

# FEC FORM 3X

# REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines. 12FE4M5

Black PAC

ADDRESS (number and street) 2090 Adam Clayton Powell Jr. Blvd.  
Suite 201A  
New York NY 10027

Check if different than previously reported. (ACC)

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

C C00609388

3. IS THIS REPORT  NEW (N) OR  AMENDED (A)

### 4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

- April 15 Quarterly Report (Q1)
- July 15 Quarterly Report (Q2)
- October 15 Quarterly Report (Q3)
- January 31 Year-End Report (YE)
- July 31 Mid-Year Report (Non-election Year Only) (MY)
- Termination Report (TER)

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

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

Election on MM / DD / YYYY in the State of   

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

Election on MM / DD / YYYY in the State of   

5. Covering Period MM / DD / YYYY through MM / DD / YYYY  
07 / 01 / 2020 through 07 / 31 / 2020

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

Shropshire, Adrienne, R., ,

Type or Print Name of Treasurer

Signature of Treasurer Shropshire, Adrienne, R., , [Electronically Filed] Date MM / DD / YYYY  
08 / 20 / 2020

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

Office Use Only

**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 05/2016)

Write or Type Committee Name

**Black PAC**

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

|  | COLUMN A<br>This Period                 | COLUMN B<br>Calendar Year-to-Date       |
|--|---|---|
| 6. (a) Cash on Hand<br>January 1, <input type="text" value="2020"/>  | <input type="text" value="238460.47"/>  | <input type="text" value="238460.47"/>  |
| (b) Cash on Hand at<br>Beginning of Reporting Period.....  | <input type="text" value="2506935.25"/> |   |
| (c) Total Receipts (from Line 19) .....  | <input type="text" value="1376533.01"/> | <input type="text" value="4432190.04"/> |
| (d) Subtotal (add Lines 6(b) and<br>6(c) for Column A and Lines<br>6(a) and 6(c) for Column B).....              | <input type="text" value="3883468.26"/> | <input type="text" value="4670650.51"/> |
| 7. Total Disbursements (from Line 31).....   | <input type="text" value="1395703.74"/> | <input type="text" value="2182885.99"/> |
| 8. Cash on Hand at Close of<br>Reporting Period<br>(subtract Line 7 from Line 6(d)).....                         | <input type="text" value="2487764.52"/> | <input type="text" value="2487764.52"/> |
| 9. Debts and Obligations Owed <b>TO</b><br>the Committee (Itemize all on<br>Schedule C and/or Schedule D) .....  | <input type="text" value="0.00"/>       |   |
| 10. Debts and Obligations Owed <b>BY</b><br>the Committee (Itemize all on<br>Schedule C and/or Schedule D) ..... | <input type="text" value="73127.54"/>   |   |

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 PAC**

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

| I. Receipts   | COLUMN A<br>Total This Period | COLUMN B<br>Calendar Year-to-Date |
|---|-------------------------------|-----------------------------------|
| 11. Contributions (other than loans) From:  |                               |                                   |
| (a) Individuals/Persons Other Than Political Committees   |                               |                                   |
| (i) Itemized (use Schedule A).....  | 124260.00                     | 3122055.00                        |
| (ii) Unitemized .....   | 2273.01                       | 20616.41                          |
| (iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶   | 126533.01                     | 3142671.41                        |
| (b) Political Party Committees .....  | 0.00                          | 0.00                              |
| (c) Other Political Committees (such as PACs).....  | 1250000.00                    | 1250000.00                        |
| (d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) .....  | 1376533.01                    | 4392671.41                        |
| 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                          | 39518.63                          |
| 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)).....▶                         | 1376533.01                    | 4432190.04                        |
| 20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶                                   | 1376533.01                    | 4432190.04                        |

**DETAILED SUMMARY PAGE**  
of Disbursements

| II. Disbursements  | COLUMN A<br>Total This Period | COLUMN B<br>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 .....   | 349246.85                     | 820746.55                         |
| (c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....                        | 349246.85                     | 820746.55                         |
| 22. Transfers to Affiliated/Other Party Committees.....  | 0.00                          | 0.00                              |
| 23. Contributions to Federal Candidates/Committees and Other Political Committees.....         | 0.00                          | 5000.00                           |
| 24. Independent Expenditures (use Schedule E) .....  | 1046456.89                    | 1161739.44                        |
| 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                          | 25.00                             |
| (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                          | 25.00                             |
| 29. Other Disbursements (Including Non-Federal Donations).....                                 | 0.00                          | 195375.00                         |
| 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)) ..      | 1395703.74                    | 2182885.99                        |
| 32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31)..... | 1395703.74                    | 2182885.99                        |

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 5

| <b>III. Net Contributions/<br/>Operating Expenditures</b>                            | <b>COLUMN A<br/>Total This Period</b> | <b>COLUMN B<br/>Calendar Year-to-Date</b> |
|--|---------------------------------------|---|
| 33. Total Contributions (other than loans)<br>(from Line 11(d), page 3) .....        | 1376533.01                            | 4392671.41                                |
| 34. Total Contribution Refunds<br>(from Line 28(d)) .....                            | 0.00                                  | 25.00                                     |
| 35. Net Contributions (other than loans)<br>(subtract Line 34 from Line 33) .....    | 1376533.01                            | 4392646.41                                |
| 36. Total Federal Operating Expenditures<br>(add Line 21(a)(i) and Line 21(b)) ..... | 349246.85                             | 820746.55                                 |
| 37. Offsets to Operating Expenditures<br>(from Line 15, page 3).....                 | 0.00                                  | 0.00                                      |
| 38. Net Operating Expenditures<br>(subtract Line 37 from Line 36) .....              | 349246.85                             | 820746.55                                 |

**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 49  |
|   | <input checked="" type="checkbox"/> 11a<br><input type="checkbox"/> 13 | <input type="checkbox"/> 11b<br><input type="checkbox"/> 14 |

|                             |                             |                             |
|-----------------------------|-----------------------------|-----------------------------|
| <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 PAC**

**A. Heffernan, Mary, T, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 3954 NE 14th Ave  
 City Portland State OR Zip Code 97212-1313  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Self-Employed Occupation (for Individual) Organizational Consultant  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 07 / 21 / 2020  
**Transaction ID : VTEF8Z1JB20**  
 Amount of Each Receipt this Period 250.00  
 Memo Item  
 \* Earmarked Contribution: See Below

**B. ActBlue**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO Box 441146  
 City West Somerville State MA Zip Code 02144-0031  
 FEC ID number of contributing federal political committee. **C** C00401224  
 Name of Employer (for Individual) Occupation (for Individual) Conduit total listed in Agg. field  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 6263.01

Date of Receipt 07 / 27 / 2020  
**Transaction ID : VTEF8Z1JB20E**  
 Amount of Each Receipt this Period 250.00  
 Memo Item  
 Note: Above Contribution earmarked through this organization.

**C. Murdoch, Kathryn, A, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 117 E 69th St  
 City New York State NY Zip Code 10021-5004  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Quadrivium Foundation Occupation (for Individual) Co-Founder & President  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 60000.00

Date of Receipt 07 / 28 / 2020  
**Transaction ID : VTEF8Z1JFM0**  
 Amount of Each Receipt this Period 60000.00  
 Memo Item

|   |          |
|---|----------|
| <b>SUBTOTAL</b> of Receipts This Page (optional).....           | 60250.00 |
| <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 49                 |
|   | <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 PAC**

**A. Miller, Lori, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 13531 Bayliss Rd  
 City Los Angeles State CA Zip Code 90049-1812  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Retired  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 07 / 15 / 2020  
**Transaction ID : VTEF8Z1J9X0**  
 Amount of Each Receipt this Period 250.00  
 Memo Item  
 \* Earmarked Contribution: See Below

**B. ActBlue**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO Box 441146  
 City West Somerville State MA Zip Code 02144-0031  
 FEC ID number of contributing federal political committee. **C** C00401224  
 Name of Employer (for Individual) Occupation (for Individual) Conduit total listed in Agg. field  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 6263.01

Date of Receipt 07 / 20 / 2020  
**Transaction ID : VTEF8Z1J9X0E**  
 Amount of Each Receipt this Period 250.00  
 Memo Item  
 Note: Above Contribution earmarked through this organization.

**C. Burke, Barbara, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 214 University Ave  
 City Ithaca State NY Zip Code 14850-3818  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Self-Employed Occupation (for Individual) Publisher  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 07 / 09 / 2020  
**Transaction ID : VTEF8Z1JBB1**  
 Amount of Each Receipt this Period 50.00  
 Memo Item  
 \* Earmarked Contribution: See Below

**SUBTOTAL** of Receipts This Page (optional).....▶ 300.00  
**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 49  |
| <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 PAC**

**A. ActBlue**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Mailing Address PO Box 441146

|                         |             |                        |
|-------------------------|-------------|------------------------|
| City<br>West Somerville | State<br>MA | Zip Code<br>02144-0031 |
|-------------------------|-------------|------------------------|

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
6263.01

Date of Receipt  
MM / DD / YYYY  
07 / 13 / 2020

**Transaction ID : VTEF8Z1JBB1E**

Amount of Each Receipt this Period  
50.00

Memo Item

Note: Above Contribution earmarked through this organization.

**B. Harmon, Jocelyn, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Mailing Address 903 Dryden St

|                       |             |                        |
|-----------------------|-------------|------------------------|
| City<br>Silver Spring | State<br>MD | Zip Code<br>20901-1826 |
|-----------------------|-------------|------------------------|

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
MM / DD / YYYY  
06 / 29 / 2020

**Transaction ID : VTEF8Z1JAR1**

Amount of Each Receipt this Period  
50.00

Memo Item

\* Earmarked Contribution: See Below

**C. ActBlue**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Mailing Address PO Box 441146

|                         |             |                        |
|-------------------------|-------------|------------------------|
| City<br>West Somerville | State<br>MA | Zip Code<br>02144-0031 |
|-------------------------|-------------|------------------------|

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

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

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
6263.01

Date of Receipt  
MM / DD / YYYY  
07 / 01 / 2020

**Transaction ID : VTEF8Z1JAR1E**

Amount of Each Receipt this Period  
50.00

Memo Item

Note: Above Contribution earmarked through this organization.

|   |       |
|---|-------|
| <b>SUBTOTAL</b> of Receipts This Page (optional).....           | 50.00 |
| <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 49                 |
|   | <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 PAC**

**A. Mcfarlane, Laura, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 410 N 63rd St  
 City Seattle State WA Zip Code 98103-5526  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Retired  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 07 / 22 / 2020  
**Transaction ID : VTEF8Z1JB12**  
 Amount of Each Receipt this Period 500.00  
 Memo Item  
 \* Earmarked Contribution: See Below

**B. ActBlue**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO Box 441146  
 City West Somerville State MA Zip Code 02144-0031  
 FEC ID number of contributing federal political committee. **C** C00401224  
 Name of Employer (for Individual) Occupation (for Individual) Conduit total listed in Agg. field  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 6263.01

Date of Receipt 07 / 27 / 2020  
**Transaction ID : VTEF8Z1JB12E**  
 Amount of Each Receipt this Period 500.00  
 Memo Item  
 Note: Above Contribution earmarked through this organization.

**C. Smith, Lauren, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 5530 31st Ave NE  
 City Seattle State WA Zip Code 98105-2301  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) King County Washington Occupation (for Individual) Director of Regional Planning  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 07 / 20 / 2020  
**Transaction ID : VTEF8Z1J8H2**  
 Amount of Each Receipt this Period 50.00  
 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 10 OF 49                |
|   | <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 PAC**

**A. Murdoch, James, R., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 117 E 69th St  
 City New York State NY Zip Code 10021-5004  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) 21st Century Fox Occupation (for Individual) CEO  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 60000.00

Date of Receipt 07 / 28 / 2020  
**Transaction ID : VTEF8Z1JFK2**  
 Amount of Each Receipt this Period 60000.00  
 Memo Item

**B. Williams, Jaron, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 8947 Wendy Dr SE  
 City Olympia State WA Zip Code 98513-6823  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Washington State Occupation (for Individual) Software Application Developer  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 525.00

Date of Receipt 07 / 01 / 2020  
**Transaction ID : VTEF8Z1J9Q2**  
 Amount of Each Receipt this Period 525.00  
 Memo Item  
 \* Earmarked Contribution: See Below

**C. ActBlue**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO Box 441146  
 City West Somerville State MA Zip Code 02144-0031  
 FEC ID number of contributing federal political committee. **C** C00401224  
 Name of Employer (for Individual) Occupation (for Individual) Conduit total listed in Agg. field  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 6263.01

Date of Receipt 07 / 06 / 2020  
**Transaction ID : VTEF8Z1J9Q2E**  
 Amount of Each Receipt this Period 525.00  
 Memo Item  
 Note: Above Contribution earmarked through this organization.

|   |          |
|---|----------|
| <b>SUBTOTAL</b> of Receipts This Page (optional).....           | 60525.00 |
| <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 49                |
|   | <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 PAC**

**A. Pattenaude, James, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 12058 Beacon Ave S  
 City Seattle State WA Zip Code 98178-3552  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Retired  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 07 / 16 / 2020  
**Transaction ID : VTEF8Z1J9W2**  
 Amount of Each Receipt this Period 500.00  
 Memo Item  
 \* Earmarked Contribution: See Below

**B. ActBlue**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO Box 441146  
 City West Somerville State MA Zip Code 02144-0031  
 FEC ID number of contributing federal political committee. **C** C00401224  
 Name of Employer (for Individual) Occupation (for Individual) Conduit total listed in Agg. field  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 6263.01

Date of Receipt 07 / 20 / 2020  
**Transaction ID : VTEF8Z1J9W2E**  
 Amount of Each Receipt this Period 500.00  
 Memo Item  
 Note: Above Contribution earmarked through this organization.

**C. Gibson, David, H, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 3511 Overbrook Dr  
 City Dallas State TX Zip Code 75205-4324  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Self-Employed Occupation (for Individual) Investor & Photographer  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 07 / 16 / 2020  
**Transaction ID : VTEF8Z1JA03**  
 Amount of Each Receipt this Period 50.00  
 Memo Item  
 \* Earmarked Contribution: See Below

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 550.00  
**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 12 OF 49 |
|   | <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 PAC**

**A. ActBlue**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Mailing Address PO Box 441146

|                         |             |                        |
|-------------------------|-------------|------------------------|
| City<br>West Somerville | State<br>MA | Zip Code<br>02144-0031 |
|-------------------------|-------------|------------------------|

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
6263.01

Date of Receipt  
MM / DD / YYYY  
07 / 20 / 2020  
**Transaction ID : VTEF8Z1JA03E**

Amount of Each Receipt this Period  
50.00

Memo Item

Note: Above Contribution earmarked through this organization.

**B. Moore, Faryce, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Mailing Address 1351 Dean St  
FI 2

|                  |             |                        |
|------------------|-------------|------------------------|
| City<br>Brooklyn | State<br>NY | Zip Code<br>11216-3403 |
|------------------|-------------|------------------------|

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

Name of Employer (for Individual) Occupation (for Individual)  
U.S. Congress Contract Coordinator

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
210.00

Date of Receipt  
MM / DD / YYYY  
07 / 02 / 2020  
**Transaction ID : VTEF8Z1JA53**

Amount of Each Receipt this Period  
10.00

Memo Item

\* Earmarked Contribution: See Below

**C. ActBlue**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Mailing Address PO Box 441146

|                         |             |                        |
|-------------------------|-------------|------------------------|
| City<br>West Somerville | State<br>MA | Zip Code<br>02144-0031 |
|-------------------------|-------------|------------------------|

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

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

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
6263.01

Date of Receipt  
MM / DD / YYYY  
07 / 06 / 2020  
**Transaction ID : VTEF8Z1JA53E**

Amount of Each Receipt this Period  
10.00

Memo Item

Note: Above Contribution earmarked through this organization.

|   |       |
|---|-------|
| <b>SUBTOTAL</b> of Receipts This Page (optional).....           | 10.00 |
| <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 49   |
|   | <input checked="" type="checkbox"/> 11a<br><input type="checkbox"/> 13 | <input type="checkbox"/> 11b<br><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 PAC**

**A. Mardenborough, Leslie, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 256 Hamilton Ave  
 City New Rochelle State NY Zip Code 10801-2820  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Retired  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 700.00

Date of Receipt 07 / 10 / 2020  
**Transaction ID : VTEF8Z1JBA3**  
 Amount of Each Receipt this Period 100.00  
 Memo Item  
 \* Earmarked Contribution: See Below

**B. ActBlue**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO Box 441146  
 City West Somerville State MA Zip Code 02144-0031  
 FEC ID number of contributing federal political committee. **C** C00401224  
 Name of Employer (for Individual) Occupation (for Individual) Conduit total listed in Agg. field  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 6263.01

Date of Receipt 07 / 13 / 2020  
**Transaction ID : VTEF8Z1JBA3E**  
 Amount of Each Receipt this Period 100.00  
 Memo Item  
 Note: Above Contribution earmarked through this organization.

**C. Rajagopal, Vivek, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1252 Swims Valley Dr NW  
 City Atlanta State GA Zip Code 30327-3810  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Retired  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 07 / 04 / 2020  
**Transaction ID : VTEF8Z1J9P4**  
 Amount of Each Receipt this Period 250.00  
 Memo Item  
 \* Earmarked Contribution: See Below

|   |        |
|---|--------|
| <b>SUBTOTAL</b> of Receipts This Page (optional).....           | 350.00 |
| <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 49                |
|   | <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 PAC**

**A. ActBlue**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Mailing Address PO Box 441146

|                         |             |                        |
|-------------------------|-------------|------------------------|
| City<br>West Somerville | State<br>MA | Zip Code<br>02144-0031 |
|-------------------------|-------------|------------------------|

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
6263.01

Date of Receipt  
MM / DD / YYYY  
07 / 06 / 2020

**Transaction ID : VTEF8Z1J9P4E**

Amount of Each Receipt this Period  
250.00

Memo Item

Note: Above Contribution earmarked through this organization.

**B. Flynn, Sharon, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Mailing Address 1321 Upland Dr # 3128

|                 |             |                        |
|-----------------|-------------|------------------------|
| City<br>Houston | State<br>TX | Zip Code<br>77043-4718 |
|-----------------|-------------|------------------------|

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

Name of Employer (for Individual) Occupation (for Individual)  
OceanaGold Corporation Executive

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
MM / DD / YYYY  
07 / 09 / 2020

**Transaction ID : VTEF8Z1JB95**

Amount of Each Receipt this Period  
100.00

Memo Item

\* Earmarked Contribution: See Below

**C. ActBlue**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Mailing Address PO Box 441146

|                         |             |                        |
|-------------------------|-------------|------------------------|
| City<br>West Somerville | State<br>MA | Zip Code<br>02144-0031 |
|-------------------------|-------------|------------------------|

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

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

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
6263.01

Date of Receipt  
MM / DD / YYYY  
07 / 13 / 2020

**Transaction ID : VTEF8Z1JB95E**

Amount of Each Receipt this Period  
100.00

Memo Item

Note: Above Contribution earmarked through this organization.

|   |        |
|---|--------|
| <b>SUBTOTAL</b> of Receipts This Page (optional).....           | 100.00 |
| <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 49 |
|   | <input checked="" type="checkbox"/> 11a<br><input type="checkbox"/> 11b<br><input type="checkbox"/> 11c<br><input type="checkbox"/> 12<br><input type="checkbox"/> 13<br><input type="checkbox"/> 14<br><input type="checkbox"/> 15<br><input type="checkbox"/> 16<br><input type="checkbox"/> 17 |               |

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NAME OF COMMITTEE (In Full)  
**Black PAC**

**A. Porter, Jay, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1043 La Quinta Ct  
 City Napa State CA Zip Code 94559-3522  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Revere Occupation (for Individual) CEO  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 07 / 08 / 2020  
**Transaction ID : VTEF8Z1JBE5**  
 Amount of Each Receipt this Period 50.00  
 Memo Item  
 \* Earmarked Contribution: See Below

**B. ActBlue**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO Box 441146  
 City West Somerville State MA Zip Code 02144-0031  
 FEC ID number of contributing federal political committee. **C** C00401224  
 Name of Employer (for Individual) Occupation (for Individual) Conduit total listed in Agg. field  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 6263.01

Date of Receipt 07 / 13 / 2020  
**Transaction ID : VTEF8Z1JBE5E**  
 Amount of Each Receipt this Period 50.00  
 Memo Item  
 Note: Above Contribution earmarked through this organization.

**C. Vorperian, Kevork, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 13590 Herrick Ave  
 City Sylmar State CA Zip Code 91342-1226  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) AFH Occupation (for Individual) Physician  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 200.00

Date of Receipt 06 / 29 / 2020  
**Transaction ID : VTEF8Z1JAV5**  
 Amount of Each Receipt this Period 25.00  
 Memo Item  
 \* Earmarked Contribution: See Below

|   |       |
|---|-------|
| <b>SUBTOTAL</b> of Receipts This Page (optional).....           | 75.00 |
| <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 49                |
|   | <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 PAC**

**A. ActBlue**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Mailing Address PO Box 441146

|                         |             |                        |
|-------------------------|-------------|------------------------|
| City<br>West Somerville | State<br>MA | Zip Code<br>02144-0031 |
|-------------------------|-------------|------------------------|

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
6263.01

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
07 / 01 / 2020

**Transaction ID : VTEF8Z1JAV5E**

Amount of Each Receipt this Period  
25.00

Memo Item

Note: Above Contribution earmarked through this organization.

**B. Greenberg, Kathryn, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Mailing Address 5009 Belt Rd NW

|                    |             |                        |
|--------------------|-------------|------------------------|
| City<br>Washington | State<br>DC | Zip Code<br>20016-4234 |
|--------------------|-------------|------------------------|

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

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

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  
07 / 09 / 2020

**Transaction ID : VTEF8Z1JB46**

Amount of Each Receipt this Period  
500.00

Memo Item

\* Earmarked Contribution: See Below

**C. ActBlue**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Mailing Address PO Box 441146

|                         |             |                        |
|-------------------------|-------------|------------------------|
| City<br>West Somerville | State<br>MA | Zip Code<br>02144-0031 |
|-------------------------|-------------|------------------------|

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

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

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
6263.01

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
07 / 13 / 2020

**Transaction ID : VTEF8Z1JB46E**

Amount of Each Receipt this Period  
500.00

Memo Item

Note: Above Contribution earmarked through this organization.

|   |        |
|---|--------|
| <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 17 OF 49   |
|   | <input checked="" type="checkbox"/> 11a<br><input type="checkbox"/> 13 | <input type="checkbox"/> 11b<br><input type="checkbox"/> 14 |

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NAME OF COMMITTEE (In Full)  
**Black PAC**

**A. Moore, Faryce, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1351 Dean St  
 FI 2  
 City Brooklyn State NY Zip Code 11216-3403  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) U.S. Congress Occupation (for Individual) Contract Coordinator  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 235.00

Date of Receipt 07 / 07 / 2020  
**Transaction ID : VTEF8Z1JBJ6**  
 Amount of Each Receipt this Period 25.00  
 Memo Item  
 \* Earmarked Contribution: See Below

**B. ActBlue**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO Box 441146  
 City West Somerville State MA Zip Code 02144-0031  
 FEC ID number of contributing federal political committee. **C** C00401224  
 Name of Employer (for Individual) Occupation (for Individual) Conduit total listed in Agg. field  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 6263.01

Date of Receipt 07 / 13 / 2020  
**Transaction ID : VTEF8Z1JBJ6E**  
 Amount of Each Receipt this Period 25.00  
 Memo Item  
 Note: Above Contribution earmarked through this organization.

**C. Bloom, Allan, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 201 Transylvania Ave  
 City Raleigh State NC Zip Code 27609-6317  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Self-Employed Occupation (for Individual) Psychologist  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 07 / 04 / 2020  
**Transaction ID : VTEF8Z1J9N6**  
 Amount of Each Receipt this Period 50.00  
 Memo Item  
 \* Earmarked Contribution: See Below

|  |       |
|--|-------|
| <b>SUBTOTAL</b> of Receipts This Page (optional).....▶           | 75.00 |
| <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 49                |
|   | <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 PAC**

**A. ActBlue**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Mailing Address PO Box 441146

|                         |             |                        |
|-------------------------|-------------|------------------------|
| City<br>West Somerville | State<br>MA | Zip Code<br>02144-0031 |
|-------------------------|-------------|------------------------|

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
6263.01

Date of Receipt  
MM / DD / YYYY  
07 / 06 / 2020

**Transaction ID : VTEF8Z1J9N6E**

Amount of Each Receipt this Period  
50.00

Memo Item

Note: Above Contribution earmarked through this organization.

**B. Friedman, Eleanor, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Mailing Address 17 W 54th St  
Apt 1B

|                  |             |                        |
|------------------|-------------|------------------------|
| City<br>New York | State<br>NY | Zip Code<br>10019-5455 |
|------------------|-------------|------------------------|

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
MM / DD / YYYY  
07 / 12 / 2020

**Transaction ID : VTEF8Z1JB87**

Amount of Each Receipt this Period  
250.00

Memo Item

\* Earmarked Contribution: See Below

**C. ActBlue**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Mailing Address PO Box 441146

|                         |             |                        |
|-------------------------|-------------|------------------------|
| City<br>West Somerville | State<br>MA | Zip Code<br>02144-0031 |
|-------------------------|-------------|------------------------|

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

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

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
6263.01

Date of Receipt  
MM / DD / YYYY  
07 / 13 / 2020

**Transaction ID : VTEF8Z1JB87E**

Amount of Each Receipt this Period  
250.00

Memo Item

Note: Above Contribution earmarked through this organization.

|   |        |
|---|--------|
| <b>SUBTOTAL</b> of Receipts This Page (optional).....           | 250.00 |
| <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 49                |
|   | <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 PAC**

**A. Reynolds, William, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1404 K St SE  
 Apt 2  
 City Washington State DC Zip Code 20003-3225  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Civix Strategy Group Occupation (for Individual) Consultant  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 625.00

Date of Receipt 07 / 01 / 2020  
**Transaction ID : VTEF8Z1J9G7**  
 Amount of Each Receipt this Period 25.00  
 Memo Item  
 \* Earmarked Contribution: See Below

**B. ActBlue**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO Box 441146  
 City West Somerville State MA Zip Code 02144-0031  
 FEC ID number of contributing federal political committee. **C** C00401224  
 Name of Employer (for Individual) Occupation (for Individual) Conduit total listed in Agg. field  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 6263.01

Date of Receipt 07 / 06 / 2020  
**Transaction ID : VTEF8Z1J9G7E**  
 Amount of Each Receipt this Period 25.00  
 Memo Item  
 Note: Above Contribution earmarked through this organization.

**C. Cohen, Ilana, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 4247 Se Pine  
 City Portland State OR Zip Code 97215  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Axiom Learning Occupation (for Individual) Tutor  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 07 / 09 / 2020  
**Transaction ID : VTEF8Z1JCW8**  
 Amount of Each Receipt this Period 500.00  
 Memo Item  
 \* Earmarked Contribution: See Below

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 525.00  
**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 20 OF 49 |
|   | <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 PAC**

**A. ActBlue**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Mailing Address PO Box 441146

|                         |             |                        |
|-------------------------|-------------|------------------------|
| City<br>West Somerville | State<br>MA | Zip Code<br>02144-0031 |
|-------------------------|-------------|------------------------|

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
6263.01

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
07 / 13 / 2020

**Transaction ID : VTEF8Z1JCW8E**

Amount of Each Receipt this Period  
500.00

Memo Item

Note: Above Contribution earmarked through this organization.

**B. Vorperian, Kevork, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Mailing Address 13590 Herrick Ave

|                |             |                        |
|----------------|-------------|------------------------|
| City<br>Sylmar | State<br>CA | Zip Code<br>91342-1226 |
|----------------|-------------|------------------------|

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

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

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  
07 / 05 / 2020

**Transaction ID : VTEF8Z1J9F9**

Amount of Each Receipt this Period  
25.00

Memo Item

\* Earmarked Contribution: See Below

**C. ActBlue**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Mailing Address PO Box 441146

|                         |             |                        |
|-------------------------|-------------|------------------------|
| City<br>West Somerville | State<br>MA | Zip Code<br>02144-0031 |
|-------------------------|-------------|------------------------|

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

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

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
6263.01

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
07 / 06 / 2020

**Transaction ID : VTEF8Z1J9F9E**

Amount of Each Receipt this Period  
25.00

Memo Item

Note: Above Contribution earmarked through this organization.

|   |       |
|---|-------|
| <b>SUBTOTAL</b> of Receipts This Page (optional).....           | 25.00 |
| <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 49                |
|   | <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 PAC**

**A. Harmon, Jocelyn, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 903 Dryden St  
 City Silver Spring State MD Zip Code 20901-1826  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Self-Employed Occupation (for Individual) Fundraising Consultant  
 Receipt For:  Primary  General  Other (specify)  Aggregate Year-to-Date **525.00**

Date of Receipt **07 / 19 / 2020**  
**Transaction ID : VTEF8Z1JCJ9**  
 Amount of Each Receipt this Period **25.00**  
 Memo Item  
 \* Earmarked Contribution: See Below

**B. ActBlue**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO Box 441146  
 City West Somerville State MA Zip Code 02144-0031  
 FEC ID number of contributing federal political committee. **C** C00401224  
 Name of Employer (for Individual) Occupation (for Individual) Conduit total listed in Agg. field  
 Receipt For:  Primary  General  Other (specify)  Aggregate Year-to-Date **6263.01**

Date of Receipt **07 / 20 / 2020**  
**Transaction ID : VTEF8Z1JCJ9E**  
 Amount of Each Receipt this Period **25.00**  
 Memo Item  
 Note: Above Contribution earmarked through this organization.

**C. Ponte, Maya, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 309 Plymouth Rd  
 City Lower Gwynedd State PA Zip Code 19002-1962  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Dermatology & Mohs Surgery Center Occupation (for Individual) Physician  
 Receipt For:  Primary  General  Other (specify)  Aggregate Year-to-Date **750.00**

Date of Receipt **07 / 23 / 2020**  
**Transaction ID : VTEF8Z1JBZ9**  
 Amount of Each Receipt this Period **100.00**  
 Memo Item  
 \* Earmarked Contribution: See Below

**SUBTOTAL** of Receipts This Page (optional)..... **125.00**  
**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 22 OF 49                |
|   | <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 PAC**

**A. ActBlue**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Mailing Address PO Box 441146

|                         |             |                        |
|-------------------------|-------------|------------------------|
| City<br>West Somerville | State<br>MA | Zip Code<br>02144-0031 |
|-------------------------|-------------|------------------------|

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
6263.01

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
07 / 27 / 2020

**Transaction ID : VTEF8Z1JBZ9E**

Amount of Each Receipt this Period  
100.00

Memo Item

Note: Above Contribution earmarked through this organization.

**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

|   |           |
|---|-----------|
| <b>SUBTOTAL</b> of Receipts This Page (optional).....           | 0.00      |
| <b>TOTAL</b> This Period (last page this line number only)..... | 124260.00 |

**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 23 OF 49   |
| <input type="checkbox"/> 11a  | <input type="checkbox"/> 11b | <input checked="" type="checkbox"/> 11c | <input type="checkbox"/> 12                             |
| <input type="checkbox"/> 13   | <input type="checkbox"/> 14  | <input type="checkbox"/> 15             | <input type="checkbox"/> 16 <input type="checkbox"/> 17 |

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NAME OF COMMITTEE (In Full)  
**Black PAC**

|   |             |   |
|---|-------------|---|
| Full Name of Individual (Last, First, Middle Initial) or Full Organization Name<br><b>A. LCV Victory Fund</b>                   |             | Date of Receipt   |
| Mailing Address 740 15th St NW<br>FI 7  |             | <input type="text" value="07"/> / <input type="text" value="23"/> / <input type="text" value="2020"/> |
| City<br>Washington  | State<br>DC | Zip Code<br>20005-1048  |
| FEC ID number of contributing federal political committee.<br><b>C</b> C00486845  |             | <b>Transaction ID : VTEF8Z17DW3</b>   |
| Name of Employer (for Individual)   |             | Occupation (for Individual)   |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |             | Amount of Each Receipt this Period<br><input type="text" value="250000.00"/>                          |
| Aggregate Year-to-Date ▼<br><input type="text" value="250000.00"/>  |             | <input type="checkbox"/> Memo Item  |

|   |             |   |
|---|-------------|---|
| Full Name of Individual (Last, First, Middle Initial) or Full Organization Name<br><b>B. Democracy PAC</b>                      |             | Date of Receipt   |
| Mailing Address 700 13th St NW<br>Ste 600   |             | <input type="text" value="07"/> / <input type="text" value="28"/> / <input type="text" value="2020"/> |
| City<br>Washington  | State<br>DC | Zip Code<br>20005-5998  |
| FEC ID number of contributing federal political committee.<br><b>C</b> C00693382  |             | <b>Transaction ID : VTEF8Z1H4T7</b>   |
| Name of Employer (for Individual)   |             | Occupation (for Individual)   |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |             | Amount of Each Receipt this Period<br><input type="text" value="1000000.00"/>                         |
| Aggregate Year-to-Date ▼<br><input type="text" value="1000000.00"/>   |             | <input type="checkbox"/> Memo Item  |

|   |       |  |
|---|-------|--|
| Full Name of Individual (Last, First, Middle Initial) or Full Organization Name<br><b>C.</b>                                  |       | Date of Receipt  |
| Mailing Address   |       | <input type="text"/> / <input type="text"/> / <input type="text"/> |
| City  | State | Zip Code   |
| FEC ID number of contributing federal political committee.<br><b>C</b>  |       | Amount of Each Receipt this Period<br><input type="text"/>         |
| Name of Employer (for Individual)   |       | Occupation (for Individual)  |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |       | <input type="checkbox"/> Memo Item                                 |
| Aggregate Year-to-Date ▼<br><input type="text"/>  |       |  |

|   |   |
|---|---|
| <b>SUBTOTAL</b> of Receipts This Page (optional).....           | <input type="text" value="1250000.00"/> |
| <b>TOTAL</b> This Period (last page this line number only)..... | <input type="text" value="1250000.00"/> |

**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 PAC**

|   |  |   |
|---|--|---|
| Full Name (Last, First, Middle Initial)<br><b>A. Shropshire, LLC</b>  |  | Date of Disbursement<br>MM / DD / YYYY<br>07 / 29 / 2020  |
| Mailing Address 380 Summit Ave  |  | FEC Identification Number<br>C [REDACTED]<br><b>Transaction ID : VTDG0AEJKI</b><br>Amount of Each Disbursement this Period<br>6250.00 |
| City<br>Mount Vernon  | State<br>NY  | Zip Code<br>10552-2206  |
| Purpose of Disbursement<br>Strategic Consulting Services  |  | Category/<br>Type   |
| Candidate Name  |  |   |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |
| State: District:  | <input type="checkbox"/> Memo Item   |   |

|   |  |   |
|---|--|---|
| Full Name (Last, First, Middle Initial)<br><b>B. ActBlue Technical Services</b>   |  | Date of Disbursement<br>MM / DD / YYYY<br>07 / 19 / 2020  |
| Mailing Address 336 Summer St   |  | FEC Identification Number<br>C [REDACTED]<br><b>Transaction ID : VTDG0AEJ9S</b><br>Amount of Each Disbursement this Period<br>48.36 |
| City<br>Somerville  | State<br>MA  | Zip Code<br>02144-3146  |
| Purpose of Disbursement<br>Credit Card Processing Fees  |  | Category/<br>Type   |
| Candidate Name  |  |   |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |
| State: District:  | <input type="checkbox"/> Memo Item   |   |

|   |  |   |
|---|--|---|
| Full Name (Last, First, Middle Initial)<br><b>C. OTG Strategies</b>   |  | Date of Disbursement<br>MM / DD / YYYY<br>07 / 16 / 2020  |
| Mailing Address 10130 Perimeter Pkwy<br>Ste 200   |  | FEC Identification Number<br>C [REDACTED]<br><b>Transaction ID : VTDG0AEJJJ</b><br>Amount of Each Disbursement this Period<br>3646.00 |
| City<br>Charlotte   | State<br>NC  | Zip Code<br>28216-0197  |
| Purpose of Disbursement<br>Computer Software  |  | Category/<br>Type   |
| Candidate Name  |  |   |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |
| State: District:  | <input type="checkbox"/> Memo Item   |   |

|  |         |
|--|---------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional).....▶      | 9944.36 |
| <b>TOTAL</b> This Period (last page this line number only).....▶ |         |

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**Black PAC**

|   |  |                          |  |  |
|---|--|--------------------------|--|--|
| Full Name (Last, First, Middle Initial)<br><b>A. Nubia Scott-Bennett</b>  |  |                          | Date of Disbursement<br>MM / DD / YYYY<br>07 / 01 / 2020   |  |
| Mailing Address 1230 Croes Ave<br>19-H  |  |                          | FEC Identification Number<br>C [ ]<br><b>Transaction ID : VTDG0AEJJP</b><br>Amount of Each Disbursement this Period<br>[ ] 2500.00 |  |
| City<br>Bronx   | State<br>NY  | Zip Code<br>10472-4536   | Memo Item <input type="checkbox"/>   |  |
| Purpose of Disbursement<br>Strategic Consulting Services  |  | Category/<br>Type<br>[ ] | Memo Item <input type="checkbox"/>   |  |
| Candidate Name  |  |                          |  |  |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |                          |  |  |
| State: District:  |  |                          |  |  |

|   |  |                          |  |  |
|---|--|--------------------------|--|--|
| Full Name (Last, First, Middle Initial)<br><b>B. Kerry Mitchell Brown, LLC</b>  |  |                          | Date of Disbursement<br>MM / DD / YYYY<br>07 / 07 / 2020   |  |
| Mailing Address 1000 W Washington Blvd<br>Unit 146  |  |                          | FEC Identification Number<br>C [ ]<br><b>Transaction ID : VTDG0AEJJP</b><br>Amount of Each Disbursement this Period<br>[ ] 3500.00 |  |
| City<br>Chicago   | State<br>IL  | Zip Code<br>60607-2148   | Memo Item <input type="checkbox"/>   |  |
| Purpose of Disbursement<br>Research Consulting Services   |  | Category/<br>Type<br>[ ] | Memo Item <input type="checkbox"/>   |  |
| Candidate Name  |  |                          |  |  |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |                          |  |  |
| State: District:  |  |                          |  |  |

|   |  |                          |   |  |
|---|--|--------------------------|---|--|
| Full Name (Last, First, Middle Initial)<br><b>C. American Express</b>   |  |                          | Date of Disbursement<br>MM / DD / YYYY<br>07 / 27 / 2020  |  |
| Mailing Address 200 Vesey St  |  |                          | FEC Identification Number<br>C [ ]<br><b>Transaction ID : VTDG0AEJJK</b><br>Amount of Each Disbursement this Period<br>[ ] 362.41 |  |
| City<br>New York  | State<br>NY  | Zip Code<br>10285-1000   | Memo Item <input type="checkbox"/>  |  |
| Purpose of Disbursement<br>Credit Card Payment, See Below   |  | Category/<br>Type<br>[ ] | Memo Item <input type="checkbox"/>  |  |
| Candidate Name  |  |                          |   |  |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |                          |   |  |
| State: District:  |  |                          |   |  |

|  |             |
|--|-------------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional).....▶      | [ ] 6362.41 |
| <b>TOTAL</b> This Period (last page this line number only).....▶ | [ ]         |

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**Black PAC**

**A. WP Engine**

Full Name (Last, First, Middle Initial)

Mailing Address 504 Lavaca St  
Ste 1000

City Austin State TX Zip Code 78701-2857

Purpose of Disbursement Email Hosting

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: MM / DD / YYYY  
07 / 27 / 2020

FEC Identification Number: C

Transaction ID : VTDG0AEJKI

Amount of Each Disbursement this Period: 30.00

Memo Item

**B. Action Network**

Full Name (Last, First, Middle Initial)

Mailing Address 1900 L St NW  
Ste 900

City Washington State DC Zip Code 20036-5005

Purpose of Disbursement Email Services

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: MM / DD / YYYY  
07 / 27 / 2020

FEC Identification Number: C

Transaction ID : VTDG0AEJK3

Amount of Each Disbursement this Period: 129.32

Memo Item

**C. Google LLC**

Full Name (Last, First, Middle Initial)

Mailing Address 1600 Amphitheatre Pkwy

City Mountain View State CA Zip Code 94043-1351

Purpose of Disbursement Email Services

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: MM / DD / YYYY  
07 / 27 / 2020

FEC Identification Number: C

Transaction ID : VTDG0AEJK

Amount of Each Disbursement this Period: 65.84

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 PAC**

**A. Break Something Inc.**

Full Name (Last, First, Middle Initial)

Mailing Address 1701 Rhode Island Ave NW  
FI 5

City Washington State DC Zip Code 20036-3040

Purpose of Disbursement See Schedule E, Digital Advertisements

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For: 2020  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement 07 / 16 / 2020

FEC Identification Number C

Transaction ID : VTDG0AEJKI

Amount of Each Disbursement this Period - 10469.54

Memo Item

**B. ActBlue Technical Services**

Full Name (Last, First, Middle Initial)

Mailing Address 336 Summer St

City Somerville State MA Zip Code 02144-3146

Purpose of Disbursement Credit Card Processing Fees

Candidate Name

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

State: District:

Date of Disbursement 07 / 12 / 2020

FEC Identification Number C

Transaction ID : VTDG0AEJ9R

Amount of Each Disbursement this Period 78.18

Memo Item

**C. Pace, Jessica, L, ,**

Full Name (Last, First, Middle Initial)

Mailing Address 7630 Carleton Ave

City Saint Louis State MO Zip Code 63130-1620

Purpose of Disbursement Strategic Consulting Services

Candidate Name

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

State: District:

Date of Disbursement 07 / 14 / 2020

FEC Identification Number C

Transaction ID : VTDG0AEJJJ

Amount of Each Disbursement this Period 4000.00

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ - 6391.36

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**Black PAC**

**A. Cooper, DaMareo, , ,**

Full Name (Last, First, Middle Initial)

Mailing Address 774 Fuller St

City Akron State OH Zip Code 44306-2518

Purpose of Disbursement Strategic Consulting Services

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement 07 / 07 / 2020

FEC Identification Number C

Transaction ID : VTDG0AEJJC

Amount of Each Disbursement this Period 3000.00

Memo Item

**B. Amalgamated Bank, N. A.**

Full Name (Last, First, Middle Initial)

Mailing Address 1825 K St NW

City Washington State DC Zip Code 20006-1245

Purpose of Disbursement Bank Fee

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement 07 / 24 / 2020

FEC Identification Number C

Transaction ID : VTDG0AEJJC

Amount of Each Disbursement this Period 552.30

Memo Item

**C. Break Something Inc.**

Full Name (Last, First, Middle Initial)

Mailing Address 1701 Rhode Island Ave NW  
FI 5

City Washington State DC Zip Code 20036-3040

Purpose of Disbursement Digital Advertisements

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement 07 / 28 / 2020

FEC Identification Number C

Transaction ID : VTDG0AEJJK

Amount of Each Disbursement this Period 37637.26

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 41189.56

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**Black PAC**

**A. ActBlue Technical Services**

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address 336 Summer St

|       |   |       |   |           |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 07    |   | 05    |   | 2020      |

City  
Somerville

State  
MA

Zip Code  
02144-3146

FEC Identification Number

Purpose of Disbursement  
Credit Card Processing Fees

|   |
|---|
| C |
|---|

Candidate Name

Category/  
Type

Transaction ID : VTDG0AEJ9C

Amount of Each Disbursement this Period

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

|       |
|-------|
| 47.09 |
|-------|

State: District:

Memo Item

**B. DC Treasurer**

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address PO Box 96019

|       |   |       |   |           |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 07    |   | 14    |   | 2020      |

City  
Washington

State  
DC

Zip Code  
20090-6019

FEC Identification Number

Purpose of Disbursement  
Local Taxes

|   |
|---|
| C |
|---|

Candidate Name

Category/  
Type

Transaction ID : VTDG0AEJJV

Amount of Each Disbursement this Period

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

|        |
|--------|
| 250.00 |
|--------|

State: District:

Memo Item

**C. Media Fortitude Partners**

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address 30 Newport Pkwy  
Apt 2110

|       |   |       |   |           |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 07    |   | 15    |   | 2020      |

City  
Jersey City

State  
NJ

Zip Code  
07310-1512

FEC Identification Number

Purpose of Disbursement  
Media Buy & Production

|   |
|---|
| C |
|---|

Candidate Name

Category/  
Type

Transaction ID : VTDG0AEM0

Amount of Each Disbursement this Period

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

|           |
|-----------|
| 250000.00 |
|-----------|

State: District:

Memo Item

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

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

|           |
|-----------|
| 250297.09 |
|-----------|

|  |
|--|
|  |
|--|



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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**Black PAC**

**A. ActBlue Technical Services**

Full Name (Last, First, Middle Initial)

Mailing Address 336 Summer St

City Somerville State MA Zip Code 02144-3146

Purpose of Disbursement  
Credit Card Processing Fees

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: MM / DD / YYYY  
07 / 01 / 2020

FEC Identification Number: C

Transaction ID : VTDG0AEJ9F

Amount of Each Disbursement this Period: 19.70

Memo Item

**B. Civix Strategy Group, LLC**

Full Name (Last, First, Middle Initial)

Mailing Address 114 N Main St Ste 203

City Concord State NH Zip Code 03301-4953

Purpose of Disbursement  
Strategic Consulting Services

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: MM / DD / YYYY  
07 / 08 / 2020

FEC Identification Number: C

Transaction ID : VTDG0AEJJS

Amount of Each Disbursement this Period: 13000.00

Memo Item

**C. ActBlue Technical Services**

Full Name (Last, First, Middle Initial)

Mailing Address 336 Summer St

City Somerville State MA Zip Code 02144-3146

Purpose of Disbursement  
Credit Card Processing Fees

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: MM / DD / YYYY  
07 / 26 / 2020

FEC Identification Number: C

Transaction ID : VTDG0AEJ9\*

Amount of Each Disbursement this Period: 54.41

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 13074.11

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**Black PAC**

|   |  |  |
|---|--|--|
| Full Name (Last, First, Middle Initial)<br><b>A. Time Warner Cable</b>  |  | Date of Disbursement<br>MM / DD / YYYY<br>07 / 23 / 2020   |
| Mailing Address PO Box 11820  |  | FEC Identification Number<br>C [REDACTED]<br><b>Transaction ID : VTDG0AEJJJ</b><br>Amount of Each Disbursement this Period<br>[REDACTED] 83.48 |
| City Newark   | State NJ   | Zip Code 07101-8120  |
| Purpose of Disbursement<br>Utilities  |  | Category/Type<br>[REDACTED]  |
| Candidate Name  |  |  |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |  |
| State: District:  | <input type="checkbox"/> Memo Item   |  |

|   |  |   |
|---|--|---|
| Full Name (Last, First, Middle Initial)<br><b>B. Jocelyn Harmon</b>   |  | Date of Disbursement<br>MM / DD / YYYY<br>07 / 27 / 2020  |
| Mailing Address 903 Dryden St   |  | FEC Identification Number<br>C [REDACTED]<br><b>Transaction ID : VTDG0AEJJK</b><br>Amount of Each Disbursement this Period<br>[REDACTED] 500.00 |
| City Silver Spring  | State MD   | Zip Code 20901-1826   |
| Purpose of Disbursement<br>Writing & Editing Services   |  | Category/Type<br>[REDACTED]   |
| Candidate Name  |  |   |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |
| State: District:  | <input type="checkbox"/> Memo Item   |   |

|   |  |  |
|---|--|--|
| Full Name (Last, First, Middle Initial)<br><b>C. Nubia Scott-Bennett</b>  |  | Date of Disbursement<br>MM / DD / YYYY<br>07 / 31 / 2020   |
| Mailing Address 1230 Croes Ave<br>19-H  |  | FEC Identification Number<br>C [REDACTED]<br><b>Transaction ID : VTDG0AEJJI</b><br>Amount of Each Disbursement this Period<br>[REDACTED] 2500.00 |
| City Bronx  | State NY   | Zip Code 10472-4536  |
| Purpose of Disbursement<br>Strategic Consulting Services  |  | Category/Type<br>[REDACTED]  |
| Candidate Name  |  |  |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |  |
| State: District:  | <input type="checkbox"/> Memo Item   |  |

|  |                      |
|--|----------------------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional).....▶      | [REDACTED] 3083.48   |
| <b>TOTAL</b> This Period (last page this line number only).....▶ | [REDACTED] 349221.93 |

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

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

|   |                                   |
|---|-----------------------------------|
| (Use separate schedule(s) for each numbered line) | PAGE 33 OF 49                     |
|   | FOR LINE NUMBER: (check only one) |
| <input type="checkbox"/>                          | 9                                 |
| <input checked="" type="checkbox"/>               | 10                                |

NAME OF COMMITTEE (In Full)  
**Black PAC**

|  |             |                        |  |
|--|-------------|------------------------|--|
| A. Full Name (Last, First, Middle Initial) of Debtor or Creditor<br><b>Burrell Communications Group, LLC</b> |             |                        | Nature of Debt (Purpose):<br>Media Production - Estimate |
| Mailing Address 233 N Michigan Ave<br>Ste 2900   |             |                        |  |
| City<br>Chicago  | State<br>IL | Zip Code<br>60601-5709 |  |

|  |  |   |
|--|--|---|
| Outstanding Balance Beginning This Period<br><input type="text" value="0.00"/> | <b>Transaction ID : VTBHG9HASG0</b>                      |   |
| Amount Incurred This Period<br><input type="text" value="4737.00"/>            | Payment This Period<br><input type="text" value="0.00"/> | Outstanding Balance at Close of This Period<br><input type="text" value="4737.00"/> |

|  |             |                        |  |
|--|-------------|------------------------|--|
| B. Full Name (Last, First, Middle Initial) of Debtor or Creditor<br><b>Burrell Communications Group, LLC</b> |             |                        | Nature of Debt (Purpose):<br>Media Production - Estimate |
| Mailing Address 233 N Michigan Ave<br>Ste 2900   |             |                        |  |
| City<br>Chicago  | State<br>IL | Zip Code<br>60601-5709 |  |

|  |  |   |
|--|--|---|
| Outstanding Balance Beginning This Period<br><input type="text" value="0.00"/> | <b>Transaction ID : VTBHG9HASF2</b>                      |   |
| Amount Incurred This Period<br><input type="text" value="4737.00"/>            | Payment This Period<br><input type="text" value="0.00"/> | Outstanding Balance at Close of This Period<br><input type="text" value="4737.00"/> |

|   |             |                        |  |
|---|-------------|------------------------|--|
| C. Full Name (Last, First, Middle Initial) of Debtor or Creditor<br><b>Break Something Inc.</b> |             |                        | Nature of Debt (Purpose):<br>Digital Advertisements - Estimate |
| Mailing Address 1701 Rhode Island Ave NW<br>FI 5  |             |                        |  |
| City<br>Washington  | State<br>DC | Zip Code<br>20036-3040 |  |

|  |  |   |
|--|--|---|
| Outstanding Balance Beginning This Period<br><input type="text" value="0.00"/> | <b>Transaction ID : VTBHG9HASJ6</b>                      |   |
| Amount Incurred This Period<br><input type="text" value="5000.00"/>            | Payment This Period<br><input type="text" value="0.00"/> | Outstanding Balance at Close of This Period<br><input type="text" value="5000.00"/> |

|  |                                       |
|--|---------------------------------------|
| 1) <b>SUBTOTALS</b> This Period This Page (optional)..... ▶                                      | <input type="text" value="14474.00"/> |
| 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 34 OF 49                          |
|   | FOR LINE NUMBER: (check only one)      |
| <input type="checkbox"/> 9                        | <input checked="" type="checkbox"/> 10 |

NAME OF COMMITTEE (In Full)  
**Black PAC**

|   |             |                        |  |
|---|-------------|------------------------|--|
| A. Full Name (Last, First, Middle Initial) of Debtor or Creditor<br><b>Break Something Inc.</b> |             |                        | Nature of Debt (Purpose):<br>Digital Advertisements - Estimate |
| Mailing Address 1701 Rhode Island Ave NW<br>FI 5  |             |                        |  |
| City<br>Washington  | State<br>DC | Zip Code<br>20036-3040 |  |

|  |  |   |
|--|--|---|
| Outstanding Balance Beginning This Period<br><input type="text" value="0.00"/> | <b>Transaction ID : VTBHG9HASH8</b>                      |   |
| Amount Incurred This Period<br><input type="text" value="5000.00"/>            | Payment This Period<br><input type="text" value="0.00"/> | Outstanding Balance at Close of This Period<br><input type="text" value="5000.00"/> |

|  |             |                        |  |
|--|-------------|------------------------|--|
| B. Full Name (Last, First, Middle Initial) of Debtor or Creditor<br><b>Perkins Coie, LLP</b> |             |                        | Nature of Debt (Purpose):<br>Legal & Compliance Services |
| Mailing Address 1201 3rd Ave<br>Ste 4900   |             |                        |  |
| City<br>Seattle  | State<br>WA | Zip Code<br>98101-3095 |  |

|  |  |  |
|--|--|--|
| Outstanding Balance Beginning This Period<br><input type="text" value="53653.54"/> | <b>Transaction ID : VTBHG9HAQE9</b>                      |  |
| Amount Incurred This Period<br><input type="text" value="0.00"/>                   | Payment This Period<br><input type="text" value="0.00"/> | Outstanding Balance at Close of This Period<br><input type="text" value="53653.54"/> |

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

|  |                                       |
|--|---------------------------------------|
| 1) <b>SUBTOTALS</b> This Period This Page (optional)..... ▶                                      | <input type="text" value="58653.54"/> |
| 2) <b>TOTALS</b> This Period (last page this line number only)..... ▶                            | <input type="text" value="73127.54"/> |
| 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="73127.54"/> |

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

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

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

Full Name of Payee Break Something Inc.
Mailing Address 1701 Rhode Island Ave NW
City Washington State DC Zip Code 20036-3040
Purpose of Expenditure Digital Advertisements
Date of Public Distribution/Dissemination 07/19/2020
Amount 667.67
Transaction ID: VTDG0AEHJMO
Date of Disbursement or Obligation 07/19/2020

Name of Federal Candidate: Tillis, Thom, R.,
Support Oppose
Office Sought: House Senate
Disbursement For: Primary General
Calendar Year-To-Date Per Election for Office Sought 31454.15

Full Name of Payee Break Something Inc.
Mailing Address 1701 Rhode Island Ave NW
City Washington State DC Zip Code 20036-3040
Purpose of Expenditure Digital Advertisements
Date of Public Distribution/Dissemination 07/22/2020
Amount 176.11
Transaction ID: VTDG0AEHMQ0
Date of Disbursement or Obligation 07/22/2020

Name of Federal Candidate: Trump, Donald, J.,
Support Oppose
Office Sought: President Senate
Disbursement For: Primary General
Calendar Year-To-Date Per Election for Office Sought 897844.88

(a) SUBTOTAL of Itemized Independent Expenditures 843.78
(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.

Shropshire, Adrienne, R., [Electronically Filed] Date 08/20/2020
Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

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

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

Full Name of Payee
Burrell Communications Group, LLC
Mailing Address
233 N Michigan Ave
Ste 2900
City
Chicago
State
IL
Zip Code
60601-5709
Purpose of Expenditure
Media Buy
Category/Type
Date of Public Distribution/Dissemination
07 / 21 / 2020
Amount
230094.36
Transaction ID : VTDG0AEHJ21
Date of Disbursement or Obligation
07 / 23 / 2020

Name of Federal Candidate:
Peters, Gary, , ,
Support
Oppose
Office Sought:
House
Senate
District:
State: MI
Calendar Year-To-Date
Per Election for Office Sought
234831.36
Disbursement For:
Primary
General
Other (specify)

Full Name of Payee
Break Something Inc.
Mailing Address
1701 Rhode Island Ave NW
FI 5
City
Washington
State
DC
Zip Code
20036-3040
Purpose of Expenditure
Digital Advertisements
Category/Type
Date of Public Distribution/Dissemination
07 / 17 / 2020
Amount
692.80
Transaction ID : VTDG0AEHJF1
Date of Disbursement or Obligation
07 / 17 / 2020

Name of Federal Candidate:
Trump, Donald, J., ,
Support
Oppose
Office Sought:
President
Senate
District:
State:
Calendar Year-To-Date
Per Election for Office Sought
897844.88
Disbursement For:
Primary
General
Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures ..... 230787.16
(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.

Shropshire, Adrienne, R., , [Electronically Filed] Date 08 / 20 / 2020
Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

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

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

Full Name of Payee Break Something Inc.
Mailing Address 1701 Rhode Island Ave NW
City Washington State DC Zip Code 20036-3040
Purpose of Expenditure Digital Advertisements - Estimate
Category/Type

Name of Federal Candidate: Tillis, Thom, R.,
Support Oppose
Office Sought: House Senate
Disbursement For: Primary General
Calendar Year-To-Date Per Election for Office Sought 31454.15

Full Name of Payee Break Something Inc.
Mailing Address 1701 Rhode Island Ave NW
City Washington State DC Zip Code 20036-3040
Purpose of Expenditure Digital Advertisements
Category/Type

Name of Federal Candidate: Trump, Donald, J.,
Support Oppose
Office Sought: President Senate
Disbursement For: Primary General
Calendar Year-To-Date Per Election for Office Sought 897844.88

(a) SUBTOTAL of Itemized Independent Expenditures 667.68
(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.

Shropshire, Adrienne, R.,

[Electronically Filed]

Date

08 / 20 / 2020

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SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

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

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

Full Name of Payee Break Something Inc.
Mailing Address 1701 Rhode Island Ave NW
City Washington State DC Zip Code 20036-3040
Purpose of Expenditure Digital Advertisements
Date of Public Distribution/Dissemination 07/21/2020
Amount 548.20
Transaction ID : VTDG0AEHJR2
Date of Disbursement or Obligation 07/21/2020

Name of Federal Candidate: Tillis, Thom, R.,
Support Oppose
Office Sought: House Senate
Disbursement For: Primary General
Calendar Year-To-Date Per Election for Office Sought 31454.15

Full Name of Payee Break Something Inc.
Mailing Address 1701 Rhode Island Ave NW
City Washington State DC Zip Code 20036-3040
Purpose of Expenditure Digital Advertisements
Date of Public Distribution/Dissemination 07/16/2020
Amount 695.20
Transaction ID : VTDG0AEHJE3
Date of Disbursement or Obligation 07/16/2020

Name of Federal Candidate: Tillis, Thom, R.,
Support Oppose
Office Sought: House Senate
Disbursement For: Primary General
Calendar Year-To-Date Per Election for Office Sought 31454.15

(a) SUBTOTAL of Itemized Independent Expenditures 1243.40
(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.

Shropshire, Adrienne, R.,

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Date

08/20/2020

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SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

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

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

Full Name of Payee
Break Something Inc.
Mailing Address
1701 Rhode Island Ave NW
FI 5
City
Washington State
DC Zip Code
20036-3040
Purpose of Expenditure
Digital Advertisements
Category/Type

Date of Public Distribution/Dissemination
07 / 23 / 2020
Amount
703.20
Transaction ID : VTDG0AEHMT3
Date of Disbursement or Obligation
07 / 23 / 2020

Name of Federal Candidate:
Tillis, Thom, R.,
Support Oppose
Office Sought:
House Senate
District:
State: NC

Disbursement For:
Primary General
Other (specify)

Full Name of Payee
Burrell Communications Group, LLC
Mailing Address
233 N Michigan Ave
Ste 2900
City
Chicago State
IL Zip Code
60601-5709
Purpose of Expenditure
Media Buy
Category/Type

Date of Public Distribution/Dissemination
07 / 21 / 2020
Amount
292892.99
Transaction ID : VTDG0AEHKF4
Date of Disbursement or Obligation
07 / 23 / 2020

Name of Federal Candidate:
Trump, Donald, J.,
Support Oppose
Office Sought:
President Senate
District:
State:

Disbursement For:
Primary General
Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures ..... 293596.19
(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.

Shropshire, Adrienne, R., [Electronically Filed] Date 08 / 20 / 2020
Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

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

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

Full Name of Payee: Break Something Inc.
Mailing Address: 1701 Rhode Island Ave NW, FI 5, Washington, DC, 20036-3040
Purpose of Expenditure: Digital Advertisements
Category/Type:
Name of Federal Candidate: Trump, Donald, J., , Oppose
Office Sought: President
Disbursement For: General 2020
Amount: 548.21
Transaction ID: VTDG0AEHJQ4

Full Name of Payee: Media Fortitude Partners
Mailing Address: 30 Newport Pkwy, Apt 2110, Jersey City, NJ, 07310-1512
Purpose of Expenditure: Media Buy & Production
Category/Type:
Name of Federal Candidate: Trump, Donald, J., , Oppose
Office Sought: President
Disbursement For: General 2020
Amount: 500000.00
Transaction ID: VTDG0AEH995

(a) SUBTOTAL of Itemized Independent Expenditures: 500548.21
(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.

Shropshire, Adrienne, R.,

[Electronically Filed]

Date

08 / 20 / 2020

Signature

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFHZG7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SE

Transaction ID : VTDG0AEH995

Estimated amount of \$750,000 adjusted to actual amount of \$500,000.

Form/Schedule:

Transaction ID:

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

|   |   |
|---|---|
| NAME OF COMMITTEE (In Full)<br><b>Black PAC</b> | <b>FEC IDENTIFICATION NUMBER ▼</b><br><div style="border: 1px solid black; padding: 2px;"> <span style="font-size: 1.5em; font-weight: bold; border: 1px solid black; display: inline-block; width: 20px; height: 20px; text-align: center; vertical-align: middle;">C</span> <span style="margin-left: 5px;">C00609388</span> </div> |
|---|---|

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

|  |  |            |          |          |            |    |            |
|--|--|------------|----------|----------|------------|----|------------|
| Full Name of Payee <input checked="" type="checkbox"/> Memo Item<br><b>Break Something Inc.</b><br>*   | Date of Public Distribution/Dissemination<br><span style="font-size: 1.2em;">M M / D D / Y Y Y Y Y Y</span><br>07 / 31 / 2020  |            |          |          |            |    |            |
| Mailing Address 1701 Rhode Island Ave NW<br>FI 5   | Amount<br><div style="border: 1px solid black; padding: 2px; text-align: right;">5000.00</div> Transaction ID : <b>VTDG0AEJAA5</b><br>Date of Disbursement or Obligation<br><span style="font-size: 1.2em;">M M / D D / Y Y Y Y Y Y</span> |            |          |          |            |    |            |
| <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:33%;">City</td> <td style="width:33%;">State</td> <td style="width:33%;">Zip Code</td> </tr> <tr> <td>Washington</td> <td>DC</td> <td>20036-3040</td> </tr> </table> |  | City       | State    | Zip Code | Washington | DC | 20036-3040 |
| City   |  | State      | Zip Code |          |            |    |            |
| Washington   | DC   | 20036-3040 |          |          |            |    |            |
| Purpose of Expenditure<br>Digital Advertisements - Estimate  |  |            |          |          |            |    |            |
| Name of Federal Candidate: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose<br>Trump, Donald, J., ,   | Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate<br>District: _____ State: _____  |            |          |          |            |    |            |
| Calendar Year-To-Date Per Election for Office Sought<br><div style="border: 1px solid black; padding: 2px; text-align: right;">897844.88</div>   | Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2020<br><input type="checkbox"/> Other (specify) ▶ _____  |            |          |          |            |    |            |

|  |   |            |          |          |            |    |            |
|--|---|------------|----------|----------|------------|----|------------|
| Full Name of Payee <input type="checkbox"/> Memo Item<br><b>Break Something Inc.</b>   | Date of Public Distribution/Dissemination<br><span style="font-size: 1.2em;">M M / D D / Y Y Y Y Y Y</span><br>07 / 16 / 2020   |            |          |          |            |    |            |
| Mailing Address 1701 Rhode Island Ave NW<br>FI 5   | Amount<br><div style="border: 1px solid black; padding: 2px; text-align: right;">695.20</div> Transaction ID : <b>VTDG0AEHJD5</b><br>Date of Disbursement or Obligation<br><span style="font-size: 1.2em;">M M / D D / Y Y Y Y Y Y</span><br>07 / 16 / 2020 |            |          |          |            |    |            |
| <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:33%;">City</td> <td style="width:33%;">State</td> <td style="width:33%;">Zip Code</td> </tr> <tr> <td>Washington</td> <td>DC</td> <td>20036-3040</td> </tr> </table> |   | City       | State    | Zip Code | Washington | DC | 20036-3040 |
| City   |   | State      | Zip Code |          |            |    |            |
| Washington   | DC  | 20036-3040 |          |          |            |    |            |
| Purpose of Expenditure<br>Digital Advertisements   |   |            |          |          |            |    |            |
| Name of Federal Candidate: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose<br>Trump, Donald, J., ,   | Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate<br>District: _____ State: _____   |            |          |          |            |    |            |
| Calendar Year-To-Date Per Election for Office Sought<br><div style="border: 1px solid black; padding: 2px; text-align: right;">897844.88</div>   | Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2020<br><input type="checkbox"/> Other (specify) ▶ _____   |            |          |          |            |    |            |

|   |   |
|---|---|
| <b>(a) SUBTOTAL</b> of Itemized Independent Expenditures ..... ▶  | <div style="border: 1px solid black; padding: 2px; text-align: right;">695.20</div> |
| <b>(b) SUBTOTAL</b> of Unitemized Independent Expenditures..... ▶ | <div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>      |
| <b>(c) TOTAL</b> Independent Expenditures ..... ▶                 | <div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>      |

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

*Shropshire, Adrienne, R.,*

*[Electronically Filed]*

Date

M M / D D / Y Y Y Y Y Y  
 08 / 20 / 2020

Signature

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

|   |   |
|---|---|
| NAME OF COMMITTEE (In Full)<br><b>Black PAC</b> | <b>FEC IDENTIFICATION NUMBER ▼</b><br><div style="border: 1px solid black; padding: 2px;"> <span style="font-size: 24px; font-weight: bold; margin-right: 5px;">C</span> C00609388                 </div> |
|---|---|

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

|  |             |   |
|--|-------------|---|
| Full Name of Payee <input type="checkbox"/> Memo Item<br><b>Break Something Inc.</b> |             |   |
| Mailing Address 1701 Rhode Island Ave NW<br>FI 5                                     |             |   |
| City<br>Washington   | State<br>DC | Zip Code<br>20036-3040  |
| Purpose of Expenditure<br>Digital Advertisements                                     |             | Category/Type <span style="border: 1px solid black; padding: 2px;"> </span> |

|   |  |  |
|---|--|--|
| Date of Public Distribution/Dissemination<br><span style="font-size: 24px; font-weight: bold;">M M / D D / Y Y Y Y Y Y</span><br>07 / 18 / 2020                                 |  |  |
| Amount<br><span style="font-size: 24px; font-weight: bold;"> </span> 688.83   |  |  |
| Transaction ID : <b>VTDG0AEHJJ5</b><br>Date of Disbursement or Obligation<br><span style="font-size: 24px; font-weight: bold;">M M / D D / Y Y Y Y Y Y</span><br>07 / 18 / 2020 |  |  |

|   |  |
|---|--|
| Name of Federal Candidate:<br>Tillis, Thom, R., ,   | <input type="checkbox"/> Support<br><input checked="" type="checkbox"/> Oppose |
| Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;"> </span> 31454.15 |  |

|   |
|---|
| Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate<br><input type="checkbox"/> President <input type="checkbox"/> District: _____<br>State: <u>NC</u> |
| Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▶ _____  |

|  |             |   |
|--|-------------|---|
| Full Name of Payee <input type="checkbox"/> Memo Item<br><b>Break Something Inc.</b> |             |   |
| Mailing Address 1701 Rhode Island Ave NW<br>FI 5                                     |             |   |
| City<br>Washington   | State<br>DC | Zip Code<br>20036-3040  |
| Purpose of Expenditure<br>Digital Advertisements                                     |             | Category/Type <span style="border: 1px solid black; padding: 2px;"> </span> |

|   |  |  |
|---|--|--|
| Date of Public Distribution/Dissemination<br><span style="font-size: 24px; font-weight: bold;">M M / D D / Y Y Y Y Y Y</span><br>07 / 22 / 2020                                 |  |  |
| Amount<br><span style="font-size: 24px; font-weight: bold;"> </span> 426.47   |  |  |
| Transaction ID : <b>VTDG0AEHKK5</b><br>Date of Disbursement or Obligation<br><span style="font-size: 24px; font-weight: bold;">M M / D D / Y Y Y Y Y Y</span><br>07 / 22 / 2020 |  |  |

|   |  |
|---|--|
| Name of Federal Candidate:<br>Tillis, Thom, R., ,   | <input type="checkbox"/> Support<br><input checked="" type="checkbox"/> Oppose |
| Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;"> </span> 31454.15 |  |

|   |
|---|
| Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate<br><input type="checkbox"/> President <input type="checkbox"/> District: _____<br>State: <u>NC</u> |
| Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▶ _____  |

|   |   |
|---|---|
| <b>(a) SUBTOTAL</b> of Itemized Independent Expenditures ..... ▶  | <span style="border: 1px solid black; padding: 2px;"> </span> 1115.30 |
| <b>(b) SUBTOTAL</b> of Unitemized Independent Expenditures..... ▶ | <span style="border: 1px solid black; padding: 2px;"> </span>         |
| <b>(c) TOTAL</b> Independent Expenditures ..... ▶                 | <span style="border: 1px solid black; padding: 2px;"> </span>         |

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Shropshire, Adrienne, R., , *[Electronically Filed]*  
 Signature

Date M M / D D / Y Y Y Y Y Y  
 08 / 20 / 2020

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

|   |  |
|---|--|
| NAME OF COMMITTEE (In Full)<br><b>Black PAC</b> | <b>FEC IDENTIFICATION NUMBER ▼</b><br><b>C</b> C00609388 |
|---|--|

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

|   |   |
|---|---|
| Full Name of Payee <input type="checkbox"/> Memo Item<br><b>Break Something Inc.</b>  | Date of Public Distribution/Dissemination<br><input type="text"/> / <input type="text"/> / <input type="text"/>   |
| Mailing Address 1701 Rhode Island Ave NW<br>FI 5  | Amount<br><input type="text"/> 6500.00<br><b>Transaction ID : VTDG0AEHPP5</b><br>Date of Disbursement or Obligation<br><input type="text"/> / <input type="text"/> / <input type="text"/> |
| City Washington State DC Zip Code 20036-3040  |   |
| Purpose of Expenditure Digital Advertisements Category/Type <input type="text"/>  |   |
| Name of Federal Candidate: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose<br>Tillis, Thom, R., , | Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: _____ State: NC  |
| Calendar Year-To-Date Per Election for Office Sought <input type="text"/> 31454.15  | Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ▶ _____                                      |

|  |  |
|--|--|
| Full Name of Payee <input type="checkbox"/> Memo Item<br><b>Break Something Inc.</b>   | Date of Public Distribution/Dissemination<br><input type="text"/> / <input type="text"/> / <input type="text"/>  |
| Mailing Address 1701 Rhode Island Ave NW<br>FI 5   | Amount<br><input type="text"/> 703.19<br><b>Transaction ID : VTDG0AEHMS5</b><br>Date of Disbursement or Obligation<br><input type="text"/> / <input type="text"/> / <input type="text"/> |
| City Washington State DC Zip Code 20036-3040   |  |
| Purpose of Expenditure Digital Advertisements Category/Type <input type="text"/>   |  |
| Name of Federal Candidate: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose<br>Trump, Donald, J., , | Office Sought: <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate District: _____ State: _____  |
| Calendar Year-To-Date Per Election for Office Sought <input type="text"/> 897844.88  | Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ▶ _____                                     |

|   |                              |
|---|------------------------------|
| (a) <b>SUBTOTAL</b> of Itemized Independent Expenditures .....  | <input type="text"/> 7203.19 |
| (b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures..... | <input type="text"/>         |
| (c) <b>TOTAL</b> Independent Expenditures .....                 | <input type="text"/>         |

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

Shropshire, Adrienne, R., ,

[Electronically Filed]

Date

/  /

Signature

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

|   |  |
|---|--|
| NAME OF COMMITTEE (In Full)<br><b>Black PAC</b> | <b>FEC IDENTIFICATION NUMBER ▼</b><br><b>C</b> C00609388 |
|---|--|

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

|  |             |  |   |
|--|-------------|--|---|
| Full Name of Payee <input type="checkbox"/> Memo Item<br><b>Break Something Inc.</b> |             | Date of Public Distribution/Dissemination<br><input type="text"/> / <input type="text"/> / <input type="text"/>                                    |   |
| Mailing Address 1701 Rhode Island Ave NW<br>FI 5                                     |             | Amount<br><input type="text"/>   |   |
| City<br>Washington   | State<br>DC | Zip Code<br>20036-3040   | Transaction ID : <b>VTDG0AEHJP6</b>   |
| Purpose of Expenditure<br>Digital Advertisements                                     |             | Category/<br>Type <input type="text"/>   | Date of Disbursement or Obligation<br><input type="text"/> / <input type="text"/> / <input type="text"/>  |
| Name of Federal Candidate:<br>Tillis, Thom, R., ,                                    |             | <input type="checkbox"/> Support<br><input checked="" type="checkbox"/> Oppose   | Office Sought: <input type="checkbox"/> House District: _____<br><input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <b>NC</b> |
| Calendar Year-To-Date<br>Per Election for Office Sought <input type="text"/>         |             | Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▶ _____ |   |

|  |             |  |   |
|--|-------------|--|---|
| Full Name of Payee <input type="checkbox"/> Memo Item<br><b>Break Something Inc.</b> |             | Date of Public Distribution/Dissemination<br><input type="text"/> / <input type="text"/> / <input type="text"/>                                    |   |
| Mailing Address 1701 Rhode Island Ave NW<br>FI 5                                     |             | Amount<br><input type="text"/>   |   |
| City<br>Washington   | State<br>DC | Zip Code<br>20036-3040   | Transaction ID : <b>VTDG0AEHJH7</b>   |
| Purpose of Expenditure<br>Digital Advertisements                                     |             | Category/<br>Type <input type="text"/>   | Date of Disbursement or Obligation<br><input type="text"/> / <input type="text"/> / <input type="text"/>  |
| Name of Federal Candidate:<br>Trump, Donald, J., ,                                   |             | <input type="checkbox"/> Support<br><input checked="" type="checkbox"/> Oppose   | Office Sought: <input type="checkbox"/> House District: _____<br><input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____ |
| Calendar Year-To-Date<br>Per Election for Office Sought <input type="text"/>         |             | Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▶ _____ |   |

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

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*Shropshire, Adrienne, R., ,*

*[Electronically Filed]*

Date  /  /

Signature

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

|   |  |
|---|--|
| NAME OF COMMITTEE (In Full)<br><b>Black PAC</b> | <b>FEC IDENTIFICATION NUMBER ▼</b><br><div style="border: 1px solid black; padding: 2px;"> <span style="font-size: 1.5em; font-weight: bold; margin-right: 5px;">C</span> C00609388                 </div> |
|---|--|

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

|   |   |
|---|---|
| Full Name of Payee <input type="checkbox"/> Memo Item<br><b>Break Something Inc.</b>  | Date of Public Distribution/Dissemination<br><div style="border: 1px solid black; padding: 2px;"> <span style="font-size: 1.2em;">M M / D D / Y Y Y Y Y Y</span><br/>                     07 / 22 / 2020                 </div>   |
| Mailing Address 1701 Rhode Island Ave NW<br>FI 5  | Amount<br><div style="border: 1px solid black; padding: 2px; text-align: right;"> <span style="font-size: 1.2em;">M M / D D / Y Y Y Y Y Y</span><br/>                     426.46                 </div> Transaction ID : <b>VTDG0AEHKJ7</b><br>Date of Disbursement or Obligation<br><div style="border: 1px solid black; padding: 2px;"> <span style="font-size: 1.2em;">M M / D D / Y Y Y Y Y Y</span><br/>                     07 / 22 / 2020                 </div> |
| City Washington State DC Zip Code 20036-3040  |   |
| Purpose of Expenditure Digital Advertisements Category/Type <span style="border: 1px solid black; padding: 2px;"> </span>                     |   |
| Name of Federal Candidate: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose<br>Trump, Donald, J., ,                | Office Sought: <input type="checkbox"/> House District: _____<br><input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____   |
| Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px; margin-left: 20px;">897844.88</span> | Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2020<br><input type="checkbox"/> Other (specify) ▶ _____   |

|   |  |
|---|--|
| Full Name of Payee <input type="checkbox"/> Memo Item<br><b>Break Something Inc.</b>  | Date of Public Distribution/Dissemination<br><div style="border: 1px solid black; padding: 2px;"> <span style="font-size: 1.2em;">M M / D D / Y Y Y Y Y Y</span><br/>                     07 / 24 / 2020                 </div>  |
| Mailing Address 1701 Rhode Island Ave NW<br>FI 5  | Amount<br><div style="border: 1px solid black; padding: 2px; text-align: right;"> <span style="font-size: 1.2em;">M M / D D / Y Y Y Y Y Y</span><br/>                     6500.00                 </div> Transaction ID : <b>VTDG0AEHPN7</b><br>Date of Disbursement or Obligation<br><div style="border: 1px solid black; padding: 2px;"> <span style="font-size: 1.2em;">M M / D D / Y Y Y Y Y Y</span><br/>                     07 / 28 / 2020                 </div> |
| City Washington State DC Zip Code 20036-3040  |  |
| Purpose of Expenditure Digital Advertisements Category/Type <span style="border: 1px solid black; padding: 2px;"> </span>                     |  |
| Name of Federal Candidate: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose<br>Trump, Donald, J., ,                | Office Sought: <input type="checkbox"/> House District: _____<br><input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____  |
| Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px; margin-left: 20px;">897844.88</span> | Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2020<br><input type="checkbox"/> Other (specify) ▶ _____  |

|   |  |
|---|--|
| <b>(a) SUBTOTAL</b> of Itemized Independent Expenditures ..... ▶  | <div style="border: 1px solid black; padding: 2px; text-align: right;"> <span style="font-size: 1.2em;">M M / D D / Y Y Y Y Y Y</span><br/>                     6926.46                 </div> |
| <b>(b) SUBTOTAL</b> of Unitemized Independent Expenditures..... ▶ | <div style="border: 1px solid black; padding: 2px; text-align: right;"> <span style="font-size: 1.2em;">M M / D D / Y Y Y Y Y Y</span><br/>                     _____                 </div>   |
| <b>(c) TOTAL</b> Independent Expenditures ..... ▶                 | <div style="border: 1px solid black; padding: 2px; text-align: right;"> <span style="font-size: 1.2em;">M M / D D / Y Y Y Y Y Y</span><br/>                     _____                 </div>   |

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

*Shropshire, Adrienne, R.,*

**[Electronically Filed]**

Date M M / D D / Y Y Y Y Y Y  
 08 / 20 / 2020

Signature

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

|   |   |
|---|---|
| NAME OF COMMITTEE (In Full)<br><b>Black PAC</b> | <b>FEC IDENTIFICATION NUMBER ▼</b><br><div style="border: 1px solid black; padding: 2px;"> <span style="font-size: 24px; font-weight: bold; margin-right: 5px;">C</span> C00609388                 </div> |
|---|---|

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

|  |   |
|--|---|
| Full Name of Payee <input type="checkbox"/> Memo Item<br><b>Break Something Inc.</b>   | Date of Public Distribution/Dissemination<br><div style="border: 1px solid black; padding: 2px;"> <span style="font-size: 24px; font-weight: bold; margin-right: 5px;">M M / D D / Y Y Y Y Y Y</span> </div>  |
| Mailing Address 1701 Rhode Island Ave NW<br>FI 5   | Amount<br><div style="border: 1px solid black; padding: 2px;"> <span style="font-size: 24px; font-weight: bold; margin-right: 5px;">M M / D D / Y Y Y Y Y Y</span> </div>   |
| City Washington State DC Zip Code 20036-3040   | Transaction ID : <b>VTDG0AEHJN8</b><br>Date of Disbursement or Obligation<br><div style="border: 1px solid black; padding: 2px;"> <span style="font-size: 24px; font-weight: bold; margin-right: 5px;">M M / D D / Y Y Y Y Y Y</span> </div>  |
| Purpose of Expenditure Digital Advertisements Category/Type <span style="border: 1px solid black; padding: 2px;"> </span>    | Name of Federal Candidate: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose<br>Trump, Donald, J., , Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate District: _____ State: _____ |
| Name of Federal Candidate: Trump, Donald, J., , <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose  | Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ▶ _____  |
| Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;"> </span> 897844.88 | Date of Public Distribution/Dissemination<br><div style="border: 1px solid black; padding: 2px;"> <span style="font-size: 24px; font-weight: bold; margin-right: 5px;">M M / D D / Y Y Y Y Y Y</span> </div>  |

|   |   |
|---|---|
| Full Name of Payee <input type="checkbox"/> Memo Item<br><b>Break Something Inc.</b>  | Date of Public Distribution/Dissemination<br><div style="border: 1px solid black; padding: 2px;"> <span style="font-size: 24px; font-weight: bold; margin-right: 5px;">M M / D D / Y Y Y Y Y Y</span> </div>  |
| Mailing Address 1701 Rhode Island Ave NW<br>FI 5  | Amount<br><div style="border: 1px solid black; padding: 2px;"> <span style="font-size: 24px; font-weight: bold; margin-right: 5px;">M M / D D / Y Y Y Y Y Y</span> </div>   |
| City Washington State DC Zip Code 20036-3040  | Transaction ID : <b>VTDG0AEHMR8</b><br>Date of Disbursement or Obligation<br><div style="border: 1px solid black; padding: 2px;"> <span style="font-size: 24px; font-weight: bold; margin-right: 5px;">M M / D D / Y Y Y Y Y Y</span> </div>            |
| Purpose of Expenditure Digital Advertisements Category/Type <span style="border: 1px solid black; padding: 2px;"> </span>   | Name of Federal Candidate: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose<br>Tillis, Thom, R., , Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: _____ State: <u>NC</u> |
| Name of Federal Candidate: Tillis, Thom, R., , <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose  | Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ▶ _____  |
| Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;"> </span> 31454.15 | Date of Public Distribution/Dissemination<br><div style="border: 1px solid black; padding: 2px;"> <span style="font-size: 24px; font-weight: bold; margin-right: 5px;">M M / D D / Y Y Y Y Y Y</span> </div>  |

|   |   |
|---|---|
| <b>(a) SUBTOTAL</b> of Itemized Independent Expenditures ..... ▶  | <div style="border: 1px solid black; padding: 2px;"> <span style="font-size: 24px; font-weight: bold; margin-right: 5px;">M M / D D / Y Y Y Y Y Y</span> </div> |
| <b>(b) SUBTOTAL</b> of Unitemized Independent Expenditures..... ▶ | <div style="border: 1px solid black; padding: 2px;"> <span style="font-size: 24px; font-weight: bold; margin-right: 5px;">M M / D D / Y Y Y Y Y Y</span> </div> |
| <b>(c) TOTAL</b> Independent Expenditures ..... ▶                 | <div style="border: 1px solid black; padding: 2px;"> <span style="font-size: 24px; font-weight: bold; margin-right: 5px;">M M / D D / Y Y Y Y Y Y</span> </div> |

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

Signature Shropshire, Adrienne, R., , **[Electronically Filed]** Date M M / D D / Y Y Y Y Y Y 08 / 20 / 2020

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

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

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

Full Name of Payee: Burrell Communications Group, LLC
Mailing Address: 233 N Michigan Ave, Ste 2900, Chicago, IL 60601-5709
Purpose of Expenditure: Media Production - Estimate
Category/Type:
Name of Federal Candidate: Peters, Gary, , Support
Office Sought: Senate, State: MI
Disbursement For: Primary
Amount: 4737.00
Transaction ID: VTDG0AEHJ39

Full Name of Payee: Break Something Inc.
Mailing Address: 1701 Rhode Island Ave NW, FI 5, Washington, DC 20036-3040
Purpose of Expenditure: Digital Advertisements
Category/Type:
Name of Federal Candidate: Tillis, Thom, R., , Oppose
Office Sought: Senate, State: NC
Disbursement For: General
Amount: 692.79
Transaction ID: VTDG0AEHJG9

(a) SUBTOTAL of Itemized Independent Expenditures: 692.79
(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.

Shropshire, Adrienne, R.,

[Electronically Filed]

Date 08 / 20 / 2020

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

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

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

Full Name of Payee: Burrell Communications Group, LLC
Mailing Address: 233 N Michigan Ave, Ste 2900, Chicago, IL 60601-5709
Purpose of Expenditure: Media Production - Estimate
Amount: 4737.00
Transaction ID: VTDG0AEHKH9
Date of Disbursement or Obligation: 07/21/2020
Name of Federal Candidate: Trump, Donald, J., Oppose
Disbursement For: General 2020

Empty form fields for another expenditure item.

(a) SUBTOTAL of Itemized Independent Expenditures: 0.00
(b) SUBTOTAL of Unitemized Independent Expenditures:
(c) TOTAL Independent Expenditures: 1046456.89

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.

Shropshire, Adrienne, R.,

[Electronically Filed]

Date 08/20/2020

Signature