

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 BEAR PAC, INC.

ADDRESS (number and street) **1593 HAMPTON ROAD**
Check if different than previously reported. (ACC) **CHARLESTON WV 25314**

2. FEC IDENTIFICATION NUMBER ▼ CITY ▲ STATE ▲ ZIP CODE ▲
C C00708644 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) May 20 (M5) Aug 20 (M8) Nov 20 (M11) (Non-Election Year Only)
 Mar 20 (M3) Jun 20 (M6) Sep 20 (M9) Dec 20 (M12) (Non-Election Year Only)
 Apr 20 (M4) Jul 20 (M7) Oct 20 (M10) Jan 31 (YE)
(c) 12-Day PRE-Election Report for the:
 Primary (12P) General (12G) Runoff (12R)
 Convention (12C) Special (12S)
Election on / / in the State of
(d) 30-Day POST-Election Report for the:
 General (30G) Runoff (30R) Special (30S)
Election on / / in the State of

5. Covering Period / / 2021 through / / 2021

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.
Type or Print Name of Treasurer **GANTT, CHARLES, , ,**

Signature of Treasurer **GANTT, CHARLES, , ,** [Electronically Filed] Date / / 2022

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

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 05/2016)

Write or Type Committee Name

BLACK BEAR PAC, INC.

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="2021"/>	<input type="text" value="27559.46"/>	<input type="text" value="27559.46"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="109016.71"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="179200.00"/>	<input type="text" value="264200.00"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<input type="text" value="288216.71"/>	<input type="text" value="291759.46"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="26736.17"/>	<input type="text" value="30278.92"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="261480.54"/>	<input type="text" value="261480.54"/>
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	

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

For further information contact:

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

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

DETAILED SUMMARY PAGE
of Receipts

Write or Type Committee Name

BLACK BEAR PAC, INC.

Report Covering the Period: From: / / To: / /

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).....	176700.00	261700.00
(ii) Unitemized	0.00	0.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	176700.00	261700.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	2500.00	2500.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	179200.00	264200.00
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.00	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)).....▶	179200.00	264200.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	179200.00	264200.00

DETAILED SUMMARY PAGE
of Disbursements

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures	26736.17	30278.92
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	26736.17	30278.92
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)) ..	26736.17	30278.92
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	26736.17	30278.92

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 5

III. Net Contributions/ Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	179200.00	264200.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	179200.00	264200.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	26736.17	30278.92
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	26736.17	30278.92

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 6 OF 16
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<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 BEAR PAC, INC.

A. ADVANCE FINANCIAL ADMINISTRATION, LLC
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 100 OCEANSIDE DRIVE
 City NASHVILLE State TN Zip Code 37204
 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 ▼ 2500.00

Date of Receipt
 11 / 17 / 2021
Transaction ID : SA11AI.4245
 Amount of Each Receipt this Period
 2500.00
 Memo Item

B. AHERN RENTALS, LLC
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1401 MINERAL AVE
 City LAS VEGAS State NV Zip Code 89106
 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 ▼ 10000.00

Date of Receipt
 09 / 30 / 2021
Transaction ID : SA11AI.4241
 Amount of Each Receipt this Period
 10000.00
 Memo Item

C. AMERICAN PROSPERITY GROUP
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address C/O BULLDOG COMPLIANCE
 138 CONANT STREET 2ND FLOOR
 City BEVERLY State MA Zip Code 01915
 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 ▼ 55000.00

Date of Receipt
 09 / 21 / 2021
Transaction ID : SA11AI.4239
 Amount of Each Receipt this Period
 55000.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	67500.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 7 OF 16
<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 BEAR PAC, INC.

A. ANGRICK, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 300 LAMBERT AVE
 City FLAGLER BEACH State FL Zip Code 32136
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PERSIMMON CAPITAL Occupation (for Individual) OWNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 12 / 29 / 2021
Transaction ID : SA11AI.4281
 Amount of Each Receipt this Period 5000.00
 Memo Item

B. COLE, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 404 OAKHURST AVE
 City BLUEFIELD State WV Zip Code 24701
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) COLE AUTO GROUP Occupation (for Individual) CAR DEALER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2500.00

Date of Receipt 12 / 16 / 2021
Transaction ID : SA11AI.4269
 Amount of Each Receipt this Period 2500.00
 Memo Item

C. COMMUNITY CHOICE FINANCIAL, INC.
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5165 EMERALD PARKWAY SUITE 100
 City DUBLIN State OH Zip Code 43017
 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 ▼ 2500.00

Date of Receipt 11 / 17 / 2021
Transaction ID : SA11AI.4249
 Amount of Each Receipt this Period 2500.00
 Memo Item

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

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 8 OF 16
<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 BEAR PAC, INC.

A. CRAFT, JOE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1717 S BOULDER AVE
 STE 400
 City TULSA State OK Zip Code 74119
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ALLIANCE RESOURCE PARTNERS, LP Occupation (for Individual) EXECUTIVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt **12 / 23 / 2021**
Transaction ID : SA11AI.4273
 Amount of Each Receipt this Period 5000.00
 Memo Item

B. ENERGY TRANSFER OPERATING, LP
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8111 WESTCHESTER DR
 STE 600
 City DALLAS State TX Zip Code 75225
 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 ▼ 25000.00

Date of Receipt **10 / 21 / 2021**
Transaction ID : SA11AI.4243
 Amount of Each Receipt this Period 25000.00
 Memo Item

C. FRESHWATER, DAVID, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 929 CHARLESTON RD
 City SPENCER State WV Zip Code 25276
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CONSERV Occupation (for Individual) OWNER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 2500.00

Date of Receipt **12 / 28 / 2021**
Transaction ID : SA11AI.4279
 Amount of Each Receipt this Period 2500.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	32500.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 9 OF 16
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<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 BEAR PAC, INC.

A. FRESHWATER, SCOTT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 929 CHARLESTON RD
 City SPENCER State WV Zip Code 25276
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CONSERV Occupation (for Individual) OWNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 28 / 2021
Transaction ID : SA11AI.4277
 Amount of Each Receipt this Period
 2500.00
 Memo Item

B. GETAWAYS RESORT MANAGEMENT LLC
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 235 E WARM SPRINGS RD STE 10
 City LAS VEGAS State NV Zip Code 89119
 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 ▼ 25000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 07 / 2021
Transaction ID : SA11AI.4237
 Amount of Each Receipt this Period
 25000.00
 Memo Item

C. HOLMES, WILLIAM, L, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P.O. BOX 3728
 City MIDLAND State TX Zip Code 79702
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF-EMPLOYED Occupation (for Individual) OIL & GAS
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 2700.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 06 / 2021
Transaction ID : SA11AI.4265
 Amount of Each Receipt this Period
 2700.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	30200.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 10 OF 16
<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 BEAR PAC, INC.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. MCNABB, GARRY, W, ,		Date of Receipt
Mailing Address 1211 BILL SMITH RD		<input type="text" value="11"/> / <input type="text" value="17"/> / <input type="text" value="2021"/>
City COOKEVILLE	State TN	Zip Code 38501
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : SA11AI.4247
Name of Employer (for Individual) CASH EXPRESS		Amount of Each Receipt this Period <input type="text" value="5000.00"/>
Occupation (for Individual) CEO		<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="5000.00"/>	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. MELLI, ALI, , ,		Date of Receipt
Mailing Address 4281 EXPRESS LN STE N9314		<input type="text" value="12"/> / <input type="text" value="16"/> / <input type="text" value="2021"/>
City SARASOTA	State FL	Zip Code 34249
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : SA11AI.4267
Name of Employer (for Individual) RETIRED		Amount of Each Receipt this Period <input type="text" value="4000.00"/>
Occupation (for Individual) RETIRED		<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="4000.00"/>	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. OGA AQUISITIONS LLC		Date of Receipt
Mailing Address 2932 FOSTER CREIGHTON DR		<input type="text" value="12"/> / <input type="text" value="31"/> / <input type="text" value="2021"/>
City NASHVILLE	State TN	Zip Code 37204
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : SA11AI.4285
Name of Employer (for Individual)		Amount of Each Receipt this Period <input type="text" value="10000.00"/>
Occupation (for Individual)		<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ <input type="text" value="10000.00"/>	

SUBTOTAL of Receipts This Page (optional).....	<input type="text" value="19000.00"/>
TOTAL This Period (last page this line number only).....	<input type="text"/>

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 11 OF 16
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<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 BEAR PAC, INC.

A. RASTIN, TOM, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1240 GAMBIER RD

City MOUNT VERNON	State OH	Zip Code 43050
----------------------	-------------	-------------------

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 ▼
10000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	16	/	2021

Transaction ID : SA11AI.4271

Amount of Each Receipt this Period
10000.00

Memo Item

B. WICKSHIRE FINANCIAL CORPORATION
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 83 SOUTH ST

City MORRISTOWN	State NJ	Zip Code 07960
--------------------	-------------	-------------------

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 ▼
2500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	12	/	2021

Transaction ID : SA11AI.4235

Amount of Each Receipt this Period
2500.00

Memo Item

C. WOODALL, TROY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 36 PAUL WILSON LN

City MORGANTOWN	State WV	Zip Code 26508
--------------------	-------------	-------------------

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

Name of Employer (for Individual) WEST VIRGINIA CROSSROADS LLC	Occupation (for Individual) PARTNER
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	22	/	2021

Transaction ID : SA11AI.4275

Amount of Each Receipt this Period
5000.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	17500.00
TOTAL This Period (last page this line number only).....	176700.00

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

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NAME OF COMMITTEE (In Full)
BLACK BEAR PAC, INC.

A. DEFENDING CONSERVATIVE VALUES

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

Mailing Address 115 E PARK AVE
SUITE 1

City TALLAHASSEE State FL Zip Code 32301

FEC ID number of contributing federal political committee. **C** C00774794

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
12 / 31 / 2021

Transaction ID : SA11C.4286

Amount of Each Receipt this Period
2500.00

Memo Item

B.

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

Mailing Address

City State Zip Code

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt
M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

Memo Item

C.

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

Mailing Address

City State Zip Code

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

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

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt
M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

Memo Item

SUBTOTAL of Receipts This Page (optional).....	2500.00
TOTAL This Period (last page this line number only).....	2500.00

**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 BEAR PAC, INC.

Full Name (Last, First, Middle Initial) A. ANEDOT INC.		Date of Disbursement MM / DD / YYYY 12 / 20 / 2021
Mailing Address 1340 POYDRAS ST. STE 1770		FEC Identification Number C [] Transaction ID : SB21B.4262 Amount of Each Disbursement this Period [] 660.90
City NEW ORLEANS	State LA	Zip Code 70112
Purpose of Disbursement MERCHANT FEE		Category/ Type []
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) B. ANEDOT INC.		Date of Disbursement MM / DD / YYYY 12 / 24 / 2021
Mailing Address 1340 POYDRAS ST. STE 1770		FEC Identification Number C [] Transaction ID : SB21B.4263 Amount of Each Disbursement this Period [] 200.30
City NEW ORLEANS	State LA	Zip Code 70112
Purpose of Disbursement MERCHANT FEE		Category/ Type []
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) C. ANEDOT INC.		Date of Disbursement MM / DD / YYYY 12 / 30 / 2021
Mailing Address 1340 POYDRAS ST. STE 1770		FEC Identification Number C [] Transaction ID : SB21B.4261 Amount of Each Disbursement this Period [] 400.90
City NEW ORLEANS	State LA	Zip Code 70112
Purpose of Disbursement MERCHANT FEES		Category/ Type []
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

SUBTOTAL of Disbursements This Page (optional).....▶	[] 1262.10
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 BEAR PAC, INC.

Full Name (Last, First, Middle Initial) A. BULLDOG COMPLIANCE			Date of Disbursement MM / DD / YYYY 07 / 23 / 2021		
Mailing Address 138 CONANT STREET 2ND FLOOR			FEC Identification Number C [] Transaction ID : SB21B.4250 Amount of Each Disbursement this Period [] 1000.00		
City BEVERLY	State MA	Zip Code 01915	Category/Type []		
Purpose of Disbursement COMPLIANCE CONSULTING			Memo Item <input type="checkbox"/>		
Candidate Name			Amount of Each Disbursement this Period [] 1000.00		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input type="checkbox"/>		
State: District:			Amount of Each Disbursement this Period [] 1000.00		
Full Name (Last, First, Middle Initial) B. BULLDOG COMPLIANCE			Date of Disbursement MM / DD / YYYY 10 / 11 / 2021		
Mailing Address 138 CONANT STREET 2ND FLOOR			FEC Identification Number C [] Transaction ID : SB21B.4254 Amount of Each Disbursement this Period [] 2007.75		
City BEVERLY	State MA	Zip Code 01915	Category/Type []		
Purpose of Disbursement COMPLIANCE CONSULTING			Memo Item <input type="checkbox"/>		
Candidate Name			Amount of Each Disbursement this Period [] 2007.75		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input type="checkbox"/>		
State: District:			Amount of Each Disbursement this Period [] 2007.75		
Full Name (Last, First, Middle Initial) C. BULLDOG COMPLIANCE			Date of Disbursement MM / DD / YYYY 10 / 11 / 2021		
Mailing Address 138 CONANT STREET 2ND FLOOR			FEC Identification Number C [] Transaction ID : SB21B.4255 Amount of Each Disbursement this Period [] 1000.00		
City BEVERLY	State MA	Zip Code 01915	Category/Type []		
Purpose of Disbursement COMPLIANCE CONSULTING			Memo Item <input type="checkbox"/>		
Candidate Name			Amount of Each Disbursement this Period [] 1000.00		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input type="checkbox"/>		
State: District:			Amount of Each Disbursement this Period [] 1000.00		
SUBTOTAL of Disbursements This Page (optional)..... ▶			[] 4007.75		
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 BEAR PAC, INC.

Full Name (Last, First, Middle Initial) A. BULLDOG COMPLIANCE		Date of Disbursement MM / DD / YYYY 12 / 17 / 2021
Mailing Address 138 CONANT STREET 2ND FLOOR		FEC Identification Number C [REDACTED] Transaction ID : SB21B.4256
City BEVERLY	State MA	Zip Code 01915
Purpose of Disbursement COMPLIANCE CONSULTING		Amount of Each Disbursement this Period [REDACTED] 1000.00
Candidate Name		<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. BULLDOG COMPLIANCE		Date of Disbursement MM / DD / YYYY 12 / 17 / 2021
Mailing Address 138 CONANT STREET 2ND FLOOR		FEC Identification Number C [REDACTED] Transaction ID : SB21B.4257
City BEVERLY	State MA	Zip Code 01915
Purpose of Disbursement COMPLIANCE CONSULTING		Amount of Each Disbursement this Period [REDACTED] 1000.00
Candidate Name		<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C. DICKINSON WRIGHT PLLC		Date of Disbursement MM / DD / YYYY 09 / 23 / 2021
Mailing Address 1825 EYE STREET NW STE 900		FEC Identification Number C [REDACTED] Transaction ID : SB21B.4251
City WASHINGTON	State DC	Zip Code 20006
Purpose of Disbursement LEGAL CONSULTING		Amount of Each Disbursement this Period [REDACTED] 219.00
Candidate Name		<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....▶	[REDACTED] 2219.00
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 BEAR PAC, INC.

Full Name (Last, First, Middle Initial) A. DICKINSON WRIGHT PLLC		Date of Disbursement MM / DD / YYYY 12 / 22 / 2021
Mailing Address 1825 EYE STREET NW STE 900		FEC Identification Number C [REDACTED] Transaction ID : SB21B.4258 Amount of Each Disbursement this Period [REDACTED] 190.00
City WASHINGTON	State DC	Zip Code 20006
Purpose of Disbursement LEGAL CONSULTING		Category/ Type [REDACTED]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) B. HOLLOWAY CONSULTING, INC.		Date of Disbursement MM / DD / YYYY 09 / 29 / 2021
Mailing Address 1530 WILSON BLVD STE 440		FEC Identification Number C [REDACTED] Transaction ID : SB21B.4253 Amount of Each Disbursement this Period [REDACTED] 7500.00
City ARLINGTON	State VA	Zip Code 22209
Purpose of Disbursement FUNDRAISING CONSULTING		Category/ Type [REDACTED]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) C. HOLLOWAY CONSULTING, INC.		Date of Disbursement MM / DD / YYYY 12 / 30 / 2021
Mailing Address 1530 WILSON BLVD STE 440		FEC Identification Number C [REDACTED] Transaction ID : SB21B.4259 Amount of Each Disbursement this Period [REDACTED] 11557.32
City ARLINGTON	State VA	Zip Code 22209
Purpose of Disbursement FUNDRAISING CONSULTANT: TRAVEL EXPENSES, FUNDRAISING CONSULTING		Category/ Type [REDACTED]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

SUBTOTAL of Disbursements This Page (optional).....▶	[REDACTED] 19247.32
TOTAL This Period (last page this line number only).....▶	[REDACTED] 26736.17