24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (S

Schedule E)					PAGE 1 OF 1 FOR SE OF FORM 24/48
IAME OF COMMITTEE (In Full)				FEC II	DENTIFICATION NUMBER ▼
LATINO VICTORY FUND				С	C00562777
check if 24-hour report x 48-hour report	New rep	port X Amends repo	ort filed or	09	08 2016
Full Name of Payee Ralston Lapp Media				ate of Publi	c Distribution/Dissemination
				09	06 2016
Mailing Address 1054 31st Street NW Suite 430			A	mount	
City	State	Zip Code			15612.77
Washington	DC	20007			ID: SE.5149 ursement or Obligation
Purpose of Expenditure Media - Non-contribution Account		Category/ Type		M 09	06 2016
Name of Federal Candidate		Support	Office S	ought:	House District:
DONALD J TRUMP		X Oppose	X Pi	esident	Senate State:
Calendar Year-To-Date		54015.77	Disburse	ement For:	Primary Seneral
Per Election for Office Sought	7 7	34013.77	2010	Other (sp	pecify) ▶
Full Name of Payee Targeted Platform Media LLC				ate of Publi	ic Distribution/Dissemination
Mailing Address				09	06 2016
Mailing Address 1291 Hollywood Avenue			A	mount	
City	State	Zip Code			38403.00
Annapolis	MD	21403		ansaction II	D: SE.5154 ursement or Obligation
Purpose of Expenditure Media - Non-contribution Account		Category/		M M M 08	/ DID / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
		Туре		لتنا	
Name of Federal Candidate DONALD J TRUMP		Support	Office S	ought:	House District:
BOWLES & THOMAS		x Oppose		resident	Senate State:
Calendar Year-To-Date Per Election for Office Sought		38403.00	Disburs 2016	ement For: Other (sp	Primary Seneral
	, ,			Other (sp	
(a) SUBTOTAL of Itemized Independent Expendit	tures				54015.77
			-		
(b) SUBTOTAL of Unitemized Independent Exper	nditures		" ▶ [1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
(c) TOTAL Independent Expenditures			[54015.77
				7	4
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.					
Sara Le Brusq	[FI]	uicallu Eiled	M = M	/ D D	/ Y Y Y Y
Signature	[Electro	nically Filed] Date	9 09	09	2016