10/27/2016 22 : 07

Image# 201610279036974306 24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule E)

(Schedule E)	OF INDEPENDENT	LAFLINDI	TUNES			PAGE 1 O	
NAME OF COMMITTEE (In F	ull)				EEC II		
Immigrant Voters W						C00612820	
Check if X 24-hour report	48-hour report	× New repo	ort Amends	report filed	d on		YYYY
Full Name of Payee The Pivot Group,	Inc				Date of Publi	c Distribution/Disse	mination
Mailing Address 1720 S	t NW, Suite 550				10		2016
					Amount		
City		State	Zip Code				146.16
Washington		DC	20006			ID:24-01-00233-01 ursement or Obligat	
Purpose of Expenditure Canvassing Literature De	sign and Printing		Category/ Type		10 ^M	26 / Y	2016 Y
Name of Federal Candida	te		🗶 Suppo	ort Offic	e Sought:	X House Distric	ot: 13
Crist, Charlie, , ,			Oppos	se	President	Senate Stat	e:FL
Calendar Year-To-Dat Per Election for Offic		р. 1 тр	146.16	Disb 2016	ursement For:		General
Full Name of Payee The Pivot Group, I	nc				Date of Publi	c Distribution/Disse	mination 2016
Mailing Address 1720 I	St NW, Suite 550				Amount		
City		State	Zip Code			2	963.80
Washington		DC	20006			D : 24-01-00233-01: ursement or Obliga	
Purpose of Expenditure Canvassing Literature De	sign and Printing		Category/ Type		10	/ D D / Y	2016 Y
Name of Federal Candida	ite		X Suppo	ort Offic	e Sought:	x House Distrie	ct: 26
Garcia, Joe, , ,			Oppos		President	Senate Stat	e:FL
Calendar Year-To-Dat Per Election for Offic		y	123743.97	Disb 2010	ursement For: 6 Other (sp		General
(a) SUBTOTAL of Itemized	d Independent Expenditures	;		••••••		31	09.96
(b) SUBTOTAL of Unitemiz	zed Independent Expenditur	res		►			-
(c) TOTAL Independent Ex	xpenditures			►			
with, or at the request or s	certify that the independent suggestion of, any candidate cal party committee or its ag	e or authorized					
Young, Ryan, ,	,	[Flectron	ically Filed]	Data	10 / D D	2016	٦
Signature				Date	10 21	2010	-

Image# 201610279036974307 24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule E)

	hedule E)	-	PAGE 2 OF 12 FOR SE OF FORM 24/48
	ME OF COMMITTEE (In Full)		ENTIFICATION NUMBER
In	nmigrant Voters Win PAC		C00612820
Che	eck if 🗶 24-hour report 🔄 48-hour report 🗶 New report 🗌 Amends report filed	d on	D = D / Y = Y = Y = Y
	Full Name of Payee The Pivot Group, Inc	Date of Public	Distribution/Dissemination
	Mailing Address 1720 I St NW, Suite 550	10 Amount	31 2016
		Amount	
	City State Zip Code		25865.40
	Washington DC 20006 Purpose of Expenditure Cotogon/		D : 24-01-00233-01261 rsement or Obligation
	Mailer Design and Printing Category/ Type	10 ^{//}	^D 26 ^Y 2016
	Name of Federal Candidate Support Offic	e Sought:	House District: 00
	Clinton, Hillary , , ,	President	Senate State: 00
	Calendar Year-To-Date Per Election for Office Sought 3102512.88	ursement For:	Primary X General ecify) ►
- [Full Name of Payee	Date of Public	Distribution/Dissemination
	The Pivot Group, Inc	M M / 10	28 2016
	Mailing Address 1720 I St NW, Suite 550	Amount	
	City State Zip Code		6850.86
	Washington DC 20006		: 24-01-00233-01263 rsement or Obligation
	Purpose of Expenditure Canvassing Literature Design and Printing	10 /	26 / Y Y Y Y 2016
	Name of Federal Candidate Support Offic	e Sought:	House District: 00
	Clinton, Hillary , , ,	President	Senate State: 00
	Calendar Year-To-Date Per Election for Office Sought	oursement For: Difference of the other other of the other other of the other other of the other o	Primary ✗ General ecify) ►
	(a) SUBTOTAL of Itemized Independent Expenditures	· · · ·	32716.26
	· · · · · · · · · · · · · · · · · · ·		32110.20
	(b) SUBTOTAL of Unitemized Independent Expenditures		
	(c) TOTAL Independent Expenditures		· · · · · · · ·
١	Under penalty of perjury I certify that the independent expenditures reported herein were not m with, or at the request or suggestion of, any candidate or authorized committee or agent of either party committee) any political party committee or its agent.		
	Young, Ryan, , , [Electronically Filed] Date	10 / D D 27	/ Y Y Y Y 2016
	Signature		

Image# 201610279036974308 24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule E)

(So	chedule E)					PAGE 3	OF 12 FORM 24/48
	ME OF COMMITTEE (In Full)				FEC ID		
lr	nmigrant Voters Win PAC				_	C00612820	
					C	00012020	
Ch	eck if 🗶 24-hour report 🗌 48-hour report	t 🗶 New rep	oort Amends repo		/ /	D D /	Y Y Y Y
	Full Name of Payee			Date	of Public	Distribution/	Dissemination
	Bridgetown			N	1 M /	D D /	Y Y Y Y Y
	Mailing Address 5300 N Channel Ave			Amou	nt		
	City	State	Zip Code				13123.37
	Portland	OR	97217			D:24-01-002 rsement or C	
	Purpose of Expenditure Voter Guide Mailing		Category/ Type		10 /	26 /	Y Y Y Y 2016
	Name of Federal Candidate		X Support	Office Sough	it:	House	District: 00
	Clinton, Hillary , , ,		Oppose	× Preside	ent	Senate	State: 00
	Calendar Year-To-Date Per Election for Office Sought		3122487.11	Disbursemen 2016	t For:	Primary	X General
					ther (sp	ecify) 🕨	
	Full Name of Payee JVA Campaigns, LLC			_	of Public		Dissemination
	Mailing Address 240 N 5th St, Suite 360			— L	10	26	2016
				Amou	int		
	City	State	Zip Code				1222.89
	Columbus	ОН	43215			D: 24-01-002	
	Purpose of Expenditure Canvassing Literature Design and Printing		Category/ Type		10 /	26	2016
	Name of Federal Candidate		X Support	Office Sough	nt:	House	District: 00
	Clinton, Hillary , , ,		Oppose	× Presid	ent	Senate	State:00
	Calendar Year-To-Date Per Election for Office Sought		3123710.00	Disbursemer 2016	it For:	Primary	General
				C	Other (sp	ecify) ►	
	(a) SUBTOTAL of Itemized Independent Exper	nditures		·· •	-7-		14346.26
	(b) SUBTOTAL of Unitemized Independent Exp	penditures					
	(c) TOTAL Independent Expenditures			·· •			
	Under penalty of perjury I certify that the indep with, or at the request or suggestion of, any ca party committee) any political party committee of	andidate or authorized					
	Young, Ryan, , ,			M M /	D D		Y Y
	Signature	[Electron	<i>iically Filed]</i> Date	9 10	27	201	6
1							

Image# 201610279036974309 24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule E)

(So	chedule E)					PAGE 4	OF 12 FORM 24/48
	ME OF COMMITTEE (In Full)				FEC ID		
lr	nmigrant Voters Win PAC				_	C00612820	
					C	C00612820	
Ch	eck if 🗶 24-hour report 🗌 48-hour rep	port X New rep	port Amends repo		/ /		Y Y Y Y Y
	Full Name of Payee			Date	of Public	Distribution/	Dissemination
	Compdealings			N	10 /	26 /	2016
	Mailing Address 2040 NE 163rd St Ste 210			Amou	nt		
	City	State	Zip Code				230.00
	North Miami Beach	FL	33162			D:24-01-002 rsement or C	
	Purpose of Expenditure Canvassing Literature Design and Printing		Category/ Type		10	D D /	Y Y Y Y 2016
	Name of Federal Candidate		Support	Office Sough	it:	House	District: 00
	Trump, Donald, J., ,		X Oppose	× Preside	ənt	Senate	State:00
	Calendar Year-To-Date Per Election for Office Sought		3123940.00	Disbursemen 2016	it For: Other (sp	Primary	X General
	Full Name of Payee	, ,					Dissemination
	Mavi Social Butterfly				10 / 10		2016
	Mailing Address 3800 N Hills Dr #217					20	2010
				Amou	int		
	City	State	Zip Code				4210.25
	Hollywood	FL	33021			: 24-01-002 Irsement or 0	
	Purpose of Expenditure Social Media Administration and Marketing		Category/ Type		10 /	26	2016
	Name of Federal Candidate		Support	Office Sough	nt:	House	District: 00
	Trump, Donald, J., ,		X Oppose	× Presid	ent	Senate	State:00
	Calendar Year-To-Date Per Election for Office Sought		3128150.25	Disbursemer 2016	nt For: Other (sp	Primary	X General
		, ,			iner (sp	ecity) •	
	(a) SUBTOTAL of Itemized Independent Ex	penditures					4440.25
	(b) SUBTOTAL of Unitemized Independent	Expenditures					
					-7-	-7-	
	(c) TOTAL Independent Expenditures			••			
	Under penalty of perjury I certify that the ir with, or at the request or suggestion of, any party committee) any political party committe	/ candidate or authorize					
	Young, Ryan, , ,	[T](ninglly Filed	M M /			Y Y
	Signature	[Electroi	<i>nically Filed]</i> Date	e 10	27	201	0

Image# 201610279036974310 24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule E)

	chedule E)			PAGE 5 OF 12 FOR SE OF FORM 24/48
	AME OF COMMITTEE (In Full)		FFC I	DENTIFICATION NUMBER
lr	mmigrant Voters Win PAC		С	C00612820
Ch	neck if 🗶 24-hour report 🔄 48-hour report 💽 New report 🔄 Amends repor		- M	/ D = D / Y = Y = Y = Y
	Full Name of Payee	Date of	of Publi	ic Distribution/Dissemination
	The Pivot Group, Inc	М	10 ^M	/ D D / Y Y Y Y 31 / 2016
	Mailing Address 1720 I St NW, Suite 550	Amou	nt	
	City State Zip Code			25865.40
	Washington DC 20006			ID: 24-01-00233-01262 ursement or Obligation
	Purpose of Expenditure Mailer Design and Printing Category/ Type	М	10 ^M	/ D D / Y Y Y Y Y 26 / 2016
	Name of Federal Candidate Support	Office Sough	t:	House District: 00
	Murphy, Patrick, , ,	Preside	ent	Senate State: FL
	Calendar Year-To-Date Per Election for Office Sought	Disbursemen 2016 O		Primary X General pecify) ►
	Full Name of Payee	Date	of Publ	ic Distribution/Dissemination
	The Pivot Group, Inc	N	10	/ D D / Y Y Y Y 28 2016
	Mailing Address 1720 I St NW, Suite 550	Amou	nt	
	City State Zip Code			6850.86
	Washington DC 20006			D: 24-01-00233-01264 pursement or Obligation
	Purpose of Expenditure Canvassing Literature Design and Printing	Ň	10 ^M	/ D D / Y Y Y Y 26 2016
	Name of Federal Candidate Support	Office Sough	it:	House District: 00
	Murphy, Patrick, , ,	Preside	ent [Senate State: FL
	Calendar Year-To-Date Per Election for Office Sought	Disbursemen 2016		Primary X General pecify) ►
	(a) SUBTOTAL of Itemized Independent Expenditures			32716.26
			-7-	02110.20
	(b) SUBTOTAL of Unitemized Independent Expenditures	•	- 7	
	(c) TOTAL Independent Expenditures	•	-7	
	Under penalty of perjury I certify that the independent expenditures reported herein were r with, or at the request or suggestion of, any candidate or authorized committee or agent of party committee) any political party committee or its agent.			
	Young, Ryan, , , [Electronically Filed] Date	10 /	27	/ Y Y Y Y Y 2016
	Signature			

Image# 201610279036974311 24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule E)

	chedule E)		ITUNES			PAGE 6 OF 12 FOR SE OF FORM 24/48
	ME OF COMMITTEE (In Full)				FEC II	DENTIFICATION NUMBER
lr	nmigrant Voters Win PAC				С	C00612820
Ch	eck if 🗶 24-hour report 📃 48-hour	report 🗴 New rep	ort Amends repo		M	/ D = D / Y = Y = Y = Y
	Full Name of Payee			Date	of Publi	c Distribution/Dissemination
	Bridgetown				M _ M	
	Mailing Address 5300 N Channel Ave			Amou	int	
	City	State	Zip Code			13123.36
	Portland	OR	97217			ID : 24-01-00237-01271 ursement or Obligation
	Purpose of Expenditure Voter Guide Mailing		Category/ Type		10	/ <u>26</u> / <u>2016</u>
	Name of Federal Candidate		X Support	Office Sough	nt:	House District: 00
	Murphy, Patrick, , ,		Oppose	Presid	ent	Senate State: FL
	Calendar Year-To-Date Per Election for Office Sought		564375.09	Disbursemer 2016		Primary X General Decify) ►
	Full Name of Payee			Date	of Publi	ic Distribution/Dissemination
	FLIC Votes, Inc				M	
	Mailing Address 2800 Biscayne Blvd S	te 800		Amou	unt	
	City	State	Zip Code			2846.11
	Miami	FL	33137			D: 24-01-00247-0014 ursement or Obligation
	Purpose of Expenditure Reimbursed Expenses - See Memos		Category/ Type] [10 ^M	/ 26 / Y Y Y Y 2016
	Name of Federal Candidate		Support	Office Sough	nt:	House District: 00
	Rubio, Marco, , ,		X Oppose	Presid	ent	Senate State: FL
	Calendar Year-To-Date Per Election for Office Sought		567221.20	Disbursemer 2016		Primary X General pecify) ►
	(a) SUBTOTAL of Itemized Independent	Expenditures				15969.47
					-7-	
	(b) SUBTOTAL of Uniternized Independent	nt Expenditures		••	-7	
	(c) TOTAL Independent Expenditures			•	-7	
	Under penalty of perjury I certify that the with, or at the request or suggestion of, a party committee) any political party comm	ny candidate or authorized				
	Young, Ryan, , ,	[Electron	nically Filed] Date	e 10	D D 27	/ Y Y Y Y 2016
	Signature				<u> </u>	

Image# 201610279036974312 24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule E)

	chedule E)		TUNES			PAGE 7 OF 12 FOR SE OF FORM 24/48
NA	ME OF COMMITTEE (In Full)				EEC ID	
	nmigrant Voters Win PAC					C00612820
Ch	eck if 🗶 24-hour report 🗌 48-hour	report X New rep	port Amends rep	ort filed c	on M M /	
	Full Name of Payee				Data of Public	Distribution/Dissemination
	Rojas, Ariel, , , x				M M /	
	Mailing Address 11381 NW 7th St Apt	203			Amount	
	City	State	Zip Code			180.00
	Miami	FL	33172			D: 24-01-00247-01332 ursement or Obligation
	Purpose of Expenditure Organizer		Category/ Type		10 ^{//}	26 / Y Y Y Y 2016
	Name of Federal Candidate		Support	Office	Sought:	House District: 00
	Rubio, Marco, , ,		X Oppose		President	Senate State: FL
	Calendar Year-To-Date Per Election for Office Sought	· · · · · · · ·	0.00	Disburs 2016	sement For:	Primary X General ecify) ►
	Full Name of Payee				Date of Public	c Distribution/Dissemination
	Fedex x				M M /	
	Mailing Address 13155 Noel Road, S	uite 1600				
					Amount	
	City	State	Zip Code		· · · ·	53.80
	Dallas	ТХ	75240	٦		D : 24-01-00247-01331 Irsement or Obligation
	Purpose of Expenditure Printing Literature		Category/ Type		10 ^{//}	/ D = D / Y = Y = Y = Y 26 2016
	Name of Federal Candidate		Support	Office	Sought:	House District: 00
	Rubio, Marco, , ,		X Oppose		President 1	Senate State: FL
	Calendar Year-To-Date Per Election for Office Sought		0.00	Disbur 2016	sement For:	Primary X General
	(a) SUBTOTAL of Itemized Independent	Expenditures				0.00
				,	-7-	
	(b) SUBTOTAL of Uniternized Independent	ent Expenditures		··· ►		
	(c) TOTAL Independent Expenditures			▶		
	Under penalty of perjury I certify that th with, or at the request or suggestion of, party committee) any political party comm	any candidate or authorized				
	Young, Ryan, , ,	[Electron	<i>nically Filed]</i> Dat	e 10	M / D D 27	2016
	Signature					

Image# 201610279036974313 24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule E)

	chedule E)		ITUNES			PAGE 8 OF 12 FOR SE OF FORM 24/48
NA	ME OF COMMITTEE (In Full)				FEC II	
	nmigrant Voters Win PAC				C	C00612820
						000012020
Ch	eck if 🗶 24-hour report 🗌 48-hour	report X New rep	ort Amends repo		M	
	Full Name of Payee			Date	of Publi	ic Distribution/Dissemination
	Fedex x			- I	M M	/ D D / Y Y Y Y
	Mailing Address 13155 Noel Road, Suite	e 1600				
				Amo	unt	
	City	State	Zip Code			52.31
	Dallas	ТХ	75240			ID: 24-01-00247-01330 ursement or Obligation
	Purpose of Expenditure Printing Literature		Category/ Type		^M 10	/ D D / Y Y Y Y 26 / 2016
	Name of Federal Candidate		Support	Office Soug	ht:	House District: 00
	Rubio, Marco, , ,		× Oppose	Presi	dent	X Senate State:
	Calendar Year-To-Date			Disburseme	nt For:	Primary X General
	Per Election for Office Sought		0.00	2016	Other (sp	pecify) ►
	Full Name of Payee			Date	of Publi	ic Distribution/Dissemination
	Carbo, Uolla, , , x				M M	/ D D / Y Y Y
	Mailing Address 903 Cypress Grove D	0r #903		Ama	unt	
				Amo	uni	
	City	State	Zip Code			135.00
	Pompano Beach	FL	33069			D: 24-01-00247-01322 ursement or Obligation
	Purpose of Expenditure Organizer Coordinator		Category/		^M 10	/ D D / Y Y Y Y 26 2016
			Туре			
	Name of Federal Candidate		Support	Office Soug	ght:	House District: 00
	Rubio, Marco, , ,		× Oppose	Presi	dent	X Senate State: FL
	Calendar Year-To-Date		0.00	Disburseme	ent For:	Primary X General
	Per Election for Office Sought		0.00		Other (s	pecify) ►
				_		
	(a) SUBTOTAL of Itemized Independent	Expenditures		• •	-7-	0.00
	(b) SUBTOTAL of Unitemized Independe	nt Expenditures				
	()				-7-	
	(c) TOTAL Independent Expenditures			· •		
					-7-	
	Under penalty of perjury I certify that the with, or at the request or suggestion of, a party committee) any political party comm	any candidate or authorized				
	Young, Ryan, , ,			MM	DD	/ Y Y Y Y
	Signature	[Electron	<i>ically Filed]</i> Date	e 10	27	2016

Image# 201610279036974314 24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule E)

	chedule E)		ITUNES			PAGE 9 OF 12 FOR SE OF FORM 24/48
	ME OF COMMITTEE (In Full)				FEC ID	
Ir	nmigrant Voters Win PAC					C00612820
Ch	eck if 🗶 24-hour report 🗌 48-hour	report X New rep	ort Amends repo		M /	
	Full Name of Payee			Date	of Public	c Distribution/Dissemination
	FLIC Votes, Inc x				/	
	Mailing Address 2800 Biscayne Blvd Ste	800		Amou	nt	
	City	State	Zip Code			1500.00
	Miami	FL	33137			D: 24-01-00247-01328 Irsement or Obligation
	Purpose of Expenditure Bus Rental		Category/ Type		10 ^M	26 / Y Y Y Y Y 2016
	Name of Federal Candidate		Support	Office Sough	t:	House District: 00
	Rubio, Marco, , ,		X Oppose	Preside	ent	Senate State: FL
	Calendar Year-To-Date Per Election for Office Sought		0.00	Disbursemen 2016		Primary X General
	Full Name of Payee			Date	of Publi	c Distribution/Dissemination
	Thompson, Andrea, , ,			Ν	1 M	
	X Mailing Address 5021 NW 16th Ct			— L		
				Amou	nt	
	City	State	Zip Code		1.00	180.00
	Lauderhill	FL	33313			D: 24-01-00247-01325 ursement or Obligation
	Purpose of Expenditure Organizer		Category/ Type		10	/ 26 / Y Y Y Y 2016
	Name of Federal Candidate		Support	Office Sough	nt:	House District: 00
	Rubio, Marco, , ,		X Oppose	Preside	ent	Senate State: FL
	Calendar Year-To-Date Per Election for Office Sought		0.00	Disbursemer 2016		Primary X General
					(0)	
	(a) SUBTOTAL of Itemized Independent	Expenditures		•• •	-7-	0.00
	(b) SUBTOTAL of Unitemized Independe	ent Expenditures		•••	-7-	· · · · · · · ·
	(c) TOTAL Independent Expenditures					· · · · · · · ·
	Under penalty of perjury I certify that the with, or at the request or suggestion of, a party committee) any political party comm	any candidate or authorized				
	Young, Ryan, , ,	[Electron	ically Filed] Date	e 10	27	/ Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	Signature					

Image# 201610279036974315 24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES

	chedule E)	PENDENT EXPEND	IIUNES		PAGE 10 OF 12 FOR SE OF FORM 24/48
	ME OF COMMITTEE (In Full)			FE	C IDENTIFICATION NUMBER V
Ir	nmigrant Voters Win PAC			C	C00612820
Ch	eck if 🗶 24-hour report 🗌 48-hour	report X New repo	ort Amends repo	ort filed on	/ D = D / Y = Y = Y = Y
	Full Name of Payee			Date of P	ublic Distribution/Dissemination
	Sabur, Jamilah, , ,			M N	
	X Mailing Address 1281 NE 208th Terr			L.	
				Amount	
	City	State	Zip Code		125.00
	Miami	FL	33179	Transacti	on ID : 24-01-00247-01327
	Purpose of Expenditure				isbursement or Obligation
	Organizer Coordinator		Category/ Type	10	/ D D / Y Y Y Y 26 / 2016
	Name of Federal Candidate		Support	Office Sought:	House District: 00
	Rubio, Marco, , ,		× Oppose	President	X Senate State:
	Calendar Year-To-Date			Disbursement Fo	or: Primary X General
	Per Election for Office Sought		0.00	2016 Other	(specify)
	Full Name of Payee			Date of P	ublic Distribution/Dissemination
	Benavides, Ligia, , ,			M	
	X Mailing Address 125 NW 8th Ave Ap	t D2		L.	
				Amount	
	City	State	Zip Code		180.00
	Hallandale	FL	33009		on ID : 24-01-00247-01326 Disbursement or Obligation
	Purpose of Expenditure Organizer		Category/ Type	10	/ ^D 26 / ^Y 2016
	Name of Federal Candidate		Support	Office Sought:	House District: 00
	Rubio, Marco, , ,		× Oppose	President	Senate State:
	Calendar Year-To-Date			Disbursement Fo	or: Primary X General
	Per Election for Office Sought		0.00		· (specify) ►
	(a) SUBTOTAL of Itemized Independent	Expenditures			0.00
	(b) SUBTOTAL of Unitemized Independent	ent Expenditures			T T T .
	(c) TOTAL Independent Expenditures			• •	
,	Under penalty of perjury I certify that th with, or at the request or suggestion of, party committee) any political party comm	any candidate or authorized			
	Young, Ryan, , ,	[Electron	ically Filed] Date	e 10 2	27 2016
	Signature		Date		

Image# 201610279036974316 24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule E)

(Schedule E)		TIONES		PAGE 11 OF 12
NAME OF COMMITTEE (In Full)				FOR SE OF FORM 24/48
Immigrant Voters Win PAC				C C00612820
Check if X 24-hour report 48-hour	report X New rep	ort Amends repo	ort filed on	M / D D / Y Y Y Y Y
Full Name of Payee			Date of	Public Distribution/Dissemination
Pereira, Esther, , , x			М	M / D D / Y Y Y Y
Mailing Address 7011 Environ Bldg Apt	110		Amount	
City	State	Zip Code		80.00
Lauderhill	FL	33319		tion ID : 24-01-00247-01323 Disbursement or Obligation
Purpose of Expenditure Organizer		Category/ Type	M	
Name of Federal Candidate		Support	Office Sought:	House District: 00
Rubio, Marco, , ,		× Oppose	Presiden	t X Senate State: FL
Calendar Year-To-Date Per Election for Office Sought	· · · · · · ·	0.00	Disbursement I 2016 Oth	For: Primary
Full Name of Payee			Date of	Public Distribution/Dissemination
Fondoit, Wusthania, , , x			М	M / D D / Y Y Y Y
Mailing Address 7380 NW 4th St Apt	102		_ L	
			Amount	
City	State	Zip Code		180.00
Plantation	FL	33317		tion ID : 24-01-00247-01324 Disbursement or Obligation
Purpose of Expenditure Organizer		Category/ Type	M 1	
Name of Federal Candidate		Support	Office Sought:	House District: 00
Rubio, Marco, , ,		X Oppose	Presiden	t Senate State: FL
Calendar Year-To-Date Per Election for Office Sought		0.00	Disbursement 2016	For: Primary
	, , ,			
(a) SUBTOTAL of Itemized Independent	Expenditures		••	0.00
(b) SUBTOTAL of Unitemized Independe	ent Expenditures		·· •	
(c) TOTAL Independent Expenditures				
			·	-77
Under penalty of perjury I certify that th with, or at the request or suggestion of, party committee) any political party comm	any candidate or authorized			
Young, Ryan, , ,	[Flectron	ically Filed] Date		27 2016
Signature		Date		2010

Image# 201610279036974317 24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule E)

	nedule E)	DITORES		PAGE 12 OF 12 FOR SE OF FORM 24/48
NAM	IE OF COMMITTEE (In Full)			FEC IDENTIFICATION NUMBER ▼
	migrant Voters Win PAC			C C00612820
				• M / D • D / Y • Y • Y • Y
Cheo	ck if 🗶 24-hour report 🔄 48-hour report 🗶 New re	eport Amends rep	ort filed on	
	Full Name of Payee Alu, Nicolette, , ,			of Public Distribution/Dissemination
	X		M	M / D D / Y Y Y Y
ľ	Mailing Address 9450 Poinciana PI Apt 205		Amour	nt
	City State	Zip Code		180.00
	Davie FL	33324		action ID : 24-01-00247-01329 of Disbursement or Obligation
	Purpose of Expenditure Organizer	Category/ Type		10 / D D / Y Y Y Y 26 / 2016
	Name of Federal Candidate	Support	Office Sough	t: House District: 00
	Rubio, Marco, , ,	X Oppose	Preside	ent X Senate State: FL
	Calendar Year-To-Date Per Election for Office Sought	0.00	Disbursement 2016	t For: Primary X General ther (specify) ►
F	Full Name of Payee		Date of	of Public Distribution/Dissemination
	JVA Campaigns, LLC		М	10 26 2016
	Mailing Address 240 N 5th St, Suite 360		Amou	nt
	City State	Zip Code		1222.88
	Columbus OH	43215		ction ID : 24-01-00244-01319 of Disbursement or Obligation
	Purpose of Expenditure Canvassing Literature Design and Printing	Category/ Type		10 / ^D 26 / ^Y <u>Y</u> <u>Y</u> <u>Y</u> <u>Y</u>
	Name of Federal Candidate	X Support	Office Sough	t: House District: 00
	Cortez Masto, Catherine, , ,	Oppose	Preside	ent X Senate State: <u>NV</u>
	Calendar Year-To-Date Per Election for Office Sought	564955.70	Disbursemen 2016	t For: Primary X General ther (specify) ►
(a	a) SUBTOTAL of Itemized Independent Expenditures			1222.88
(k	b) SUBTOTAL of Unitemized Independent Expenditures			· · · · · · · · · ·
(0	c) TOTAL Independent Expenditures		•	104521.34
w	nder penalty of perjury I certify that the independent expenditure ith, or at the request or suggestion of, any candidate or authoriz arty committee) any political party committee or its agent.			
		onically Filed] Date	e 10 /	27 2016
	Signature	-		