

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
LATINO VICTORY FUND

ADDRESS (number and street) PO BOX 34104
Check if different than previously reported. (ACC) WASHINGTON DC 20005

2. FEC IDENTIFICATION NUMBER CITY STATE ZIP CODE
C C00562777 3. IS THIS REPORT NEW OR AMENDED (A) [X] (N)

4. TYPE OF REPORT (Choose One)
(a) Quarterly Reports: April 15, July 15, October 15, January 31, July 31 Mid-Year, Termination Report
(b) Monthly Report Due On: Feb 20, Mar 20, Apr 20, May 20, Jun 20, Jul 20, Aug 20, Sep 20, Oct 20, Nov 20, Dec 20, Jan 31
(c) 12-Day PRE-Election Report for the: Primary, General, Runoff, Convention, Special
(d) 30-Day POST-Election Report for the: General, Runoff, Special

5. Covering Period 08 / 01 / 2022 through 08 / 31 / 2022

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

Signature of Treasurer Gonzalez, Maria, R., [Electronically Filed] Date 09 / 20 / 2022

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

**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 05/2016)

Write or Type Committee Name

**LATINO VICTORY FUND**

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="2022"/>		665524.68
(b) Cash on Hand at Beginning of Reporting Period.....	425965.82	
(c) Total Receipts (from Line 19) .....	48394.07	460660.06
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	474359.89	1126184.74
7. Total Disbursements (from Line 31).....	27771.09	679595.94
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	446588.80	446588.80
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	

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

**For further information contact:**  
  
Federal Election Commission  
999 E Street, NW  
Washington, DC 20463  
  
Toll Free 800-424-9530  
Local 202-694-1100

**DETAILED SUMMARY PAGE**  
of Receipts

Write or Type Committee Name

**LATINO VICTORY FUND**

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

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	9140.00	63470.00
(ii) Unitemized .....	504.07	4297.56
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	9644.07	67767.56
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	2500.00	2500.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) .....	12144.07	70267.56
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.).....	36250.00	390392.50
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)).....▶	48394.07	460660.06
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	48394.07	460660.06

**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 .....	22.95	3573.72
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	22.95	3573.72
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	7500.00	63300.00
24. Independent Expenditures (use Schedule E) .....	20000.00	20000.00
25. Coordinated Party Expenditures (52 U.S.C. § 30116(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	25000.00
(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	25000.00
29. Other Disbursements (Including Non-Federal Donations).....	248.14	567722.22
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)) ..	27771.09	679595.94
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	27771.09	679595.94

**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) .....	12144.07	70267.56
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	25000.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	12144.07	45267.56
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	22.95	3573.72
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	22.95	3573.72

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 6 OF 16
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
	<input type="checkbox"/> 12	<input type="checkbox"/> 16
		<input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
**LATINO VICTORY FUND**

**A. Gates, Melinda, French, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 10230 NE Points Drive, Suite 200  
 City Kirkland State WA Zip Code 98033  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Occupation (for Individual)  
 Self-employed Philanthropist  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 08 / 02 / 2022  
**Transaction ID : SA11AI.6316**  
 Amount of Each Receipt this Period 5000.00  
 Memo Item Contribution

**B. Greenburger, Francis, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 55 Fifth Avenue 15th Floor  
 City New York State NY Zip Code 10003  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Occupation (for Individual)  
 Time Equities Inc. Chairman CEO  
 Receipt For: 2022  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 2500.00

Date of Receipt 08 / 14 / 2022  
**Transaction ID : SA11AI.6331**  
 Amount of Each Receipt this Period 2000.00  
 Memo Item Conduit: ActBlue

**C. Guerrero, Cynthia, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 9265 W. Russell Road Unit #A256  
 City Las Vegas State NV Zip Code 89148  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Occupation (for Individual)  
 CalStrat Partner  
 Receipt For: 2022  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 08 / 07 / 2022  
**Transaction ID : SA11AI.6328**  
 Amount of Each Receipt this Period 1000.00  
 Memo Item Conduit: ActBlue

<b>SUBTOTAL</b> of Receipts This Page (optional).....	8000.00
<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 16
	<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)  
**LATINO VICTORY FUND**

**A. Lafer, Jill, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1060 Fifth Avenue  
 City NY State NY Zip Code 10128  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Self Occupation (for Individual) Not Employed  
 Receipt For: 2022  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 1000.00

Date of Receipt  
 08 / 28 / 2022  
**Transaction ID : SA11AI.6348**  
 Amount of Each Receipt this Period  
 1000.00  
 Memo Item  
 Conduit: ActBlue

**B. Levine, Becky, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO Box 33171  
 City Los Gatos State CA Zip Code 95031  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Planned Parenthood Mar Monte Occupation (for Individual) Grants Manager  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 320.00

Date of Receipt  
 08 / 07 / 2022  
**Transaction ID : SA11AI.6362**  
 Amount of Each Receipt this Period  
 40.00  
 Memo Item  
 Conduit: ActBlue

**C. Solis Doyle, Patti, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 3719 Morrison Street  
 City Washington State DC Zip Code 20015  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) The Brunswick Group Occupation (for Individual) Partner  
 Receipt For: 2022  
 Primary  General  
 Other (specify)  
 Aggregate Year-to-Date ▼  
 800.00

Date of Receipt  
 08 / 21 / 2022  
**Transaction ID : SA11AI.6334**  
 Amount of Each Receipt this Period  
 100.00  
 Memo Item  
 Conduit: ActBlue

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1140.00
<b>TOTAL</b> This Period (last page this line number only).....	9140.00

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

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NAME OF COMMITTEE (In Full)  
**LATINO VICTORY FUND**

**A.** Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**PLANNED PARENTHOOD ACTION FUND INC**

Mailing Address 123 WILLIAM ST 10TH FLOOR

City NEW YORK	State NY	Zip Code 10038
------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C70004148

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2500.00

Date of Receipt  

M M	/	D D	/	Y Y Y Y
08		31		2022

**Transaction ID : SA11C.6359**

Amount of Each Receipt this Period  
2500.00

Memo Item Contribution

**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
-----	---	-----	---	---------

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
-----	---	-----	---	---------

Amount of Each Receipt this Period

Memo Item

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



**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 9 OF 16
<input 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 checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**LATINO VICTORY FUND**

**A. Greenburger, Francis, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 55 Fifth Avenue 15th Floor  
 City New York State NY Zip Code 10003  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Time Equities Inc. Occupation (for Individual) Chairman CEO  
 Receipt For: 2022  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 2500.00

Date of Receipt  
 08 / 14 / 2022  
**Transaction ID : SA17.6384**  
 Amount of Each Receipt this Period  
 0.00  
 Memo Item  
 Conduit: ActBlue, Non-contribution Account

**B. Hernandez, Anthony, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 900 Biscayne Blvd Apt 5709  
 City Biscayne State FL Zip Code 33132  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Amazon Occupation (for Individual) Product MAnager  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 250.00

Date of Receipt  
 08 / 07 / 2022  
**Transaction ID : SA17.6380**  
 Amount of Each Receipt this Period  
 250.00  
 Memo Item  
 Conduit: ActBlue, Non-contribution Account

**C. Lafer, Jill, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1060 Fifth Avenue  
 City NY State NY Zip Code 10128  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Self Occupation (for Individual) Not Employed  
 Receipt For: 2022  
 Primary  General  
 Other (specify)  
 Aggregate Year-to-Date ▼  
 1000.00

Date of Receipt  
 08 / 28 / 2022  
**Transaction ID : SA17.6401**  
 Amount of Each Receipt this Period  
 0.00  
 Memo Item  
 Conduit: ActBlue, Non-contribution Account

<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 10 OF 16
<input 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 checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**LATINO VICTORY FUND**

**A. MOLINA, JOSE, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 7007 NW 77th ave  
 City Miami State FL Zip Code 33166  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) SBS Occupation (for Individual) CFO  
 Receipt For: 2022  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 20000.00

Date of Receipt  
 08 / 07 / 2022  
**Transaction ID : SA17.6378**  
 Amount of Each Receipt this Period  
 20000.00  
 Memo Item  
 Conduit: ActBlue, Non-contribution Account

**B. Montoya, Regina, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 5230 Lobello Drive  
 City Dallas State TX Zip Code 75229  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Self-employed Occupation (for Individual) Attorney  
 Receipt For: 2022  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 20000.00

Date of Receipt  
 08 / 07 / 2022  
**Transaction ID : SA17.6379**  
 Amount of Each Receipt this Period  
 10000.00  
 Memo Item  
 Conduit: ActBlue, Non-contribution Account

**C. Mujica, Hector, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1423 Van Buren St  
 City Hollywood State FL Zip Code 33020  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Google Occupation (for Individual) Program Manager  
 Receipt For: 2022  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 1000.00

Date of Receipt  
 08 / 07 / 2022  
**Transaction ID : SA17.6376**  
 Amount of Each Receipt this Period  
 1000.00  
 Memo Item  
 Conduit: ActBlue, Non-contribution Account

<b>SUBTOTAL</b> of Receipts This Page (optional).....	31000.00
<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 16
<input 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 checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**LATINO VICTORY FUND**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>A. Solis Doyle, Patti, , ,</b>			Date of Receipt MM / DD / YYYY 08 / 21 / 2022 <b>Transaction ID : SA17.6387</b>
Mailing Address 3719 Morrison Street			Amount of Each Receipt this Period 0.00
City Washington	State DC	Zip Code 20015	<input type="checkbox"/> Memo Item Conduit: ActBlue, Non-contribution Account
FEC ID number of contributing federal political committee. C		Aggregate Year-to-Date 800.00	
Name of Employer (for Individual) The Brunswick Group		Occupation (for Individual) Partner	
Receipt For: 2022 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>B. ULLICO Management Company</b>			Date of Receipt MM / DD / YYYY 08 / 02 / 2022 <b>Transaction ID : SA17.6315</b>
Mailing Address 8403 Colesville Road			Amount of Each Receipt this Period 5000.00
City Silver Spring	State MD	Zip Code 20910	<input type="checkbox"/> Memo Item Non-contribution Account
FEC ID number of contributing federal political committee. C		Aggregate Year-to-Date 25000.00	
Name of Employer (for Individual)		Occupation (for Individual)	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

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

<b>SUBTOTAL</b> of Receipts This Page (optional).....	5000.00
<b>TOTAL</b> This Period (last page this line number only).....	36250.00

**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)  
**LATINO VICTORY FUND**

**A. Paya Inc.**

Full Name (Last, First, Middle Initial)

Mailing Address 12120 Sunset Hills Road #500

City Reston State VA Zip Code 20190

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: MM / DD / YYYY  
08 / 01 / 2022

FEC Identification Number: C

Transaction ID : SB21B.6364

Amount of Each Disbursement this Period: 22.95

Memo Item

**B.**

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: MM / DD / YYYY

FEC Identification Number: C

Amount of Each Disbursement this Period

Memo Item

**C.**

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: MM / DD / YYYY

FEC Identification Number: C

Amount of Each Disbursement this Period

Memo Item

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	22.95
<b>TOTAL</b> This Period (last page this line number only).....▶	22.95

**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 type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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

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)  
**LATINO VICTORY FUND**

Full Name (Last, First, Middle Initial) <b>A. CARLINA FOR NEW YORK</b>		Date of Disbursement MM / DD / YYYY 08 / 19 / 2022
Mailing Address 245 E 25TH ST 18C		FEC Identification Number C 00815795 <b>Transaction ID : SB23.6374</b>
City NEW YORK	State NY	Zip Code 10010
Purpose of Disbursement Contribution		Amount of Each Disbursement this Period 5000.00
Candidate Name <b>RIVERA, CARLINA, , ,</b>		Category/Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: NY	District: 10	

Full Name (Last, First, Middle Initial) <b>B. MAXWELL ALEJANDRO FROST FOR CONGRESS</b>		Date of Disbursement MM / DD / YYYY 08 / 19 / 2022
Mailing Address PO BOX 772671		FEC Identification Number C 00786822 <b>Transaction ID : SB23.6371</b>
City ORLANDO	State FL	Zip Code 32877
Purpose of Disbursement Contribution		Amount of Each Disbursement this Period 2500.00
Candidate Name <b>FROST, MAXWELL ALEJANDRO, , ,</b>		Category/Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: FL	District: 10	

Full Name (Last, First, Middle Initial) <b>C.</b>		Date of Disbursement MM / DD / YYYY
Mailing Address		FEC Identification Number C
City	State	Zip Code
Purpose of Disbursement		Amount of Each Disbursement this Period
Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State:	District:	

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

7500.00

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

7500.00

**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 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**LATINO VICTORY FUND**

Full Name (Last, First, Middle Initial) <b>A. ActBlue Technical Services</b>		Date of Disbursement MM / DD / YYYY 08 / 07 / 2022	
Mailing Address 366 Summer Street		FEC Identification Number C [ ] <b>Transaction ID : SB29.6365</b>	
City Somerville	State MA	Zip Code 02144	Amount of Each Disbursement this Period [ ] 44.62
Purpose of Disbursement Credit Card Processing Fees		Category/ Type [ ]	Memo Item <input type="checkbox"/>
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: [ ]	District: [ ]		

Full Name (Last, First, Middle Initial) <b>B. ActBlue Technical Services</b>		Date of Disbursement MM / DD / YYYY 08 / 14 / 2022	
Mailing Address 366 Summer Street		FEC Identification Number C [ ] <b>Transaction ID : SB29.6366</b>	
City Somerville	State MA	Zip Code 02144	Amount of Each Disbursement this Period [ ] 80.59
Purpose of Disbursement Credit Card Processing Fees		Category/ Type [ ]	Memo Item <input type="checkbox"/>
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: [ ]	District: [ ]		

Full Name (Last, First, Middle Initial) <b>C. ActBlue Technical Services</b>		Date of Disbursement MM / DD / YYYY 08 / 21 / 2022	
Mailing Address 366 Summer Street		FEC Identification Number C [ ] <b>Transaction ID : SB29.6367</b>	
City Somerville	State MA	Zip Code 02144	Amount of Each Disbursement this Period [ ] 9.23
Purpose of Disbursement Credit Card Processing Fees		Category/ Type [ ]	Memo Item <input type="checkbox"/>
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: [ ]	District: [ ]		

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

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

[ ] 134.44
[ ]

**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 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**LATINO VICTORY FUND**

**A. ActBlue Technical Services**

Full Name (Last, First, Middle Initial)

Mailing Address 366 Summer Street

City Somerville State MA Zip Code 02144

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: 08 / 28 / 2022

FEC Identification Number: C

Transaction ID : SB29.6368

Amount of Each Disbursement this Period: 48.70

Memo Item

**B. Capital One N.A.**

Full Name (Last, First, Middle Initial)

Mailing Address 1200 F Street NW

City Washington State DC Zip Code 20004

Purpose of Disbursement  
Bank Fees, Non-contribution Account

Candidate Name

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

State: District:

Date of Disbursement: 08 / 19 / 2022

FEC Identification Number: C

Transaction ID : SB29.6369

Amount of Each Disbursement this Period: 50.00

Memo Item

**C. Capital One N.A.**

Full Name (Last, First, Middle Initial)

Mailing Address 1200 F Street NW

City Washington State DC Zip Code 20004

Purpose of Disbursement  
Bank Fees, Non-contribution Account

Candidate Name

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

State: District:

Date of Disbursement: 08 / 30 / 2022

FEC Identification Number: C

Transaction ID : SB29.6370

Amount of Each Disbursement this Period: 15.00

Memo Item

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	113.70
<b>TOTAL</b> This Period (last page this line number only).....▶	248.14

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full)
LATINO VICTORY FUND
FEC IDENTIFICATION NUMBER
C C00562777

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

Full Name of Payee
Vilar Strategy Group LLC
Mailing Address
10524 Moss Park Road Ste 204-625
City
Orlando State
FL Zip Code
32832
Purpose of Expenditure
Radio Advertising
Category/Type
Amount
20000.00
Transaction ID : SE.6311
Date of Disbursement or Obligation
08 / 19 / 2022

Name of Federal Candidate:
FROST, MAXWELL ALEJANDRO, ,
Support Oppose
Office Sought:
House Senate State: FL
District: 10
Disbursement For:
Primary General
Other (specify)

Full Name of Payee
Mailing Address
City
State
Zip Code
Purpose of Expenditure
Category/Type
Date of Public Distribution/Dissemination
Amount
Date of Disbursement or Obligation

Name of Federal Candidate:
Support Oppose
Office Sought:
House Senate State:
District:
Disbursement For:
Primary General
Other (specify)

Table with 2 columns: Description and Amount.
(a) SUBTOTAL of Itemized Independent Expenditures 20000.00
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures 20000.00

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.

Gonzalez, Maria, R.,

[Electronically Filed]

Date 09 / 20 / 2022

Signature