

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES
(Schedule E)PAGE 1 OF 2
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) BLOC PAC			FEC IDENTIFICATION NUMBER ▼ C C00748301		
Check if ☒ 24-hour report ☐ 48-hour report ☒ New report ☐ Amends report filed on / /					
Full Name of Payee Base Builder			Date of Public Distribution/Dissemination / / 10 / 23 / 2024		
Mailing Address 81 Prospect St			Amount 45214.00		
City Brooklyn		State NY	Zip Code 11201-1473		Transaction ID : 500193925
Purpose of Expenditure Estimated Cost for Canvassing Services		Category/ Type 004		Date of Disbursement or Obligation / /	
Name of Federal Candidate Harris, Kamala, , ,			☒ Support ☐ Oppose		Office Sought: ☐ House District: _____ ☒ President ☐ Senate State: _____
Calendar Year-To-Date Per Election for Office Sought			 54536.56		Disbursement For: ☐ Primary ☒ General 2024 ☐ Other (specify) ▶ _____
Full Name of Payee Base Builder			Date of Public Distribution/Dissemination / / 10 / 23 / 2024		
Mailing Address 81 Prospect St			Amount 45214.00		
City Brooklyn		State NY	Zip Code 11201-1473		Transaction ID : 500193926
Purpose of Expenditure Estimated Cost for Canvassing Services		Category/ Type 004		Date of Disbursement or Obligation / /	
Name of Federal Candidate Baldwin, Tammy, , ,			☒ Support ☐ Oppose		Office Sought: ☐ House District: _____ ☐ President ☒ Senate State: WI
Calendar Year-To-Date Per Election for Office Sought			 54536.56		Disbursement For: ☐ Primary ☒ General 2024 ☐ Other (specify) ▶ _____
(a) SUBTOTAL of Itemized Independent Expenditures..... ▶			 90428.00		
(b) SUBTOTAL of Unitemized Independent Expenditures ▶					
(c) TOTAL Independent Expenditures..... ▶					
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature Lang, Angela, , ,			Date / / 10 / 24 / 2024		

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NAME OF COMMITTEE (In Full) BLOC PAC		FEC IDENTIFICATION NUMBER ▼ C C00748301
Check if ☒ 24-hour report ☐ 48-hour report ☒ New report ☐ Amends report filed on		MM / DD / YYYY

Full Name of Payee Colonial Quality Printing		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 23 / 2024
Mailing Address 2997 S Howell Ave		Amount 9322.56
City Milwaukee	State WI	Zip Code 53207-2083
Purpose of Expenditure Printing - Canvassing Lit	Category/ Type 004	Transaction ID : 500193922 Date of Disbursement or Obligation MM / DD / YYYY
Name of Federal Candidate Harris, Kamala, , ,		Office Sought: ☒ Support ☐ Oppose ☒ President ☐ Senate State: _____
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: ☐ Primary ☒ General 2024 ☐ Other (specify) ▶ _____

Full Name of Payee Colonial Quality Printing		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 23 / 2024
Mailing Address 2997 S Howell Ave		Amount 9322.56
City Milwaukee	State WI	Zip Code 53207-2083
Purpose of Expenditure Printing - Canvassing Lit	Category/ Type 004	Transaction ID : 500193923 Date of Disbursement or Obligation MM / DD / YYYY
Name of Federal Candidate Baldwin, Tammy, , ,		Office Sought: ☒ Support ☐ Oppose ☐ President ☒ Senate State: WI
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: ☐ Primary ☒ General 2024 ☐ Other (specify) ▶ _____

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	18645.12
(b) SUBTOTAL of Unitemized Independent Expenditures ▶	
(c) TOTAL Independent Expenditures..... ▶	109073.12

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

Lang, Angela, , ,

Signature

Date MM / DD / YYYY
10 / 24 / 2024