

# 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

Hispanic Victory PAC

ADDRESS (number and street) 1717 Pennsylvania Ave NW

Check if different than previously reported. (ACC) Ste 1025

Washington DC 20006-3951

2. **FEC IDENTIFICATION NUMBER ▼** C C00614453 **CITY ▲** **STATE ▲** **ZIP CODE ▲**

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

4. **TYPE OF REPORT (Choose One)**

(a) Quarterly Reports:

April 15 Quarterly Report (Q1)

July 15 Quarterly Report (Q2)

October 15 Quarterly Report (Q3)

January 31 Year-End Report (YE)

July 31 Mid-Year Report (Non-election Year Only) (MY)

Termination Report (TER)

(b) Monthly Report Due On:

Feb 20 (M2)  May 20 (M5)  Aug 20 (M8)  Nov 20 (M11) (Non-Election Year Only)

Mar 20 (M3)  Jun 20 (M6)  Sep 20 (M9)  Dec 20 (M12) (Non-Election Year Only)

Apr 20 (M4)  Jul 20 (M7)  Oct 20 (M10)  Jan 31 (YE)

(c) 12-Day **PRE-Election** Report for the:

Primary (12P)  **General (12G)**  Runoff (12R)

Convention (12C)  Special (12S)

Election on 11 / 08 / 2016 in the State of  

(d) 30-Day **POST-Election** Report for the:

General (30G)  Runoff (30R)  Special (30S)

Election on   /   /   in the State of  

5. Covering Period 10 / 01 / 2016 through 10 / 19 / 2016

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.  
 Sanchez Canete, Jesus, D, ,  
 Type or Print Name of Treasurer

Signature of Treasurer Sanchez Canete, Jesus, D, , **[Electronically Filed]** Date 10 / 27 / 2016

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

**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 05/2016)

Write or Type Committee Name

Hispanic Victory PAC

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

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2016"/>	<input type="text" value="0.00"/>	<input type="text" value="0.00"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="4546.86"/>	
(c) Total Receipts (from Line 19) .....	<input type="text" value="0.00"/>	<input type="text" value="165560.90"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<input type="text" value="4546.86"/>	<input type="text" value="165560.90"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="20383.63"/>	<input type="text" value="130024.49"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="-15836.77"/>	<input type="text" value="35536.41"/>
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<input type="text" value="50430.23"/>	

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  
Hispanic Victory PAC

Report Covering the Period: From: MM / DD / YYYY 10 / 01 / 2016 To: MM / DD / YYYY 10 / 19 / 2016

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	0.00	29793.00
(ii) Unitemized .....	0.00	135767.90
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	0.00	165560.90
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) .....	0.00	165560.90
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received .....	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	0.00	0.00
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)).....▶	0.00	165560.90
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	0.00	165560.90

**DETAILED SUMMARY PAGE**  
of Disbursements

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share .....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures .....	0.00	22714.25
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	0.00	22714.25
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditures (use Schedule E) .....	20383.63	107225.24
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	85.00
(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	85.00
29. Other Disbursements (Including Non-Federal Donations).....	0.00	0.00
30. Federal Election Activity (52 U.S.C. § 30101(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b)) .....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	20383.63	130024.49
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	20383.63	130024.49

**DETAILED SUMMARY PAGE**  
of Disbursements

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Page 5

<b>III. Net Contributions/ Operating Expenditures</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Calendar Year-to-Date</b>
33. Total Contributions (other than loans) (from Line 11(d), page 3) .....	0.00	165560.90
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	85.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	0.00	165475.90
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	0.00	22714.25
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	0.00	22714.25

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

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

(Use separate schedule(s) for each numbered line)	PAGE 6 OF 17
	FOR LINE NUMBER: (check only one)
<input type="checkbox"/> 9	<input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)  
**Hispanic Victory PAC**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Campaign Funding Direct</b>			Nature of Debt (Purpose): Agency Fee - Consulting - Direct Mail
Mailing Address 1420 Spring Hill Road Suite 490			
City McLean	State VA	Zip Code 22102-3028	

Outstanding Balance Beginning This Period 5294.56	Transaction ID : D07C00787B14B4EC3853	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 5294.56

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Campaign Funding Direct</b>			Nature of Debt (Purpose): Agency Fee - Consulting - Direct Mail
Mailing Address 1420 Spring Hill Road Suite 490			
City McLean	State VA	Zip Code 22102-3028	

Outstanding Balance Beginning This Period 892.80	Transaction ID : DEC9C7CBB8D20424AA7C	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 892.80

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Campaign Funding Direct</b>			Nature of Debt (Purpose): Agency Fee - Consulting - Direct Mail
Mailing Address 1420 Spring Hill Road Suite 490			
City McLean	State VA	Zip Code 22102-3028	

Outstanding Balance Beginning This Period 1919.55	Transaction ID : D51B901FC6F164BB185D	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 1919.55

1) <b>SUBTOTALS</b> This Period This Page (optional)..... ▶	8106.91
2) <b>TOTALS</b> This Period (last page this line number only)..... ▶	
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only) ..... ▶	
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) ▶	

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

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

(Use separate schedule(s) for each numbered line)	PAGE 7 OF 17
	FOR LINE NUMBER: (check only one)
<input type="checkbox"/>	9
<input checked="" type="checkbox"/>	10

NAME OF COMMITTEE (In Full)  
**Hispanic Victory PAC**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Colortree Group, Inc.</b>			Nature of Debt (Purpose): Direct Mail - Printing
Mailing Address 8000 Villa Park Drive			
City Richmond	State VA	Zip Code 23228-6500	

Outstanding Balance Beginning This Period 2097.58		Transaction ID : D6EF3834AF69544ECB21	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 2097.58	

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Colortree Group, Inc.</b>			Nature of Debt (Purpose): Direct Mail - Printing
Mailing Address 8000 Villa Park Drive			
City Richmond	State VA	Zip Code 23228-6500	

Outstanding Balance Beginning This Period 3583.36		Transaction ID : DF5783318309F4A2FAE1	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 3583.36	

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Colortree Group, Inc.</b>			Nature of Debt (Purpose): Direct Mail - Printing
Mailing Address 8000 Villa Park Drive			
City Richmond	State VA	Zip Code 23228-6500	

Outstanding Balance Beginning This Period 3906.64		Transaction ID : DDD58848FD4FC46DA831	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 3906.64	

1) <b>SUBTOTALS</b> This Period This Page (optional)..... ▶	9587.58
2) <b>TOTALS</b> This Period (last page this line number only)..... ▶	
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only) ..... ▶	
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) ▶	

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

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

(Use separate schedule(s) for each numbered line)	PAGE 8 OF 17
	FOR LINE NUMBER: (check only one)
<input type="checkbox"/> 9	<input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)  
**Hispanic Victory PAC**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>CP Direct</b>			Nature of Debt (Purpose): Direct Mail - Printing
Mailing Address 4600A Boston Way			
City Lanham	State MD	Zip Code 20706-4858	

Outstanding Balance Beginning This Period <input type="text" value="4635.55"/>	Transaction ID : DF9BD0390A9AD4627AB5	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="4635.55"/>

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>CP Direct</b>			Nature of Debt (Purpose): Direct Mail - Printing
Mailing Address 4600A Boston Way			
City Lanham	State MD	Zip Code 20706-4858	

Outstanding Balance Beginning This Period <input type="text" value="3320.45"/>	Transaction ID : DD253A75479A44384986	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="3320.45"/>

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>EKG Data Center</b>			Nature of Debt (Purpose): Direct Mail - List Maintenance
Mailing Address 1420 Spring Hill Road Suite 490			
City Mc Lean	State VA	Zip Code 22102-3028	

Outstanding Balance Beginning This Period <input type="text" value="200.00"/>	Transaction ID : DBD1A6FE3933E4AE89F6	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="200.00"/>

1) <b>SUBTOTALS</b> This Period This Page (optional)..... ▶	<input type="text" value="8156.00"/>
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 9 OF 17
	FOR LINE NUMBER: (check only one)
	<input type="checkbox"/> 9
	<input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)  
**Hispanic Victory PAC**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>ECG Data Center</b>			Nature of Debt (Purpose): Direct Mail - List Maintenance
Mailing Address ' 1420 Spring Hill Road Suite 490			
City Mc Lean	State VA	Zip Code 22102-3028	

Outstanding Balance Beginning This Period <input type="text" value="50.00"/>	<b>Transaction ID : D269B77FF27B940FA847</b>	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="50.00"/>

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>ECG Data Center</b>			Nature of Debt (Purpose): Direct Mail - Postage
Mailing Address ' 1420 Spring Hill Road Suite 490			
City Mc Lean	State VA	Zip Code 22102-3028	

Outstanding Balance Beginning This Period <input type="text" value="1246.48"/>	<b>Transaction ID : D9FA2A1D0D89049C48F4</b>	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="1246.48"/>

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>ECG Data Center</b>			Nature of Debt (Purpose): Direct Mail - List Maintenance
Mailing Address ' 1420 Spring Hill Road Suite 490			
City Mc Lean	State VA	Zip Code 22102-3028	

Outstanding Balance Beginning This Period <input type="text" value="232.98"/>	<b>Transaction ID : DC335094718D14382B4E</b>	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="232.98"/>

1) <b>SUBTOTALS</b> This Period This Page (optional)..... ▶	<input type="text" value="1529.46"/>
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 10 OF 17
	FOR LINE NUMBER: (check only one)
	<input type="checkbox"/> 9
	<input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)  
**Hispanic Victory PAC**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>ECG Data Center</b>			Nature of Debt (Purpose): Direct Mail - List Maintenance
Mailing Address ' 1420 Spring Hill Road Suite 490			
City Mc Lean	State VA	Zip Code 22102-3028	

Outstanding Balance Beginning This Period <input type="text" value="100.00"/>	Transaction ID : <b>DA448E08C9F4044A89EE</b>	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="100.00"/>

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>ECG Data Center</b>			Nature of Debt (Purpose): Direct Mail - List Maintenance
Mailing Address ' 1420 Spring Hill Road Suite 490			
City Mc Lean	State VA	Zip Code 22102-3028	

Outstanding Balance Beginning This Period <input type="text" value="67.06"/>	Transaction ID : <b>D8975E61FAD5E427ABAA</b>	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="67.06"/>

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>ECG Data Center</b>			Nature of Debt (Purpose): Direct Mail - List Maintenance
Mailing Address ' 1420 Spring Hill Road Suite 490			
City Mc Lean	State VA	Zip Code 22102-3028	

Outstanding Balance Beginning This Period <input type="text" value="83.79"/>	Transaction ID : <b>D03A5F02EC0F7420AB5D</b>	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="83.79"/>

1) <b>SUBTOTALS</b> This Period This Page (optional)..... ▶	<input type="text" value="250.85"/>
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 11 OF 17
	FOR LINE NUMBER: (check only one)
	<input type="checkbox"/> 9
	<input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)  
**Hispanic Victory PAC**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>ECG Data Center</b>			Nature of Debt (Purpose): Direct Mail - Postage
Mailing Address ' 1420 Spring Hill Road Suite 490			
City Mc Lean	State VA	Zip Code 22102-3028	

Outstanding Balance Beginning This Period		Transaction ID : D61FD3E4650614457B65	
881.43			
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	
0.00	0.00	881.43	

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>MDI Imaging &amp; Mail</b>			Nature of Debt (Purpose): Direct Mail - Printing
Mailing Address 21955 Cascades Parkway			
City Dulles	State VA	Zip Code 20166-9211	

Outstanding Balance Beginning This Period		Transaction ID : D2865CA7FA0AE4F01B19	
3276.66			
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	
0.00	0.00	3276.66	

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>MDI Imaging &amp; Mail</b>			Nature of Debt (Purpose): Direct Mail - Printing
Mailing Address 21955 Cascades Parkway			
City Dulles	State VA	Zip Code 20166-9211	

Outstanding Balance Beginning This Period		Transaction ID : D7A678BFAFD4248429D2	
552.53			
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	
0.00	0.00	552.53	

1) <b>SUBTOTALS</b> This Period This Page (optional).....▶	4710.62
2) <b>TOTALS</b> This Period (last page this line number only).....▶	
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only) .....▶	
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only)▶	

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

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

(Use separate schedule(s) for each numbered line)	PAGE 12 OF 17
	FOR LINE NUMBER: (check only one)
<input type="checkbox"/> 9	<input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)  
**Hispanic Victory PAC**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Omega List Company</b>			Nature of Debt (Purpose): List Rental Expenses
Mailing Address ' 1420 Spring Hill Road Suite 490			
City Mc Lean	State VA	Zip Code 22102-3028	

Outstanding Balance Beginning This Period <input type="text" value="2669.56"/>	<b>Transaction ID : D7D55A09AF94A432985D</b>	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="2669.56"/>

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Omega List Company</b>			Nature of Debt (Purpose): List Rental Expenses
Mailing Address ' 1420 Spring Hill Road Suite 490			
City Mc Lean	State VA	Zip Code 22102-3028	

Outstanding Balance Beginning This Period <input type="text" value="958.82"/>	<b>Transaction ID : DF5ABC72ED21E4142BD7</b>	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="958.82"/>

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Omega List Company</b>			Nature of Debt (Purpose): List Rental Expenses
Mailing Address ' 1420 Spring Hill Road Suite 490			
City Mc Lean	State VA	Zip Code 22102-3028	

Outstanding Balance Beginning This Period <input type="text" value="5546.38"/>	<b>Transaction ID : DF209F2D266844C0FB7D</b>	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="5546.38"/>

1) <b>SUBTOTALS</b> This Period This Page (optional)..... ▶	<input type="text" value="9174.76"/>
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 13 OF 17
	FOR LINE NUMBER: (check only one)
	<input type="checkbox"/> 9
	<input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)  
**Hispanic Victory PAC**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Omega List Company</b>			Nature of Debt (Purpose): List Rental Expenses
Mailing Address ' 1420 Spring Hill Road Suite 490			
City Mc Lean	State VA	Zip Code 22102-3028	

Outstanding Balance Beginning This Period		Transaction ID : <b>D16414F05083E42FAA33</b>	
3616.65			
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	
0.00	0.00	3616.65	

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Omega List Company</b>			Nature of Debt (Purpose): List Rental Expenses
Mailing Address ' 1420 Spring Hill Road Suite 490			
City Mc Lean	State VA	Zip Code 22102-3028	

Outstanding Balance Beginning This Period		Transaction ID : <b>D46387B90F567437DBA4</b>	
915.74			
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	
0.00	0.00	915.74	

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Omega List Company</b>			Nature of Debt (Purpose): List Rental Expenses
Mailing Address ' 1420 Spring Hill Road Suite 490			
City Mc Lean	State VA	Zip Code 22102-3028	

Outstanding Balance Beginning This Period		Transaction ID : <b>D1F46567B01DF4E32807</b>	
3475.00			
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	
0.00	0.00	3475.00	

1) <b>SUBTOTALS</b> This Period This Page (optional)..... ▶	8007.39
2) <b>TOTALS</b> This Period (last page this line number only)..... ▶	
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only) ..... ▶	
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) ▶	

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

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

(Use separate schedule(s) for each numbered line)	PAGE 14 OF 17
	FOR LINE NUMBER: (check only one)
<input type="checkbox"/> 9	<input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)  
**Hispanic Victory PAC**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Washington Intelligence Bureau</b>			Nature of Debt (Purpose): Bookkeeping
Mailing Address 4128 Pepsi Place			
City Chantilly	State VA	Zip Code 20151-1501	

Outstanding Balance Beginning This Period		Transaction ID : D8E3B9F7FE94B4749902	
906.66			
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	
0.00	0.00	906.66	

B. 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		Outstanding Balance at Close of This Period	
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	

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		Outstanding Balance at Close of This Period	
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	

1) <b>SUBTOTALS</b> This Period This Page (optional)..... ▶	906.66
2) <b>TOTALS</b> This Period (last page this line number only)..... ▶	50430.23
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only) ..... ▶	0.00
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) ▶	50430.23

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

NAME OF COMMITTEE (In Full) <b>Hispanic Victory PAC</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px;"> <span style="font-size: 24px; font-weight: bold; margin-right: 5px;">C</span> C00614453                 </div>
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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 <b>Colortree Group, Inc.</b>	Date of Public Distribution/Dissemination <div style="border: 1px solid black; padding: 2px;"> <span style="font-size: 24px; font-weight: bold; margin-right: 5px;">M M</span> / <span style="font-size: 24px; font-weight: bold; margin-right: 5px;">D D</span> / <span style="font-size: 24px; font-weight: bold;">Y Y Y Y Y Y</span>                      10 / 03 / 2016                 </div>
Mailing Address 8000 Villa Park Drive	Amount <div style="border: 1px solid black; padding: 2px;"> <span style="font-size: 24px; font-weight: bold; margin-right: 5px;">M M</span> / <span style="font-size: 24px; font-weight: bold; margin-right: 5px;">D D</span> / <span style="font-size: 24px; font-weight: bold;">Y Y Y Y Y Y</span>                      5680.94                 </div>
City Richmond State VA Zip Code 23228-6500	<b>Transaction ID : EE4C4E2CAFCFA432EAB1</b> Date of Disbursement or Obligation <div style="border: 1px solid black; padding: 2px;"> <span style="font-size: 24px; font-weight: bold; margin-right: 5px;">M M</span> / <span style="font-size: 24px; font-weight: bold; margin-right: 5px;">D D</span> / <span style="font-size: 24px; font-weight: bold;">Y Y Y Y Y Y</span>                      10 / 05 / 2016                 </div>
Purpose of Expenditure Direct Mail - Printing Category/Type	Name of Federal Candidate: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Clinton, Hillary, , , Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate District: 00 State:
Calendar Year-To-Date Per Election for Office Sought <span style="float: right;">97595.24</span>	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶

Full Name of Payee <input type="checkbox"/> Memo Item <b>ECG Data Center</b>	Date of Public Distribution/Dissemination <div style="border: 1px solid black; padding: 2px;"> <span style="font-size: 24px; font-weight: bold; margin-right: 5px;">M M</span> / <span style="font-size: 24px; font-weight: bold; margin-right: 5px;">D D</span> / <span style="font-size: 24px; font-weight: bold;">Y Y Y Y Y Y</span>                      10 / 03 / 2016                 </div>
Mailing Address 1420 Spring Hill Road Suite 490	Amount <div style="border: 1px solid black; padding: 2px;"> <span style="font-size: 24px; font-weight: bold; margin-right: 5px;">M M</span> / <span style="font-size: 24px; font-weight: bold; margin-right: 5px;">D D</span> / <span style="font-size: 24px; font-weight: bold;">Y Y Y Y Y Y</span>                      1496.48                 </div>
City Mc Lean State VA Zip Code 22102-3028	<b>Transaction ID : E492ED0E170B5433E908</b> Date of Disbursement or Obligation <div style="border: 1px solid black; padding: 2px;"> <span style="font-size: 24px; font-weight: bold; margin-right: 5px;">M M</span> / <span style="font-size: 24px; font-weight: bold; margin-right: 5px;">D D</span> / <span style="font-size: 24px; font-weight: bold;">Y Y Y Y Y Y</span>                      10 / 05 / 2016                 </div>
Purpose of Expenditure Direct Mail - List Maintenance Category/Type	Name of Federal Candidate: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Clinton, Hillary, , , Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate District: 00 State:
Calendar Year-To-Date Per Election for Office Sought <span style="float: right;">97595.24</span>	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶

<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</span> / <span style="font-size: 24px; font-weight: bold; margin-right: 5px;">D D</span> / <span style="font-size: 24px; font-weight: bold;">Y Y Y Y Y Y</span>                      7177.42                 </div>
<b>(a) 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</span> / <span style="font-size: 24px; font-weight: bold; margin-right: 5px;">D D</span> / <span style="font-size: 24px; font-weight: bold;">Y Y Y Y Y Y</span> </div>
<b>(a) 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</span> / <span style="font-size: 24px; font-weight: bold; margin-right: 5px;">D D</span> / <span style="font-size: 24px; font-weight: bold;">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 Sanchez, Jesus, , , **[Electronically Filed]** Date M M / D D / Y Y Y Y Y Y  
10 / 27 / 2016

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full)
Hispanic Victory PAC
FEC IDENTIFICATION NUMBER
C C00614453

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

Full Name of Payee
Omega List Company
Mailing Address
1420 Spring Hill Road
Suite 490
City
Mc Lean
State
VA
Zip Code
22102-3028
Purpose of Expenditure
Direct Mail - List Rental Expenses
Category/Type
Date of Public Distribution/Dissemination
10 / 03 / 2016
Amount
2669.55
Transaction ID : E17ABF28A6ACB485F884
Date of Disbursement or Obligation
10 / 05 / 2016

Name of Federal Candidate:
Clinton, Hillary, ,
Support
Oppose
Office Sought:
President
Senate
District: 00
State:
Disbursement For:
Primary
General
Other (specify)

Full Name of Payee
Salem Radio Network
Mailing Address
6400 N Belt Line Rd
Suite 210
City
Irving
State
TX
Zip Code
75063-6066
Purpose of Expenditure
Radio Advertisements
Category/Type
Date of Public Distribution/Dissemination
10 / 14 / 2016
Amount
9630.00
Transaction ID : E62FE52B308A0452D80F
Date of Disbursement or Obligation
10 / 14 / 2016

Name of Federal Candidate:
Clinton, Hillary, ,
Support
Oppose
Office Sought:
President
Senate
District: 00
State:
Disbursement For:
Primary
General
Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures ..... 12299.55
(a) SUBTOTAL of Unitemized Independent Expenditures .....
(a) 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.

Sanchez, Jesus, ,

[Electronically Filed]

Date

10 / 27 / 2016

Signature



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

NAME OF COMMITTEE (In Full) <b>Hispanic Victory PAC</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <span style="font-size: 1.2em; font-weight: bold; border: 1px solid black;">C</span> C00614453             </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 <b>Washington Intelligence Bureau</b>	Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 03 / 2016
Mailing Address <b>4128 Pepsi Place</b>	Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">906.66</div>
City <b>Chantilly</b> State <b>VA</b> Zip Code <b>20151-1501</b>	
Purpose of Expenditure <b>Bookkeeping</b> Category/Type <span style="border: 1px solid black; padding: 2px;"> </span>	
Name of Federal Candidate: <input type="checkbox"/> Support <b>Clinton, Hillary, , ,</b> <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House    District: <u>00</u> <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;">97595.24</span>	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ _____

Full Name of Payee <input type="checkbox"/> Memo Item	Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span>
Mailing Address	Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;"> </div>
City    State    Zip Code	
Purpose of Expenditure    Category/Type <span style="border: 1px solid black; padding: 2px;"> </span>	
Name of Federal Candidate: <input type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House    District: _____ <input 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;"> </span>	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ _____

<b>(a) SUBTOTAL</b> of Itemized Independent Expenditures ..... ▶	<div style="border: 1px solid black; padding: 2px; display: inline-block;">906.66</div>
<b>(a) SUBTOTAL</b> of Unitemized Independent Expenditures ..... ▶	<div style="border: 1px solid black; padding: 2px; display: inline-block;"> </div>
<b>(a) TOTAL</b> Independent Expenditures ..... ▶	<div style="border: 1px solid black; padding: 2px; display: inline-block;">20383.63</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.

*Sanchez, Jesus, , ,*

**[Electronically Filed]**

Date

M M / D D / Y Y Y Y Y Y  
10 / 27 / 2016

Signature