## 24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule F)

Schedule E)	FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼
LATINO VICTORY FUND	
	C C00562777
Check if 24-hour report 48-hour report New report Amends report filed	i on Mam / Dad / Yayayay
Full Name of Payee	Date of Public Distribution/Dissemination
AKPD Message & Media LLC	11 01 2016
Mailing Address 730 N. Franklin Street Suite 404	Amount
City State Zip Code	37000.00
Chicago IL 60654	Transaction ID : SE.5434  Date of Disbursement or Obligation
Purpose of Expenditure Media - Non-contribution Account  Category/ Type	11 01 2016
Name of Federal Candidate Support Office	e Sought: X House District: 07
WALKINSHAW, BRADY PINERO, , , Oppose	President Senate State: WA
Calendar Year-To-Date Per Election for Office Sought  Disbut 2016	ursement For: Primary   General  Other (specify) ▶
Full Name of Payee	Date of Public Distribution/Dissemination
Targeted Platform Media LLC	11 01 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 1291 Hollywood Avenue	11 01 2010
	Amount
City State Zip Code	71956.75
Annapolis MD 21403	Transaction ID : SE.5432 Date of Disbursement or Obligation
Purpose of Expenditure  Category/	M M / D D / Y Y Y Y
Media - Non-contribution Account  Type	11 01 2016
Name of Federal Candidate Support Office	e Sought: House District:
TRUMP, DONALD J, , ,	President Senate State:
Calendar Year-To-Date Disbu	ursement For: Primary X General
Per Election for Office Sought 559407.58	Other (specify)
(a) SUBTOTAL of Itemized Independent Expenditures	108956.75
	7 7 7
(b) SUBTOTAL of Unitemized Independent Expenditures	7 7
(c) TOTAL Independent Expenditures	108956.75
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.	
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Signature	