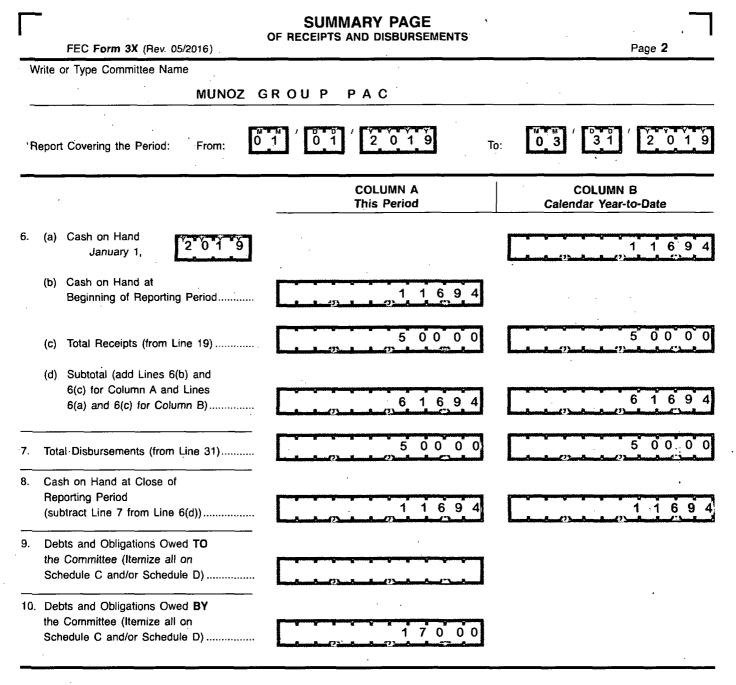
		· .		
FFC I	EPORT OF RE		RECEN FEC MAIL	CENTER
	Other Than An Authorized	f	2019 APR 22 Office Use C	AM 10: 47
1. NAME OF TY COMMITTEE (in full)		ample: If typing, type er the lines. /	12FE4M5]
MUNOZ GROUP PA			<u>.l. l. l. l. l. l. l</u>	
ADDRESS (number and street)	P ₁ O ₁ B ₁ O ₁ X ₁ 2 ₁ 1 ₁ 9 ₁ 1 ₁			- ;
Check if different	- - - <u> . </u>			
than previously	¹ Ο ₁ U ₁ N ₁ D ₁ R ₁ O ₁ C ₁ K ₁		T X 7 8 6 8	0_2191
2. FEC IDENTIFICATION NUM			STATE ZIF	
C 0 0 5 5 8 0 4 5	3. IS THIS	NEW (N) OR		
	REPORT	(N) OR	(A)	··
4. TYPE OF REPORT (Choose One)	(b) Monthly Report Feb 20 (M2)	May 20 (M5)	Aug 20 (M8)	Nov 20 (M11) (Non-Election Year Only)
(a) Quarterly Reports:	Due On: Mar 20 (M3)	Jun 20 (M6)	Sep 20 (M9)	Dec 20 (M12) (Non-Election Year Only)
April 15	Apr 20 (M4)	Jul 20 (M7)	Oct 20 (M10)	Jan 31 (YE)
July 15	(C) 12-Day	Primary (12P)	General (12G)	Runoff (12R)
Quarterly Report (Q2) October 15	Report for the:	Convention (12C)	Special (12S)	
January 31	Election on			the late of
Year-End Report (YE) July 31 Mid-Year	(d) 30-Day	handard harden h		
Report (Non-election Year Only) (MY)	POST-Election Report for the:	General (30G)	Runoff (30R)	Special (30S)
Termination Report (TER)	Election on	M*****		the Late of
5. Covering Period	' <mark>° 1</mark> ′ <mark>' 2 ' 0 ' 1 '</mark> 9	through	′ [°] [°] [°] [°] [°] [°] [°]	Ŷ9
I certify that I have examined this F		wledge and belief it is tru	e, correct and complete.	
Type or Print Name of Treasurer	ENRIQUE MUNOZ		· · · · · · · · · · · · · · · · · · ·	
Signature of Treasurer	mj Mu	D	bate 0 4 1 5	2019
NOTE: Submission of false, erroneous	s, or incomplete information may su	bject the person signing th	is Report to the penalties of	of 52 U.S.C. § 30109.
Office . Use Only				ORM 3X 05/2016

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

For further information contact:

Federal Election Commission 1050 First Street, N.E. Washington, DC 20463

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

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FEC Form 3X (Rev. 05/2016)	DETAILED SUMMARY PAGE of Receipts	Page 3
Write or Type Committee Name	······································	
	GROUP PAC	
Report Covering the Period: From:		
I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		r
(a) Individuals/Persons Other		
Than Political Committees		
(i) Itemized (use Schedule A)	······································	<u> </u>
(ii) Uniternized		5 0 0 0 0
(ii) Unitemized (iii) TOTAL (add		
Lines 11(a)(i) and (ii)	5 0 0 0 0	5 0 0 0
		<u> </u>
(b) Political Party Committees		
(c) Other Political Committees		
(such as PACs)	······································	
(d) Total Contributions (add Lines		
11(a)(iii), (b), and (c)) (Carry		
Totals to Line 33, page 5)	5 0 0 0 0	
12. Transfers From Affiliated/Other		
Party Committees	··· /	//
· ·		
13. All Loans Received	···	
14. Loan Repayments Received		
15. Offsets To Operating Expenditures	Land and the second	
(Refunds, Rebates, etc.)		
(Carry Totals to Line 37, page 5)	···	
16. Refunds of Contributions Made		
to Federal Candidates and Other		
Political Committees	··· [
17. Other Federal Receipts		
(Dividends, Interest, etc.)	<u> </u>	
(a) Non-Federal Account		
(from Schedule H3)		
([henner
(b) Levin Funds (from Schedule H5)		
(c) Total Transfers (add 18(a) and 18(b)).		· · · · · · · · · · · · · · · · · · ·
	···	Lunder Sund march and Sunder Sund and Sund Sund
		· · · ·
19. Total Receipts (add Lines 11(d),		
12, 13, 14, 15, 16, 17, and 18(c))▶	50000	50000
	[
20. Total Federal Receipts	المعارضين والمعارضين والمعارضين والمعارضين والمعارفين وال	$\left\{ \begin{array}{c} & & \\ & & \\ & & \\ & & \end{array} \right\} \left\{ \begin{array}{c} & & \\ & & \\ & & \end{array} \right\} \left\{ \begin{array}{c} & & \end{array} \\x \left\{ \begin{array}{c} & & \end{array} \\x \left\{ \end{array} \right\} \left\{ \begin{array}{c} & & \\ \\x \end{array} \left\{ \end{array} \right\} \left\{ \begin{array}{c} & & \\ \\x \end{array} \left\{ \begin{array}{c} & & \\ \\x \end{array} \left\{ \end{array} \right\} \left\{ \begin{array}{c} & & \\ \\x \end{array} \left\{ \end{array} \right\} \left\{ \begin{array}{c} & & \\ \\x \end{array} \left\{ \end{array} \right\} \left\{ \begin{array}{c} & & \\ \\x \end{array} \left\{ \end{array} \right\} \left\{ \begin{array}{c} & & \\ \\x \end{array} \left\{ \end{array} \end{array} \left\{ \begin{array}{c} & & \\ \\x \end{array} \left\{ \end{array} \right\} \left\{ \begin{array}{c} & & \\ \\x \end{array} \left\{ \end{array} \end{array} \left\{ \begin{array}{c} & & \\ \end{array} \left\{ \end{array} \end{array} \left\{ \end{array} \right\} $
(subtract Line 18(c) from Line 19)▶	50000	
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DETAILED SUMMARY PAGE

of Disbursements FEC Form 3X (Rev. 05/2016) COLUMN A **II. Disbursements Total This Period** 21. Operating Expenditures: (a) Allocated Federal/Non-Federal Activity (from Schedule H4) Federal Share (i) (ii) Non-Federal Share..... (b) Other Federal Operating Expenditures (c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) 22. Transfers to Affiliated/Other Party Committees 23. Contributions to Federal Candidates/Committees and Other Political Committees..... 24. Independent Expenditures (use Schedule E) Coordinated Party Expenditures (52 U.S.C. § 30116(d)) (use Schedule F)..... 25, 26. Loan Repayments Made Loans Made 27. Refunds of Contributions To: (a) Individuals/Persons Other 28. (a) Than Political Committees (b) Political Party Committees (c) Other Political Committees (such as PACs)..... (d) Total Contribution Refunds (add Lines 28(a), (b), and (c))...........

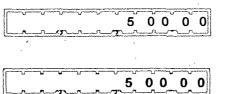
- 29. Other Disbursements (Including Non-Federal Donations).....
- 30. Federal Election Activity (52 U.S.C. § 30101(20))
 - (a) Allocated Federal Election Activity (from Schedule H6) (i) Federal Share
 - (ii) "Levin" Share..... (b) Federal Election Activity Paid Entirely With Federal Funds
 - (c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))
- 31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..
- 32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....

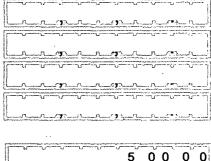
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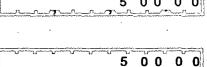
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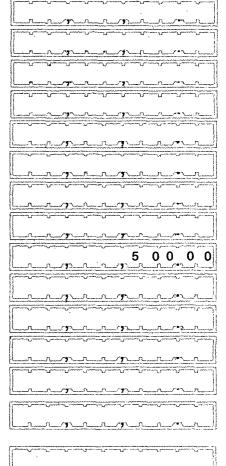
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Page 4

COLUMN B

Calendar Year-to-Date



DETAILED SUMMARY PAGE

of Disbursements

Page 5

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	III. Net Contributions/ Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33.	Total Contributions (other than loans) (from Line 11(d), page 3)	50000	50000
34.	Total Contribution Refunds (from Line 28(d))		
35.	Net Contributions (other than loans) (subtract Line 34 from Line 33)	50000	5 0 0 0 0
36.	Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))▶	0.00	0.00
37.	Offsets to Operating Expenditures		
38.	Net Operating Expenditures (subtract Line 37 from Line 36)	0.00	0.00

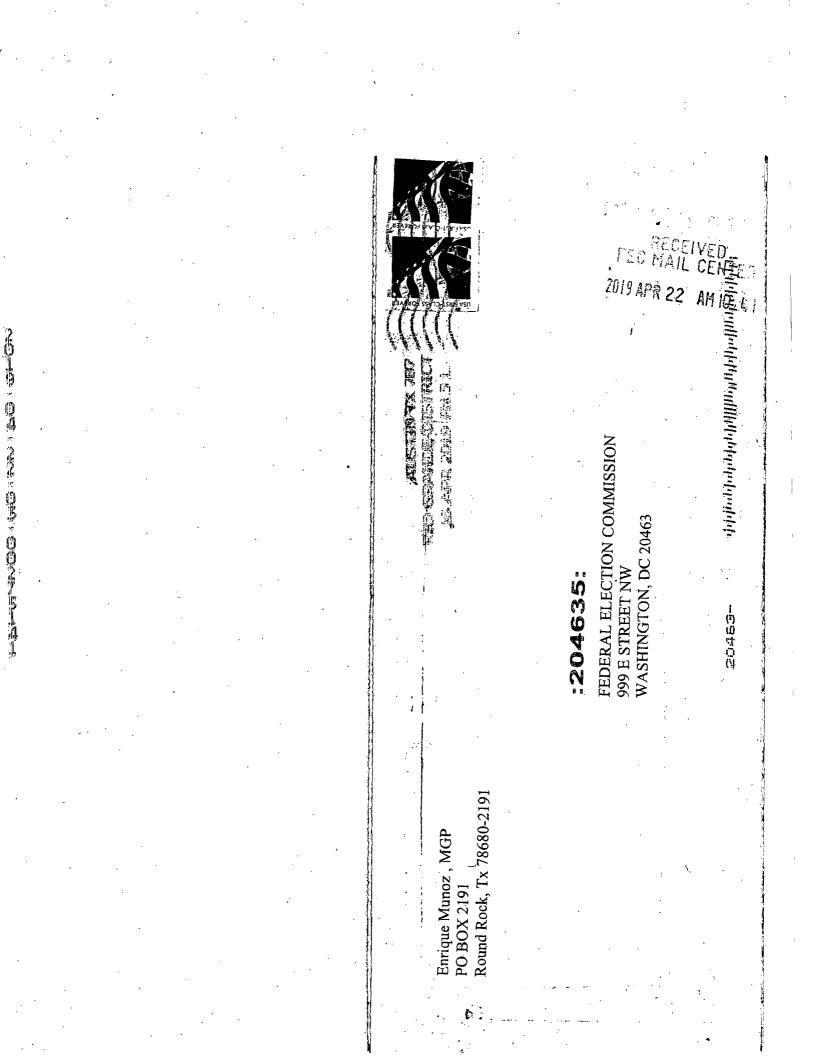
FEC Form 3X (Rev. 05/2016)

SCHEDULE C (FEC Form 3X)

LOANS		Use separate schedule(s) for each category of the Detailed Summary Page	PAGE 1 OF 1 FOR LINE 13 OF FORM 3X	
NAME OF COMMITTEE (In Full)			· · · · · · · · · · · · · · · · · · ·	
MUNOZ G	ROUP PAC			
LOAN SOURCE Full Name (Last, First, Mi ENRIQUE MUNOZ	ddle Initial)	Memo Item El	ection:	
		×	General	
Mailing Address PO BOX 2191			Other (specify) ▼	
City ROUND ROCK	State ZIP Co TX	ode	· · · · · · · · · · · · · · · · · · ·	
Original Amount of Loan	Cumulative Payment To	Date Balance	Outstanding at Close of This Period	
4 6 7 0 0 0		450000		
TERMS	Data Dua	linterest Data	Commente	
Date Incurred Date Due Interest Rate Secured: M 1 0 1 2 0 1 2 0 1 1 Yes X No				
List All Endorsers or Guarantors (if any) t	o Loan Source	· · · · · · · · · · · · · · · · · · ·		
1. Full Name (Last, First, Middle Initial)		Name of Employer		
Mailing Address		Occupation		
City State	ZIP Code	Amount Guaranteed Outstanding:	2 <u></u>	
2. Full Name (Last, First, Middle Initial)		Name of Employer		
Mailing Address		Occupation		
City State	ZIP Code	Amount Guaranteed Outstanding:	y	
3. Full Name (Last, First, Middle Initial)	······································	Name of Employer		
Mailing Address	<u> </u>	Occupation		
City State	ZIP Code	Amount Guaranteed Outstanding:	7 <u></u>	
4. Full Name (Last, First, Middle Initial)		Name of Employer		
Mailing Address	<u> </u>	Occupation		
City State	ZIP Code	Amount Guaranteed Outstanding:		
SUBTOTALS This Period This Page (optional)				
TOTALS This Period (last page in this line only)				
Carry outstanding balance only to LINE 3, Sch	edule D, for this line. If	no Schedule D, carry forward	to appropriate line of Summary.	

FEC Schedule C (Form 3X) Rev. 05/2016

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ENVELOPE REPLACI	•	ssion ICOMING DOCUMENTS o indicate how it was received.
Hand Delivered		Date of Receipt
USPS First Class Mail	Postmarked 4-16-19	Date of Receipt
USPS Registered/Certifie	d	Postmarked (R/C)
USPS Priority Mail	•	Postmarked
USPS Priority Mail Expres	SS	Postmarked
Postmark Illegible		
No Postmark		
Overnight Delivery Servic	e (Specify):	Shipping Date
	Ne	xt Business Day Delivery
Received from House Re	cords & Registration O	Date of Receipt
Received from Senate Pu	blic Records Office	Date of Receipt
Received from Electronic	Filing Office	Date of Receipt
Other (Specify):		Date of Receipt or Postmarked
af		C1-22-19
PREPARER (3/2015)		DATE PREPARED

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