

# 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) **700 14TH STREET NW, 2ND FLOOR**  
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 (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  /  /  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   /   /    through   /   /

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

Signature of Treasurer **Saenz, Adrian, , ,** [Electronically Filed] Date   /   /

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)

Page 2

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="2020"/>	<input type="text" value="53529.84"/>	<input type="text" value="53529.84"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="44774.00"/>	
(c) Total Receipts (from Line 19) .....	<input type="text" value="152093.00"/>	<input type="text" value="279978.00"/>
(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="196867.00"/>	<input type="text" value="333507.84"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="24645.12"/>	<input type="text" value="161285.96"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="172221.88"/>	<input type="text" value="172221.88"/>
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="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).....	5000.00	5000.00
(ii) Unitemized .....	593.00	1478.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	5593.00	6478.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	7500.00	7500.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) .....	13093.00	13978.00
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.).....	139000.00	266000.00
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)).....▶	152093.00	279978.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	152093.00	279978.00

**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 .....	26.57	15152.91
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	26.57	15152.91
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	12500.00	26900.00
24. Independent Expenditures (use Schedule E) .....	0.00	25000.00
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	0.00
(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	0.00
29. Other Disbursements (Including Non-Federal Donations).....	12118.55	94233.05
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)) ..	24645.12	161285.96
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	24645.12	161285.96

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 05/2016)

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) .....	13093.00	13978.00
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	13093.00	13978.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	26.57	15152.91
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	26.57	15152.91

**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 17  
(check only one)

<input checked="" 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 type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<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.** Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Bonderman, David, , ,

Mailing Address 301 Commerce Street Ste 3150

City Fort Worth	State TX	Zip Code 76102
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) TPG Capital	Occupation (for Individual) Chairman
--	---

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	04	/	2020

**Transaction ID : SA11AI.5631**

Amount of Each Receipt this Period  
5000.00

Memo Item

**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 M	/	D D D	/	Y Y 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
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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 M	/	D D D	/	Y Y Y Y Y Y
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Amount of Each Receipt this Period

Memo Item

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

**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 7 OF 17
<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. ACTBLUE**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Mailing Address P.O. BOX 441146

City SOMERVILLE	State MA	Zip Code 02144
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FEC ID number of contributing federal political committee. **C** C00401224

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
03		31		2020

**Transaction ID : SA11C.5627**

Amount of Each Receipt this Period  

583.00
--------

Memo Item  
Total Received Through Conduit This Reporting Period

**B. EDUCATE AND INNOVATE PAC**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Mailing Address 918 PENNSYLVANIA AVE SE

City WASHINGTON	State DC	Zip Code 20003
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FEC ID number of contributing federal political committee. **C** C00564187

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
03		04		2020

**Transaction ID : SA11C.5548**

Amount of Each Receipt this Period  

5000.00
---------

Memo Item

**C. TREASURE STATE PAC**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Mailing Address 3242 CUMMINS WAY

City MISSOULA	State MT	Zip Code 59802
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FEC ID number of contributing federal political committee. **C** C00433680

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

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
03		04		2020

**Transaction ID : SA11C.5546**

Amount of Each Receipt this Period  

2500.00
---------

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	7500.00
<b>TOTAL</b> This Period (last page this line number only).....▶	7500.00

**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 17
<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. ACTBLUE**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address P.O. BOX 441146

City SOMERVILLE	State MA	Zip Code 02144
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00401224

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
03		15		2020

**Transaction ID : SA17.5628**

Amount of Each Receipt this Period  

48000.00
----------

Memo Item  
 Total Received Through Conduit This Reporting Period, Non-contribution Account

**B. Azteca International Corporation (Azteca America)**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3900 W. Alameda Avenue Ste 1200

City Burbank	State CA	Zip Code 91505
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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 M	/	D D D	/	Y Y Y Y Y Y
03		13		2020

**Transaction ID : SA17.5634**

Amount of Each Receipt this Period  

30000.00
----------

Memo Item  
 Non-contribution Account

**C. Balance Public Relations**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1401 North Broadway Blvd.

City Los Angeles	State CA	Zip Code 90012
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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 M	/	D D D	/	Y Y Y Y Y Y
03		10		2020

**Transaction ID : SA17.5565**

Amount of Each Receipt this Period  

6000.00
---------

Memo Item  
 Non-contribution Account

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	36000.00
<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 9 OF 17
<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. Bonderman, David, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 301 Commerce Street Ste 3150  
 City Fort Worth State TX Zip Code 76102  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) TPG Capital Occupation (for Individual) Chairman  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 10000.00

Date of Receipt 03 / 04 / 2020  
**Transaction ID : SA17.5641**  
 Amount of Each Receipt this Period 5000.00  
 Memo Item  
 Non-contribution Account

**B. Dake, Glen, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1843 W. Silver Lake Drive  
 City Los Angeles State CA Zip Code 90026  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GDML Occupation (for Individual) Landscape Architect  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 03 / 15 / 2020  
**Transaction ID : SA17.5574**  
 Amount of Each Receipt this Period 1000.00  
 Memo Item  
 Conduit: ActBlue, Non-contribution Account

**C. Dominguez, Dorene, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 4540 Duckhorn Drive Suite 100  
 City Sacramento State CA Zip Code 95834  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) VANIR Occupation (for Individual) CEO  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 6000.00

Date of Receipt 03 / 08 / 2020  
**Transaction ID : SA17.5572**  
 Amount of Each Receipt this Period 6000.00  
 Memo Item  
 Conduit: ActBlue, Non-contribution Account

<b>SUBTOTAL</b> of Receipts This Page (optional).....	12000.00
<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 17
<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. Kaufman, Loretta, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 360 Hamilton AVenue Suite 100  
 City White Plains State NY Zip Code 10601  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Self-employed Occupation (for Individual) Volunteer  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 15000.00

Date of Receipt 03 / 08 / 2020  
**Transaction ID : SA17.5567**  
 Amount of Each Receipt this Period 15000.00  
 Memo Item  
 Conduit: ActBlue, Non-contribution Account

**B. Kaufman, Victor, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 360 Hamilton Avenue, Suite 100  
 City White Plains State NY Zip Code 10601  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) IAC Occupation (for Individual) Vice Chairman  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 15000.00

Date of Receipt 03 / 08 / 2020  
**Transaction ID : SA17.5569**  
 Amount of Each Receipt this Period 15000.00  
 Memo Item  
 Conduit: ActBlue, Non-contribution Account

**C. 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:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 03 / 15 / 2020  
**Transaction ID : SA17.5576**  
 Amount of Each Receipt this Period 5000.00  
 Memo Item  
 Conduit: ActBlue, Non-contribution Account

<b>SUBTOTAL</b> of Receipts This Page (optional).....	35000.00
<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 17
<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. Onward Together</b>		Date of Receipt
Mailing Address 120 W. 45th Street Suite 2700		<input type="text" value="03"/> / <input type="text" value="25"/> / <input type="text" value="2020"/>
City New York	State NY	Zip Code 10036
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		<b>Transaction ID : SA17.5636</b>
Name of Employer (for Individual)		Amount of Each Receipt this Period <input type="text" value="50000.00"/>
Occupation (for Individual)		<input type="checkbox"/> Memo Item Non-contribution Account
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="50000.00"/>	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>B. Ramirez, Oscar, , ,</b>		Date of Receipt
Mailing Address 306 3rd Street SE		<input type="text" value="03"/> / <input type="text" value="08"/> / <input type="text" value="2020"/>
City Washington	State DC	Zip Code 20003
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		<b>Transaction ID : SA17.5571</b>
Name of Employer (for Individual) Fulcrum Public Affairs		Amount of Each Receipt this Period <input type="text" value="6000.00"/>
Occupation (for Individual) Government Relations		<input type="checkbox"/> Memo Item Conduit: ActBlue, Non-contribution Account
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="6000.00"/>	

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

<b>SUBTOTAL</b> of Receipts This Page (optional).....	<input type="text" value="56000.00"/>
<b>TOTAL</b> This Period (last page this line number only).....	<input type="text" value="139000.00"/>

**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**

Full Name (Last, First, Middle Initial) <b>A. ActBlue Technical Services</b>		Date of Disbursement MM / DD / YYYY 03 / 08 / 2020	
Mailing Address 366 Summer Street		FEC Identification Number C [ ] <b>Transaction ID : SB21B.5580</b> Amount of Each Disbursement this Period [ ] 3.97	
City Somerville	State MA	Zip Code 02144	Category/ Type [ ]
Purpose of Disbursement Credit Card Processing Fees		Candidate Name	
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 03 / 15 / 2020	
Mailing Address 366 Summer Street		FEC Identification Number C [ ] <b>Transaction ID : SB21B.5581</b> Amount of Each Disbursement this Period [ ] 11.00	
City Somerville	State MA	Zip Code 02144	Category/ Type [ ]
Purpose of Disbursement Credit Card Processing Fees		Candidate Name	
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 03 / 22 / 2020	
Mailing Address 366 Summer Street		FEC Identification Number C [ ] <b>Transaction ID : SB21B.5582</b> Amount of Each Disbursement this Period [ ] 0.99	
City Somerville	State MA	Zip Code 02144	Category/ Type [ ]
Purpose of Disbursement Credit Card Processing Fees		Candidate Name	
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:			

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	[ ] 15.96
<b>TOTAL</b> This Period (last page this line number only).....▶	[ ]

**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. 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  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: MM / DD / YYYY  
03 / 29 / 2020

FEC Identification Number  
C [ ]  
Transaction ID : SB21B.5610  
Amount of Each Disbursement this Period  
[ ] 4.96

Memo Item

**B. 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  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: MM / DD / YYYY  
03 / 31 / 2020

FEC Identification Number  
C [ ]  
Transaction ID : SB21B.5611  
Amount of Each Disbursement this Period  
[ ] 0.20

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  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

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).....▶	[ ] 5.16
<b>TOTAL</b> This Period (last page this line number only).....▶	[ ] 21.12

**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

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

Full Name (Last, First, Middle Initial) <b>A. CISNEROS FOR CONGRESS</b>		Date of Disbursement MM / DD / YYYY 03 / 03 / 2020
Mailing Address P.O. BOX 40		FEC Identification Number C00650648 <b>Transaction ID : SB23.5550</b>
City PLACENTIA	State CA	Zip Code 92871
Purpose of Disbursement Contribution		Amount of Each Disbursement this Period 2500.00
Candidate Name <b>CISNEROS, GILBERT, , ,</b>		Category/ Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: CA	District: 39	

Full Name (Last, First, Middle Initial) <b>B. MICHELLE FOR KANSAS</b>		Date of Disbursement MM / DD / YYYY 03 / 24 / 2020
Mailing Address PO BOX 67101		FEC Identification Number C00732792 <b>Transaction ID : SB23.5553</b>
City TOPEKA	State KS	Zip Code 66667
Purpose of Disbursement Contribution		Amount of Each Disbursement this Period 2500.00
Candidate Name <b>DE LA ISLA, MICHELLE, , ,</b>		Category/ Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: KS	District: 02	

Full Name (Last, First, Middle Initial) <b>C. PEOPLE FOR BEN</b>		Date of Disbursement MM / DD / YYYY 03 / 24 / 2020
Mailing Address PO BOX 31129		FEC Identification Number C00443689 <b>Transaction ID : SB23.5556</b>
City SANTA FE	State NM	Zip Code 87594
Purpose of Disbursement Contribution		Amount of Each Disbursement this Period 2500.00
Candidate Name <b>LUJAN, BEN RAY, , ,</b>		Category/ Type
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: NM	District: 00	

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

**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 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

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

Full Name (Last, First, Middle Initial)

**A. TERESA FOR ALL**

Mailing Address PO BOX 2675

City SANTA FE State NM Zip Code 87504

Purpose of Disbursement  
Contribution

Candidate Name  
**LEGER, TERESA, , ,**

Office Sought:  House  Senate  President  
Disbursement For: 2020  Primary  General  Other (specify) ▼  
State: NM District: 03

Date of Disbursement  
MM / DD / YYYY  
03 / 24 / 2020

FEC Identification Number

**C** C00704049  
**Transaction ID : SB23.5557**  
Amount of Each Disbursement this Period  
2500.00

Memo Item

Full Name (Last, First, Middle Initial)

**B. XOCHITL FOR NEW MEXICO**

Mailing Address PO BOX 2250

City LAS CRUCES State NM Zip Code 88004

Purpose of Disbursement  
Contribution

Candidate Name  
**TORRES SMALL, XOCHITL, , ,**

Office Sought:  House  Senate  President  
Disbursement For: 2020  Primary  General  Other (specify) ▼  
State: NM District: 02

Date of Disbursement  
MM / DD / YYYY  
03 / 24 / 2020

FEC Identification Number

**C** C00666149  
**Transaction ID : SB23.5560**  
Amount of Each Disbursement this Period  
2500.00

Memo Item

Full Name (Last, First, Middle Initial)

**C.**

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

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

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

5000.00  
12500.00

**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 03 / 08 / 2020
Mailing Address 366 Summer Street		FEC Identification Number C <b>Transaction ID : SB29.5577</b> Amount of Each Disbursement this Period 1659.00
City Somerville	State MA	
Zip Code 02144		Memo Item <input type="checkbox"/>
Purpose of Disbursement Credit Card Processing Fees, Non-contribution Account		
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) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. ActBlue Technical Services</b>		Date of Disbursement MM / DD / YYYY 03 / 15 / 2020
Mailing Address 366 Summer Street		FEC Identification Number C <b>Transaction ID : SB29.5578</b> Amount of Each Disbursement this Period 237.00
City Somerville	State MA	
Zip Code 02144		Memo Item <input type="checkbox"/>
Purpose of Disbursement Credit Card Processing Fees, Non-contribution Account		
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) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. Facebook</b>		Date of Disbursement MM / DD / YYYY 03 / 23 / 2020
Mailing Address 1 Hacker Way		FEC Identification Number C <b>Transaction ID : SB29.5638</b> Amount of Each Disbursement this Period 201.75
City Menlo Park	State CA	
Zip Code 94025		Memo Item <input type="checkbox"/>
Purpose of Disbursement Promotional Ad, Non-contribution Account		
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) ▼	
State: District:		

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

2097.75

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



# 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. Latino Victory Project**

Full Name (Last, First, Middle Initial)

Mailing Address 700 14th Street NW 2nd Floor

City Washington State DC Zip Code 20005

Purpose of Disbursement Administrative and Office Overhead Expenses, Non-contribution Account

Candidate Name

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

State: District:

Date of Disbursement: 03 / 10 / 2020

FEC Identification Number: C

Transaction ID : SB29.5633

Amount of Each Disbursement this Period: 10000.00

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:

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:

FEC Identification Number: C

Amount of Each Disbursement this Period:

Memo Item

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	10000.00
<b>TOTAL</b> This Period (last page this line number only).....▶	12097.75