

# 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**  
**LGBTQ Victory Fund Federal PAC**

ADDRESS (number and street) **1225 Eye St NW**  
**Ste 525**  
 Check if different than previously reported. (ACC) **Washington DC 20005**

2. FEC IDENTIFICATION NUMBER ▼ CITY ▲ STATE ▲ ZIP CODE ▲  
**C C00476978** 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  /  /  2024 through  /  /  2024

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 **Holt, Richard, , ,**

Signature of Treasurer **Holt, Richard, , ,** Date  /  /  2024

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

Write or Type Committee Name

LGBTQ Victory Fund Federal PAC

Report Covering the Period: From: 02 / 01 / 2024 To: 02 / 29 / 2024

Table with 2 columns: COLUMN A This Period, COLUMN B Calendar Year-to-Date. Rows include: 6. (a) Cash on Hand January 1, 2024 (111521.83); (b) Cash on Hand at Beginning of Reporting Period (119137.65); (c) Total Receipts (from Line 19) (7431.51 / 17931.30); (d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) (126569.16 / 129453.13); 7. Total Disbursements (from Line 31) (34244.43 / 37128.40); 8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) (92324.73 / 92324.73); 9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D) (0.00); 10. Debts and Obligations Owed BY 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 the Federal Election Commission at 800-424-9530 or visit www.fec.gov

DETAILED SUMMARY PAGE  
of Receipts

Write or Type Committee Name

LGBTQ Victory Fund Federal PAC

Report Covering the Period: From: 02 / 01 / 2024 To: 02 / 29 / 2024

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).....	954.54	954.54
(ii) Unitemized .....	726.97	1226.76
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	1681.51	2181.30
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	5000.00	5000.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) .....	6681.51	7181.30
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.).....	750.00	10750.00
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)).....▶	7431.51	17931.30
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	7431.51	17931.30

**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 4

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 .....	143.43	472.40
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	143.43	472.40
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	12500.00	15000.00
24. Independent Expenditures (use Schedule E) .....	0.00	0.00
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 .....	25.00	25.00
(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)).....	25.00	25.00
29. Other Disbursements (Including Non-Federal Donations).....	21576.00	21631.00
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)) ..	34244.43	37128.40
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	34244.43	37128.40

**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) .....	6681.51	7181.30
34. Total Contribution Refunds (from Line 28(d)) .....	25.00	25.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	6656.51	7156.30
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	143.43	472.40
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	143.43	472.40

# 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"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14
<input type="checkbox"/> 15	<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)  
**LGBTQ Victory Fund Federal PAC**

**A. Cohen, Naomi, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO Box 39  
 City Gap Mills State WV Zip Code 24941-0039  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 04 / 2024  
**Transaction ID : 2210279**  
 Amount of Each Receipt this Period  
 250.00  
 Memo Item

**B. Rakes, Wade, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2190 Mount Paran Rd NW  
 City Atlanta State GA Zip Code 30327-2924  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Peach State Health Occupation (for Individual) President  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 454.54

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 26 / 2024  
**Transaction ID : 2210294**  
 Amount of Each Receipt this Period  
 454.54  
 Memo Item

**C. Valacer, David, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 5 Bradford Street Ext  
 City Provincetown State MA Zip Code 02657-1983  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Regor Occupation (for Individual) Physician  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 28 / 2024  
**Transaction ID : 2210295**  
 Amount of Each Receipt this Period  
 250.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	954.54
<b>TOTAL</b> This Period (last page this line number only).....	954.54

# 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 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)  
**LGBTQ Victory Fund Federal PAC**

**A. CENTENE CORPORATION POLITICAL ACTION COMMITTEE (CENTENE PAC)**

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

Mailing Address Plaza 7700 Forsyth Boulevard

City Saint Louis State MO Zip Code 63105

FEC ID number of contributing federal political committee. **C** C00397851

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

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  
 02 / 08 / 2024

**Transaction ID : 2210269**

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

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

<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: PAGE 8 OF 16  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

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NAME OF COMMITTEE (In Full)  
**LGBTQ Victory Fund Federal PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**A. LGBTQ Victory Fund California PAC**

Mailing Address 1225 I St NW  
Ste 525

City Washington State DC Zip Code 20005-6005

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 ▼  
750.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
02 / 23 / 2024

**Transaction ID : 2216887**

Amount of Each Receipt this Period  
750.00

Memo Item

Reimbursement for Voter Model Access, Non-Contribution Account

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

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 Y Y

Amount of Each Receipt this Period

Memo Item

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

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 Y Y

Amount of Each Receipt this Period

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	750.00
<b>TOTAL</b> This Period (last page this line number only).....▶	750.00



# 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)

**LGBTQ Victory Fund Federal PAC**

Full Name (Last, First, Middle Initial)

### A. Paragon Payment Solutions

Mailing Address 2141 E Broadway Rd  
Ste 202

City  
Tempe

State  
AZ

Zip Code  
85282-1895

Purpose of Disbursement  
Credit Card Processing Fees

Candidate Name

Office Sought:  House  
 Senate  
 President

State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	2		0	2		2	0	2	4

FEC Identification Number

C [ ]

**Transaction ID : 500013301**

Amount of Each Disbursement this Period

[ ] 44.36 [ ]

Memo Item

Full Name (Last, First, Middle Initial)

### B.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:  House  
 Senate  
 President

State: District:

Disbursement For:  
 Primary  General  
 Other (specify)

Category/  
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y

FEC Identification Number

C [ ]

Amount of Each Disbursement this Period

[ ] [ ]

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

State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y

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)..... ▶

[ ] 44.36 [ ]

[ ] 44.36 [ ]

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)

Form for line numbers 21b-30b with checkboxes, where 23 is checked.

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NAME OF COMMITTEE (In Full)
LGBTQ Victory Fund Federal PAC

Form A: ERIC SORENSEN FOR ILLINOIS. Includes fields for Full Name, Mailing Address, City, State, Zip Code, Purpose of Disbursement, Candidate Name, Office Sought, Disbursement For, Date of Disbursement, FEC Identification Number, Transaction ID, and Amount of Each Disbursement.

Form B: EVAN LOW FOR CONGRESS. Includes fields for Full Name, Mailing Address, City, State, Zip Code, Purpose of Disbursement, Candidate Name, Office Sought, Disbursement For, Date of Disbursement, FEC Identification Number, Transaction ID, and Amount of Each Disbursement.

Form C: JULIE JOHNSON FOR CONGRESS. Includes fields for Full Name, Mailing Address, City, State, Zip Code, Purpose of Disbursement, Candidate Name, Office Sought, Disbursement For, Date of Disbursement, FEC Identification Number, Transaction ID, and Amount of Each Disbursement.

SUBTOTAL of Disbursements This Page (optional) 8000.00
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 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)

**LGBTQ Victory Fund Federal PAC**

Full Name (Last, First, Middle Initial)

### A. SAN DIEGO COUNTY DEMOCRATIC PARTY (FED. ACCT.)

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02	/	15	/	2024

Mailing Address 3934 Murphy Canyon Rd  
Ste B103

City San Diego State CA Zip Code 92123-4425

FEC Identification Number

**C** C00402826

**Transaction ID : 500013316**

Amount of Each Disbursement this Period

1000.00

Memo Item

Purpose of Disbursement

Contribution

Category/Type

Candidate Name

SAN DIEGO COUNTY DEMOCRATIC PARTY (FED. ACCT.)

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

### B. SHARICE FOR CONGRESS

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02	/	14	/	2024

Mailing Address 13851 W 63rd St  
Num 303

City Shawnee State KS Zip Code 66216-3800

FEC Identification Number

**C** C00670034

**Transaction ID : 500013310**

Amount of Each Disbursement this Period

1000.00

Memo Item

Purpose of Disbursement

Contribution

Category/Type

Candidate Name

DAVIDS, SHARICE, , ,

Office Sought:  House  Senate  President

Disbursement For: 2024  Primary  General  Other (specify)

State: KS District: 03

Full Name (Last, First, Middle Initial)

### C. WILL ROLLINS FOR CONGRESS

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02	/	15	/	2024

Mailing Address 31500 Grape St  
Ste 3 Pmb 452

City Lake Elsinore State CA Zip Code 92532-9702

FEC Identification Number

**C** C00792507

**Transaction ID : 500013319**

Amount of Each Disbursement this Period

2500.00

Memo Item

Purpose of Disbursement

Contribution

Category/Type

Candidate Name

ROLLINS, WILL, , ,

Office Sought:  House  Senate  President

Disbursement For: 2024  Primary  General  Other (specify) ▼

State: CA District: 41

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

4500.00

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

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)

**LGBTQ Victory Fund Federal PAC**

Full Name (Last, First, Middle Initial)

### A. Committee to Elect Satana Deberry

Mailing Address PO Box 1121

City  
Durham

State  
NC

Zip Code  
27702-1121

Purpose of Disbursement  
Non-Federal Contribution

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:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	2		2	3		2	0	2	4

FEC Identification Number

C [ ]

**Transaction ID : 500013320**

Amount of Each Disbursement this Period

[ ] 250.00

Memo Item

Full Name (Last, First, Middle Initial)

### B. Eli Bohnert for Ohio

Mailing Address 1070 Brookhouse Ln

City  
Gahanna

State  
OH

Zip Code  
43230-1975

Purpose of Disbursement  
Non-Federal Contribution

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:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	2		0	8		2	0	2	4

FEC Identification Number

C [ ]

**Transaction ID : 500013307**

Amount of Each Disbursement this Period

[ ] 2500.00

Memo Item

Full Name (Last, First, Middle Initial)

### C. Friends of DJ Nichols

Mailing Address 800 Bauman St

City  
Oshkosh

State  
WI

Zip Code  
54902-3425

Purpose of Disbursement  
Non-Federal Contribution

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:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	2		1	5		2	0	2	4

FEC Identification Number

C [ ]

**Transaction ID : 500013312**

Amount of Each Disbursement this Period

[ ] 250.00

Memo Item

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

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

[ ] 3000.00

[ ]

**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)  
**LGBTQ Victory Fund Federal PAC**

Full Name (Last, First, Middle Initial) <b>A. Friends of Peter Burgelis</b>		Date of Disbursement MM / DD / YYYY 02 / 15 / 2024
Mailing Address 5101 W Jackson Park Dr		FEC Identification Number <b>C</b> <b>Transaction ID : 500013311</b> Amount of Each Disbursement this Period 250.00
City Milwaukee	State WI Zip Code 53219-3248	
Purpose of Disbursement Non-Federal Contribution		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. Kim Ogg for Harris County Atty General</b>		Date of Disbursement MM / DD / YYYY 02 / 21 / 2024
Mailing Address 2450 Louisiana St Ste Pm 400		FEC Identification Number <b>C</b> <b>Transaction ID : 500013324</b> Amount of Each Disbursement this Period 1000.00
City Houston	State TX Zip Code 77006-2318	
Purpose of Disbursement Non-Federal Contribution		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. Larson for County Board</b>		Date of Disbursement MM / DD / YYYY 02 / 15 / 2024
Mailing Address N9633 Tyvand Rd		FEC Identification Number <b>C</b> <b>Transaction ID : 500013314</b> Amount of Each Disbursement this Period 250.00
City Blanchardville	State WI Zip Code 53516-9638	
Purpose of Disbursement Non-Federal Contribution		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:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	1500.00
<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 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)

**LGBTQ Victory Fund Federal PAC**

Full Name (Last, First, Middle Initial)

### A. Lauren Simmons Campaign

Mailing Address PO Box 56386

City  
Houston

State  
TX

Zip Code  
77256-6386

Purpose of Disbursement  
Non-Federal Contribution

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:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	2		0	8		2	0	2	4

FEC Identification Number

C [ ]

**Transaction ID : 500013306**

Amount of Each Disbursement this Period

[ ] 2500.00 [ ]

Memo Item

Full Name (Last, First, Middle Initial)

### B. Lauren Simmons Campaign

Mailing Address PO Box 56386

City  
Houston

State  
TX

Zip Code  
77256-6386

Purpose of Disbursement  
Non-Federal Contribution

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:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	2		2	3		2	0	2	4

FEC Identification Number

C [ ]

**Transaction ID : 500013321**

Amount of Each Disbursement this Period

[ ] 3021.00 [ ]

Memo Item

Full Name (Last, First, Middle Initial)

### C. Lupe Valdez For Dallas Sheriff

Mailing Address 711 N Edgefield Ave

City  
Dallas

State  
TX

Zip Code  
75208-3616

Purpose of Disbursement  
Non-Federal Contribution

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:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	2		1	5		2	0	2	4

FEC Identification Number

C [ ]

**Transaction ID : 500013317**

Amount of Each Disbursement this Period

[ ] 1000.00 [ ]

Memo Item

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

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

[ ] 6521.00 [ ]

[ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ]

**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)

**LGBTQ Victory Fund Federal PAC**

Full Name (Last, First, Middle Initial)

**A. Marisabel for Milwaukee**

Mailing Address 7740 W Greenfield Ave  
Unit 33433

City  
Milwaukee

State  
WI

Zip Code  
53214-5700

Purpose of Disbursement  
Non-Federal Contribution

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	2		1	5		2	0	2	4

FEC Identification Number

C [ ]

**Transaction ID : 500013313**

Amount of Each Disbursement this Period

[ ] 250.00

Memo Item

Full Name (Last, First, Middle Initial)

**B. Mo Jenkins Campaign**

Mailing Address PO Box 16638

City  
Houston

State  
TX

Zip Code  
77222-6638

Purpose of Disbursement  
Non-Federal Contribution

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	2		2	3		2	0	2	4

FEC Identification Number

C [ ]

**Transaction ID : 500013322**

Amount of Each Disbursement this Period

[ ] 5000.00

Memo Item

Full Name (Last, First, Middle Initial)

**C. Molly For Texas**

Mailing Address PO Box 667238

City  
Houston

State  
TX

Zip Code  
77266-7238

Purpose of Disbursement  
Non-Federal Contribution

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	2		0	8		2	0	2	4

FEC Identification Number

C [ ]

**Transaction ID : 500013308**

Amount of Each Disbursement this Period

[ ] 2500.00

Memo Item

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

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

[ ] 7750.00

[ ]

**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)  
**LGBTQ Victory Fund Federal PAC**

Full Name (Last, First, Middle Initial) <b>A. Molly For Texas</b>		Date of Disbursement MM / DD / YYYY 02 / 29 / 2024	
Mailing Address PO Box 667238			
City Houston	State TX	Zip Code 77266-7238	
Purpose of Disbursement Non-Federal Contribution		Category/Type <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:			
		FEC Identification Number C <b>Transaction ID : 500013323</b> Amount of Each Disbursement this Period 2500.00	
		<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>B. Scotty Hernandez for School Board 2024</b>		Date of Disbursement MM / DD / YYYY 02 / 08 / 2024	
Mailing Address PO Box 2952			
City Oklahoma City	State OK	Zip Code 73101-2952	
Purpose of Disbursement Non-Federal Contribution		Category/Type <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:			
		FEC Identification Number C <b>Transaction ID : 500013305</b> Amount of Each Disbursement this Period 250.00	
		<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>C.</b>		Date of Disbursement MM / DD / YYYY	
Mailing Address			
City	State	Zip Code	
Purpose of Disbursement		Category/Type <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:			
		FEC Identification Number C Amount of Each Disbursement this Period	
		<input type="checkbox"/> Memo Item	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	2750.00
<b>TOTAL</b> This Period (last page this line number only).....▶	21521.00