 17 OF 81
	<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 Americans to Re-elect the President**

**A. Hines, Billy, B, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 3815 Mintwood Dr  
 City Mint Hill State NC Zip Code 28227-8233  
 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 ▼ 450.00

Date of Receipt 06 / 17 / 2019  
**Transaction ID : SA11AI.30747**  
 Amount of Each Receipt this Period 150.00  
 Memo Item

**B. Hollifield, Michael, , Mr,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 3446 Winder Hwy M359  
 City Flowery Branch State GA Zip Code 30542-3007  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Self Contract Occupation (for Individual) Merch Marine  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 05 / 24 / 2019  
**Transaction ID : SA11AI.29685**  
 Amount of Each Receipt this Period 300.00  
 Memo Item

**C. Horst, Veronyca, Castanon, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1510 Villanova Dr  
 City Austin State TX Zip Code 78757-7838  
 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 ▼ 500.00

Date of Receipt 06 / 28 / 2019  
**Transaction ID : SA11AI.31868**  
 Amount of Each Receipt this Period 500.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	950.00
<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 18 OF 81
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**Black Americans to Re-elect the President**

**A. Hummel, E, Lewis, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 7 May Ann Hls  
 City Schuylkill Haven State PA Zip Code 17972-9376  
 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 ▼ 300.00

Date of Receipt **04 / 22 / 2019**  
**Transaction ID : SA11AI.22098**  
 Amount of Each Receipt this Period 300.00  
 Memo Item

**B. Hunter, Robert, L, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 120 Mont Rd  
 City Butler State PA Zip Code 16001-1398  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Not Employed Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt **05 / 06 / 2019**  
**Transaction ID : SA11AI.26446**  
 Amount of Each Receipt this Period 250.00  
 Memo Item

**C. Iffland, Charles, F, Mr,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 406 Oak Hill Rd  
 City Thomasville State GA Zip Code 31757-2032  
 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 ▼ 600.00

Date of Receipt **05 / 28 / 2019**  
**Transaction ID : SA11AI.29822**  
 Amount of Each Receipt this Period 100.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	650.00
<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 19 OF 81
<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 Americans to Re-elect the President**

**A. Islam, Ange, Rae, Ms,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 5584 State Route 20A E

City Warsaw	State NY	Zip Code 14569-9302
----------------	-------------	------------------------

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 ▼  
250.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	28	/	2019

**Transaction ID : SA11AI.31885**

Amount of Each Receipt this Period  

250.00
--------

 Memo Item

**B. Janick, Joseph, W, Mr,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2533 E Beryl Ave

City Phoenix	State AZ	Zip Code 85028-3714
-----------------	-------------	------------------------

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 ▼  
250.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	10	/	2019

**Transaction ID : SA11AI.30416**

Amount of Each Receipt this Period  

250.00
--------

 Memo Item

**C. Jorich, Mark, A, ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO Box 162

City Landisburg	State PA	Zip Code 17040-0162
--------------------	-------------	------------------------

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

Name of Employer (for Individual) Arcelor Millal LLC	Occupation (for Individual) Mechanic
---------------------------------------------------------	-----------------------------------------

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	01	/	2019

**Transaction ID : SA11AI.24739**

Amount of Each Receipt this Period  

250.00
--------

 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	650.00
<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 20 OF 81
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**Black Americans to Re-elect the President**

**A. Klotz, Diane, M, Mrs,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 10120 Clemente Cir

City Austin	State TX	Zip Code 78737-1030
----------------	-------------	------------------------

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
350.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
05		13		2019

**Transaction ID : SA11AI.28500**

Amount of Each Receipt this Period  
250.00

Memo Item

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

Mailing Address 2801 Turner Grove Dr N

City Greensboro	State NC	Zip Code 27455-1976
--------------------	-------------	------------------------

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

Name of Employer (for Individual) Infolink Communications, INC.	Occupation (for Individual) Infolink Communications, INC.
--------------------------------------------------------------------	--------------------------------------------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
05		20		2019

**Transaction ID : SA11AI.29357**

Amount of Each Receipt this Period  
250.00

Memo Item

**C. Lair, Rosetta, Alice, Mrs,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 6207 Foxcroft Rd

City Alexandria	State VA	Zip Code 22307-1104
--------------------	-------------	------------------------

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 ▼  
500.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
04		25		2019

**Transaction ID : SA11AI.22589**

Amount of Each Receipt this Period  
500.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1000.00
<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 21 OF 81
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**Black Americans to Re-elect the President**

**A. Lair, Rosetta, Alice, Mrs,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 6207 Foxcroft Rd

City Alexandria	State VA	Zip Code 22307-1104
--------------------	-------------	------------------------

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 ▼  
800.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	10	/	2019

**Transaction ID : SA11AI.30410**

Amount of Each Receipt this Period  
300.00

Memo Item

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

Mailing Address 103 Cedar Branch Dr

City Georgetown	State TX	Zip Code 78628-7118
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Self	Occupation (for Individual) Attorney
-------------------------------------------	-----------------------------------------

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
05	/	07	/	2019

**Transaction ID : SA11AI.27133**

Amount of Each Receipt this Period  
500.00

Memo Item

**C. Lattea, Gary, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO Box 848

City Penrose	State CO	Zip Code 81240-0848
-----------------	-------------	------------------------

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 ▼  
250.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	09	/	2019

**Transaction ID : SA11AI.27806**

Amount of Each Receipt this Period  
100.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	900.00
<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 22 OF 81
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)  
**Black Americans to Re-elect the President**

**A. Lattea, Gary, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO Box 848  
 City Penrose State CO Zip Code 81240-0848  
 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 ▼ 350.00

Date of Receipt 06 / 10 / 2019  
**Transaction ID : SA11AI.30412**  
 Amount of Each Receipt this Period 100.00  
 Memo Item

**B. Laub, Curtis, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1160 Ridgemont Dr  
 City Meadville State PA Zip Code 16335  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Retired Occupation (for Individual) Physician  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 04 / 20 / 2019  
**Transaction ID : SA11AI.32232**  
 Amount of Each Receipt this Period 250.00  
 Memo Item

**C. Linn, Max, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO Box 945  
 City Fort Sumner State NM Zip Code 88119-0945  
 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 ▼ 250.00

Date of Receipt 04 / 25 / 2019  
**Transaction ID : SA11AI.22725**  
 Amount of Each Receipt this Period 250.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	600.00
<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 23 OF 81
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<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 Americans to Re-elect the President**

**A. Little, Lola, A, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 5100 John D Ryan Blvd  
 Apt 2406  
 City San Antonio State TX Zip Code 78245-3523  
 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 ▼ 1000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 05 / 01 / 2019  
**Transaction ID : SA11AI.24851**  
 Amount of Each Receipt this Period  
 1000.00  
 Memo Item

**B. Lovelace, Lorraine, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 4974 Rio Verde Dr  
 City San Jose State CA Zip Code 95118-2303  
 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 ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 17 / 2019  
**Transaction ID : SA11AI.30772**  
 Amount of Each Receipt this Period  
 100.00  
 Memo Item

**C. Mackert, John, R, Mr, Sr**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 530 McKinnes Line  
 City Evans State GA Zip Code 30809-4084  
 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 ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 05 / 21 / 2019  
**Transaction ID : SA11AI.29524**  
 Amount of Each Receipt this Period  
 100.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1200.00
<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 24 OF 81
<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 Americans to Re-elect the President**

**A. Malpass, Tad, M, ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2701 S M 66

City East Jordan	State MI	Zip Code 49727-8401
---------------------	-------------	------------------------

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 ▼  
500.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	10	/	2019

**Transaction ID : SA11AI.28043**

Amount of Each Receipt this Period  
500.00

Memo Item

**B. Martin, G, H, Mr,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4218 Brittany Pt

City Lansdale	State PA	Zip Code 19446-6544
------------------	-------------	------------------------

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 ▼  
300.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	09	/	2019

**Transaction ID : SA11AI.27812**

Amount of Each Receipt this Period  
200.00

Memo Item

**C. Marx, Richard, C, Mr,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO Box 440

City Wappingers Falls	State NY	Zip Code 12590-0440
--------------------------	-------------	------------------------

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 ▼  
350.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	16	/	2019

**Transaction ID : SA11AI.29115**

Amount of Each Receipt this Period  
250.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	950.00
<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 25 OF 81
	<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 Americans to Re-elect the President**

**A. McIntosh, Vivian, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 32605 W 171st St  
 City Gardner State KS Zip Code 66030  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Retired Occupation (for Individual) not employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 06 / 22 / 2019  
**Transaction ID : SA11AI.32319**  
 Amount of Each Receipt this Period 250.00  
 Memo Item

**B. McKee, Ellsworth, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO Box 567  
 City Collegedale State TN Zip Code 37315-0567  
 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 ▼ 1000.00

Date of Receipt 05 / 13 / 2019  
**Transaction ID : SA11AI.28540**  
 Amount of Each Receipt this Period 1000.00  
 Memo Item

**C. McVaney, Carole, L, Ms,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1201 Green Oaks Dr  
 City Greenwood Vlg State CO Zip Code 80121-1328  
 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 ▼ 500.00

Date of Receipt 05 / 21 / 2019  
**Transaction ID : SA11AI.29545**  
 Amount of Each Receipt this Period 500.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1750.00
<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 26 OF 81
	<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 Americans to Re-elect the President**

**A. Mire, Antoinette, C, Mrs,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1105 Island Park Blvd  
Apt 104

City Shreveport State LA Zip Code 71105-4742

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 ▼  
205.00

Date of Receipt  
05 / 28 / 2019  
Transaction ID : SA11AI.29793

Amount of Each Receipt this Period  
10.00

Memo Item

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

Mailing Address 42868 Iron Bit PI

City Chantilly State VA Zip Code 20152-6367

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

Name of Employer (for Individual) QualX Corporation Occupation (for Individual) Chief Financial Officer

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
05 / 01 / 2019  
Transaction ID : SA11AI.24942

Amount of Each Receipt this Period  
250.00

Memo Item

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

Mailing Address 42868 Iron Bit PI

City Chantilly State VA Zip Code 20152-6367

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

Name of Employer (for Individual) QualX Corporation Occupation (for Individual) Chief Financial Officer

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
06 / 07 / 2019  
Transaction ID : SA11AI.30223

Amount of Each Receipt this Period  
250.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	510.00
<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 27 OF 81
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**Black Americans to Re-elect the President**

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

Mailing Address 16 Silver Fox Ln

City Pisgah Forest	State NC	Zip Code 28768-9609
-----------------------	-------------	------------------------

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 ▼  
500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 05 / 28 / 2019  
**Transaction ID : SA11AI.29797**

Amount of Each Receipt this Period  
500.00

Memo Item

**B. Neal, Gordon, G, Col, USAF Ret**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 6983 Peace Pipe Ct

City Reno	State NV	Zip Code 89511-5676
--------------	-------------	------------------------

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 ▼  
300.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 05 / 09 / 2019  
**Transaction ID : SA11AI.27822**

Amount of Each Receipt this Period  
100.00

Memo Item

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

Mailing Address 1602 N Fountain Blvd

City Springfield	State OH	Zip Code 45504-1429
---------------------	-------------	------------------------

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

Name of Employer (for Individual) Self Employed	Occupation (for Individual) Self Employed
----------------------------------------------------	----------------------------------------------

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 23 / 2019  
**Transaction ID : SA11AI.22140**

Amount of Each Receipt this Period  
250.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	850.00
<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 28 OF 81
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**Black Americans to Re-elect the President**

**A. Nugent, R, M, , Jr**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 11508 Royalshire Dr  
 City Dallas State TX Zip Code 75230-2914  
 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 ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 05 / 13 / 2019  
**Transaction ID : SA11AI.28584**  
 Amount of Each Receipt this Period  
 250.00  
 Memo Item

**B. O'Boyle, Thomas, R, , USAF**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 7295 W 59th Ave  
 City Manhattan State KS Zip Code 66503-9798  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Ultra Electronics ICE Occupation (for Individual) Ultra Electronics ICE  
 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  
 05 / 06 / 2019  
**Transaction ID : SA11AI.26272**  
 Amount of Each Receipt this Period  
 500.00  
 Memo Item

**C. Omlin, Rosie, , Miss,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2743 Baker Rd  
 City Modesto State CA Zip Code 95358-8263  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Dairy Farmer Occupation (for Individual) Dairy Farmer  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 21 / 2019  
**Transaction ID : SA11AI.30883**  
 Amount of Each Receipt this Period  
 100.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	850.00
<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 29 OF 81
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**Black Americans to Re-elect the President**

**A. Overbey, Jesse, W, Mr,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 612 Oakland Dr  
 City Chatham State VA Zip Code 24531-3418  
 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 ▼ 225.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 05 / 09 / 2019  
**Transaction ID : SA11AI.27824**  
 Amount of Each Receipt this Period  
 150.00  
 Memo Item

**B. Pagel, Alex, B, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 555 Park Ave Fl 11E  
 City New York State NY Zip Code 10065-8199  
 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 ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 25 / 2019  
**Transaction ID : SA11AI.22782**  
 Amount of Each Receipt this Period  
 250.00  
 Memo Item

**C. Patterson, James, A, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 10350 Ormsby Park Pl Ste 202  
 City Louisville State KY Zip Code 40223-6173  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Self Occupation (for Individual) Investor  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 05 / 01 / 2019  
**Transaction ID : SA11AI.25018**  
 Amount of Each Receipt this Period  
 250.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	650.00
<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 30 OF 81
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**Black Americans to Re-elect the President**

**A. Peterson, John, D, Mr,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2802 S 975 E

City Zionsville	State IN	Zip Code 46077-9410
--------------------	-------------	------------------------

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

Name of Employer (for Individual) CITY SECURITIES INC	Occupation (for Individual) CITY SECURITIES INC
----------------------------------------------------------	----------------------------------------------------

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
05		06		2019

**Transaction ID : SA11AI.26232**

Amount of Each Receipt this Period  
500.00

Memo Item

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

Mailing Address 13140 Country Club Dr SW  
Unit 404

City Lakewood	State WA	Zip Code 98498-5320
------------------	-------------	------------------------

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 ▼  
750.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
06		26		2019

**Transaction ID : SA11AI.31466**

Amount of Each Receipt this Period  
750.00

Memo Item

**C. Powers, Kenneth, R, Mr,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4214 Lanier Ridge Walk

City Cumming	State GA	Zip Code 30041-7496
-----------------	-------------	------------------------

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 ▼  
250.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
04		23		2019

**Transaction ID : SA11AI.22146**

Amount of Each Receipt this Period  
250.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1500.00
<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 31 OF 81
<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 Americans to Re-elect the President**

**A. Pusta, Lenora, H, Ms,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 138 W Sunflower Dr

City Payson	State AZ	Zip Code 85541-6152
----------------	-------------	------------------------

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 ▼  
500.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
05		09		2019

**Transaction ID : SA11AI.27834**

Amount of Each Receipt this Period  
500.00

Memo Item

**B. Pusta, Lenora, H, Ms,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 138 W Sunflower Dr

City Payson	State AZ	Zip Code 85541-6152
----------------	-------------	------------------------

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 ▼  
700.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
05		13		2019

**Transaction ID : SA11AI.28630**

Amount of Each Receipt this Period  
200.00

Memo Item

**C. Reed, Andrea, F, ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 18505 E 1220 Rd

City Sayre	State OK	Zip Code 73662-6503
---------------	-------------	------------------------

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 ▼  
250.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
04		25		2019

**Transaction ID : SA11AI.22657**

Amount of Each Receipt this Period  
250.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	950.00
<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 32 OF 81
<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 Americans to Re-elect the President**

**A. Reed, Carolyn, J, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1084 Cormar Dr  
 City Lake Zurich State IL Zip Code 60047-1457  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Occupation (for Individual)  
 Rush U Medical Ctr Administrator  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 05 / 03 / 2019  
**Transaction ID : SA11AI.25809**  
 Amount of Each Receipt this Period  
 250.00  
 Memo Item

**B. Rev Liv Trust**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO Box 30490  
 City Fort Lauderdale State FL Zip Code 33303-0490  
 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 ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 05 / 07 / 2019  
**Transaction ID : SA11AI.27333**  
 Amount of Each Receipt this Period  
 250.00  
 Memo Item

**C. Ries, Melvin, A, Mr,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 3585 Round Barn Blvd Apt 329  
 City Santa Rosa State CA Zip Code 95403-0145  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Occupation (for Individual)  
 Retired Retired  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 270.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 05 / 28 / 2019  
**Transaction ID : SA11AI.29839**  
 Amount of Each Receipt this Period  
 170.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	670.00
<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 33 OF 81
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**Black Americans to Re-elect the President**

**A. Ries, Melvin, A, Mr,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3585 Round Barn Blvd  
Apt 329

City Santa Rosa	State CA	Zip Code 95403-0145
--------------------	-------------	------------------------

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 ▼  
470.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	10	/	2019

**Transaction ID : SA11AI.30346**

Amount of Each Receipt this Period  
200.00

Memo Item

**B. Robertson, Richard, G, Mr,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 17289 Venables Dr

City Lewes	State DE	Zip Code 19958-4807
---------------	-------------	------------------------

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 ▼  
250.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	22	/	2019

**Transaction ID : SA11AI.22112**

Amount of Each Receipt this Period  
250.00

Memo Item

**C. Rumph, Scott, W, , III**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 5 Lewis Cir

City Sumter	State SC	Zip Code 29154-6237
----------------	-------------	------------------------

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

Name of Employer (for Individual) Design Tec	Occupation (for Individual) Architect
-------------------------------------------------	------------------------------------------

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
700.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	13	/	2019

**Transaction ID : SA11AI.28675**

Amount of Each Receipt this Period  
700.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1150.00
<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 34 OF 81
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**Black Americans to Re-elect the President**

**A. Ryan, Jerome, D, Mr,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 806 Buchanan Blvd  
 Ste 115  
 City Boulder City State NV Zip Code 89005-2144  
 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 ▼ 250.00

Date of Receipt 06 / 21 / 2019  
**Transaction ID : SA11AI.30885**  
 Amount of Each Receipt this Period 250.00  
 Memo Item

**B. Samerson, Marjorie, H, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 620 SW 94th Ter  
 City Pembroke Pines State FL Zip Code 33025-1150  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) S Florida State Hospital Occupation (for Individual) Coordinator  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 07 / 2019  
**Transaction ID : SA11AI.27376**  
 Amount of Each Receipt this Period 250.00  
 Memo Item

**C. Scott, Dorothy, R, Ms,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 5105 Seabreeze Way  
 City Oxnard State CA Zip Code 93035-1054  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Canteen of Coastal CA Occupation (for Individual) Retired  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 20 / 2019  
**Transaction ID : SA11AI.29282**  
 Amount of Each Receipt this Period 250.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	750.00
<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 35 OF 81
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13 <input type="checkbox"/> 11b <input type="checkbox"/> 14 <input type="checkbox"/> 11c <input type="checkbox"/> 15 <input type="checkbox"/> 12 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**Black Americans to Re-elect the President**

**A. Sellick, Jeff, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO Box 88757  
 City Los Angeles State CA Zip Code 90009-6757  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Henkels & McCoy Occupation (for Individual) Network Cabling Technician  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 06 / 28 / 2019  
**Transaction ID : SA11AI.32340**  
 Amount of Each Receipt this Period 100.00  
 Memo Item

**B. Sellner, Elliott, M, Mr,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1809 Prairie Ave SW  
 City Faribault State MN Zip Code 55021-5514  
 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 ▼ 249.00

Date of Receipt 05 / 06 / 2019  
**Transaction ID : SA11AI.26158**  
 Amount of Each Receipt this Period 249.00  
 Memo Item

**C. Sewell, Charles, K, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 8 Woodlawn Dr NE  
 City Marietta State GA Zip Code 30067-4712  
 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 ▼ 250.00

Date of Receipt 05 / 15 / 2019  
**Transaction ID : SA11AI.29070**  
 Amount of Each Receipt this Period 250.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	599.00
<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 36 OF 81
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Black Americans to Re-elect the President**

**A. SIMPSON FAMILY TRUST II**

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

Mailing Address 8515 Costa Verde Blvd  
Unit 1557

City San Diego State CA Zip Code 92122-6685

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 ▼  
250.00

Date of Receipt  
MM / DD / YYYY  
05 / 17 / 2019

**Transaction ID : SA11AI.29219**

Amount of Each Receipt this Period  
250.00

Memo Item

**B. Sloniker, Earl, W, Mr,**

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

Mailing Address 3541 Sunset Dr

City Columbus State OH Zip Code 43221-1744

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 ▼  
500.00

Date of Receipt  
MM / DD / YYYY  
05 / 07 / 2019

**Transaction ID : SA11AI.27328**

Amount of Each Receipt this Period  
500.00

Memo Item

**C. Smith, Dick, , Mr,**

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

Mailing Address 25 Leonard Trl

City Westworth Village State TX Zip Code 76114-4037

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 ▼  
250.00

Date of Receipt  
MM / DD / YYYY  
05 / 03 / 2019

**Transaction ID : SA11AI.25826**

Amount of Each Receipt this Period  
250.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1000.00
<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 37 OF 81
	<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 Americans to Re-elect the President**

**A. Smith, Jack, D, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 177 Boundary Ln  
 City Otterville State MO Zip Code 65348-2420  
 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 ▼ 300.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 05 / 13 / 2019  
**Transaction ID : SA11AI.28659**  
 Amount of Each Receipt this Period  
 200.00  
 Memo Item

**B. Smith, Jack, D, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 177 Boundary Ln  
 City Otterville State MO Zip Code 65348-2420  
 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 ▼ 400.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 05 / 20 / 2019  
**Transaction ID : SA11AI.29287**  
 Amount of Each Receipt this Period  
 100.00  
 Memo Item

**C. Smith, Jack, D, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 177 Boundary Ln  
 City Otterville State MO Zip Code 65348-2420  
 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 ▼ 600.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 10 / 2019  
**Transaction ID : SA11AI.30272**  
 Amount of Each Receipt this Period  
 200.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	500.00
<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 38 OF 81
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**Black Americans to Re-elect the President**

**A. Stansell, Kathie, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 363 Potomac Shore Dr  
 City Heathsville State VA Zip Code 22473  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) activist  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 24 / 2019  
**Transaction ID : SA11AI.32263**  
 Amount of Each Receipt this Period 250.00  
 Memo Item

**B. Star, Richard, W, Mr,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 19045 Thomson Dr Unit 204  
 City Brookfield State WI Zip Code 53045-5176  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Engman Taylor Occupation (for Individual) Chairman  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 05 / 07 / 2019  
**Transaction ID : SA11AI.27392**  
 Amount of Each Receipt this Period 250.00  
 Memo Item

**C. Stewart, Nelda, M, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 225 Arnold Blvd Trlr 58  
 City Abilene State TX Zip Code 79605-1272  
 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 ▼ 285.00

Date of Receipt 06 / 10 / 2019  
**Transaction ID : SA11AI.30289**  
 Amount of Each Receipt this Period 100.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	600.00
<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 39 OF 81
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Black Americans to Re-elect the President**

**A. St George, Nicholas, J, Mr,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 971 Georgia Ave

City Winter Park	State FL	Zip Code 32789-2606
---------------------	-------------	------------------------

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 ▼  
300.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
05		09		2019

**Transaction ID : SA11AI.27856**

Amount of Each Receipt this Period  
200.00

Memo Item

**B. Stultz, Mary, N, Mrs,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 262 Deerfield Cir

City Kingwood	State WV	Zip Code 26537-1358
------------------	-------------	------------------------

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 ▼  
250.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
05		13		2019

**Transaction ID : SA11AI.28703**

Amount of Each Receipt this Period  
250.00

Memo Item

**C. Stultz, Mary, N, Mrs,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 262 Deerfield Cir

City Kingwood	State WV	Zip Code 26537-1358
------------------	-------------	------------------------

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 ▼  
500.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
05		21		2019

**Transaction ID : SA11AI.29572**

Amount of Each Receipt this Period  
250.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	700.00
<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 40 OF 81
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**Black Americans to Re-elect the President**

**A. Sumlin, Melba, B, Ms,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 713 Cooktown Rd

City Ruston	State LA	Zip Code 71270-3652
----------------	-------------	------------------------

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 ▼  
225.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
04		26		2019

**Transaction ID : SA11AI.22940**

Amount of Each Receipt this Period  
75.00

Memo Item

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

Mailing Address PO Box 550

City Bryn Athyn	State PA	Zip Code 19009-0550
--------------------	-------------	------------------------

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 ▼  
500.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
04		23		2019

**Transaction ID : SA11AI.22178**

Amount of Each Receipt this Period  
500.00

Memo Item

**C. Szaforowicz, Eugene, E, ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PSC 76 Box 2664

City Apo	State AP	Zip Code 96319-0027
-------------	-------------	------------------------

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

Name of Employer (for Individual) AAFES	Occupation (for Individual) Manager
--------------------------------------------	----------------------------------------

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
400.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
05		13		2019

**Transaction ID : SA11AI.28693**

Amount of Each Receipt this Period  
200.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	775.00
<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 41 OF 81
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**Black Americans to Re-elect the President**

**A. Szaferowicz, Eugene, E, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PSC 76 Box 2664  
 City Apo State AP Zip Code 96319-0027  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) AAFES Occupation (for Individual) Manager  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt 05 / 31 / 2019  
**Transaction ID : SA11AI.32279**  
 Amount of Each Receipt this Period 50.00  
 Memo Item

**B. Tepas, Gary, L, Ms,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2022 Cheviot Dr  
 City Inverness State IL Zip Code 60010-5619  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) EMKAY Occupation (for Individual) CEO  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 06 / 25 / 2019  
**Transaction ID : SA11AI.31312**  
 Amount of Each Receipt this Period 500.00  
 Memo Item

**C. Topper, Margaret, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 212 Treasure Pl  
 City Jupiter State FL Zip Code 33469-3517  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Self Employed Occupation (for Individual) Executive  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 05 / 13 / 2019  
**Transaction ID : SA11AI.28712**  
 Amount of Each Receipt this Period 1000.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1550.00
<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 42 OF 81
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**Black Americans to Re-elect the President**

**A. Vernon, Robert, J, Mr,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1706 Crestmont Ave

City Norman	State OK	Zip Code 73069-6606
----------------	-------------	------------------------

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

Name of Employer (for Individual) Program Manager	Occupation (for Individual) Program Manager
------------------------------------------------------	------------------------------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
225.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
05		03		2019

**Transaction ID : SA11AI.25880**

Amount of Each Receipt this Period  
200.00

Memo Item

**B. Vojcek, Victor, V, Mr,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 13505 N Haggerty Rd

City Plymouth	State MI	Zip Code 48170-4251
------------------	-------------	------------------------

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 ▼  
500.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
05		03		2019

**Transaction ID : SA11AI.25899**

Amount of Each Receipt this Period  
500.00

Memo Item

**C. Volz, John, Fred, Mr,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 87 Hillcrest Circle Rd

City Brevard	State NC	Zip Code 28712-9331
-----------------	-------------	------------------------

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 ▼  
500.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
04		29		2019

**Transaction ID : SA11AI.23743**

Amount of Each Receipt this Period  
500.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1200.00
<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 43 OF 81
	<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 Americans to Re-elect the President**

**A. Volz, John, Fred, Mr,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 87 Hillcrest Circle Rd

City Brevard	State NC	Zip Code 28712-9331
-----------------	-------------	------------------------

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 ▼  
700.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	21	/	2019

**Transaction ID : SA11AI.30907**

Amount of Each Receipt this Period  
200.00

Memo Item

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

Mailing Address 4153 Country Club Dr

City Long Beach	State CA	Zip Code 90807-1905
--------------------	-------------	------------------------

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

Name of Employer (for Individual) Alpha Capital Mgt	Occupation (for Individual) Investor
--------------------------------------------------------	-----------------------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	09	/	2019

**Transaction ID : SA11AI.27872**

Amount of Each Receipt this Period  
250.00

Memo Item

**C. Wantin, Reino, I, Mr,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2810 Susie Ln

City San Carlos	State CA	Zip Code 94070-4343
--------------------	-------------	------------------------

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 ▼  
250.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	13	/	2019

**Transaction ID : SA11AI.30688**

Amount of Each Receipt this Period  
100.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	550.00
<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 44 OF 81
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**Black Americans to Re-elect the President**

**A. Watson, James, R, Mr,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 12205 Chevelle Dr

City Sterling Heights	State MI	Zip Code 48312-4023
--------------------------	-------------	------------------------

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 ▼  
250.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
05		06		2019

**Transaction ID : SA11AI.25993**

Amount of Each Receipt this Period  
250.00

Memo Item

**B. Wiehr, Loretta, M, Ms,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 202 Rainbow Dr  
PMB 10213

City Livingston	State TX	Zip Code 77399-0001
--------------------	-------------	------------------------

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 ▼  
1000.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
06		24		2019

**Transaction ID : SA11AI.30923**

Amount of Each Receipt this Period  
1000.00

Memo Item

**C. Woodruff, Piers, , Mr,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO Box 503

City Somerset	State VA	Zip Code 22972-0503
------------------	-------------	------------------------

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

Name of Employer (for Individual) Self	Occupation (for Individual) Farmer
-------------------------------------------	---------------------------------------

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
300.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
06		07		2019

**Transaction ID : SA11AI.30254**

Amount of Each Receipt this Period  
100.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1350.00
<b>TOTAL</b> This Period (last page this line number only).....	46704.00

# 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 45 OF 81
<input type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14
<input checked="" type="checkbox"/> 11c <input type="checkbox"/> 15	<input type="checkbox"/> 12 <input type="checkbox"/> 16
<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**Black Americans to Re-elect the President**

**A. RST Marketing**

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

Mailing Address 1272 Corporate Park Rd.

City Forest	State VA	Zip Code 24551
----------------	-------------	-------------------

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 ▼

762.00

Date of Receipt

**06 / 26 / 2019**

**Transaction ID : SA15.218613**

Amount of Each Receipt this Period

762.00

Memo Item

Return of dollars in the window of fundraising appeal

**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

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

Amount of Each Receipt this Period

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	762.00
<b>TOTAL</b> This Period (last page this line number only).....	762.00

**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)

**Black Americans to Re-elect the President**

Full Name (Last, First, Middle Initial)

**A. 3 Kids Screen Printing**

Mailing Address 10860 Old Lumberton Rd

City Evergreen State NC Zip Code 28438

Purpose of Disbursement Tee shirts

Category/Type

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
0	6		2	0		2	0	1	9

FEC Identification Number  
  
**Transaction ID : SB21B.21806**  
 Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**B. Campaign Funding Direct INC**

Mailing Address 1420 SPRING HILL ROAD

City MCLEAN State VA Zip Code 22102

Purpose of Disbursement Postage/Mailing costs

Category/Type

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
0	4		2	9		2	0	1	9

FEC Identification Number  
  
**Transaction ID : SB21B.21837**  
 Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**C. Campaign Funding Direct INC**

Mailing Address 1420 SPRING HILL ROAD

City MCLEAN State VA Zip Code 22102

Purpose of Disbursement Postage/mailing costs

Category/Type

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
0	5		1	3		2	0	1	9

FEC Identification Number  
  
**Transaction ID : SB21B.21827**  
 Amount of Each Disbursement this Period

Memo Item

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

**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 Americans to Re-elect the President**

Full Name (Last, First, Middle Initial)

**A. Campaign Funding Direct INC**

Mailing Address 1420 SPRING HILL ROAD

City **MCLEAN** State **VA** Zip Code **22102**

Purpose of Disbursement Agency Fee

001  
 002  
 **003**  
Category/Type

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  
**05 / 15 / 2019**

FEC Identification Number

**C**   
**Transaction ID : SB21B.21841**  
Amount of Each Disbursement this Period  
 **1600.00**

Memo Item

Full Name (Last, First, Middle Initial)

**B. Campaign Funding Direct INC**

Mailing Address 1420 SPRING HILL ROAD

City **MCLEAN** State **VA** Zip Code **22102**

Purpose of Disbursement agency fee

001  
 002  
 **003**  
Category/Type

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  
**06 / 17 / 2019**

FEC Identification Number

**C**   
**Transaction ID : SB21B.21857**  
Amount of Each Disbursement this Period  
 **3635.68**

Memo Item

Full Name (Last, First, Middle Initial)

**C. Campaign Funding Direct INC**

Mailing Address 1420 SPRING HILL ROAD

City **MCLEAN** State **VA** Zip Code **22102**

Purpose of Disbursement Agency Fee

001  
 002  
 **003**  
Category/Type

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  
**06 / 24 / 2019**

FEC Identification Number

**C**   
**Transaction ID : SB21B.2186t**  
Amount of Each Disbursement this Period  
 **7039.92**

Memo Item

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

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

**12275.60**

**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 Americans to Re-elect the President**

Full Name (Last, First, Middle Initial)

**A. Colortree Group**

Mailing Address 8000 Villa Park Dr

City Richmond State VA Zip Code 23228

Purpose of Disbursement Printing

Category/Type

Candidate Name

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

Date of Disbursement

/  /

FEC Identification Number

**Transaction ID : SB21B.21826**  
 Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**B. CP Direct Inc**

Mailing Address 4600 Boston Way # A

City Lanham State MD Zip Code 20706

Purpose of Disbursement printing

Category/Type

Candidate Name

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

Date of Disbursement

/  /

FEC Identification Number

**Transaction ID : SB21B.21861**  
 Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**C. ECG Data Center**

Mailing Address 1420 Spring Hill Suite 490

City McLean State VA Zip Code 22102

Purpose of Disbursement computer List Maint

Category/Type

Candidate Name

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

Date of Disbursement

/  /

FEC Identification Number

**Transaction ID : SB21B.21842**  
 Amount of Each Disbursement this Period

Memo Item

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

**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 Americans to Re-elect the President**

Full Name (Last, First, Middle Initial)

**A. ECG Data Center**

Mailing Address 1420 Spring Hill  
Suite 490

City McLean State VA Zip Code 22102

Purpose of Disbursement  
computer list maint

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

/  /

FEC Identification Number

**Transaction ID : SB21B.21843**  
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**B. ECG Data Center**

Mailing Address 1420 Spring Hill  
Suite 490

City McLean State VA Zip Code 22102

Purpose of Disbursement  
Back-end Cost

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

/  /

FEC Identification Number

**Transaction ID : SB21B.21845**  
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**C. ECG Data Center**

Mailing Address 1420 Spring Hill  
Suite 490

City McLean State VA Zip Code 22102

Purpose of Disbursement  
Computer- List Maint./ Computer-Postal / Back End Cost

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

/  /

FEC Identification Number

**Transaction ID : SB21B.21862**  
Amount of Each Disbursement this Period

Memo Item

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

**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 Americans to Re-elect the President**

Full Name (Last, First, Middle Initial)

**A. First Virginia Community Bank**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
04		30		2019

Mailing Address 11325 Random Hills Road

FEC Identification Number

C [ ]

**Transaction ID : SB21B.21854**  
Amount of Each Disbursement this Period

[ ] 26.84

Memo Item

City Fairfax State VA Zip Code 22030

Purpose of Disbursement Bank Charge

[ ]

Candidate Name

Category/Type

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

Full Name (Last, First, Middle Initial)

**B. First Virginia Community Bank**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
05		31		2019

Mailing Address 11325 Random Hills Road

FEC Identification Number

C [ ]

**Transaction ID : SB21B.21830**  
Amount of Each Disbursement this Period

[ ] 224.61

Memo Item

City Fairfax State VA Zip Code 22030

Purpose of Disbursement Bank Charges

[ ] 003

Candidate Name

Category/Type

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

Full Name (Last, First, Middle Initial)

**C. First Virginia Community Bank**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
06		30		2019

Mailing Address 11325 Random Hills Road

FEC Identification Number

C [ ]

**Transaction ID : SB21B.21876**  
Amount of Each Disbursement this Period

[ ] 469.82

Memo Item

City Fairfax State VA Zip Code 22030

Purpose of Disbursement bank charge

[ ]

Candidate Name

Category/Type

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

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

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

[ ] 721.27

[ ]

**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 Americans to Re-elect the President**

Full Name (Last, First, Middle Initial)

**A. Juneteenth Festival of the Carolinas**

Mailing Address 1215 Thomas Ave

City Charlotte State NC Zip Code 28205

Purpose of Disbursement  
Vendor booth fee

Category/  
Type

Candidate Name

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

Date of Disbursement

/  /

FEC Identification Number

**Transaction ID : SB21B.21800**  
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**B. Juneteenth Festival of the Carolinas**

Mailing Address 1215 Thomas Ave

City Charlotte State NC Zip Code 28205

Purpose of Disbursement  
Vendor table fee

Category/  
Type

Candidate Name

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

Date of Disbursement

/  /

FEC Identification Number

**Transaction ID : SB21B.21802**  
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**C. MDI Imaging & Mail**

Mailing Address 21955 Cascades Parkway

City Dulles State VA Zip Code 20166

Purpose of Disbursement  
Posatage

Category/  
Type

Candidate Name

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

Date of Disbursement

/  /

FEC Identification Number

**Transaction ID : SB21B.21832**  
Amount of Each Disbursement this Period

Memo Item

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

**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 Americans to Re-elect the President**

Full Name (Last, First, Middle Initial)

**A. North Carolina Republican Party Building Fund**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
04	/	16	/	2019

Mailing Address 1506 Hillsborough Street

FEC Identification Number

C [REDACTED]

**Transaction ID : SB21B.20138**

Amount of Each Disbursement this Period

[REDACTED] 300.00

Memo Item

City Raleigh State NC Zip Code 27605

Purpose of Disbursement  
Convention vendor table fee

007  
Category/  
Type

Candidate Name

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

Full Name (Last, First, Middle Initial)

**B. Nova Label Company Inc**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
05	/	13	/	2019

Mailing Address 4819 Lydell Rd

FEC Identification Number

C [REDACTED]

**Transaction ID : SB21B.21829**

Amount of Each Disbursement this Period

[REDACTED] 1046.73

Memo Item

City Hyattsville State MD Zip Code 20781

Purpose of Disbursement  
Printing

003  
Category/  
Type

Candidate Name

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

Full Name (Last, First, Middle Initial)

**C. Omega List Company**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
04	/	01	/	2019

Mailing Address 1420 Spring Hill Road  
Suite 490

FEC Identification Number

C [REDACTED]

**Transaction ID : SB21B.21848**

Amount of Each Disbursement this Period

[REDACTED] 675.00

Memo Item

City McLean State VA Zip Code 22102

Purpose of Disbursement  
List Rental Exp.

003  
Category/  
Type

Candidate Name

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

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

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

[REDACTED] 2021.73

[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)

**Black Americans to Re-elect the President**

Full Name (Last, First, Middle Initial)

**A. Omega List Company**

Mailing Address 1420 Spring Hill Road  
Suite 490

City McLean State VA Zip Code 22102

Purpose of Disbursement  
List Rental Exp.

Category/  
Type

Candidate Name

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

Date of Disbursement

/  /

FEC Identification Number

**Transaction ID : SB21B.21834**  
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**B. Postmaster USPS**

Mailing Address 1544 Spring Hill Rd

City McLean State VA Zip Code 22102

Purpose of Disbursement  
Postage- BRM/ Postage Fee

Category/  
Type

Candidate Name

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

Date of Disbursement

/  /

FEC Identification Number

**Transaction ID : SB21B.21849**  
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**C. Postmaster USPS**

Mailing Address 1544 Spring Hill Rd

City McLean State VA Zip Code 22102

Purpose of Disbursement  
Postage BRM

Category/  
Type

Candidate Name

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

Date of Disbursement

/  /

FEC Identification Number

**Transaction ID : SB21B.21834**  
Amount of Each Disbursement this Period

Memo Item

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

**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 Americans to Re-elect the President**

Full Name (Last, First, Middle Initial)

**A. Postmaster USPS**

Mailing Address 1544 Spring Hill Rd

City McLean State VA Zip Code 22102

Purpose of Disbursement Postage

003  
Category/Type

Candidate Name

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

Date of Disbursement

MM / DD / YYYY  
06 / 07 / 2019

FEC Identification Number

C  
**Transaction ID : SB21B.21863**  
 Amount of Each Disbursement this Period  
 1000.00

Memo Item

Full Name (Last, First, Middle Initial)

**B. Republican Liberty Caucus**

Mailing Address 9851 State Road 54

City New Port Ritchey State FL Zip Code 34655

Purpose of Disbursement Vendor Table Fee

007  
Category/Type

Candidate Name

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

Date of Disbursement

MM / DD / YYYY  
04 / 24 / 2019

FEC Identification Number

C  
**Transaction ID : SB21B.21959**  
 Amount of Each Disbursement this Period  
 500.00

Memo Item

Full Name (Last, First, Middle Initial)

**C. Robinson Stratavision Consulting LLC**

Mailing Address 2713 Edinberg Dr SW

City Winston-Salem State NC Zip Code 27103

Purpose of Disbursement Airfare, fees and taxes, lodging, rental car, fuel, meals etc

002  
Category/Type

Candidate Name

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

Date of Disbursement

MM / DD / YYYY  
04 / 08 / 2019

FEC Identification Number

C  
**Transaction ID : SB21B.21976**  
 Amount of Each Disbursement this Period  
 2011.03

Memo Item

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

3511.03

**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 Americans to Re-elect the President**

Full Name (Last, First, Middle Initial)

**A. American Airlines**

Mailing Address 4333 Amon Carter Boulevard

City Fort Worth State TX Zip Code 76155

Purpose of Disbursement  
airfare, fees, and taxes

001  
 002  
Category/  
Type

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  
04 / 08 / 2019

FEC Identification Number

C  
Transaction ID : SB21B.21976  
Amount of Each Disbursement this Period  
469.60

Memo Item

Full Name (Last, First, Middle Initial)

**B. Orbitz**

Mailing Address 500 W. Madison Street

City Chicago State IL Zip Code 60661

Purpose of Disbursement  
Airfare, fees and taxes

001  
 002  
Category/  
Type

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  
04 / 08 / 2019

FEC Identification Number

C  
Transaction ID : SB21B.21976  
Amount of Each Disbursement this Period  
243.50

Memo Item

Full Name (Last, First, Middle Initial)

**C. Radisson Hotel**

Mailing Address 11340 Blondo Street  
Suite 100

City Omaha State NE Zip Code 68164

Purpose of Disbursement  
lodging

001  
 002  
Category/  
Type

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  
04 / 08 / 2019

FEC Identification Number

C  
Transaction ID : SB21B.21976  
Amount of Each Disbursement this Period  
577.22

Memo Item

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

0.00

**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 Americans to Re-elect the President**

Full Name (Last, First, Middle Initial)

**A. Hertz**

Mailing Address 8501 Williams Road

City  
Estero

State  
FL

Zip Code  
39928

Purpose of Disbursement  
Rental car

002

Category/  
Type

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
0	4		0	8		2	0	1	9

FEC Identification Number

C

**Transaction ID : SB21B.21976**

Amount of Each Disbursement this Period

328.76

Memo Item

Full Name (Last, First, Middle Initial)

**B. Robinson Stratavision Consulting LLC**

Mailing Address 2713 Edinberg Dr SW

City  
Winston-Salem

State  
NC

Zip Code  
27103

Purpose of Disbursement  
Mileage

002

Category/  
Type

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
0	4		0	8		2	0	1	9

FEC Identification Number

C

**Transaction ID : SB21B.21984**

Amount of Each Disbursement this Period

262.04

Memo Item

Full Name (Last, First, Middle Initial)

**C. Robinson Stratavision Consulting LLC**

Mailing Address 2713 Edinberg Dr SW

City  
Winston-Salem

State  
NC

Zip Code  
27103

Purpose of Disbursement  
computer accessories and software

001

Category/  
Type

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
0	4		0	8		2	0	1	9

FEC Identification Number

C

**Transaction ID : SB21B.2199c**

Amount of Each Disbursement this Period

305.99

Memo Item

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

568.03

**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 Americans to Re-elect the President**

Full Name (Last, First, Middle Initial)  
**A. Amazon**

Mailing Address 410 Terry Ave N

City Seattle State WA Zip Code 98109

Purpose of Disbursement computer accessory

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 04 / 08 / 2019

FEC Identification Number: C

Transaction ID : SB21B.21990

Amount of Each Disbursement this Period: 206.00

Memo Item

Full Name (Last, First, Middle Initial)  
**B. Robinson Stratavision Consulting LLC**

Mailing Address 2713 Edinberg Dr SW

City Winston-Salem State NC Zip Code 27103

Purpose of Disbursement printing, shipping, supplies

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 04 / 08 / 2019

FEC Identification Number: C

Transaction ID : SB21B.21995

Amount of Each Disbursement this Period: 114.71

Memo Item

Full Name (Last, First, Middle Initial)  
**C. Robinson Stratavision Consulting LLC**

Mailing Address 2713 Edinberg Dr SW

City Winston-Salem State NC Zip Code 27103

Purpose of Disbursement airfare and fees, lodging, train, public transit, uber

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 05 / 07 / 2019

FEC Identification Number: C

Transaction ID : SB21B.21961

Amount of Each Disbursement this Period: 1068.70

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 1183.41

**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 Americans to Re-elect the President**

Full Name (Last, First, Middle Initial)

**A. Southwest Airlines**

Mailing Address PO Box 36647

City  
Dallas

State  
TX

Zip Code  
75235

Purpose of Disbursement  
Airfare, fees and taxes

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

/  /

FEC Identification Number

**Transaction ID : SB21B.21961**  
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**B. Hotwire**

Mailing Address 655 Montgomery Street  
Suite 600

City  
San Francisco

State  
CA

Zip Code  
94111

Purpose of Disbursement  
Lodging

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

/  /

FEC Identification Number

**Transaction ID : SB21B.21961**  
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**C. Hertz**

Mailing Address 8501 Williams Road

City  
Estero

State  
FL

Zip Code  
39928

Purpose of Disbursement  
car rental

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

/  /

FEC Identification Number

**Transaction ID : SB21B.21961**  
Amount of Each Disbursement this Period

Memo Item

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

**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 Americans to Re-elect the President**

Full Name (Last, First, Middle Initial)

**A. Robinson Stratavision Consulting LLC**

Mailing Address 2713 Edinberg Dr SW

City Winston-Salem State NC Zip Code 27103

Purpose of Disbursement printing, shipping

Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

/  /

FEC Identification Number

**Transaction ID : SB21B.21973**  
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**B. Staples**

Mailing Address 500 Staples Way

City Farmingham State MA Zip Code 01702

Purpose of Disbursement Printing

Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

/  /

FEC Identification Number

**Transaction ID : SB21B.21973**  
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**C. Robinson Stratavision Consulting LLC**

Mailing Address 2713 Edinberg Dr SW

City Winston-Salem State NC Zip Code 27103

Purpose of Disbursement campaign management

Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

/  /

FEC Identification Number

**Transaction ID : SB21B.3243t**  
Amount of Each Disbursement this Period

Memo Item

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

**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 Americans to Re-elect the President**

Full Name (Last, First, Middle Initial)

**A. Robinson Stratavision Consulting LLC**

Mailing Address 2713 Edinberg Dr SW

City Winston-Salem State NC Zip Code 27103

Purpose of Disbursement  
Travel Expenses

001  
 002  
Category/  
Type

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 Y  
05 / 28 / 2019

FEC Identification Number

C   
**Transaction ID : SB21B.21919**  
Amount of Each Disbursement this Period  
 976.74

Memo Item

Full Name (Last, First, Middle Initial)

**B. Crown Plaza Redondo Beach**

Mailing Address 300 N. Harbor Dr

City Redondo Beach State CA Zip Code 90277

Purpose of Disbursement  
Lodging

001  
 002  
Category/  
Type

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 Y  
05 / 15 / 2019

FEC Identification Number

C   
**Transaction ID : SB21B.21919**  
Amount of Each Disbursement this Period  
 225.26

Memo Item

Full Name (Last, First, Middle Initial)

**C. Hotwire**

Mailing Address 655 Montgomery Street  
Suite 600

City San Francisco State CA Zip Code 94111

Purpose of Disbursement  
Hotel

001  
 002  
Category/  
Type

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 Y  
05 / 21 / 2019

FEC Identification Number

C   
**Transaction ID : SB21B.21919**  
Amount of Each Disbursement this Period  
 83.47

Memo Item

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

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

976.74

**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 Americans to Re-elect the President**

Full Name (Last, First, Middle Initial)

**A. Black Conservative Federation**

Mailing Address 1717 Pennsylvania Ave

City  
Washington

State  
DC

Zip Code  
20001

Purpose of Disbursement  
Chicago Black Summit

002

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
05 / 24 / 2019

FEC Identification Number

C  
Transaction ID : SB21B.21919  
Amount of Each Disbursement this Period  
250.00

Memo Item

Full Name (Last, First, Middle Initial)

**B. Hertz**

Mailing Address 8501 Williams Road

City  
Estero

State  
FL

Zip Code  
39928

Purpose of Disbursement  
Car Rental

002

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
05 / 13 / 2019

FEC Identification Number

C  
Transaction ID : SB21B.21919  
Amount of Each Disbursement this Period  
68.80

Memo Item

Full Name (Last, First, Middle Initial)

**C. Sam's Club**

Mailing Address 2101 SE Simple Savings Dr

City  
Bentonville

State  
AR

Zip Code  
72712

Purpose of Disbursement  
Gasoline

002

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
05 / 15 / 2019

FEC Identification Number

C  
Transaction ID : SB21B.21919  
Amount of Each Disbursement this Period  
73.19

Memo Item

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

0.00

**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 Americans to Re-elect the President**

Full Name (Last, First, Middle Initial)

**A. Robinson Stratavision Consulting LLC**

Mailing Address 2713 Edinberg Dr SW

City  
Winston-Salem

State  
NC

Zip Code  
27103

Purpose of Disbursement  
Campaign Event

007

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
05 / 28 / 2019

FEC Identification Number

C

Transaction ID : SB21B.21937

Amount of Each Disbursement this Period

583.15

Memo Item

Full Name (Last, First, Middle Initial)

**B. Black Conservative Federation**

Mailing Address 1717 Pennsylvania Ave

City  
Washington

State  
DC

Zip Code  
20001

Purpose of Disbursement  
Conservative Summit

007

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY  
05 / 15 / 2019

FEC Identification Number

C

Transaction ID : SB21B.21937

Amount of Each Disbursement this Period

500.00

Memo Item

Full Name (Last, First, Middle Initial)

**C. Robinson Stratavision Consulting LLC**

Mailing Address 2713 Edinberg Dr SW

City  
Winston-Salem

State  
NC

Zip Code  
27103

Purpose of Disbursement  
Administrative support and shipping

001

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
05 / 28 / 2019

FEC Identification Number

C

Transaction ID : SB21B.21955

Amount of Each Disbursement this Period

225.70

Memo Item

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

808.85

**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 Americans to Re-elect the President**

Full Name (Last, First, Middle Initial)

**A. Robinson Stratavision Consulting LLC**

Mailing Address 2713 Edinberg Dr SW

City  
Winston-Salem

State  
NC

Zip Code  
27103

Purpose of Disbursement  
Campagin Management

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

/  /

FEC Identification Number

**Transaction ID : SB21B.32431**  
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**B. Robinson Stratavision Consulting LLC**

Mailing Address 2713 Edinberg Dr SW

City  
Winston-Salem

State  
NC

Zip Code  
27103

Purpose of Disbursement  
Mileage reimbursement

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify)

Date of Disbursement

/  /

FEC Identification Number

**Transaction ID : SB21B.21808**  
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**C. Robinson Stratavision Consulting LLC**

Mailing Address 2713 Edinberg Dr SW

City  
Winston-Salem

State  
NC

Zip Code  
27103

Purpose of Disbursement  
Meals, lodging,

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

/  /

FEC Identification Number

**Transaction ID : SB21B.21808**  
Amount of Each Disbursement this Period

Memo Item

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

**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 Americans to Re-elect the President**

Full Name (Last, First, Middle Initial)

**A. Grand Hyatt Washington**

Mailing Address 1000 H Street NW

City  
Washington

State  
DC

Zip Code  
20001

Purpose of Disbursement  
Lodging

002

Category/  
Type

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
0	6		1	0		2	0	1	9

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.21809

Amount of Each Disbursement this Period

[REDACTED] 536.00

Memo Item

Full Name (Last, First, Middle Initial)

**B. Hotwire**

Mailing Address 655 Montgomery Street  
Suite 600

City  
San Francisco

State  
CA

Zip Code  
94111

Purpose of Disbursement  
Lodging

002

Category/  
Type

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
0	6		0	7		2	0	1	9

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.21809

Amount of Each Disbursement this Period

[REDACTED] 89.60

Memo Item

Full Name (Last, First, Middle Initial)

**C. Robinson Stratavision Consulting LLC**

Mailing Address 2713 Edinberg Dr SW

City  
Winston-Salem

State  
NC

Zip Code  
27103

Purpose of Disbursement  
Office supplies and equipment

001

Category/  
Type

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
0	6		2	0		2	0	1	9

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.21814

Amount of Each Disbursement this Period

[REDACTED] 225.99

Memo Item

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

[REDACTED] 225.99

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

[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)

**Black Americans to Re-elect the President**

Full Name (Last, First, Middle Initial)

**A. Amazon**

Mailing Address 410 Terry Ave N

City Seattle State WA Zip Code 98109

Purpose of Disbursement computer equipment

Category/Type

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  
 06 / 10 / 2019

FEC Identification Number  
  
**Transaction ID : SB21B.21814**  
 Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**B. Robinson Stratavision Consulting LLC**

Mailing Address 2713 Edinberg Dr SW

City Winston-Salem State NC Zip Code 27103

Purpose of Disbursement ammo, doorprizes, printing

Category/Type

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  
 06 / 20 / 2019

FEC Identification Number  
  
**Transaction ID : SB21B.21818**  
 Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**C. Eagle Guns**

Mailing Address 3789 Roberta Church Rd

City Concord State NC Zip Code 28027

Purpose of Disbursement machine gun social ammo

Category/Type

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  
 06 / 07 / 2019

FEC Identification Number  
  
**Transaction ID : SB21B.21818**  
 Amount of Each Disbursement this Period

Memo Item

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

**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 Americans to Re-elect the President**

Full Name (Last, First, Middle Initial)

**A. Repent Arms**

Mailing Address 816 Union St S

City  
Concord

State  
NC

Zip Code  
28025

Purpose of Disbursement  
Doorprizes

007

Category/  
Type

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
0	6		0	6		2	0	1	9

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.21818

Amount of Each Disbursement this Period

[REDACTED]	395.00
------------	--------

Memo Item

Full Name (Last, First, Middle Initial)

**B. Staples**

Mailing Address 500 Staples Way

City  
Farmingham

State  
MA

Zip Code  
01702

Purpose of Disbursement  
Flyers-Printing

007

Category/  
Type

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
0	6		0	6		2	0	1	9

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.21818

Amount of Each Disbursement this Period

[REDACTED]	21.03
------------	-------

Memo Item

Full Name (Last, First, Middle Initial)

**C. Robinson Stratavision Consulting LLC**

Mailing Address 2713 Edinberg Dr SW

City  
Winston-Salem

State  
NC

Zip Code  
27103

Purpose of Disbursement  
Airfare, meals, Vendor Fee

002

Category/  
Type

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
0	6		3	0		2	0	1	9

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.21893

Amount of Each Disbursement this Period

[REDACTED]	2054.93
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Memo Item

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

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

[REDACTED]	2054.93
------------	---------

[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)

**Black Americans to Re-elect the President**

Full Name (Last, First, Middle Initial)

**A. Southwest Airlines**

Mailing Address PO Box 36647

City  
Dallas

State  
TX

Zip Code  
75235

Purpose of Disbursement  
airfare

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

/  /

FEC Identification Number

**Transaction ID : SB21B.21893**  
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**B. Tempe Mission Palms Hotel**

Mailing Address 60 E 5th St

City  
Tempe

State  
AZ

Zip Code  
85281

Purpose of Disbursement  
Lodging

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

/  /

FEC Identification Number

**Transaction ID : SB21B.21893**  
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**C. Grand Hyatt Washington**

Mailing Address 1000 H Street NW

City  
Washington

State  
DC

Zip Code  
20001

Purpose of Disbursement  
Lodging

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

/  /

FEC Identification Number

**Transaction ID : SB21B.21893**  
Amount of Each Disbursement this Period

Memo Item

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

**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 Americans to Re-elect the President**

Full Name (Last, First, Middle Initial)

**A. Colorado Christian University**

Mailing Address 8787 W Alameda Ave

City Lakewood State CO Zip Code 80226

Purpose of Disbursement Vendor

Category/Type

Candidate Name

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

Date of Disbursement

/  /

FEC Identification Number

**Transaction ID : SB21B.21893**  
 Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**B. Robinson Stratavision Consulting LLC**

Mailing Address 2713 Edinberg Dr SW

City Winston-Salem State NC Zip Code 27103

Purpose of Disbursement

Category/Type

Candidate Name

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

Date of Disbursement

/  /

FEC Identification Number

**Transaction ID : SB21B.21894**  
 Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**C. Staples**

Mailing Address 500 Staples Way

City Farmingham State MA Zip Code 01702

Purpose of Disbursement Print

Category/Type

Candidate Name

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

Date of Disbursement

/  /

FEC Identification Number

**Transaction ID : SB21B.21894**  
 Amount of Each Disbursement this Period

Memo Item

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

**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 Americans to Re-elect the President**

Full Name (Last, First, Middle Initial)

**A. USPS**

Mailing Address 7840 North Point Blvd  
Ste 110

City Winston Salem State NC Zip Code 27601

Purpose of Disbursement  
Campaign Event

007  
Category/  
Type

Candidate Name

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

Date of Disbursement  
MM / DD / YYYY  
06 / 18 / 2019

FEC Identification Number  
C  
Transaction ID : SB21B.21894  
Amount of Each Disbursement this Period  
156.10

Memo Item

Full Name (Last, First, Middle Initial)

**B. Robinson Stratavision Consulting LLC**

Mailing Address 2713 Edinberg Dr SW

City Winston-Salem State NC Zip Code 27103

Purpose of Disbursement

002  
Category/  
Type

Candidate Name

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

Date of Disbursement  
MM / DD / YYYY  
06 / 30 / 2019

FEC Identification Number  
C  
Transaction ID : SB21B.21895  
Amount of Each Disbursement this Period  
106.83

Memo Item

Full Name (Last, First, Middle Initial)

**C. RST Marketing**

Mailing Address 1272 Corporate Park Rd.

City Forest State VA Zip Code 24551

Purpose of Disbursement  
Postage- Mailhouse

003  
Category/  
Type

Candidate Name

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

Date of Disbursement  
MM / DD / YYYY  
04 / 29 / 2019

FEC Identification Number  
C  
Transaction ID : SB21B.21852  
Amount of Each Disbursement this Period  
6825.00

Memo Item

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

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

6931.83

**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 Americans to Re-elect the President**

Full Name (Last, First, Middle Initial)

**A. RST Marketing**

Mailing Address 1272 Corporate Park Rd.

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
06		29		2019

City Forest State VA Zip Code 24551

FEC Identification Number

C [REDACTED]

Purpose of Disbursement Postage

003  
Category/Type

Transaction ID : SB21B.21864  
Amount of Each Disbursement this Period

[REDACTED] 7550.00

Candidate Name

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

Memo Item

Full Name (Last, First, Middle Initial)

**B. Sears, Winsome, Earle, ,**

Mailing Address 200 Kemper Ct

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
04		08		2019

City Stephenson State VA Zip Code 22656

FEC Identification Number

C [REDACTED]

Purpose of Disbursement mileage, hotel, car rental

002  
Category/Type

Transaction ID : SB21B.32432  
Amount of Each Disbursement this Period

[REDACTED] 390.02

Candidate Name

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

Memo Item

Full Name (Last, First, Middle Initial)

**C. Sears, Winsome, Earle, ,**

Mailing Address 200 Kemper Ct

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
05		13		2019

City Stephenson State VA Zip Code 22656

FEC Identification Number

C [REDACTED]

Purpose of Disbursement Lodging, rental car, airfare and fees

002  
Category/Type

Transaction ID : SB21B.21948  
Amount of Each Disbursement this Period

[REDACTED] 858.68

Candidate Name

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

Memo Item

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

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

[REDACTED] 8798.70

[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)

**Black Americans to Re-elect the President**

Full Name (Last, First, Middle Initial)

**A. Enterprise Car Rental**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
04		28		2019

Mailing Address 600 Corporate Park Drive

FEC Identification Number

C [REDACTED]

**Transaction ID : SB21B.21948**

Amount of Each Disbursement this Period

[REDACTED] 129.36

Memo Item

City St Louis State MO Zip Code 63105

Purpose of Disbursement  
Rental Car

002
Category/ Type

Candidate Name

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

Full Name (Last, First, Middle Initial)

**B. Wyndham Hotels**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
04		27		2019

Mailing Address 700 Monticello Ave

FEC Identification Number

C [REDACTED]

**Transaction ID : SB21B.21948**

Amount of Each Disbursement this Period

[REDACTED] 270.68

Memo Item

City Norfolk State VA Zip Code 23510

Purpose of Disbursement  
Lodging

002
Category/ Type

Candidate Name

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

Full Name (Last, First, Middle Initial)

**C. Expedia**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
05		17		2019

Mailing Address 333 108th Ave NE

FEC Identification Number

C [REDACTED]

**Transaction ID : SB21B.21948**

Amount of Each Disbursement this Period

[REDACTED] 458.64

Memo Item

City Bellevue State WA Zip Code 98004

Purpose of Disbursement  
Airfare and Lodging

002
Category/ Type

Candidate Name

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

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

[REDACTED] 0.00

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

[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)

**Black Americans to Re-elect the President**

Full Name (Last, First, Middle Initial)

**A. Sears, Winsome, Earle, ,**

Mailing Address 200 Kemper Ct

City  
Stephenson

State  
VA

Zip Code  
22656

Purpose of Disbursement  
Event organizing, running booth, promoting the PAC's goals to attendees

007

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
06 / 13 / 2019

FEC Identification Number

C  
Transaction ID : SB21B.21803  
Amount of Each Disbursement this Period

1800.00

Memo Item

Full Name (Last, First, Middle Initial)

**B. Sears, Winsome, Earle, ,**

Mailing Address 200 Kemper Ct

City  
Stephenson

State  
VA

Zip Code  
22656

Purpose of Disbursement  
copy editing

003

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
06 / 13 / 2019

FEC Identification Number

C  
Transaction ID : SB21B.21805  
Amount of Each Disbursement this Period

1200.00

Memo Item

Full Name (Last, First, Middle Initial)

**C. Sears, Winsome, Earle, ,**

Mailing Address 200 Kemper Ct

City  
Stephenson

State  
VA

Zip Code  
22656

Purpose of Disbursement  
Uber, meals

002

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
06 / 30 / 2019

FEC Identification Number

C  
Transaction ID : SB21B.21947  
Amount of Each Disbursement this Period

209.48

Memo Item

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

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

3209.48



**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 Americans to Re-elect the President**

Full Name (Last, First, Middle Initial)

**A. South Carolina Republican Party**

Mailing Address 1913 Marion Street

City Columbia State SC Zip Code 29201

Purpose of Disbursement  
Vendor Table Fee

Category/  
Type

Candidate Name

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

Date of Disbursement

/  /

FEC Identification Number

**Transaction ID : SB21B.21944**  
 Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**B. Washington Intelligence Bureau**

Mailing Address 4128 Pepsi Place

City Chantilly State VA Zip Code 20151

Purpose of Disbursement  
Bookkeeping

Category/  
Type

Candidate Name

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

Date of Disbursement

/  /

FEC Identification Number

**Transaction ID : SB21B.21839**  
 Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**C. Washington Intelligence Bureau**

Mailing Address 4128 Pepsi Place

City Chantilly State VA Zip Code 20151

Purpose of Disbursement  
Back-end cost/ bookkeeping

Category/  
Type

Candidate Name

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

Date of Disbursement

/  /

FEC Identification Number

**Transaction ID : SB21B.21844**  
 Amount of Each Disbursement this Period

Memo Item

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

**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 Americans to Re-elect the President**

Full Name (Last, First, Middle Initial)

**A. Washington Intelligence Bureau**

Mailing Address 4128 Pepsi Place

City Chantilly State VA Zip Code 20151

Purpose of Disbursement  
Back End Cost

Category/  
Type

Candidate Name

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

Date of Disbursement

/  /

FEC Identification Number

**Transaction ID : SB21B.21867**  
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**B. Washington Intelligence Bureau**

Mailing Address 4128 Pepsi Place

City Chantilly State VA Zip Code 20151

Purpose of Disbursement  
Bookkeeping

Category/  
Type

Candidate Name

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

Date of Disbursement

/  /

FEC Identification Number

**Transaction ID : SB21B.21868**  
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**C. Zip Mailing Services Inc**

Mailing Address 6304 Sheriff Road Suite Z

City Landover State MD Zip Code 20785

Purpose of Disbursement  
Postage- Mailhouse

Category/  
Type

Candidate Name

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

Date of Disbursement

/  /

FEC Identification Number

**Transaction ID : SB21B.21836**  
Amount of Each Disbursement this Period

Memo Item

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

**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 Americans to Re-elect the President**

Full Name (Last, First, Middle Initial)

**A. Zip Mailing Services Inc**

Mailing Address 6304 Sheriff Road Suite Z

City  
Landover

State  
MD

Zip Code  
20785

Purpose of Disbursement  
mailhouse/laser

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
06 / 24 / 2019

FEC Identification Number

C  
**Transaction ID : SB21B.21869**  
Amount of Each Disbursement this Period  
10166.07

Memo Item

Full Name (Last, First, Middle Initial)

**B.**

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify)

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

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

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)..... ▶

10166.07  
225251.89

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

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

(Use separate schedule(s) for each numbered line)	PAGE 76 OF 81
	FOR LINE NUMBER: (check only one)
<input type="checkbox"/>	9
<input checked="" type="checkbox"/>	10

NAME OF COMMITTEE (In Full)  
**Black Americans to Re-elect the President**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>AMH Print Group</b>			Nature of Debt (Purpose): Printing
Mailing Address 7286 Hanover Green Dr			
City Mechanicsville	State VA	Zip Code 23111	

Outstanding Balance Beginning This Period		Transaction ID : SD10.21877	
0.00			
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	
9821.87	0.00	9821.87	

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Campaign Funding Direct INC</b>			Nature of Debt (Purpose): Postage/mailing costs
Mailing Address 1420 SPRING HILL ROAD			
City MCLEAN	State VA	Zip Code 22102	

Outstanding Balance Beginning This Period		Transaction ID : SD10.18932	
43400.00			
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	
0.00	43400.00	0.00	

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Campaign Funding Direct INC</b>			Nature of Debt (Purpose): agency fee
Mailing Address 1420 SPRING HILL ROAD			
City MCLEAN	State VA	Zip Code 22102	

Outstanding Balance Beginning This Period		Transaction ID : SD10.18931	
1600.00			
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	
0.00	1600.00	0.00	

1) <b>SUBTOTALS</b> This Period This Page (optional)..... ▶	9821.87
2) <b>TOTALS</b> This Period (last page this line number only)..... ▶	
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only) ..... ▶	
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) ▶	

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

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

(Use separate schedule(s) for each numbered line)	PAGE 77 OF 81
	FOR LINE NUMBER: (check only one)
<input type="checkbox"/> 9	<input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)  
**Black Americans to Re-elect the President**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Campaign Funding Direct INC</b>			Nature of Debt (Purpose): agency fee
Mailing Address 1420 SPRING HILL ROAD			
City MCLEAN	State VA	Zip Code 22102	

Outstanding Balance Beginning This Period 0.00	Transaction ID : SD10.21880	
Amount Incurred This Period 14589.84	Payment This Period 0.00	Outstanding Balance at Close of This Period 14589.84

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Colortree Group</b>			Nature of Debt (Purpose): printing
Mailing Address 8000 Villa Park Dr			
City Richmond	State VA	Zip Code 23228	

Outstanding Balance Beginning This Period 6768.84	Transaction ID : SD10.18933	
Amount Incurred This Period 0.00	Payment This Period 6768.84	Outstanding Balance at Close of This Period 0.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>CP Direct Inc</b>			Nature of Debt (Purpose): Printing
Mailing Address 4600 Boston Way # A			
City Lanham	State MD	Zip Code 20706	

Outstanding Balance Beginning This Period 0.00	Transaction ID : SD10.21881	
Amount Incurred This Period 34224.80	Payment This Period 0.00	Outstanding Balance at Close of This Period 34224.80

1) <b>SUBTOTALS</b> This Period This Page (optional)..... ▶	48814.64
2) <b>TOTALS</b> This Period (last page this line number only)..... ▶	
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only) ..... ▶	
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) ▶	

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

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

(Use separate schedule(s) for each numbered line)	PAGE 78 OF 81
	FOR LINE NUMBER: (check only one)
<input type="checkbox"/>	9
<input checked="" type="checkbox"/>	10

NAME OF COMMITTEE (In Full)  
**Black Americans to Re-elect the President**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>ECG Data Center</b>			Nature of Debt (Purpose): computer postal/list maintenance
Mailing Address 1420 Spring Hill Suite 490			
City McLean	State VA	Zip Code 22102	

Outstanding Balance Beginning This Period	Transaction ID : SD10.18934	
<input type="text" value="3315.30"/>		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
<input type="text" value="0.00"/>	<input type="text" value="3315.30"/>	<input type="text" value="0.00"/>

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>ECG Data Center</b>			Nature of Debt (Purpose): Computer Postal/ List Maint./ Back End Cost/ Data Center Invoice
Mailing Address 1420 Spring Hill Suite 490			
City McLean	State VA	Zip Code 22102	

Outstanding Balance Beginning This Period	Transaction ID : SD10.21883	
<input type="text" value="0.00"/>		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
<input type="text" value="5912.35"/>	<input type="text" value="0.00"/>	<input type="text" value="5912.35"/>

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>MDI Imaging &amp; Mail</b>			Nature of Debt (Purpose): Mailhouse/ Printing
Mailing Address 21955 Cascades Parkway			
City Dulles	State VA	Zip Code 20166	

Outstanding Balance Beginning This Period	Transaction ID : SD10.21884	
<input type="text" value="0.00"/>		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
<input type="text" value="6969.46"/>	<input type="text" value="0.00"/>	<input type="text" value="6969.46"/>

1) <b>SUBTOTALS</b> This Period This Page (optional)..... ▶	<input type="text" value="12881.81"/>
2) <b>TOTALS</b> This Period (last page this line number only)..... ▶	<input type="text"/>
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only) ..... ▶	<input type="text"/>
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) ▶	<input type="text"/>

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

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

(Use separate schedule(s) for each numbered line)	PAGE 79 OF 81
	FOR LINE NUMBER: (check only one)
<input type="checkbox"/> 9	<input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)  
**Black Americans to Re-elect the President**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Nova Label Company Inc</b>			Nature of Debt (Purpose): Printing
Mailing Address 4819 Lydell Rd			
City Hyattsville	State MD	Zip Code 20781	

Outstanding Balance Beginning This Period	Transaction ID : SD10.18935	
1046.73		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
0.00	1046.73	0.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Nova Label Company Inc</b>			Nature of Debt (Purpose): Printing
Mailing Address 4819 Lydell Rd			
City Hyattsville	State MD	Zip Code 20781	

Outstanding Balance Beginning This Period	Transaction ID : SD10.21885	
0.00		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
1269.73	0.00	1269.73

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Omega List Company</b>			Nature of Debt (Purpose): List Rental Exp.
Mailing Address 1420 Spring Hill Road Suite 490			
City McLean	State VA	Zip Code 22102	

Outstanding Balance Beginning This Period	Transaction ID : SD10.21886	
0.00		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
12913.78	0.00	12913.78

1) <b>SUBTOTALS</b> This Period This Page (optional)..... ▶	14183.51
2) <b>TOTALS</b> This Period (last page this line number only)..... ▶	
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only) ..... ▶	
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) ▶	

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

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

(Use separate schedule(s) for each numbered line)	PAGE 80 OF 81
	FOR LINE NUMBER: (check only one)
	<input type="checkbox"/> 9
	<input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)  
**Black Americans to Re-elect the President**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Professional Printers, Inc</b>			Nature of Debt (Purpose): Printing
Mailing Address PO Box 5287			
City West Columbia	State SC	Zip Code 29172	

Outstanding Balance Beginning This Period 0.00	<b>Transaction ID : SD10.21887</b>	
Amount Incurred This Period 39019.48	Payment This Period 0.00	Outstanding Balance at Close of This Period 39019.48

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>RST Marketing</b>			Nature of Debt (Purpose): Printing/ Mailhouse/ MS Inv Adjustment
Mailing Address 1272 Corporate Park Rd.			
City Forest	State VA	Zip Code 24551	

Outstanding Balance Beginning This Period 0.00	<b>Transaction ID : SD10.21888</b>	
Amount Incurred This Period 5977.14	Payment This Period 0.00	Outstanding Balance at Close of This Period 5977.14

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Washington Intelligence Bureau</b>			Nature of Debt (Purpose): bookkeeping
Mailing Address 4128 Pepsi Place			
City Chantilly	State VA	Zip Code 20151	

Outstanding Balance Beginning This Period 1205.14	<b>Transaction ID : SD10.18936</b>	
Amount Incurred This Period 0.00	Payment This Period 1205.14	Outstanding Balance at Close of This Period 0.00

1) <b>SUBTOTALS</b> This Period This Page (optional)..... ▶	44996.62
2) <b>TOTALS</b> This Period (last page this line number only)..... ▶	
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only) ..... ▶	
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) ▶	



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

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

(Use separate schedule(s) for each numbered line)	PAGE 81 OF 81
	FOR LINE NUMBER: (check only one)
<input type="checkbox"/> 9	<input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)  
**Black Americans to Re-elect the President**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Washington Intelligence Bureau</b>			Nature of Debt (Purpose): bookkeeping
Mailing Address 4128 Pepsi Place			
City Chantilly	State VA	Zip Code 20151	

Outstanding Balance Beginning This Period	<b>Transaction ID : SD10.21889</b>	
<input type="text" value="0.00"/>		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
<input type="text" value="3746.25"/>	<input type="text" value="0.00"/>	<input type="text" value="3746.25"/>

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Zip Mailing Services Inc</b>			Nature of Debt (Purpose): Mailhouse/Laser
Mailing Address 6304 Sheriff Road Suite Z			
City Landover	State MD	Zip Code 20785	

Outstanding Balance Beginning This Period	<b>Transaction ID : SD10.21890</b>	
<input type="text" value="0.00"/>		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
<input type="text" value="322.18"/>	<input type="text" value="0.00"/>	<input type="text" value="322.18"/>

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		
<input type="text"/>		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
<input type="text"/>	<input type="text"/>	<input type="text"/>

1) <b>SUBTOTALS</b> This Period This Page (optional)..... ▶	<input type="text" value="4068.43"/>
2) <b>TOTALS</b> This Period (last page this line number only)..... ▶	<input type="text" value="134766.88"/>
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only) ..... ▶	<input type="text" value="0.00"/>
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) ▶	<input type="text" value="134766.88"/>