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

Schedule E)	FOR SE OF FORM 24/48			
IAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼			
Hispanic Victory PAC				
	C C00614453			
Check if 24-hour report 48-hour report New report Amends report filed	I on Man / Dab / Yayayay			
Full Name of Payee	Date of Public Distribution/Dissemination			
ZIP Mailing Services, Inc.	05 23 2016			
Mailing Address 6304 Sheriff Road				
Suite Z	Amount			
City State Zip Code	982.67			
Hyattsville MD 20785-4361	Transaction ID : E8AD5B18A7C5F488590B Date of Disbursement or Obligation			
Purpose of Expenditure Direct Mail - Printing  Category/ Type	05 23 / 2016			
Name of Federal Candidate Support Office	e Sought: House District: 00			
Clinton, Hillary, , ,	President Senate State:			
Calendar Year-To-Date Per Election for Office Sought  Disbut 2016	orsement For: Primary <b>X</b> General Other (specify) ▶			
Full Name of Payee Omega List Company	Date of Public Distribution/Dissemination			
Mailing Address 1420 Spring Hill Road	05 23 2016			
Suite 490	Amount			
City State Zip Code	113.66			
Mc Lean VA 22102-3028	Transaction ID : E4EAC39D934704B37BF4 Date of Disbursement or Obligation			
Purpose of Expenditure Direct Mail - List Rental Expenses  Category/ Type	05 23 2016			
Name of Federal Candidate Support Offic	e Sought: House District: 00			
Clinton, Hillary, , ,	President Senate State:			
Calendar Year-To-Date Per Election for Office Sought  Disb 2016	ursement For: Primary   General  Other (specify)			
(a) SUBTOTAL of Itemized Independent Expenditures	1096.33			
(b) SUBTOTAL of Unitemized Independent Expenditures				
(c) TOTAL Independent Expenditures				
Under penalty of perjury I certify that the independent expenditures reported herein were not mwith, 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.				
2 4.10	01 06 2017			
Signature				

## 24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES

Schedule E)	PAGE 2 OF 5 FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼
Hispanic Victory PAC	C C00614453
Check if 24-hour report	ends report filed on/
Full Name of Payee Omega List Company	Date of Public Distribution/Dissemination
Mailing Address 1420 Spring Hill Road	05 23 2016 Amount
Suite 490	Amount
City State Zip Code	119.64
Mc Lean VA 22102-3028	Transaction ID : E2E2D8ACA6D674D4DBE: Date of Disbursement or Obligation
Purpose of Expenditure Direct Mail - List Rental Expenses  Category/ Type	05 / 23 / 2016
Name of Federal Candidate	upport Office Sought: House District: 00
Clinton Hillon	ppose President Senate State:
Calendar Year-To-Date Per Election for Office Sought 18214.20	Disbursement For: Primary   ✓ General  2016  Other (specify)   ✓
Full Name of Payee	Date of Public Distribution/Dissemination
Omega List Company	05 23 2016
Mailing Address '1420 Spring Hill Road	Amount
Suite 490	Autount
City State Zip Code	10.46
Mc Lean VA 22102-3028	Transaction ID : EE1CCA83C3615492998A  Date of Disbursement or Obligation
Purpose of Expenditure Direct Mail - List Rental Expenses  Category/ Type	05 / 23 / Y 2016
Name of Federal Candidate	upport Office Sought: House District: 00
Clinton, Hillary, , ,	Oppose President Senate State:
Calendar Year-To-Date Per Election for Office Sought 18214.20	Disbursement For: Primary   General  Other (specify) ▶
(a) SUBTOTAL of Itemized Independent Expenditures	
(-)	130.10
(b) SUBTOTAL of Unitemized Independent Expenditures	<b>)</b>
(c) TOTAL Independent Expenditures	······································
Under penalty of perjury I certify that the independent expenditures reported her with, or at the request or suggestion of, any candidate or authorized committee of party committee) any political party committee or its agent.	
Sanchez, Jesus, , ,  [Electronically Filed]	Date 01 06 2017
Signature	

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

Schedule E)	FOR SE OF FORM 24/48			
IAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼			
Hispanic Victory PAC	C C00614453			
Check if 24-hour report 48-hour report New report Amends report filed	on Man / Dab / Yayaya			
Full Name of Payee Omega List Company	Date of Public Distribution/Dissemination			
Mailing Address 1420 Spring Hill Road	05 23 2016			
Suite 490	Amount			
City State Zip Code	244.35			
Mc Lean VA 22102-3028	Transaction ID : E06109E6917C148D093F Date of Disbursement or Obligation			
Purpose of Expenditure Direct Mail - List Rental Expenses  Category/ Type	05 23 / Y 2016			
Name of Federal Candidate Support Office	e Sought: House District: 00			
Clinton, Hillary, , ,	President Senate State:			
Calendar Year-To-Date Per Election for Office Sought  Disbut 2016	ursement For: Primary <b>X</b> General  Other (specify) ▶			
Full Name of Payee	Date of Public Distribution/Dissemination			
Omega List Company	05 23 2016			
Mailing Address '1420 Spring Hill Road				
Suite 490	Amount			
City State Zip Code	200.50			
Mc Lean VA 22102-3028	Transaction ID : E181966F57EE84C689A6 Date of Disbursement or Obligation			
Purpose of Expenditure Direct Mail - List Rental Expenses  Category/ Type	05 23 / 2016			
Name of Federal Candidate Support Office	e Sought: House District: 00			
Clinton, Hillary, , ,	President Senate State:			
Calendar Year-To-Date Per Election for Office Sought  Disbute 18214.20  Disbute 18214.20	ursement For: Primary   General  Other (specify)			
	Other (specify)			
(a) SUBTOTAL of Itemized Independent Expenditures	444.85			
(b) SUBTOTAL of Unitemized Independent Expenditures				
(c) TOTAL Independent Expenditures				
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.				
	01 06 2017			
Signature				

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

Schedule E)	EXI END			PAC	GE 4 OF 5 R SE OF FORM 24/48			
NAME OF COMMITTEE (In Full)					TIFICATION NUMBER ▼			
Hispanic Victory PAC					614453			
2h-sh-''	THE MANN AND			M / D	D / Y Y Y Y Y			
Check if 24-hour report 48-hour report	<b>✗</b> New rep	ort Amends repo	ort filed on		<u> </u>			
Full Name of Payee Omega List Company				1 M / D	tribution/Dissemination			
Mailing Address ' 1420 Spring Hill Road				05	23 2016			
Suite 490			Amou	nt				
City	City State Zip Code				445.44			
Mc Lean	VA	22102-3028			6D72821622404469B40 nent or Obligation			
Purpose of Expenditure Direct Mail - List Rental Expenses		Category/ Type		05 / D	23 / Y Y Y Y Y Y Y 2016			
Name of Federal Candidate		Support	Office Sough	it: H	ouse District: 00			
Clinton, Hillary, , ,		<b>x</b> Oppose	<b>x</b> Presid	ent Se	enate State:			
Calendar Year-To-Date Per Election for Office Sought		18214.20	Disbursemer 2016	t For:	Primary General			
Full Name of Payee					tribution/Dissemination			
Colortree Group, Inc.				/ M / D	D / Y Y Y Y			
Mailing Address 8000 Villa Park Drive				05	23 2016			
3333 1.112 1.113			Amou	ınt				
City	State	Zip Code			1222.65			
Richmond	VA	23228-6500	Transa Date	Transaction ID: E916AD7862631426E8F3 Date of Disbursement or Obligation				
Purpose of Expenditure Direct Mail - Printing		Category/ Type		05 / D	23 / 2016			
Name of Federal Candidate		Support	Office Sough	nt: H	ouse District: 00			
Clinton, Hillary, , ,					enate State:			
Calendar Year-To-Date Per Election for Office Sought		18214.20	Disbursemer 2016	nt For:	Primary <b>X</b> General			
(a) SUBTOTAL of Itemized Independent Expendit	tures		. <b>.</b>	7	1668.09			
(b) SUBTOTAL of Unitemized Independent Exper	nditures		· •	1 7 1				
(c) TOTAL Independent Expenditures			·· •		7 1 4			
Under penalty of perjury I certify that the independent with, or at the request or suggestion of, any candragery committee) any political party committee or	lidate or authorized							
Sanchez, Jesus, , ,	[Electron	nically Filed] Date	e 01	06	2017			
Signature								

## 24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES

Schedule E)	PAGE 5 OF 5 FOR SE OF FORM 24/48				
NAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼				
Hispanic Victory PAC	C C00614453				
Check if 24-hour report 48-hour report New report Amends report filed on	M = M / D = D / Y = Y = Y				
Full Name of Payee Dat	te of Public Distribution/Dissemination				
Omega List Company	05 23 Y 2016				
Mailing Address 1420 Spring Hill Road	Amount				
Suite 490					
City State Zip Code	52.17				
	Insaction ID: EA6ED9F39A1784990A4F te of Disbursement or Obligation				
Purpose of Expenditure Direct Mail - List Rental Expenses  Category/ Type	05 23 / 2016				
Name of Federal Candidate Support Office Sou	ught: House District: 00				
Clinton Hillary	sident Senate State:				
Calendar Year-To-Date Per Election for Office Sought  Disbursem 2016	,				
	Other (specify)				
Full Name of Payee Da	te of Public Distribution/Dissemination				
Mailing Address	nount				
All	iount				
City State Zip Code					
	te of Disbursement or Obligation				
Purpose of Expenditure  Category/ Type	M = M / D = D / Y = Y = Y				
Name of Federal Candidate Support Office Sou	ught: House District:				
Oppose Pres	sident Senate State:				
Calendar Year-To-Date Disbursem	nent For: Primary General				
Per Election for Office Sought	Other (specify) ►				
(a) SUBTOTAL of Itemized Independent Expenditures	52.17				
(b) SUBTOTAL of Unitemized Independent Expenditures					
(c) TOTAL Independent Expenditures	3391.54				
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Sanchez, Jesus, , ,  [Electronically Filed] Date 01	/ DDD / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y				
Signature					