

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 HISPANIC VICTORY PAC

ADDRESS (number and street) 11635 STONEVIEW SQ SUITE 12C RESTON VA 20191-2976 Check if different than previously reported. (ACC)

2. FEC IDENTIFICATION NUMBER C00614453 3. IS THIS REPORT NEW (N) OR AMENDED (A) [X] NEW (N) OR AMENDED (A)

4. TYPE OF REPORT (Choose One) (a) Quarterly Reports: April 15, July 15, October 15, January 31, July 31 Mid-Year, Termination Report. (b) Monthly Report Due On: Feb 20, Mar 20, Apr 20, May 20, Jun 20, Jul 20, Aug 20, Sep 20, Oct 20, Nov 20, Dec 20, Jan 31. (c) 12-Day PRE-Election Report for the: Primary, General, Runoff, Convention, Special. (d) 30-Day POST-Election Report for the: General, Runoff, Special.

5. Covering Period 07 / 01 / 2018 through 09 / 30 / 2018

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

Signature of Treasurer OEHLER, MICHAEL, , , [Electronically Filed] Date 10 / 15 / 2018

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

**HISPANIC VICTORY PAC**

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="2018"/>		20258.22
(b) Cash on Hand at Beginning of Reporting Period.....	18235.21	
(c) Total Receipts (from Line 19) .....	142880.79	393568.30
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	161116.00	413826.52
7. Total Disbursements (from Line 31).....	116060.32	368770.84
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	45055.68	45055.68
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	
10. Debts and Obligations Owed <b>BY</b> 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:**

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

**HISPANIC VICTORY PAC**

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).....	44207.05	90461.23
(ii) Unitemized .....	94873.42	294643.59
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	139080.47	385104.82
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) .....	139080.47	385104.82
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.).....	3800.32	8463.48
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)).....▶	142880.79	393568.30
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	142880.79	393568.30

**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 .....	81646.08	300248.66
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	81646.08	300248.66
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditures (use Schedule E) .....	34061.24	67901.18
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 .....	353.00	621.00
(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)).....	353.00	621.00
29. Other Disbursements (Including Non-Federal Donations).....	0.00	0.00
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)) ..	116060.32	368770.84
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	116060.32	368770.84

**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) .....	139080.47	385104.82
34. Total Contribution Refunds (from Line 28(d)) .....	353.00	621.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	138727.47	384483.82
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	81646.08	300248.66
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	81646.08	300248.66

**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 129
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
	<input type="checkbox"/> 12	<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)  
**HISPANIC VICTORY PAC**

**A. ANDERSON, ARTHUR, D, DR.,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1140 GASTON MANOR DR  
 City DURHAM State NC Zip Code 27703  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 215.00

Date of Receipt 09 / 10 / 2018  
**Transaction ID : A1AB4FC4139084121940**  
 Amount of Each Receipt this Period 100.00  
 Memo Item

**B. ANDERSON, DANA, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 100 FALL CREEK RD  
 City LAWRENCE State KS Zip Code 66049-9067  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 08 / 10 / 2018  
**Transaction ID : ABCA1A4833D0A4E6BABF**  
 Amount of Each Receipt this Period 100.00  
 Memo Item

**C. AYSSEH, ALFRED, G, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 25 SUTTON PL S APT 15G  
 City NEW YORK State NY Zip Code 10022-2461  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 07 / 05 / 2018  
**Transaction ID : A90CAD740C0DD4649BC3**  
 Amount of Each Receipt this Period 250.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	450.00
<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 7 OF 129
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**HISPANIC VICTORY PAC**

**A. AYSSEH, ALFRED, G, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 25 SUTTON PL S  
 APT 15G  
 City NEW YORK State NY Zip Code 10022-2461  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt 09 / 14 / 2018  
**Transaction ID : A3F5D7CB8F1E4482E8DE**  
 Amount of Each Receipt this Period 100.00  
 Memo Item

**B. BAIN, ELLIE, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 3409 JONESBERRY RD  
 City MATTHEWS State NC Zip Code 28105  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) INFORMATION REQUESTED Occupation (for Individual) INFORMATION REQUESTED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 09 / 07 / 2018  
**Transaction ID : ADBF100646541464EB47**  
 Amount of Each Receipt this Period 500.00  
 Memo Item

**C. BEAL, TERRY, J, DR., MD**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1309 EAGLE TRL  
 City COPPERAS COVE State TX Zip Code 76522-1967  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) CTOC Occupation (for Individual) PHYSICIAN  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 07 / 26 / 2018  
**Transaction ID : A1916BE5F3D6A443F930**  
 Amount of Each Receipt this Period 125.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	725.00
<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:	PAGE 8 OF 129
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
	<input type="checkbox"/> 12	<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**HISPANIC VICTORY PAC**

**A. BEAL, TERRY, J, DR., MD**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1309 EAGLE TRL

City COPPERAS COVE	State TX	Zip Code 76522-1967
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) CTOC	Occupation (for Individual) PHYSICIAN
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Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
375.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
09		10		2018

**Transaction ID : A70718C5633DD4CAB9E8**

Amount of Each Receipt this Period  
75.00

Memo Item

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

Mailing Address 4105 E 107TH ST

City KANSAS CITY	State MO	Zip Code 64137-1861
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FEC ID number of contributing federal political committee. **C**

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
215.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
07		10		2018

**Transaction ID : A480CED54B7A24582A11**

Amount of Each Receipt this Period  
50.00

Memo Item

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

Mailing Address 4105 E 107TH ST

City KANSAS CITY	State MO	Zip Code 64137-1861
---------------------	-------------	------------------------

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

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

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
265.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
08		07		2018

**Transaction ID : AB68001B3959D45F9908**

Amount of Each Receipt this Period  
50.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	175.00
<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 129
<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

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NAME OF COMMITTEE (In Full)  
**HISPANIC VICTORY PAC**

**A. BENSING, WALTER, F, MR.,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4105 E 107TH ST

City KANSAS CITY	State MO	Zip Code 64137-1861
---------------------	-------------	------------------------

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
305.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	13	/	2018

**Transaction ID : AF68646734D194451A28**

Amount of Each Receipt this Period  
40.00

Memo Item

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

Mailing Address 21906 NE 140TH WAY

City WOODINVILLE	State WA	Zip Code 98077
---------------------	-------------	-------------------

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

Name of Employer (for Individual) RIVER INDUSTRIES	Occupation (for Individual) MANAGER
---	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
230.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	20	/	2018

**Transaction ID : A7B5E6C2CCCB4429DAC1**

Amount of Each Receipt this Period  
230.00

Memo Item

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

Mailing Address 3511 FAIRWAY DR B  
# B

City HAYS	State KS	Zip Code 67601-1546
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) WAREHOUSE INC	Occupation (for Individual) SEMI RETIRED
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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
07	/	12	/	2018

**Transaction ID : AD78314FE049C4DEBA15**

Amount of Each Receipt this Period  
250.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	520.00
<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 129
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**HISPANIC VICTORY PAC**

**A. BRACKENRIDGE, DAVID, R, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 5232 HALLS FERRY DR  
 City BATON ROUGE State LA Zip Code 70817  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 08 / 28 / 2018  
**Transaction ID : A8F0295C5209240B2923**  
 Amount of Each Receipt this Period 300.00  
 Memo Item

**B. BRANDT, JOHN, L, MR.,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2129 12TH AVE E  
 City HIBBING State MN Zip Code 55746-1836  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 840.00

Date of Receipt 07 / 17 / 2018  
**Transaction ID : A7A275E9572E54144BE6**  
 Amount of Each Receipt this Period 210.00  
 Memo Item

**C. BRANDT, JOHN, L, MR.,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2129 12TH AVE E  
 City HIBBING State MN Zip Code 55746-1836  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 940.00

Date of Receipt 08 / 02 / 2018  
**Transaction ID : AB43CE2B9CF994D7DA6C**  
 Amount of Each Receipt this Period 100.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	610.00
<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 129
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**HISPANIC VICTORY PAC**

**A. BRITTON, LYNDA, R, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 9913 LAKE SHORE BLVD  
 City CLEVELAND State OH Zip Code 44108  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 09 / 27 / 2018  
**Transaction ID : A35245FC9BD7F4761BD3**  
 Amount of Each Receipt this Period 1000.00  
 Memo Item

**B. BROWN, BRYAN, J, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 23526 COUNTY ROAD 448  
 City LINDALE State TX Zip Code 75771-3432  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 235.87

Date of Receipt 07 / 13 / 2018  
**Transaction ID : ADD64D785FC434A57945**  
 Amount of Each Receipt this Period 118.00  
 Memo Item

**C. BROWN, BRYAN, J, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 23526 COUNTY ROAD 448  
 City LINDALE State TX Zip Code 75771-3432  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 285.87

Date of Receipt 08 / 06 / 2018  
**Transaction ID : AD05E6BAC76704FE2932**  
 Amount of Each Receipt this Period 50.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1168.00
<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 12 OF 129
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**HISPANIC VICTORY PAC**

**A. BROWN, DAN, J, ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 6318 WOODMAN DR

City OROVILLE	State CA	Zip Code 95966-3844
------------------	-------------	------------------------

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
580.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
07		19		2018

**Transaction ID : ACFF4B2913C584021963**

Amount of Each Receipt this Period  
200.00

Memo Item

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

Mailing Address PO BOX 815  
701 GARLAND ST

City LAKE CITY	State SC	Zip Code 29560-0815
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FEC ID number of contributing federal political committee. **C**

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
227.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
08		13		2018

**Transaction ID : A3FC6EABEACDB42A8AA1**

Amount of Each Receipt this Period  
40.00

Memo Item

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

Mailing Address PO BOX 815  
701 GARLAND ST

City LAKE CITY	State SC	Zip Code 29560-0815
-------------------	-------------	------------------------

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

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

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
267.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
09		13		2018

**Transaction ID : AE9BEEC6C3741439A85F**

Amount of Each Receipt this Period  
40.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	280.00
<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 13 OF 129
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)  
**HISPANIC VICTORY PAC**

**A. BUERGER, WILLI, C, MR.,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 36206 WAYMAN RD  
 City GARBER State IA Zip Code 52048-8059  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 211.00

Date of Receipt 09 / 10 / 2018  
**Transaction ID : AD00B5A7D7F4F40E8B59**  
 Amount of Each Receipt this Period 32.00  
 Memo Item

**B. BURSUM, HOLM, , , III**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO BOX Z  
 City SOCORRO State NM Zip Code 87801-0479  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) SELF-EMPLOYED Occupation (for Individual) RANCHER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 422.00

Date of Receipt 08 / 07 / 2018  
**Transaction ID : A7C7D89BAF2CF4341BB6**  
 Amount of Each Receipt this Period 100.00  
 Memo Item

**C. BUSH, HAROLD, S, MR.,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1045 SUNNYSIDE DR  
 City VIRGINIA BEACH State VA Zip Code 23464-1925  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 222.00

Date of Receipt 08 / 03 / 2018  
**Transaction ID : A86FAB8483EA54FF4ACA**  
 Amount of Each Receipt this Period 75.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	207.00
<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 14 OF 129
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**HISPANIC VICTORY PAC**

**A. CAILLOUX, KENNETH, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 303 SPRING MILL DR  
 City KERRVILLE State TX Zip Code 78028  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) CAILLOUX FOUNDATION Occupation (for Individual) PRESIDENT  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 07 / 13 / 2018  
**Transaction ID : A2ACD6BEAA5E1416DAC**  
 Amount of Each Receipt this Period 1000.00  
 Memo Item

**B. CALLAHAN, PETER, M, MR.,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 318 BUCKEYE CT  
 City LAFAYETTE State CA Zip Code 94549-4101  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 08 / 09 / 2018  
**Transaction ID : A338D57A002C541EEBDE**  
 Amount of Each Receipt this Period 100.00  
 Memo Item

**C. CALLAHAN, PETER, M, MR.,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 318 BUCKEYE CT  
 City LAFAYETTE State CA Zip Code 94549-4101  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 550.00

Date of Receipt 09 / 19 / 2018  
**Transaction ID : AC11B3611CAF04A629B4**  
 Amount of Each Receipt this Period 250.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1350.00
<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 15 OF 129
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**HISPANIC VICTORY PAC**

**A. CAMPBELL, ROBERT, F, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO BOX 11390  
 City MIDLAND State TX Zip Code 79702-8390  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 08 / 16 / 2018  
**Transaction ID : A38DD7C9A1EE1422BA74**  
 Amount of Each Receipt this Period 200.00  
 Memo Item

**B. CAMPBELL, ROBERT, F, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO BOX 11390  
 City MIDLAND State TX Zip Code 79702-8390  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1300.00

Date of Receipt 09 / 24 / 2018  
**Transaction ID : AA4CD6C74E85949159AC**  
 Amount of Each Receipt this Period 1000.00  
 Memo Item

**C. CLAIBORNE, WALTER, H, , III**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 14217 CLAIBORNE RD  
 City BATCHELOR State LA Zip Code 70715-3514  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) REAL ESTATE  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 08 / 20 / 2018  
**Transaction ID : AED5881EDB68045E7951**  
 Amount of Each Receipt this Period 200.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1400.00
<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: PAGE 16 OF 129  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**HISPANIC VICTORY PAC**

**A. CLAIRBORNE, WALTER, H, , III**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 14217 CLAIBORNE RD  
 City BATCHELOR State LA Zip Code 70715-3514  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) REAL ESTATE  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 09 / 10 / 2018  
**Transaction ID : AEFAA2D000ED040FDAF2**  
 Amount of Each Receipt this Period 100.00  
 Memo Item

**B. CLARK, KIRK, A, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO BOX 938  
 City MCALLEN State TX Zip Code 78505-0938  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) AUTOMOTIVE DEALER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 08 / 06 / 2018  
**Transaction ID : A2F0CF3DAF473486BB48**  
 Amount of Each Receipt this Period 500.00  
 Memo Item

**C. CLARK, RICHARD, A, MR.,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 5810 OSO PKWY  
 City CORPUS CHRISTI State TX Zip Code 78414-6046  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 09 / 10 / 2018  
**Transaction ID : A2269F6B9EDC243B9B94**  
 Amount of Each Receipt this Period 250.00  
 Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 850.00  
**TOTAL** 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 17 OF 129
<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

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NAME OF COMMITTEE (In Full)  
**HISPANIC VICTORY PAC**

**A. COLE, FRANCIS, H, MR., JR**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 6195 BOSKEY DR

City MILLINGTON	State TN	Zip Code 38053-6901
--------------------	-------------	------------------------

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
700.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
08		09		2018

**Transaction ID : A96838DE0050849E891B**

Amount of Each Receipt this Period  
200.00

Memo Item

**B. COLE, FRANCIS, H, MR., JR**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 6195 BOSKEY DR

City MILLINGTON	State TN	Zip Code 38053-6901
--------------------	-------------	------------------------

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
900.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
08		30		2018

**Transaction ID : A247D0F9438E84CD0871**

Amount of Each Receipt this Period  
200.00

Memo Item

**C. COLE, FRANCIS, H, MR., JR**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 6195 BOSKEY DR

City MILLINGTON	State TN	Zip Code 38053-6901
--------------------	-------------	------------------------

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

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

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
1050.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
09		10		2018

**Transaction ID : A506B1B58791B4F169B2**

Amount of Each Receipt this Period  
150.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	550.00
<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:	PAGE 18 OF 129
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**HISPANIC VICTORY PAC**

**A. CONRAD, RAYMOND, E, MR.,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO BOX 3687  
 City PLANT CITY State FL Zip Code 33563-0011  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 700.00

Date of Receipt **07 / 13 / 2018**  
**Transaction ID : ABD018EFDFA764DE9BD4**  
 Amount of Each Receipt this Period 350.00  
 Memo Item

**B. COOK, SALLY, ANN, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO BOX 121  
 City RACKERBY State CA Zip Code 95972-0121  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 212.00

Date of Receipt **09 / 19 / 2018**  
**Transaction ID : A5E2E1A8CB7B9433CB45**  
 Amount of Each Receipt this Period 40.00  
 Memo Item

**C. CRAWFORD, BETTY, R, MRS.,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 601 ASPEN TRL  
 City MUSCATINE State IA Zip Code 52761-2873  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt **09 / 11 / 2018**  
**Transaction ID : A110C868540924739922**  
 Amount of Each Receipt this Period 100.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	490.00
<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 19 OF 129
<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

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NAME OF COMMITTEE (In Full)  
**HISPANIC VICTORY PAC**

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

Mailing Address PO BOX 3003

City BLUE BELL	State PA	Zip Code 19422-0735
-------------------	-------------	------------------------

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

Name of Employer (for Individual) CRAWFORD BROADCASTING	Occupation (for Individual) OWNER
--	--------------------------------------

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
08	/	07	/	2018

**Transaction ID : A545AA685447A473CBE8**

Amount of Each Receipt this Period  
50.00

Memo Item

**B. CULPEPPER, ROBERT, C, DR., MD**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 525 PARK PLACE DR

City ALEXANDRIA	State LA	Zip Code 71301-3947
--------------------	-------------	------------------------

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

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) DOCTOR
--	---------------------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
400.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	09	/	2018

**Transaction ID : ACCD5F1BCAA12471CA37**

Amount of Each Receipt this Period  
250.00

Memo Item

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

Mailing Address PO BOX 133

City TROY	State KS	Zip Code 66087-0133
--------------	-------------	------------------------

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

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

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
590.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	10	/	2018

**Transaction ID : A02C283EC103E4B82B54**

Amount of Each Receipt this Period  
100.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	400.00
<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:	PAGE 20 OF 129
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**HISPANIC VICTORY PAC**

**A. DAHLBERG, WALTER, GUNNARD, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 3936 LOVERS LN  
 City DALLAS State TX Zip Code 75225-7102  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) DLDS LLC Occupation (for Individual) LANDS ARCHITECT  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt 08 / 09 / 2018  
**Transaction ID : A5BA0CBFEB3B24F15AAI**  
 Amount of Each Receipt this Period 75.00  
 Memo Item

**B. DAHLSTEDT, PAT, L, MRS.,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 13048 FARM TO MARKET RD  
 City MOUNT VERNON State WA Zip Code 98273-8705  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 27 / 2018  
**Transaction ID : A074AC775D69448EDB41**  
 Amount of Each Receipt this Period 250.00  
 Memo Item

**C. DONIHOO, BILLY, J, MR.,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2404 DUBLIN RD  
 City PLANO State TX Zip Code 75094-3802  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) FARMER  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 290.00

Date of Receipt 09 / 19 / 2018  
**Transaction ID : ABCED3F538C5F4F5996F**  
 Amount of Each Receipt this Period 100.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	425.00
<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 21 OF 129
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**HISPANIC VICTORY PAC**

**A. DUBE, CHARLES, I, MR.,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 9 WINTER ST

City CONCORD	State NH	Zip Code 03303-1615
-----------------	-------------	------------------------

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
255.00

Date of Receipt  

M M	/	D D	/	Y Y Y Y
08		06		2018

**Transaction ID : A6E16B8CDA08C4B69BF6**

Amount of Each Receipt this Period  
40.00

Memo Item

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

Mailing Address 320 KINGS MOUNTAIN RD

City WOODSIDE	State CA	Zip Code 94062-3618
------------------	-------------	------------------------

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

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) RIDING INSTRUCTOR
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
350.00

Date of Receipt  

M M	/	D D	/	Y Y Y Y
08		31		2018

**Transaction ID : A35D772CD250B444DBE6**

Amount of Each Receipt this Period  
250.00

Memo Item

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

Mailing Address 16436 COUNTY ROAD B

City BRISCOE	State TX	Zip Code 79011-3106
-----------------	-------------	------------------------

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

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) FARMER/RANCHER
--	---

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
300.00

Date of Receipt  

M M	/	D D	/	Y Y Y Y
09		24		2018

**Transaction ID : A10CE8A263E9B4952ACD**

Amount of Each Receipt this Period  
300.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	590.00
<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 22 OF 129
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**HISPANIC VICTORY PAC**

**A. EMERSON, PAUL, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 5901 E 7TH ST 150 # 150  
 City LONG BEACH State CA Zip Code 90822-5201  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt 09 / 10 / 2018  
**Transaction ID : A5553196D6F2A4E7E93F**  
 Amount of Each Receipt this Period 200.00  
 Memo Item

**B. EVANS, WILLIAM, J, MR.,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2515 WOODLAND RD  
 City TUSCALOOSA State AL Zip Code 35404-5028  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 08 / 13 / 2018  
**Transaction ID : A16D6F9F0BC3942018D4**  
 Amount of Each Receipt this Period 50.00  
 Memo Item

**C. EVANS, WILLIAM, J, MR.,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2515 WOODLAND RD  
 City TUSCALOOSA State AL Zip Code 35404-5028  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt 08 / 24 / 2018  
**Transaction ID : A5C6AD324584B43FA863**  
 Amount of Each Receipt this Period 50.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	300.00
<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 23 OF 129
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**HISPANIC VICTORY PAC**

**A. FILIPPONE, LINDA, S, MS.,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4202 68TH ST

City LUBBOCK	State TX	Zip Code 79413-5915
-----------------	-------------	------------------------

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
290.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
07		09		2018

**Transaction ID : A96FD39AA95BF4D2EA6D**

Amount of Each Receipt this Period  
40.00

Memo Item

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

Mailing Address 4202 68TH ST

City LUBBOCK	State TX	Zip Code 79413-5915
-----------------	-------------	------------------------

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
415.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
07		30		2018

**Transaction ID : ACCCC1D6EF6BD4B42AE2**

Amount of Each Receipt this Period  
125.00

Memo Item

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

Mailing Address 4202 68TH ST

City LUBBOCK	State TX	Zip Code 79413-5915
-----------------	-------------	------------------------

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

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

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
515.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
08		14		2018

**Transaction ID : AE754696344664794975**

Amount of Each Receipt this Period  
100.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	265.00
<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 24 OF 129
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**HISPANIC VICTORY PAC**

**A. GARDINER, DONNA, B, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 281 COUNTY ROUTE 412

City WESTERLO	State NY	Zip Code 12193-3607
------------------	-------------	------------------------

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

Name of Employer (for Individual) WYCLIFFE BIBLE TRANSLATIONS INC.	Occupation (for Individual) TRANSLATION CONSULTANT
---	---

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
300.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 08 / 14 / 2018  
**Transaction ID : A9EA9F59D22D541E7924**

Amount of Each Receipt this Period  
200.00

Memo Item

**B. GENTRY, JIM, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO BOX 1255

City TEMPLE	State TX	Zip Code 76503-1255
----------------	-------------	------------------------

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
246.21

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 17 / 2018  
**Transaction ID : A89F775FC04474C8382D**

Amount of Each Receipt this Period  
51.00

Memo Item

**C. GRAFTON, KAREN, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 913 BUCKWOOD DR

City ORLANDO	State FL	Zip Code 32806-6326
-----------------	-------------	------------------------

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

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

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 08 / 03 / 2018  
**Transaction ID : A77EAD112CDB4438B8DD**

Amount of Each Receipt this Period  
500.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	751.00
<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:	PAGE 25 OF 129
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**HISPANIC VICTORY PAC**

**A. GRIFFITH, LOIS, J, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address N2308 WINDWOOD LN  
 City LAKE GENEVA State WI Zip Code 53147  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) INFORMATION REQUESTED Occupation (for Individual) INFORMATION REQUESTED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 09 / 11 / 2018  
**Transaction ID : A3FFC03914E3B41AF9A9**  
 Amount of Each Receipt this Period 250.00  
 Memo Item

**B. GROSS, PAUL, D, MR.,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 7640 W MAIN ST  
 City DECATUR State IL Zip Code 62522-9689  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 270.00

Date of Receipt 07 / 10 / 2018  
**Transaction ID : A6501AD094DCB4677988**  
 Amount of Each Receipt this Period 100.00  
 Memo Item

**C. GROSS, PAUL, D, MR.,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 7640 W MAIN ST  
 City DECATUR State IL Zip Code 62522-9689  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 290.00

Date of Receipt 07 / 24 / 2018  
**Transaction ID : A00CE216CFE6F4DDFAF1**  
 Amount of Each Receipt this Period 20.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	370.00
<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 26 OF 129
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**HISPANIC VICTORY PAC**

**A. GROSS, PAUL, D, MR.,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 7640 W MAIN ST

City DECATUR	State IL	Zip Code 62522-9689
-----------------	-------------	------------------------

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
330.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	10	/	2018

**Transaction ID : AD5F2D208FB3647F38B2**

Amount of Each Receipt this Period  
40.00

Memo Item

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

Mailing Address 22 DUNCAN ST

City LANCASTER	State PA	Zip Code 17602
-------------------	-------------	-------------------

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	17	/	2018

**Transaction ID : A9307A1EE2E72486CB83**

Amount of Each Receipt this Period  
500.00

Memo Item

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

Mailing Address 337 DEVON DR

City COPPELL	State TX	Zip Code 75019-4017
-----------------	-------------	------------------------

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

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

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
270.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	07	/	2018

**Transaction ID : A63947B8EC91D4FF895B**

Amount of Each Receipt this Period  
60.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	600.00
<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 27 OF 129
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**HISPANIC VICTORY PAC**

**A. HAILEY, EVELYN, R, MS.,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 337 DEVON DR

City COPPELL	State TX	Zip Code 75019-4017
-----------------	-------------	------------------------

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
310.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	10	/	2018

**Transaction ID : AC2A07C9EDFCF479D90F**

Amount of Each Receipt this Period  
40.00

Memo Item

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

Mailing Address 11 CORAL DR

City PITTSBURGH	State PA	Zip Code 15238-2605
--------------------	-------------	------------------------

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

Name of Employer (for Individual) ALLEGHENY COUNTY	Occupation (for Individual) NETWORK ADMIN
---	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
225.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	12	/	2018

**Transaction ID : AC0A74941420A4812805**

Amount of Each Receipt this Period  
150.00

Memo Item

**C. HANES, THOMAS, E, DR., MD**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 5223 HEATHROW HILLS DR

City BRENTWOOD	State TN	Zip Code 37027-6548
-------------------	-------------	------------------------

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

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

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
600.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	27	/	2018

**Transaction ID : AA80AE1CA4D2E4B6F9FE**

Amount of Each Receipt this Period  
500.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	690.00
<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 28 OF 129
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**HISPANIC VICTORY PAC**

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

Mailing Address 88 MASONIC HOME RD  
APT R313

City CHARLTON State MA Zip Code 01507-3304

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
08 / 15 / 2018  
Transaction ID : **AECEAFB55DC134692B9E**

Amount of Each Receipt this Period  
100.00

Memo Item

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

Mailing Address PO BOX 4144

City VENTURA State CA Zip Code 93007-0144

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

Name of Employer (for Individual) HARRISON IND Occupation (for Individual) CEO

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1500.00

Date of Receipt  
07 / 13 / 2018  
Transaction ID : **A0571FC1EEFA24B30875**

Amount of Each Receipt this Period  
1000.00

Memo Item

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

Mailing Address 2851 SEMINOLE ST

City MIAMI State FL Zip Code 33133-3234

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

Name of Employer (for Individual) S RESEARCH INC Occupation (for Individual) PHYSICIAN

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  
07 / 13 / 2018  
Transaction ID : **A87C08237B45248AEB92**

Amount of Each Receipt this Period  
250.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1350.00
<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 29 OF 129
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**HISPANIC VICTORY PAC**

**A. HART, PETER, J, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 101 BUBIER RD  
 City MARBLEHEAD State MA Zip Code 01945  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 09 / 25 / 2018  
**Transaction ID : A0DF5C86A1B3B4F2588C**  
 Amount of Each Receipt this Period 500.00  
 Memo Item

**B. HAWTHORNE, RAYMOND, S, COL, USA RET**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 39 VALLEY DR  
 City ANNVILLE State PA Zip Code 17003-9522  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 08 / 17 / 2018  
**Transaction ID : AD07B7CA7C18048B187D**  
 Amount of Each Receipt this Period 25.00  
 Memo Item

**C. HEIFNER, BOBBY, , MR.,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1580 E WINNINGKOFF RD  
 City ALLEN State TX Zip Code 75002-8238  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 08 / 24 / 2018  
**Transaction ID : A7161FA2E89874E728D3**  
 Amount of Each Receipt this Period 150.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	675.00
<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 30 OF 129
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**HISPANIC VICTORY PAC**

**A. HENDERSON, SHIRLEY, H, MS.,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2050 BEAVERCREEK RD  
101-307

City OREGON CITY State OR Zip Code 97045-4301

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
332.00

Date of Receipt  
09 / 21 / 2018  
Transaction ID : **AFA5FDAE5AF954A37BCE**

Amount of Each Receipt this Period  
50.00

Memo Item

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

Mailing Address 501 RILEY RD

City AUSTIN State TX Zip Code 78746

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  
09 / 21 / 2018  
Transaction ID : **AE73A51B3D9B244CABE9**

Amount of Each Receipt this Period  
1000.00

Memo Item

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

Mailing Address PO BOX 1302

City DILLON State MT Zip Code 59725-1302

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

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

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  
08 / 03 / 2018  
Transaction ID : **AF98736F47ED1464FB3F**

Amount of Each Receipt this Period  
500.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1550.00
<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 31 OF 129
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**HISPANIC VICTORY PAC**

**A. HURLEY, JOHN, L, MR., SR**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2195 IBIS ISLE RD  
 APT 8  
 City PALM BEACH State FL Zip Code 33480-5365  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 440.00

Date of Receipt 09 / 25 / 2018  
**Transaction ID : ABCE082A518DB446691B**  
 Amount of Each Receipt this Period 200.00  
 Memo Item

**B. HUSON, ROGER, W, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 33 MAPLE AVE  
 City SHALIMAR State FL Zip Code 32579-1132  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 09 / 13 / 2018  
**Transaction ID : AD09CDF8734F14EF481F**  
 Amount of Each Receipt this Period 75.00  
 Memo Item

**C. IHLE, DAVID, P, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 512 FRANCES AVE  
 City HUDSON State WI Zip Code 54016-8141  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) NATIONAL BUSINESS SYSTEMS Occupation (for Individual) CEO  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 17 / 2018  
**Transaction ID : A27B4F5C59D3F49DC84D**  
 Amount of Each Receipt this Period 75.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	350.00
<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 32 OF 129
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**HISPANIC VICTORY PAC**

**A. ISLAM, ANGE, RAE, MS.,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 5584 STATE ROUTE 20A E

City WARSAW	State NY	Zip Code 14569-9302
----------------	-------------	------------------------

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

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

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
09		17		2018

**Transaction ID : ADE416FC2C93B4892929**

Amount of Each Receipt this Period  
50.00

Memo Item

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

Mailing Address 2925 W 5TH ST  
APT 17B

City BROOKLYN	State NY	Zip Code 11224-3977
------------------	-------------	------------------------

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
263.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
07		19		2018

**Transaction ID : A074E5B4F391A47EDA70**

Amount of Each Receipt this Period  
113.00

Memo Item

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

Mailing Address 13250 RIDGE RD  
APT 5A6

City LARGO	State FL	Zip Code 33778-1834
---------------	-------------	------------------------

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

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

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
300.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
09		13		2018

**Transaction ID : AE8C3853A90F54035AC0**

Amount of Each Receipt this Period  
100.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	263.00
<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 33 OF 129
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**HISPANIC VICTORY PAC**

**A. JIMENEZ, JOSE, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2205 N EAST ST  
 City BELTON State TX Zip Code 76513-1643  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt 07 / 17 / 2018  
**Transaction ID : A0A3104C3D8AB4571BB0**  
 Amount of Each Receipt this Period 100.00  
 Memo Item

**B. JIMENEZ, JOSE, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2205 N EAST ST  
 City BELTON State TX Zip Code 76513-1643  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 290.00

Date of Receipt 08 / 06 / 2018  
**Transaction ID : A3C2E9A175EF14C90956**  
 Amount of Each Receipt this Period 50.00  
 Memo Item

**C. JONES, HARRY, R, MR.,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 475 BROWN SADDLE ST  
 City HOUSTON State TX Zip Code 77057  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) INVESTMENT/REAL ESTATE  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 17 / 2018  
**Transaction ID : A2F013D35A06A4AB89FC**  
 Amount of Each Receipt this Period 250.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	400.00
<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 34 OF 129
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)  
**HISPANIC VICTORY PAC**

**A. KELLY, ROBERT, V, MR.,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 495 LINDA LN  
 City FAIRLESS HILLS State PA Zip Code 19030-3807  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) NOT EMPLOYED Occupation (for Individual) NOT EMPLOYED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 214.52

Date of Receipt **07 / 09 / 2018**  
**Transaction ID : A0E117E1601414E59935**  
 Amount of Each Receipt this Period 69.77  
 Memo Item

**B. KITTREDGE, ROBERT, M, MR.,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 622 N DARTMOUTH RD  
 City SPOKANE State WA Zip Code 99206-3821  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 740.00

Date of Receipt **07 / 12 / 2018**  
**Transaction ID : A2679221B1B3E40D6A4C**  
 Amount of Each Receipt this Period 200.00  
 Memo Item

**C. KITTREDGE, ROBERT, M, MR.,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 622 N DARTMOUTH RD  
 City SPOKANE State WA Zip Code 99206-3821  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 840.00

Date of Receipt **08 / 14 / 2018**  
**Transaction ID : AE4E70C5C2E84498BA67**  
 Amount of Each Receipt this Period 100.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	369.77
<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 35 OF 129
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)  
**HISPANIC VICTORY PAC**

**A. KITTREDGE, ROBERT, M, MR.,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 622 N DARTMOUTH RD  
 City SPOKANE State WA Zip Code 99206-3821  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 890.00

Date of Receipt 09 / 25 / 2018  
**Transaction ID : A8FEE7FB6E91E4C8795E**  
 Amount of Each Receipt this Period 50.00  
 Memo Item

**B. KLOTZBACH, THERESA, R, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 5013 SW 26TH TER  
 City TOPEKA State KS Zip Code 66614-1419  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 07 / 09 / 2018  
**Transaction ID : AF49E58F6EA1642B0BF6**  
 Amount of Each Receipt this Period 200.00  
 Memo Item

**C. KNITTLE, DONALD, L, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1035 SCOTT DR APT 411  
 City PRESCOTT State AZ Zip Code 86301  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) INFORMATION REQUESTED Occupation (for Individual) INFORMATION REQUESTED  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 215.00

Date of Receipt 08 / 24 / 2018  
**Transaction ID : AE57C97A985B54B6D80E**  
 Amount of Each Receipt this Period 115.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	365.00
<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:	PAGE 36 OF 129
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**HISPANIC VICTORY PAC**

**A. KOWALIK, GEORGE, L, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO BOX 39  
 City PANNA MARIA State TX Zip Code 78144  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 08 / 07 / 2018  
**Transaction ID : A0069D2835AEB4E09A4E**  
 Amount of Each Receipt this Period 500.00  
 Memo Item

**B. KOWALIK, GEORGE, L, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO BOX 39  
 City PANNA MARIA State TX Zip Code 78144  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 09 / 17 / 2018  
**Transaction ID : A849DEEF516FA4886924**  
 Amount of Each Receipt this Period 500.00  
 Memo Item

**C. LAINE, BETH, , MS.,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 7630 BRENT LN  
 City LAS VEGAS State NV Zip Code 89131-1712  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 286.00

Date of Receipt 07 / 10 / 2018  
**Transaction ID : AF2D7F8BC243244A8B31**  
 Amount of Each Receipt this Period 100.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1100.00
<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 37 OF 129
<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

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NAME OF COMMITTEE (In Full)  
**HISPANIC VICTORY PAC**

**A. LAINE, BETH, , MS.,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 7630 BRENT LN  
 City LAS VEGAS State NV Zip Code 89131-1712  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 361.00

Date of Receipt 08 / 07 / 2018  
**Transaction ID : AE4C2FD5856AD402D867**  
 Amount of Each Receipt this Period 75.00  
 Memo Item

**B. LAINE, BETH, , MS.,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 7630 BRENT LN  
 City LAS VEGAS State NV Zip Code 89131-1712  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 411.00

Date of Receipt 09 / 10 / 2018  
**Transaction ID : A737F3043948A42B2A1D**  
 Amount of Each Receipt this Period 50.00  
 Memo Item

**C. LATHREM, DOUGLAS, W, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 3059 WENTWORTH CT  
 City JAMUL State CA Zip Code 91935  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) SELF EMPLOYED  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 09 / 28 / 2018  
**Transaction ID : AA56A26C32E1D451E9F3**  
 Amount of Each Receipt this Period 1000.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1125.00
<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:	PAGE 38 OF 129
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**HISPANIC VICTORY PAC**

**A. LAUDY, BARBARA, A, MS.,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 353 KENDAL DR

City KENNETT SQUARE	State PA	Zip Code 19348-2338
------------------------	-------------	------------------------

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
202.92

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	21	/	2018

**Transaction ID : ACEE84BE3260842698CA**

Amount of Each Receipt this Period  
28.28

Memo Item

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

Mailing Address 711 21ST ST  
APT 207

City FORT BENTON	State MT	Zip Code 59442-9713
---------------------	-------------	------------------------

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1100.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	17	/	2018

**Transaction ID : A5ADB798D27CFE4738885**

Amount of Each Receipt this Period  
300.00

Memo Item

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

Mailing Address 1004 W CRESCENT AVE

City REDLANDS	State CA	Zip Code 92373-6649
------------------	-------------	------------------------

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

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

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
222.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	02	/	2018

**Transaction ID : AE1F31B32F7E3421C9AA**

Amount of Each Receipt this Period  
40.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	368.28
<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 39 OF 129
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**HISPANIC VICTORY PAC**

**A. LIVACICH, JOHN, A, MR.,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1004 W CRESCENT AVE  
 City REDLANDS State CA Zip Code 92373-6649  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 257.00

Date of Receipt **07 / 23 / 2018**  
**Transaction ID : AED222B36E342415F802**  
 Amount of Each Receipt this Period 35.00  
 Memo Item

**B. LIVACICH, JOHN, A, MR.,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1004 W CRESCENT AVE  
 City REDLANDS State CA Zip Code 92373-6649  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 293.00

Date of Receipt **08 / 03 / 2018**  
**Transaction ID : ABAD00DF286B94D659E5**  
 Amount of Each Receipt this Period 36.00  
 Memo Item

**C. LIVACICH, JOHN, A, MR.,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1004 W CRESCENT AVE  
 City REDLANDS State CA Zip Code 92373-6649  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 303.00

Date of Receipt **09 / 07 / 2018**  
**Transaction ID : AF243EC68061944B18EA**  
 Amount of Each Receipt this Period 10.00  
 Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 81.00  
**TOTAL** 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 40 OF 129
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**HISPANIC VICTORY PAC**

**A. LOVELACE, LORRAINE, MAE, MRS.,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 4974 RIO VERDE DR  
 City SAN JOSE State CA Zip Code 95118-2303  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 07 / 19 / 2018  
**Transaction ID : A0D7453BC034E43DABE0**  
 Amount of Each Receipt this Period 225.00  
 Memo Item

**B. LOVELACE, LORRAINE, MAE, MRS.,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 4974 RIO VERDE DR  
 City SAN JOSE State CA Zip Code 95118-2303  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt 09 / 11 / 2018  
**Transaction ID : A85F41789BB7F4C60BE0**  
 Amount of Each Receipt this Period 100.00  
 Memo Item

**C. LYONS, KARL, J, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 4438 CHERRY OAK LN  
 City HOUSTON State TX Zip Code 77088-7212  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) FORAGED COMPONENTS, INC. Occupation (for Individual) BUSINESS OWNER  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 399.00

Date of Receipt 08 / 13 / 2018  
**Transaction ID : ACF443C70F45D4D08BF6**  
 Amount of Each Receipt this Period 249.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	574.00
<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 41 OF 129
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<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)  
**HISPANIC VICTORY PAC**

**A. MADSEN, NOLA, G, MRS.,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 11698 MYRNA DR

City GRASS VALLEY	State CA	Zip Code 95945-7602
----------------------	-------------	------------------------

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
273.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	14	/	2018

**Transaction ID : AB3272BEBFBF749D9A70**

Amount of Each Receipt this Period  
50.00

Memo Item

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

Mailing Address 11698 MYRNA DR

City GRASS VALLEY	State CA	Zip Code 95945-7602
----------------------	-------------	------------------------

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
348.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	27	/	2018

**Transaction ID : A988EDC29AABB4FA58FB**

Amount of Each Receipt this Period  
75.00

Memo Item

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

Mailing Address 2050 LARKWOOD CT

City THE VILLAGES	State FL	Zip Code 32162-3495
----------------------	-------------	------------------------

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

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

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	12	/	2018

**Transaction ID : AF30B9C9B71134A6E9E0**

Amount of Each Receipt this Period  
250.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	375.00
<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 42 OF 129
<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

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NAME OF COMMITTEE (In Full)  
**HISPANIC VICTORY PAC**

**A. MARTIN, PATRICIA, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 211 HARTFORD CT  
 City MAINEVILLE State OH Zip Code 45039  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt **07 / 20 / 2018**  
**Transaction ID : AF2BED890CDCB436DBE1**  
 Amount of Each Receipt this Period 250.00  
 Memo Item

**B. MARTIN, PATRICIA, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 211 HARTFORD CT  
 City MAINEVILLE State OH Zip Code 45039  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 290.00

Date of Receipt **09 / 19 / 2018**  
**Transaction ID : A1D25DFA9F3354B68B11**  
 Amount of Each Receipt this Period 40.00  
 Memo Item

**C. MARX, RICHARD, C, MR.,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO BOX 440  
 City WAPPINGERS FALLS State NY Zip Code 12590-0440  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt **07 / 20 / 2018**  
**Transaction ID : A48527E7B4D754D9C959**  
 Amount of Each Receipt this Period 125.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	415.00
<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 43 OF 129
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**HISPANIC VICTORY PAC**

**A. MARX, RICHARD, C, MR.,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO BOX 440  
 City WAPPINGERS FALLS State NY Zip Code 12590-0440  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 351.00

Date of Receipt 09 / 20 / 2018  
**Transaction ID : A22889110D3644695ABD**  
 Amount of Each Receipt this Period 101.00  
 Memo Item

**B. MATHEWS, WILLIAM, A, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 7 LA ROCHELLE  
 City NEWPORT BEACH State CA Zip Code 92660-6818  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 07 / 20 / 2018  
**Transaction ID : AD79610B8211C4BB7AFC**  
 Amount of Each Receipt this Period 75.00  
 Memo Item

**C. MATHIASSEN, BERTILLA, , MS.,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 201 E 8TH ST  
 City POMEROY State IA Zip Code 50575-1112  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 07 / 20 / 2018  
**Transaction ID : A0FFA041C754942E391D**  
 Amount of Each Receipt this Period 100.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	276.00
<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 44 OF 129
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**HISPANIC VICTORY PAC**

**A. MATHIASSEN, BERTILLA, , MS.,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 201 E 8TH ST  
 City POMEROY State IA Zip Code 50575-1112  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 08 / 07 / 2018  
**Transaction ID : A069C7F857F5E4612B3A**  
 Amount of Each Receipt this Period 100.00  
 Memo Item

**B. MATHIASSEN, BERTILLA, , MS.,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 201 E 8TH ST  
 City POMEROY State IA Zip Code 50575-1112  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt 09 / 10 / 2018  
**Transaction ID : AA36D78D6E8D74C71BA4**  
 Amount of Each Receipt this Period 100.00  
 Memo Item

**C. MCINTOSH, ANITA, , MR.,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 10187 HARRIS RD NE  
 City MOSES LAKE State WA Zip Code 98837-3784  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 08 / 06 / 2018  
**Transaction ID : A5DA9D11B5B0E4A51A96**  
 Amount of Each Receipt this Period 200.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	400.00
<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 45 OF 129
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**HISPANIC VICTORY PAC**

**A. MCKOON, RAYMOND, D, MR.,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 10455 N MAYBROOK AVE  
UNIT A2

City MARANA State AZ Zip Code 85653-8905

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

Name of Employer (for Individual) MARANA AUTO SUPPLY Occupation (for Individual) DELIVERY DRIVER

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt 07 / 06 / 2018  
**Transaction ID : AC19D9153F67846319CC**

Amount of Each Receipt this Period 50.00

Memo Item

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

Mailing Address 10455 N MAYBROOK AVE  
UNIT A2

City MARANA State AZ Zip Code 85653-8905

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

Name of Employer (for Individual) MARANA AUTO SUPPLY Occupation (for Individual) DELIVERY DRIVER

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt 07 / 06 / 2018  
**Transaction ID : A397F83E825454308B09**

Amount of Each Receipt this Period 50.00

Memo Item

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

Mailing Address 557 SE VISTA DR

City NEWPORT State OR Zip Code 97365-4210

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

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

Receipt For:  Primary  General  Other (specify)

Aggregate Year-to-Date ▼ 500.00

Date of Receipt 07 / 30 / 2018  
**Transaction ID : AC5BE2CCF400147A7848**

Amount of Each Receipt this Period 200.00

Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... 300.00

**TOTAL** 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 46 OF 129
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)  
**HISPANIC VICTORY PAC**

**A. MCVANEY, CAROLE, L, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1201 GREEN OAKS DR  
 City LITTLETON State CO Zip Code 80121  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) HOMEMAKER Occupation (for Individual) HOMEMAKER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 07 / 23 / 2018  
**Transaction ID : A47450A10C47D43D5AF9**  
 Amount of Each Receipt this Period 250.00  
 Memo Item

**B. MELNYK, LUBA, , MS.,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 8132 DONGAN AVE  
 City ELMHURST State NY Zip Code 11373-3731  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 07 / 26 / 2018  
**Transaction ID : ABD9C4B6BC2C14795B73**  
 Amount of Each Receipt this Period 250.00  
 Memo Item

**C. MESEDAHL, CLIFFORD, S, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 19089 AVENUE 200  
 City STRATHMORE State CA Zip Code 93267-9782  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 214.00

Date of Receipt 07 / 12 / 2018  
**Transaction ID : AF8EBB6D81A284DDA810**  
 Amount of Each Receipt this Period 72.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	572.00
<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:	PAGE 47 OF 129
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**HISPANIC VICTORY PAC**

**A. MILLER, BRUCE, E, MR.,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO BOX 20008

City CHEYENNE State WY Zip Code 82003-7000

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 16 / 2018

**Transaction ID : A699C764887204C71A92**

Amount of Each Receipt this Period  
300.00

Memo Item

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

Mailing Address 421 STARLIGHT LN

City JUNO BEACH State FL Zip Code 33408-2026

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

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

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  
 09 / 24 / 2018

**Transaction ID : ABA6CFE98F00A406B86F**

Amount of Each Receipt this Period  
50.00

Memo Item

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

Mailing Address 425 N COLLEGE ST

City MARTIN State TN Zip Code 38237-2217

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

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

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
435.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 19 / 2018

**Transaction ID : A0C11D5823E31405EB39**

Amount of Each Receipt this Period  
75.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	425.00
<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 48 OF 129
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**HISPANIC VICTORY PAC**

**A. MONTGOMERY, BEBE, JEAN, MRS.,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 12410 W CORONET DR

City SUN CITY WEST State AZ Zip Code 85375-5122

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

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

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 268.00

Date of Receipt 07 / 16 / 2018

**Transaction ID : A6B3CBB5F4F144492B16**

Amount of Each Receipt this Period 50.00

Memo Item

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

Mailing Address 128 HILLSIDE CT

City DUNLAP State IL Zip Code 61525-9705

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

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

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 204.00

Date of Receipt 09 / 27 / 2018

**Transaction ID : A9D5BD53798B545DF92D**

Amount of Each Receipt this Period 20.00

Memo Item

**C. NEISS, EDWARD, , DR & MRS,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 200 CHARTER OAK DR

City NEW CANAAN State CT Zip Code 06840

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

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

Receipt For:  Primary  General  Other (specify)

Aggregate Year-to-Date ▼ 450.00

Date of Receipt 08 / 07 / 2018

**Transaction ID : A962C12AF5BBC483F934**

Amount of Each Receipt this Period 450.00

Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 520.00

**TOTAL** 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 49 OF 129
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<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)  
**HISPANIC VICTORY PAC**

**A. NEITHERCOTT, ROBERT, A, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO BOX 188  
 City BELLEVUE State WA Zip Code 98009-0188  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 495.00

Date of Receipt 09 / 10 / 2018  
**Transaction ID : A9CEB386C0BDF4B849B8**  
 Amount of Each Receipt this Period 200.00  
 Memo Item

**B. NIBBE, MARILYN, ANN, MS.,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 7500 YORK AVE S APT 740  
 City MINNEAPOLIS State MN Zip Code 55435-4752  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) INFORMATION REQUESTED Occupation (for Individual) INFORMATION REQUESTED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 13 / 2018  
**Transaction ID : ADD0E89884BA74529B10**  
 Amount of Each Receipt this Period 100.00  
 Memo Item

**C. NOONAN, FRANK, , MR.,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 241 LOCUST AVE  
 City SAN RAFAEL State CA Zip Code 94901-2240  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) SAUL ZAEVIZ CO. Occupation (for Individual) PRESIDENT  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 08 / 03 / 2018  
**Transaction ID : AB3B6C188B5C7485594B**  
 Amount of Each Receipt this Period 200.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	500.00
<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 50 OF 129
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<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)  
**HISPANIC VICTORY PAC**

**A. PAPHITES, TASSOS, JOHN, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1800 BROAD BAY CIR  
 City VIRGINIA BCH State VA Zip Code 23454-1501  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) BURGERBUSTERS INC Occupation (for Individual) PRESIDENT  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 07 / 09 / 2018  
**Transaction ID : AB378A1EABA4145A5A3F**  
 Amount of Each Receipt this Period 200.00  
 Memo Item

**B. PERELMAN, WAYNE, C, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 4737 SABLE PINE CIR APT C1BLDG  
 City WEST PALM BEACH State FL Zip Code 33417-2799  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 07 / 26 / 2018  
**Transaction ID : A2683C7BE58E640EFADE**  
 Amount of Each Receipt this Period 200.00  
 Memo Item

**C. PERELMAN, WAYNE, C, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 4737 SABLE PINE CIR APT C1BLDG  
 City WEST PALM BEACH State FL Zip Code 33417-2799  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 650.00

Date of Receipt 09 / 19 / 2018  
**Transaction ID : ABEC07B849AD54E65961**  
 Amount of Each Receipt this Period 250.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	650.00
<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 51 OF 129
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 18

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NAME OF COMMITTEE (In Full)  
**HISPANIC VICTORY PAC**

**A. PEREZ, S, M, MR.,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 25672 HILLMAN CT

City SUN CITY	State CA	Zip Code 92586-4107
------------------	-------------	------------------------

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
260.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	10	/	2018

**Transaction ID : A9A1DCFFFCBF14FE3AD8**

Amount of Each Receipt this Period  
104.00

Memo Item

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

Mailing Address 1222 TELEGRAPH RD

City ARNOLD	State MO	Zip Code 63010-4048
----------------	-------------	------------------------

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

Name of Employer (for Individual) DES FORES HOSPITAL	Occupation (for Individual) GROUNDS KEEPER
---	---

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
350.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	20	/	2018

**Transaction ID : AF2DE8CF76E594C9CA8C**

Amount of Each Receipt this Period  
275.00

Memo Item

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

Mailing Address 5025 FOOTHILLS RD  
APT 1

City LAKE OSWEGO	State OR	Zip Code 97034-4163
---------------------	-------------	------------------------

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

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

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
211.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	20	/	2018

**Transaction ID : AFF1A7DDAD2B54F2DBAE**

Amount of Each Receipt this Period  
20.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	399.00
<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 52 OF 129
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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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)  
**HISPANIC VICTORY PAC**

**A. PHILLIPS, JANICE, E, MS.,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 5025 FOOTHILLS RD  
 APT 1  
 City LAKE OSWEGO State OR Zip Code 97034-4163  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 231.00

Date of Receipt 08 / 03 / 2018  
**Transaction ID : A223BD7B7F17E4A56B7A**  
 Amount of Each Receipt this Period 20.00  
 Memo Item

**B. PHILLIPS, JANICE, E, MS.,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 5025 FOOTHILLS RD  
 APT 1  
 City LAKE OSWEGO State OR Zip Code 97034-4163  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 253.00

Date of Receipt 08 / 20 / 2018  
**Transaction ID : A5B951D6906E14151B64**  
 Amount of Each Receipt this Period 22.00  
 Memo Item

**C. PHILLIPS, JANICE, E, MS.,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 5025 FOOTHILLS RD  
 APT 1  
 City LAKE OSWEGO State OR Zip Code 97034-4163  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 283.00

Date of Receipt 09 / 10 / 2018  
**Transaction ID : A594DC14882214256A12**  
 Amount of Each Receipt this Period 30.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	72.00
<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 53 OF 129
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**HISPANIC VICTORY PAC**

**A. PHILLIPS, JANICE, E, MS.,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 5025 FOOTHILLS RD  
APT 1

City LAKE OSWEGO State OR Zip Code 97034-4163

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
308.00

Date of Receipt  
MM / DD / YYYY  
09 / 25 / 2018

**Transaction ID : A2D1EA4239FE44EDB91A**

Amount of Each Receipt this Period  
25.00

Memo Item

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

Mailing Address 8832 SUNNYBROOK LN

City FAIR OAKS State CA Zip Code 95628-3914

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
208.00

Date of Receipt  
MM / DD / YYYY  
07 / 12 / 2018

**Transaction ID : ADE4AF7EF280C4F8F97F**

Amount of Each Receipt this Period  
50.00

Memo Item

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

Mailing Address 8832 SUNNYBROOK LN

City FAIR OAKS State CA Zip Code 95628-3914

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

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

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
258.00

Date of Receipt  
MM / DD / YYYY  
08 / 06 / 2018

**Transaction ID : A576BEF7FB119447292B**

Amount of Each Receipt this Period  
50.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	125.00
<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 54 OF 129
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**HISPANIC VICTORY PAC**

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

Mailing Address 972 E CAMINO DIESTRO

City TUCSON	State AZ	Zip Code 85704-7694
----------------	-------------	------------------------

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
08		16		2018

**Transaction ID : A2D35A1F28B334D6E859**

Amount of Each Receipt this Period  
500.00

Memo Item

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

Mailing Address 9508 KINGSLEY DR

City DENTON	State TX	Zip Code 76207
----------------	-------------	-------------------

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

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

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
09		24		2018

**Transaction ID : A527ED385508A4538BEA**

Amount of Each Receipt this Period  
5000.00

Memo Item

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

Mailing Address 75 HARVARD AVE

City PALMERTON	State PA	Zip Code 18071
-------------------	-------------	-------------------

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

Name of Employer (for Individual) PENCOR SERVICES	Occupation (for Individual) EXECUTIVE
--	--

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
368.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
09		06		2018

**Transaction ID : AE693DA7D87164C4FAD3**

Amount of Each Receipt this Period  
368.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	5868.00
<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 55 OF 129
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**HISPANIC VICTORY PAC**

**A. REITZ, CHASKA, HALL, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 3027 PASCAL ST  
 City ROSEVILLE State MN Zip Code 55113-1646  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) **HOMEMAKER** Occupation (for Individual) **HOMEMAKER**  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ **700.00**

Date of Receipt **08 / 09 / 2018**  
**Transaction ID : A09D18E19246149C98C3**  
 Amount of Each Receipt this Period **500.00**  
 Memo Item

**B. REITZ, CHASKA, HALL, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 3027 PASCAL ST  
 City ROSEVILLE State MN Zip Code 55113-1646  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) **HOMEMAKER** Occupation (for Individual) **HOMEMAKER**  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ **900.00**

Date of Receipt **08 / 14 / 2018**  
**Transaction ID : AD44FCA2670EA411AA9C**  
 Amount of Each Receipt this Period **200.00**  
 Memo Item

**C. RIES, MELVIN, A, MR.,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 3585 ROUND BARN BLVD APT 329  
 City SANTA ROSA State CA Zip Code 95403-0145  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) **RETIRED** Occupation (for Individual) **RETIRED**  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ **1350.00**

Date of Receipt **09 / 14 / 2018**  
**Transaction ID : A60DA627132084121BD5**  
 Amount of Each Receipt this Period **500.00**  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	<b>1200.00</b>
<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:	PAGE 56 OF 129
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**HISPANIC VICTORY PAC**

**A. ROBERTSON, BRUCE, D, MR.,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 771 LIBERTY RIDGE LN  
 City LEXINGTON State KY Zip Code 40509-4560  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 700.00

Date of Receipt 09 / 11 / 2018  
**Transaction ID : A08A909E9FCED4C38937**  
 Amount of Each Receipt this Period 100.00  
 Memo Item

**B. ROBERTSON, BRUCE, D, MR.,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 771 LIBERTY RIDGE LN  
 City LEXINGTON State KY Zip Code 40509-4560  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 700.00

Date of Receipt 09 / 11 / 2018  
**Transaction ID : A9669D5DB9BCB48E7918**  
 Amount of Each Receipt this Period 300.00  
 Memo Item

**C. ROBERTSON, TRAVIS, E, MR.,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2465 ANTIOCH RD  
 City WETUMPKA State AL Zip Code 36092  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 09 / 13 / 2018  
**Transaction ID : A0FE76B4F47FB422DA8B**  
 Amount of Each Receipt this Period 100.00  
 Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 500.00  
**TOTAL** 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 57 OF 129
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**HISPANIC VICTORY PAC**

**A. ROBINSON, LYNDA, , MS.,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 5620 CONTRARY CREEK RD  
 City GRANBURY State TX Zip Code 76048-7507  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt 08 / 20 / 2018  
**Transaction ID : A25CD1C40ECE94DCC92E**  
 Amount of Each Receipt this Period 200.00  
 Memo Item

**B. ROSSER, DOIS, I, MR., JR**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1901 N ARMISTEAD AVE  
 City HAMPTON State VA Zip Code 23666-4311  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) I C M Occupation (for Individual) CHAIR  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 230.00

Date of Receipt 07 / 09 / 2018  
**Transaction ID : A4F74A8C2B4D048F59F0**  
 Amount of Each Receipt this Period 50.00  
 Memo Item

**C. ROSSER, DOIS, I, MR., JR**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1901 N ARMISTEAD AVE  
 City HAMPTON State VA Zip Code 23666-4311  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) I C M Occupation (for Individual) CHAIR  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 330.00

Date of Receipt 09 / 12 / 2018  
**Transaction ID : AF0AAA6A95261424589B**  
 Amount of Each Receipt this Period 100.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	350.00
<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 58 OF 129
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<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)  
**HISPANIC VICTORY PAC**

**A. SCOTT, EVA, F, MRS.,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 15830 GADDES RD

City AMELIA COURT HOUSE	State VA	Zip Code 23002
----------------------------	-------------	-------------------

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

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) SELF EMPLOYED
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
315.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	11	/	2018

**Transaction ID : A895E8BB3763D470E97F**

Amount of Each Receipt this Period  
40.00

Memo Item

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

Mailing Address 15830 GADDES RD

City AMELIA COURT HOUSE	State VA	Zip Code 23002
----------------------------	-------------	-------------------

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

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) SELF EMPLOYED
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
415.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	07	/	2018

**Transaction ID : ACEB0D2BF2F934D7A90F**

Amount of Each Receipt this Period  
100.00

Memo Item

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

Mailing Address 4817 GIRARD RD

City PITTSBURGH	State PA	Zip Code 15227
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FEC ID number of contributing federal political committee. **C**

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

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
09	/	25	/	2018

**Transaction ID : A4AD9C7E419C04F208E4**

Amount of Each Receipt this Period  
250.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	390.00
<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 59 OF 129
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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)  
**HISPANIC VICTORY PAC**

**A. SEPULVEDA, RAUL, , DR.,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 5406 CORAL RIDGE RD  
 City HOUSTON State TX Zip Code 77069-3345  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt 09 / 17 / 2018  
**Transaction ID : A73DF684B2DED42B58C0**  
 Amount of Each Receipt this Period 75.00  
 Memo Item

**B. SHAW, JOHN, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 142 W 720TH AVE  
 City FORT SCOTT State KS Zip Code 66701-8782  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 08 / 17 / 2018  
**Transaction ID : A4632261A63B649E0B6C**  
 Amount of Each Receipt this Period 40.00  
 Memo Item

**C. SHAW, JOHN, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 142 W 720TH AVE  
 City FORT SCOTT State KS Zip Code 66701-8782  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 265.00

Date of Receipt 09 / 25 / 2018  
**Transaction ID : AD254C82518E0422291D**  
 Amount of Each Receipt this Period 40.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	155.00
<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:	PAGE 60 OF 129
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
	<input type="checkbox"/> 12	<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**HISPANIC VICTORY PAC**

**A. SHIELDS, MICHAEL, J, MR.,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 10185 E 500 S

City WOLCOTTVILLE	State IN	Zip Code 46795-8788
----------------------	-------------	------------------------

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
440.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
07		23		2018

**Transaction ID : A8761F12888944A95B6F**

Amount of Each Receipt this Period  
100.00

Memo Item

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

Mailing Address 963 S CREEKVIEW LN

City ANAHEIM	State CA	Zip Code 92808-1444
-----------------	-------------	------------------------

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
400.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
09		17		2018

**Transaction ID : AEC5D1571C10C428D851**

Amount of Each Receipt this Period  
100.00

Memo Item

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

Mailing Address 177 BOUNDARY LN

City OTTERVILLE	State MO	Zip Code 65348-2420
--------------------	-------------	------------------------

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

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

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
700.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
08		17		2018

**Transaction ID : AC7F99E89061C4DBEB87**

Amount of Each Receipt this Period  
200.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	400.00
<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 61 OF 129
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**HISPANIC VICTORY PAC**

**A. ST GEORGE, NICHOLAS, J, MR.,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 971 GEORGIA AVE

City WINTER PARK	State FL	Zip Code 32789
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FEC ID number of contributing federal political committee. **C**

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
300.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
07		12		2018

**Transaction ID : A44DFD5FC9F124B58A72**

Amount of Each Receipt this Period  
300.00

Memo Item

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

Mailing Address 42 N TANGLEWOOD SPUR

City SEDONA	State AZ	Zip Code 86351-7835
----------------	-------------	------------------------

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
680.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
09		07		2018

**Transaction ID : A14AA3713AF6E42BBA7E**

Amount of Each Receipt this Period  
165.00

Memo Item

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

Mailing Address 262 DEERFIELD CIR

City KINGWOOD	State WV	Zip Code 26537-1358
------------------	-------------	------------------------

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

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

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
08		06		2018

**Transaction ID : A6110FA1963F44572802**

Amount of Each Receipt this Period  
250.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	715.00
<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 62 OF 129
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)  
**HISPANIC VICTORY PAC**

**A. STULTZ, MARY, N, MRS.,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 262 DEERFIELD CIR  
 City KINGWOOD State WV Zip Code 26537-1358  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 09 / 13 / 2018  
**Transaction ID : A9696939862CA4B2EB1D**  
 Amount of Each Receipt this Period 100.00  
 Memo Item

**B. SUMMERS, MARGARET, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 421 SUMMER AVE  
 City GREENVILLE State IL Zip Code 62246-1626  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt 07 / 10 / 2018  
**Transaction ID : AAE4729C50E114FF5B76**  
 Amount of Each Receipt this Period 100.00  
 Memo Item

**C. SUMMERS, MARGARET, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 421 SUMMER AVE  
 City GREENVILLE State IL Zip Code 62246-1626  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 340.00

Date of Receipt 08 / 03 / 2018  
**Transaction ID : AE5B2A897BCAF437A81F**  
 Amount of Each Receipt this Period 100.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	300.00
<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 63 OF 129
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**HISPANIC VICTORY PAC**

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**TAQUEY, ANTONY, , ,**

Mailing Address **PO BOX 26544**

City <b>WINSTON SALEM</b>	State <b>NC</b>	Zip Code <b>27114-6544</b>
------------------------------	--------------------	-------------------------------

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

Name of Employer (for Individual) <b>RETIRED</b>	Occupation (for Individual) <b>RETIRED</b>
---	---

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
**300.00**

Date of Receipt  
**09 / 11 / 2018**

**Transaction ID : ACF0600B67BE54B81925**

Amount of Each Receipt this Period  
**100.00**

Memo Item

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

Mailing Address **PO BOX 26544**

City <b>WINSTON SALEM</b>	State <b>NC</b>	Zip Code <b>27114-6544</b>
------------------------------	--------------------	-------------------------------

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

Name of Employer (for Individual) <b>RETIRED</b>	Occupation (for Individual) <b>RETIRED</b>
---	---

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
**400.00**

Date of Receipt  
**09 / 24 / 2018**

**Transaction ID : A0ADFE13F27494D28A48**

Amount of Each Receipt this Period  
**100.00**

Memo Item

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

Mailing Address **177 N HIGHLAND ST  
APT 4207**

City <b>MEMPHIS</b>	State <b>TN</b>	Zip Code <b>38111-4777</b>
------------------------	--------------------	-------------------------------

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

Name of Employer (for Individual) <b>RETIRED</b>	Occupation (for Individual) <b>RETIRED</b>
---	---

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
**250.00**

Date of Receipt  
**09 / 17 / 2018**

**Transaction ID : AB5779BFC4B354E779B7**

Amount of Each Receipt this Period  
**75.00**

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	<b>275.00</b>
<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 64 OF 129
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**HISPANIC VICTORY PAC**

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

Mailing Address 10044 TOWNSHIP ROAD 253

City LAKEVIEW	State OH	Zip Code 43331
------------------	-------------	-------------------

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
07		13		2018

**Transaction ID : A5CA3A14289864D75B24**

Amount of Each Receipt this Period  
500.00

Memo Item

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

Mailing Address 10044 TOWNSHIP ROAD 253

City LAKEVIEW	State OH	Zip Code 43331
------------------	-------------	-------------------

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
540.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
09		10		2018

**Transaction ID : A505D11FF762E48D9BCC**

Amount of Each Receipt this Period  
40.00

Memo Item

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

Mailing Address 249 SUNDAY CIR

City FREDERICKSBURG	State TX	Zip Code 78624
------------------------	-------------	-------------------

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

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

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
09		28		2018

**Transaction ID : AB7C10FBE501E4349B00**

Amount of Each Receipt this Period  
250.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	790.00
<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 65 OF 129
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**HISPANIC VICTORY PAC**

**A. TOENJES, WAYNE, A, MR.,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Mailing Address 1104 FLINTS RD  
City WAUSAU State WI Zip Code 54401-9049  
FEC ID number of contributing federal political committee. **C**  
Name of Employer (for Individual) MAJOR INDUSTRIES- WI Occupation (for Individual) MANAGEMENT  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 250.00

Date of Receipt 08 / 07 / 2018  
**Transaction ID : A0A8336E722AF4DF4B6B**  
Amount of Each Receipt this Period 250.00  
 Memo Item

**B. TOWSON, MICHAEL, W, MR.,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Mailing Address 1 BISHOPWOOD CT  
City SAVANNAH State GA Zip Code 31411-2862  
FEC ID number of contributing federal political committee. **C**  
Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) INVESTOR  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 475.00

Date of Receipt 07 / 10 / 2018  
**Transaction ID : ADEF56C98A8AC4859913**  
Amount of Each Receipt this Period 75.00  
 Memo Item

**C. TOWSON, MICHAEL, W, MR.,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Mailing Address 1 BISHOPWOOD CT  
City SAVANNAH State GA Zip Code 31411-2862  
FEC ID number of contributing federal political committee. **C**  
Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) INVESTOR  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 503.00

Date of Receipt 07 / 20 / 2018  
**Transaction ID : A5D4E862253B44A37B08**  
Amount of Each Receipt this Period 28.00  
 Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 353.00  
**TOTAL** 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 66 OF 129
<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

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NAME OF COMMITTEE (In Full)  
**HISPANIC VICTORY PAC**

**A. TOWSON, MICHAEL, W, MR.,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1 BISHOPWOOD CT

City SAVANNAH	State GA	Zip Code 31411-2862
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) INVESTOR
--	---

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
578.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	06	/	2018

**Transaction ID : ACE628CA25761469A8A8**

Amount of Each Receipt this Period  
75.00

Memo Item

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

Mailing Address 1 BISHOPWOOD CT

City SAVANNAH	State GA	Zip Code 31411-2862
------------------	-------------	------------------------

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

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) INVESTOR
--	---

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
638.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	30	/	2018

**Transaction ID : AED8FDCF13BCD4921812**

Amount of Each Receipt this Period  
60.00

Memo Item

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

Mailing Address 1 BISHOPWOOD CT

City SAVANNAH	State GA	Zip Code 31411-2862
------------------	-------------	------------------------

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

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) INVESTOR
--	---

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
698.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	26	/	2018

**Transaction ID : A545C46C929FE40BF989**

Amount of Each Receipt this Period  
60.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	195.00
<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 67 OF 129
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**HISPANIC VICTORY PAC**

**A. TROTTER, MAUREEN, E, MS.,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 11 CYPRESS POINT ST  
 City ABILENE State TX Zip Code 79606-5130  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) PATHOLOGY ASSOC Occupation (for Individual) PHYSICIAN  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 08 / 13 / 2018  
**Transaction ID : A08E28A5E10B2486C963**  
 Amount of Each Receipt this Period 150.00  
 Memo Item

**B. TUTTLE, DALE, W, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 4046 RUSSELL RD  
 City MUSKEGON State MI Zip Code 49445-9575  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) GUNSMITH  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 07 / 17 / 2018  
**Transaction ID : A4D00A3A4C8D74DDC876**  
 Amount of Each Receipt this Period 75.00  
 Memo Item

**C. VANDERKOP, MATHEW, C, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1704 PARKSIDE DR  
 City PASADENA State TX Zip Code 77502-5412  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 3000.00

Date of Receipt 08 / 07 / 2018  
**Transaction ID : A4C0D4326F0994BEE885**  
 Amount of Each Receipt this Period 2000.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	2225.00
<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 68 OF 129
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**HISPANIC VICTORY PAC**

**A. VANDERKOP, MATHEW, C, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1704 PARKSIDE DR  
 City PASADENA State TX Zip Code 77502-5412  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 3500.00

Date of Receipt 09 / 19 / 2018  
**Transaction ID : AB029B4EC2AAB46ADAE**  
 Amount of Each Receipt this Period 500.00  
 Memo Item

**B. VON QUINTUS, HELEN, L, MS.,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO BOX 151685  
 City AUSTIN State TX Zip Code 78715-1685  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 212.00

Date of Receipt 09 / 14 / 2018  
**Transaction ID : A8C9F4A1810EA4F26B04**  
 Amount of Each Receipt this Period 100.00  
 Memo Item

**C. VON STEEN, DALE, A, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 625 S ARBOR LN APT 343  
 City MERIDIAN State ID Zip Code 83642-3057  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 218.00

Date of Receipt 07 / 16 / 2018  
**Transaction ID : ADE2DADE2A6F442CAB48**  
 Amount of Each Receipt this Period 50.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	650.00
<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: PAGE 69 OF 129 (check only one)
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
<input type="checkbox"/> 13	<input type="checkbox"/> 14
<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/>	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**HISPANIC VICTORY PAC**

**A. VON STEEN, DALE, A, ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 625 S ARBOR LN  
APT 343

City MERIDIAN State ID Zip Code 83642-3057

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

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

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 253.00

Date of Receipt 08 / 03 / 2018  
**Transaction ID : A3B119C822BE2445D86E**

Amount of Each Receipt this Period 35.00

Memo Item

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

Mailing Address 625 S ARBOR LN  
APT 343

City MERIDIAN State ID Zip Code 83642-3057

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

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

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 303.00

Date of Receipt 08 / 07 / 2018  
**Transaction ID : AA2AD95600346427FB80**

Amount of Each Receipt this Period 50.00

Memo Item

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

Mailing Address 625 S ARBOR LN  
APT 343

City MERIDIAN State ID Zip Code 83642-3057

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

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

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 343.00

Date of Receipt 09 / 10 / 2018  
**Transaction ID : AED893297537E42CE8F7**

Amount of Each Receipt this Period 40.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	125.00
<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 70 OF 129
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**HISPANIC VICTORY PAC**

**A. WAITE, NORMAN, , , JR**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO BOX 5360  
 City AVON State CO Zip Code 81620-5360  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1500.00

Date of Receipt 08 / 10 / 2018  
**Transaction ID : A1CA786CBFBCB4821A68**  
 Amount of Each Receipt this Period 1000.00  
 Memo Item

**B. WALLACE, GAIL, C, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 138 ROGERS RD  
 City TOLEDO State WA Zip Code 98591  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GEE CEES INC Occupation (for Individual) VICE PRESIDENT  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 08 / 17 / 2018  
**Transaction ID : AF1AB7C5392204335A4E**  
 Amount of Each Receipt this Period 500.00  
 Memo Item

**C. WALTERS, ARTHUR, L, MR.,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 4935 30TH ST N  
 City ARLINGTON State VA Zip Code 22207-2753  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) VIRGINIA COMMERCE BANK Occupation (for Individual) DIRECTOR  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 08 / 06 / 2018  
**Transaction ID : A3F344FEBFE7B4B2186E**  
 Amount of Each Receipt this Period 150.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1650.00
<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:	PAGE 71 OF 129
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**HISPANIC VICTORY PAC**

**A. WARD, THERESA, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 19 OUTCALT RD  
 City EDISON State NJ Zip Code 08817  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt **07 / 27 / 2018**  
**Transaction ID : A30B618B63C5B4F239EF**  
 Amount of Each Receipt this Period 300.00  
 Memo Item

**B. WHITE, PATRICIA, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 3337 14TH ST  
 City LEWISTON State ID Zip Code 83501-5638  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt **08 / 09 / 2018**  
**Transaction ID : AAFF9558ED5944504800**  
 Amount of Each Receipt this Period 50.00  
 Memo Item

**C. WHITE, PATRICIA, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 3337 14TH ST  
 City LEWISTON State ID Zip Code 83501-5638  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 310.00

Date of Receipt **09 / 07 / 2018**  
**Transaction ID : A84299C6453E54D62BDA**  
 Amount of Each Receipt this Period 50.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	400.00
<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 72 OF 129
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**HISPANIC VICTORY PAC**

**A. WILCOX, ROBERT, E, MR.,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 20 COUNTRY RIDGE RD

City MELISSA	State TX	Zip Code 75454-8916
-----------------	-------------	------------------------

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
245.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
08		09		2018

**Transaction ID : AD0126D2DD86B467FAA4**

Amount of Each Receipt this Period  
50.00

Memo Item

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

Mailing Address 2800 INDIAN RIVER BLVD  
APT H10

City VERO BEACH	State FL	Zip Code 32960-4238
--------------------	-------------	------------------------

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
388.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
07		17		2018

**Transaction ID : AB6A44B38028C4128A1C**

Amount of Each Receipt this Period  
100.00

Memo Item

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

Mailing Address 2800 INDIAN RIVER BLVD  
APT H10

City VERO BEACH	State FL	Zip Code 32960-4238
--------------------	-------------	------------------------

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

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

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
438.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
08		07		2018

**Transaction ID : A544B0B038463497D905**

Amount of Each Receipt this Period  
50.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	200.00
<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 73 OF 129
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**HISPANIC VICTORY PAC**

**A. WOLGEMUTH, DONALD, H, MR.,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO BOX 5093  
 3001 LITITZ PIKE  
 City LANCASTER State PA Zip Code 17606-5093  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 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  
 08 / 06 / 2018  
**Transaction ID : AFF92A01A09054CABA25**  
 Amount of Each Receipt this Period  
 100.00  
 Memo Item

**B. WOODS, PAUL, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1933 N INTERSTATE 35  
 City NEW BRAUNFELS State TX Zip Code 78130-2507  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) WOODS CYCLE Occupation (for Individual) PARTNER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 10 / 2018  
**Transaction ID : AB34CF3CA874C4EAFBEE**  
 Amount of Each Receipt this Period  
 200.00  
 Memo Item

**C. YOST, JAMES, , MR.,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 15 CONGRESS AVE  
 City CHELSEA State MA Zip Code 02150-2864  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) STOP & SHOP SUPERMARKET Occupation (for Individual) PORTER  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 450.18

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 12 / 2018  
**Transaction ID : A9D2600B498E94A4A9A3**  
 Amount of Each Receipt this Period  
 100.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	400.00
<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 74 OF 129
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**HISPANIC VICTORY PAC**

**A. YOST, JAMES, , MR.,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 15 CONGRESS AVE

City CHELSEA	State MA	Zip Code 02150-2864
-----------------	-------------	------------------------

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

Name of Employer (for Individual) STOP & SHOP SUPERMARKET	Occupation (for Individual) PORTER
--	---------------------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
490.18

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
09		14		2018

**Transaction ID : AC2CA8CE969574195A5A**

Amount of Each Receipt this Period  
40.00

Memo Item

**B. ZERR, JOHN, C, MR., JR**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO BOX 184

City GEIGERTOWN	State PA	Zip Code 19523-0184
--------------------	-------------	------------------------

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

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) CARPENTER
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
220.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
07		12		2018

**Transaction ID : A8447AECC74E948938E9**

Amount of Each Receipt this Period  
40.00

Memo Item

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

Mailing Address PO BOX 184

City GEIGERTOWN	State PA	Zip Code 19523-0184
--------------------	-------------	------------------------

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

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) CARPENTER
--	--

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
280.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
08		09		2018

**Transaction ID : AD643C5D8A4504AE5B77**

Amount of Each Receipt this Period  
60.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	140.00
<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:	PAGE 75 OF 129
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**HISPANIC VICTORY PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**A. ZERR, JOHN, C, MR., JR**

Mailing Address **PO BOX 184**

City **GEIGERTOWN** State **PA** Zip Code **19523-0184**

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

Name of Employer (for Individual) **SELF EMPLOYED** Occupation (for Individual) **CARPENTER**

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **320.00**

Date of Receipt  
**09 / 07 / 2018**

**Transaction ID : A74681C265004442CA94**

Amount of Each Receipt this Period  
**40.00**

Memo Item

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

Mailing Address **14 ALBURTUS CT**

City **LAWRENCE TWP** State **NJ** Zip Code **08648-2606**

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **258.00**

Date of Receipt  
**08 / 28 / 2018**

**Transaction ID : AE44EEBB80FFD4E5F9A8**

Amount of Each Receipt this Period  
**120.00**

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

Amount of Each Receipt this Period

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	<b>160.00</b>
<b>TOTAL</b> This Period (last page this line number only).....	<b>44207.05</b>

**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 76 OF 129
<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)  
**HISPANIC VICTORY PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**A. FUND RAISING STRATEGIES, INC**

Mailing Address 1420 SPRING HILL RD

City MCLEAN	State VA	Zip Code 22102
----------------	-------------	-------------------

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 ▼  
630.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
09		11		2018

**Transaction ID : A2CDA3B32FBC24A64AC**

Amount of Each Receipt this Period  
630.00

Memo Item  
REFUND OF OVER PAYMENT

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

Mailing Address 1420 SPRING HILL RD  
STE 490

City MCLEAN	State VA	Zip Code 22102-3028
----------------	-------------	------------------------

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 ▼  
4844.88

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
07		10		2018

**Transaction ID : A25A24873927040ADAA9**

Amount of Each Receipt this Period  
181.72

Memo Item  
LIST RENTAL

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

Mailing Address 1420 SPRING HILL RD  
STE 490

City MCLEAN	State VA	Zip Code 22102-3028
----------------	-------------	------------------------

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 ▼  
6295.58

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
08		10		2018

**Transaction ID : A3955C9F345D44DDFB5D**

Amount of Each Receipt this Period  
1450.70

Memo Item  
LIST RENTAL

<b>SUBTOTAL</b> of Receipts This Page (optional).....	2262.42
<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 77 OF 129
	<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)  
**HISPANIC VICTORY PAC**

**A. OMEGA LIST COMPANY**

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

Mailing Address 1420 SPRING HILL RD  
STE 490

City MCLEAN State VA Zip Code 22102-3028

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 ▼  
6927.18

Date of Receipt  
MM / DD / YYYY  
09 / 10 / 2018

**Transaction ID : AE55EF5C048174D44BCF**

Amount of Each Receipt this Period  
631.60

Memo Item  
LIST RENTAL

**B. RST MARKETING**

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

Mailing Address 1272 CORPORATE PARK DR

City FOREST State VA Zip Code 24551-2277

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 ▼  
906.30

Date of Receipt  
MM / DD / YYYY  
08 / 20 / 2018

**Transaction ID : AD238399011AA4684AB1**

Amount of Each Receipt this Period  
906.30

Memo Item  
REFUND OF OVERPAYMENT

**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  
MM / DD / YYYY

Amount of Each Receipt this Period

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1537.90
<b>TOTAL</b> This Period (last page this line number only).....▶	3800.32

**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)  
**HISPANIC VICTORY PAC**

Full Name (Last, First, Middle Initial)

**A. ARISTOTLE INTERNATIONAL, INC.**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		20		2018

Mailing Address 205 PENNSYLVANIA AVE SE

FEC Identification Number

**C** [ ]  
**Transaction ID : BAB2E4CBB**  
 Amount of Each Disbursement this Period  
 [ ] 750.00

City WASHINGTON State DC Zip Code 20003-1164

Purpose of Disbursement  
FEC COMPLIANCE DATABASE

[ ]  
Category/Type

Candidate Name

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

Memo Item

Full Name (Last, First, Middle Initial)

**B. BANK OF AMERICA**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
07		20		2018

Mailing Address P.O. BOX 25118

FEC Identification Number

**C** [ ]  
**Transaction ID : B1DDD5BAF**  
 Amount of Each Disbursement this Period  
 [ ] 6.00

City TAMPA State FL Zip Code 33622-5118

Purpose of Disbursement  
BANK FEES

[ ]  
Category/Type

Candidate Name

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

Memo Item

Full Name (Last, First, Middle Initial)

**C. BANK OF AMERICA**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		21		2018

Mailing Address P.O. BOX 25118

FEC Identification Number

**C** [ ]  
**Transaction ID : B7B3282B79**  
 Amount of Each Disbursement this Period  
 [ ] 35.95

City TAMPA State FL Zip Code 33622-5118

Purpose of Disbursement  
BANK FEES

[ ]  
Category/Type

Candidate Name

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

Memo Item

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

[ ] 791.95

**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 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)  
**HISPANIC VICTORY PAC**

Full Name (Last, First, Middle Initial)

**A. BANK OF AMERICA**

Mailing Address P.O. BOX 25118

City  
TAMPA

State  
FL

Zip Code  
33622-5118

Purpose of Disbursement  
BANK FEES

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			2	7			2	0	1	8		

FEC Identification Number

**C** [REDACTED]

Transaction ID : **B491E08E7F**

Amount of Each Disbursement this Period

[REDACTED] 45.95

Memo Item

Full Name (Last, First, Middle Initial)

**B. CAMPAIGN FUNDING DIRECT, INC.**

Mailing Address 1420 SPRING HILL RD  
STE 490

City  
MCLEAN

State  
VA

Zip Code  
22102-3028

Purpose of Disbursement  
FUNDRAISING DIRECT MAIL AGENCY FEE

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	7			0	2			2	0	1	8		

FEC Identification Number

**C** [REDACTED]

Transaction ID : **B66CB4559B**

Amount of Each Disbursement this Period

[REDACTED] 2178.83

Memo Item

Full Name (Last, First, Middle Initial)

**C. CAMPAIGN FUNDING DIRECT, INC.**

Mailing Address 1420 SPRING HILL RD  
STE 490

City  
MCLEAN

State  
VA

Zip Code  
22102-3028

Purpose of Disbursement  
FUNDRAISING DIRECT MAIL AGENCY FEE

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	7			2	3			2	0	1	8		

FEC Identification Number

**C** [REDACTED]

Transaction ID : **B7BD997ED**

Amount of Each Disbursement this Period

[REDACTED] 248.35

Memo Item

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

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

[REDACTED] 2473.13

[REDACTED]

**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)  
**HISPANIC VICTORY PAC**

Full Name (Last, First, Middle Initial)

**A. CAMPAIGN FUNDING DIRECT, INC.**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
07		23		2018

Mailing Address 1420 SPRING HILL RD  
STE 490

City MCLEAN State VA Zip Code 22102-3028

Purpose of Disbursement  
FUNDRAISING DIRECT MAIL AGENCY FEE

FEC Identification Number

**C** [ ]  
**Transaction ID : B93A6ABBF**  
Amount of Each Disbursement this Period  
[ ] 143.05

Candidate Name

Category/  
Type

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

Memo Item

Full Name (Last, First, Middle Initial)

**B. CAMPAIGN FUNDING DIRECT, INC.**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		13		2018

Mailing Address 1420 SPRING HILL RD  
STE 490

City MCLEAN State VA Zip Code 22102-3028

Purpose of Disbursement  
FUNDRAISING DIRECT MAIL AGENCY FEE

FEC Identification Number

**C** [ ]  
**Transaction ID : B02B705B7B**  
Amount of Each Disbursement this Period  
[ ] 695.42

Candidate Name

Category/  
Type

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

Memo Item

Full Name (Last, First, Middle Initial)

**C. CAMPAIGN FUNDING DIRECT, INC.**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		13		2018

Mailing Address 1420 SPRING HILL RD  
STE 490

City MCLEAN State VA Zip Code 22102-3028

Purpose of Disbursement  
FUNDRAISING DIRECT MAIL AGENCY FEE

FEC Identification Number

**C** [ ]  
**Transaction ID : BA7E9DEDC**  
Amount of Each Disbursement this Period  
[ ] 198.73

Candidate Name

Category/  
Type

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

Memo Item

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

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

[ ] 1037.20

[ ]



**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)  
**HISPANIC VICTORY PAC**

Full Name (Last, First, Middle Initial)

**A. CAMPAIGN FUNDING DIRECT, INC.**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		20		2018

Mailing Address 1420 SPRING HILL RD  
STE 490

City MCLEAN State VA Zip Code 22102-3028

Purpose of Disbursement  
FUNDRAISING DIRECT MAIL AGENCY FEE

FEC Identification Number

**C** [ ]  
**Transaction ID : B6129BA7CF**  
Amount of Each Disbursement this Period  
[ ] 2304.06

Candidate Name

Category/  
Type

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

Memo Item

State: District:

Full Name (Last, First, Middle Initial)

**B. CAMPAIGN FUNDING DIRECT, INC.**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		20		2018

Mailing Address 1420 SPRING HILL RD  
STE 490

City MCLEAN State VA Zip Code 22102-3028

Purpose of Disbursement  
FUNDRAISING DIRECT MAIL AGENCY FEE

FEC Identification Number

**C** [ ]  
**Transaction ID : B9B8765E314**  
Amount of Each Disbursement this Period  
[ ] 92.89

Candidate Name

Category/  
Type

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

Memo Item

State: District:

Full Name (Last, First, Middle Initial)

**C. CAMPAIGN FUNDING DIRECT, INC.**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		20		2018

Mailing Address 1420 SPRING HILL RD  
STE 490

City MCLEAN State VA Zip Code 22102-3028

Purpose of Disbursement  
FUNDRAISING DIRECT MAIL AGENCY FEE

FEC Identification Number

**C** [ ]  
**Transaction ID : BDAD519291**  
Amount of Each Disbursement this Period  
[ ] 21.32

Candidate Name

Category/  
Type

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

Memo Item

State: District:

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

[ ] 2418.27

**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 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)  
**HISPANIC VICTORY PAC**

Full Name (Last, First, Middle Initial)

**A. CAMPAIGN FUNDING DIRECT, INC.**

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			1	7			2	0	1	8		

Mailing Address 1420 SPRING HILL RD  
STE 490

FEC Identification Number

**C** [ ]  
**Transaction ID : BC6406DD51**  
Amount of Each Disbursement this Period  
[ ] 511.78

City MCLEAN State VA Zip Code 22102-3028

Purpose of Disbursement  
FUNDRAISING DIRECT MAIL AGENCY FEE

[ ]  
Category/  
Type

Candidate Name

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

Memo Item

Full Name (Last, First, Middle Initial)

**B. CAMPAIGN FUNDING DIRECT, INC.**

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			1	7			2	0	1	8		

Mailing Address 1420 SPRING HILL RD  
STE 490

FEC Identification Number

**C** [ ]  
**Transaction ID : BA6577945DI**  
Amount of Each Disbursement this Period  
[ ] 129.73

City MCLEAN State VA Zip Code 22102-3028

Purpose of Disbursement  
FUNDRAISING DIRECT MAIL AGENCY FEE

[ ]  
Category/  
Type

Candidate Name

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

Memo Item

Full Name (Last, First, Middle Initial)

**C. CAMPAIGN FUNDING DIRECT, INC.**

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			1	7			2	0	1	8		

Mailing Address 1420 SPRING HILL RD  
STE 490

FEC Identification Number

**C** [ ]  
**Transaction ID : B25B194ABE**  
Amount of Each Disbursement this Period  
[ ] 742.52

City MCLEAN State VA Zip Code 22102-3028

Purpose of Disbursement  
FUNDRAISING DIRECT MAIL AGENCY FEE

[ ]  
Category/  
Type

Candidate Name

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

Memo Item

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

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

[ ] 1384.03  
[ ]

**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)  
**HISPANIC VICTORY PAC**

Full Name (Last, First, Middle Initial)

**A. CAMPAIGN FUNDING DIRECT, INC.**

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		1	7		2	0	1	8

Mailing Address 1420 SPRING HILL RD  
STE 490

City MCLEAN State VA Zip Code 22102-3028

Purpose of Disbursement  
FUNDRAISING DIRECT MAIL AGENCY FEE

FEC Identification Number

C
---

**Transaction ID : BA857F355B!**  
Amount of Each Disbursement this Period

221.01
--------

Candidate Name

Category/  
Type

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

Memo Item

State: District:

Full Name (Last, First, Middle Initial)

**B. CAMPAIGN FUNDING DIRECT, INC.**

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		1	7		2	0	1	8

Mailing Address 1420 SPRING HILL RD  
STE 490

City MCLEAN State VA Zip Code 22102-3028

Purpose of Disbursement  
FUNDRAISING DIRECT MAIL AGENCY FEE

FEC Identification Number

C
---

**Transaction ID : B3CEC2AF65**  
Amount of Each Disbursement this Period

66.71
-------

Candidate Name

Category/  
Type

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

Memo Item

State: District:

Full Name (Last, First, Middle Initial)

**C. CAMPAIGN FUNDING DIRECT, INC.**

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		1	7		2	0	1	8

Mailing Address 1420 SPRING HILL RD  
STE 490

City MCLEAN State VA Zip Code 22102-3028

Purpose of Disbursement  
FUNDRAISING DIRECT MAIL AGENCY FEE

FEC Identification Number

C
---

**Transaction ID : B45E8F26D9**  
Amount of Each Disbursement this Period

217.10
--------

Candidate Name

Category/  
Type

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

Memo Item

State: District:

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

504.82
--------

**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 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)  
**HISPANIC VICTORY PAC**

Full Name (Last, First, Middle Initial)

**A. CAMPAIGN FUNDING DIRECT, INC.**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		17		2018

Mailing Address 1420 SPRING HILL RD  
STE 490

FEC Identification Number

**C** [REDACTED]

**Transaction ID : B072CD7717!**  
Amount of Each Disbursement this Period

[REDACTED] 1655.58

Memo Item

City MCLEAN State VA Zip Code 22102-3028

Purpose of Disbursement  
FUNDRAISING DIRECT MAIL AGENCY FEE

[REDACTED]

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

**B. COLORTREE GROUP, INC.**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
07		02		2018

Mailing Address 8000 VILLA PARK DR

FEC Identification Number

**C** [REDACTED]

**Transaction ID : B39D733155C**  
Amount of Each Disbursement this Period

[REDACTED] 2804.76

Memo Item

City RICHMOND State VA Zip Code 23228-6500

Purpose of Disbursement  
FUNDRAISING DIRECT MAIL PRINTING

[REDACTED]

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

**C. COLORTREE GROUP, INC.**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
07		09		2018

Mailing Address 8000 VILLA PARK DR

FEC Identification Number

**C** [REDACTED]

**Transaction ID : B3092EC655**  
Amount of Each Disbursement this Period

[REDACTED] 1774.44

Memo Item

City RICHMOND State VA Zip Code 23228-6500

Purpose of Disbursement  
FUNDRAISING DIRECT MAIL PRINTING

[REDACTED]

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

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

[REDACTED] 6234.78

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

[REDACTED]

**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="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)  
**HISPANIC VICTORY PAC**

Full Name (Last, First, Middle Initial)

**A. COLORTREE GROUP, INC.**

Mailing Address 8000 VILLA PARK DR

City  
RICHMOND

State  
VA

Zip Code  
23228-6500

Purpose of Disbursement  
FUNDRAISING DIRECT MAIL PRINTING

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
08 / 13 / 2018

FEC Identification Number

C

**Transaction ID : BBAD0950D0**  
Amount of Each Disbursement this Period

498.34

Memo Item

Full Name (Last, First, Middle Initial)

**B. COLORTREE GROUP, INC.**

Mailing Address 8000 VILLA PARK DR

City  
RICHMOND

State  
VA

Zip Code  
23228-6500

Purpose of Disbursement  
FUNDRAISING DIRECT MAIL PRINTING

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY  
08 / 13 / 2018

FEC Identification Number

C

**Transaction ID : B135DFFAE2**  
Amount of Each Disbursement this Period

1450.08

Memo Item

Full Name (Last, First, Middle Initial)

**C. COLORTREE GROUP, INC.**

Mailing Address 8000 VILLA PARK DR

City  
RICHMOND

State  
VA

Zip Code  
23228-6500

Purpose of Disbursement  
FUNDRAISING DIRECT MAIL PRINTING

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
08 / 13 / 2018

FEC Identification Number

C

**Transaction ID : B9D93C8004**  
Amount of Each Disbursement this Period

1070.66

Memo Item

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

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

3019.08

**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)  
**HISPANIC VICTORY PAC**

Full Name (Last, First, Middle Initial) <b>A. COLORTREE GROUP, INC.</b>		Date of Disbursement MM / DD / YYYY 08 / 13 / 2018
Mailing Address 8000 VILLA PARK DR		FEC Identification Number C <b>Transaction ID : B3EA3D5EF0</b> Amount of Each Disbursement this Period 2336.24
City RICHMOND	State VA	
Zip Code 23228-6500		Memo Item <input type="checkbox"/>
Purpose of Disbursement FUNDRAISING DIRECT MAIL PRINTING		
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. COLORTREE GROUP, INC.</b>		Date of Disbursement MM / DD / YYYY 08 / 13 / 2018
Mailing Address 8000 VILLA PARK DR		FEC Identification Number C <b>Transaction ID : B25568D9A6!</b> Amount of Each Disbursement this Period 56.75
City RICHMOND	State VA	
Zip Code 23228-6500		Memo Item <input type="checkbox"/>
Purpose of Disbursement FUNDRAISING DIRECT MAIL PRINTING		
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. COLORTREE GROUP, INC.</b>		Date of Disbursement MM / DD / YYYY 09 / 04 / 2018
Mailing Address 8000 VILLA PARK DR		FEC Identification Number C <b>Transaction ID : B84B28E47B</b> Amount of Each Disbursement this Period 1193.73
City RICHMOND	State VA	
Zip Code 23228-6500		Memo Item <input type="checkbox"/>
Purpose of Disbursement FUNDRAISING DIRECT MAIL PRINTING		
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:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	3586.72
<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)  
**HISPANIC VICTORY PAC**

Full Name (Last, First, Middle Initial)

**A. COLORTREE GROUP, INC.**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		04		2018

Mailing Address 8000 VILLA PARK DR

City RICHMOND State VA Zip Code 23228-6500

FEC Identification Number

**C** [ ]  
**Transaction ID : BFC4680F47I**  
 Amount of Each Disbursement this Period  
 [ ] 498.34

Purpose of Disbursement  
FUNDRAISING DIRECT MAIL PRINTING

[ ]  
Category/Type

Candidate Name

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

Memo Item

Full Name (Last, First, Middle Initial)

**B. COLORTREE GROUP, INC.**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		10		2018

Mailing Address 8000 VILLA PARK DR

City RICHMOND State VA Zip Code 23228-6500

FEC Identification Number

**C** [ ]  
**Transaction ID : BC6F4CA075I**  
 Amount of Each Disbursement this Period  
 [ ] 839.52

Purpose of Disbursement  
FUNDRAISING DIRECT MAIL PRINTING

[ ]  
Category/Type

Candidate Name

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

Memo Item

Full Name (Last, First, Middle Initial)

**C. COLORTREE GROUP, INC.**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		10		2018

Mailing Address 8000 VILLA PARK DR

City RICHMOND State VA Zip Code 23228-6500

FEC Identification Number

**C** [ ]  
**Transaction ID : B7E8E640EA**  
 Amount of Each Disbursement this Period  
 [ ] 769.56

Purpose of Disbursement  
FUNDRAISING DIRECT MAIL PRINTING

[ ]  
Category/Type

Candidate Name

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

Memo Item

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

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

[ ] 2107.42  
 [ ]

**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)  
**HISPANIC VICTORY PAC**

Full Name (Last, First, Middle Initial)

**A. CP DIRECT**

Mailing Address 4600 BOSTON WAY  
STE A

City  
LANHAM

State  
MD

Zip Code  
20706-4858

Purpose of Disbursement  
FUNDRAISING DIRECT MAIL PRINTING

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

/  /

FEC Identification Number

**Transaction ID : B78279679Cz**  
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**B. CP DIRECT**

Mailing Address 4600 BOSTON WAY  
STE A

City  
LANHAM

State  
MD

Zip Code  
20706-4858

Purpose of Disbursement  
FUNDRAISING DIRECT MAIL PRINTING

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

/  /

FEC Identification Number

**Transaction ID : B138F975528**  
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**C. CP DIRECT**

Mailing Address 4600 BOSTON WAY  
STE A

City  
LANHAM

State  
MD

Zip Code  
20706-4858

Purpose of Disbursement  
FUNDRAISING DIRECT MAIL PRINTING

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

/  /

FEC Identification Number

**Transaction ID : B7520AB95A**  
Amount of Each Disbursement this Period

Memo Item

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

**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 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)  
**HISPANIC VICTORY PAC**

Full Name (Last, First, Middle Initial)

**A. CP DIRECT**

Mailing Address 4600 BOSTON WAY  
STE A

City LANHAM State MD Zip Code 20706-4858

Purpose of Disbursement  
FUNDRAISING DIRECT MAIL PRINTING

Candidate Name

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

State: District:

Date of Disbursement

MM / DD / YYYY  
09 / 10 / 2018

FEC Identification Number

C  
Transaction ID : B9D33BD0E2  
Amount of Each Disbursement this Period  
3610.20

Memo Item

Full Name (Last, First, Middle Initial)

**B. DC CREATIVE SOLUTIONS**

Mailing Address 18123 SCENIC CREEK LN

City CULPEPER State VA Zip Code 22701

Purpose of Disbursement  
GRAPHIC DESIGN

Candidate Name

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

State: District:

Date of Disbursement

MM / DD / YYYY  
09 / 10 / 2018

FEC Identification Number

C  
Transaction ID : B590972A160  
Amount of Each Disbursement this Period  
350.00

Memo Item

Full Name (Last, First, Middle Initial)

**C. ECG DATA CENTER**

Mailing Address 1420 SPRING HILL RD  
STE 490

City MCLEAN State VA Zip Code 22102-3028

Purpose of Disbursement  
FUNDRAISING DIRECT MAIL LIST MAINTENANCE

Candidate Name

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

State: District:

Date of Disbursement

MM / DD / YYYY  
07 / 02 / 2018

FEC Identification Number

C  
Transaction ID : BD8CD4F241  
Amount of Each Disbursement this Period  
177.94

Memo Item

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

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

4138.14

**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)  
**HISPANIC VICTORY PAC**

Full Name (Last, First, Middle Initial) <b>A. ECG DATA CENTER</b>		Date of Disbursement MM / DD / YYYY 07 / 02 / 2018
Mailing Address 1420 SPRING HILL RD STE 490		FEC Identification Number C [REDACTED] <b>Transaction ID : B946D47FBF</b> Amount of Each Disbursement this Period [REDACTED] 317.76
City MCLEAN	State VA	Zip Code 22102-3028
Purpose of Disbursement FUNDRAISING DIRECT MAIL LIST MAINTENANCE		Category/ Type [REDACTED]
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:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>B. ECG DATA CENTER</b>		Date of Disbursement MM / DD / YYYY 07 / 23 / 2018
Mailing Address 1420 SPRING HILL RD STE 490		FEC Identification Number C [REDACTED] <b>Transaction ID : BF830C2C88/</b> Amount of Each Disbursement this Period [REDACTED] 320.98
City MCLEAN	State VA	Zip Code 22102-3028
Purpose of Disbursement FUNDRAISING DIRECT MAIL LIST MAINTENANCE		Category/ Type [REDACTED]
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:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>C. ECG DATA CENTER</b>		Date of Disbursement MM / DD / YYYY 08 / 13 / 2018
Mailing Address 1420 SPRING HILL RD STE 490		FEC Identification Number C [REDACTED] <b>Transaction ID : B71ACDBEB</b> Amount of Each Disbursement this Period [REDACTED] 389.60
City MCLEAN	State VA	Zip Code 22102-3028
Purpose of Disbursement FUNDRAISING DIRECT MAIL LIST MAINTENANCE		Category/ Type [REDACTED]
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:	<input type="checkbox"/> Memo Item	

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

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

[REDACTED] 1028.34
[REDACTED]

**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)  
**HISPANIC VICTORY PAC**

Full Name (Last, First, Middle Initial)

**A. ECG DATA CENTER**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		13		2018

Mailing Address 1420 SPRING HILL RD  
STE 490

City MCLEAN State VA Zip Code 22102-3028

Purpose of Disbursement  
FUNDRAISING DIRECT MAIL LIST MAINTENANCE

FEC Identification Number

**C** [ ]  
**Transaction ID : BC7D8E36F0**  
Amount of Each Disbursement this Period  
[ ] 187.62

Candidate Name

Category/  
Type

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

Memo Item

Full Name (Last, First, Middle Initial)

**B. ECG DATA CENTER**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		13		2018

Mailing Address 1420 SPRING HILL RD  
STE 490

City MCLEAN State VA Zip Code 22102-3028

Purpose of Disbursement  
FUNDRAISING DIRECT MAIL POSTAL EXPENSE

FEC Identification Number

**C** [ ]  
**Transaction ID : B14BE2386E**  
Amount of Each Disbursement this Period  
[ ] 1385.16

Candidate Name

Category/  
Type

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

Memo Item

Full Name (Last, First, Middle Initial)

**C. ECG DATA CENTER**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		13		2018

Mailing Address 1420 SPRING HILL RD  
STE 490

City MCLEAN State VA Zip Code 22102-3028

Purpose of Disbursement  
FUNDRAISING DIRECT MAIL POSTAL EXPENSE

FEC Identification Number

**C** [ ]  
**Transaction ID : B190E8FE5D**  
Amount of Each Disbursement this Period  
[ ] 133.77

Candidate Name

Category/  
Type

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

Memo Item

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

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

[ ] 1706.55

[ ]

**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)  
**HISPANIC VICTORY PAC**

Full Name (Last, First, Middle Initial)

**A. ECG DATA CENTER**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		20		2018

Mailing Address 1420 SPRING HILL RD  
STE 490

City MCLEAN State VA Zip Code 22102-3028

Purpose of Disbursement  
FUNDRAISING DIRECT MAIL LIST MAINTENANCE

FEC Identification Number

C [REDACTED]

Transaction ID : B2CBE40468  
Amount of Each Disbursement this Period

[REDACTED] 321.20

Memo Item

Candidate Name

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

State: District:

Full Name (Last, First, Middle Initial)

**B. ECG DATA CENTER**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		20		2018

Mailing Address 1420 SPRING HILL RD  
STE 490

City MCLEAN State VA Zip Code 22102-3028

Purpose of Disbursement  
FUNDRAISING DIRECT MAIL POSTAL EXPENSE

FEC Identification Number

C [REDACTED]

Transaction ID : B461C121406  
Amount of Each Disbursement this Period

[REDACTED] 134.47

Memo Item

Candidate Name

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

State: District:

Full Name (Last, First, Middle Initial)

**C. ECG DATA CENTER**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		17		2018

Mailing Address 1420 SPRING HILL RD  
STE 490

City MCLEAN State VA Zip Code 22102-3028

Purpose of Disbursement  
FUNDRAISING DIRECT MAIL LIST MAINTENANCE

FEC Identification Number

C [REDACTED]

Transaction ID : B8B31085C6  
Amount of Each Disbursement this Period

[REDACTED] 194.26

Memo Item

Candidate Name

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

State: District:

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

[REDACTED] 649.93

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

[REDACTED]

**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)  
**HISPANIC VICTORY PAC**

Full Name (Last, First, Middle Initial)

**A. ECG DATA CENTER**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		17		2018

Mailing Address 1420 SPRING HILL RD  
STE 490

FEC Identification Number

C
---

**Transaction ID : B50AC3E6FE**  
Amount of Each Disbursement this Period

384.99
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Memo Item

City MCLEAN State VA Zip Code 22102-3028

Purpose of Disbursement  
FUNDRAISING DIRECT MAIL LIST MAINTENANCE

--

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

**B. ECG DATA CENTER**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		17		2018

Mailing Address 1420 SPRING HILL RD  
STE 490

FEC Identification Number

C
---

**Transaction ID : B61902A5F99**  
Amount of Each Disbursement this Period

529.96
--------

Memo Item

City MCLEAN State VA Zip Code 22102-3028

Purpose of Disbursement  
FUNDRAISING DIRECT MAIL LIST MAINTENANCE

--

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

**C. ECG DATA CENTER**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		17		2018

Mailing Address 1420 SPRING HILL RD  
STE 490

FEC Identification Number

C
---

**Transaction ID : BD0492FE04**  
Amount of Each Disbursement this Period

256.30
--------

Memo Item

City MCLEAN State VA Zip Code 22102-3028

Purpose of Disbursement  
FUNDRAISING DIRECT MAIL LIST MAINTENANCE

--

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

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

1170.85
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**TOTAL** This Period (last page this line number only)..... ▶

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**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)  
**HISPANIC VICTORY PAC**

Full Name (Last, First, Middle Initial) <b>A. ECG DATA CENTER</b>		Date of Disbursement MM / DD / YYYY 09 / 17 / 2018
Mailing Address 1420 SPRING HILL RD STE 490		FEC Identification Number C [ ] <b>Transaction ID : B01C49AEDC</b> Amount of Each Disbursement this Period [ ] 134.62
City MCLEAN	State VA	Zip Code 22102-3028
Purpose of Disbursement FUNDRAISING DIRECT MAIL POSTAL EXPENSE		Category/ Type [ ]
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:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>B. ECG DATA CENTER</b>		Date of Disbursement MM / DD / YYYY 09 / 17 / 2018
Mailing Address 1420 SPRING HILL RD STE 490		FEC Identification Number C [ ] <b>Transaction ID : B410FA38E8</b> Amount of Each Disbursement this Period [ ] 1094.34
City MCLEAN	State VA	Zip Code 22102-3028
Purpose of Disbursement FUNDRAISING DIRECT MAIL POSTAL EXPENSE		Category/ Type [ ]
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:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>C. ECG DATA CENTER</b>		Date of Disbursement MM / DD / YYYY 09 / 17 / 2018
Mailing Address 1420 SPRING HILL RD STE 490		FEC Identification Number C [ ] <b>Transaction ID : B9382527C5</b> Amount of Each Disbursement this Period [ ] 1065.74
City MCLEAN	State VA	Zip Code 22102-3028
Purpose of Disbursement FUNDRAISING DIRECT MAIL POSTAL EXPENSE		Category/ Type [ ]
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:	<input type="checkbox"/> Memo Item	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	[ ] 2294.70
<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)  
**HISPANIC VICTORY PAC**

Full Name (Last, First, Middle Initial)

**A. ECG DATA CENTER**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		17		2018

Mailing Address 1420 SPRING HILL RD  
STE 490

FEC Identification Number

**C** [ ]  
**Transaction ID : B2F2F202BA**  
 Amount of Each Disbursement this Period  
 [ ] 199.54

City MCLEAN State VA Zip Code 22102-3028

Purpose of Disbursement  
FUNDRAISING DIRECT MAIL LIST MAINTENANCE

[ ]  
Category/  
Type

Candidate Name

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

Memo Item

Full Name (Last, First, Middle Initial)

**B. FEDERAL ELECTION COMMISSION**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
07		02		2018

Mailing Address 999 E ST. NW ATTN: FINANCE OFFICE

FEC Identification Number

**C** [ ]  
**Transaction ID : B83FB8FA5D**  
 Amount of Each Disbursement this Period  
 [ ] 2500.00

City WASHINGTON State DC Zip Code 20463-0001

Purpose of Disbursement  
ADMINISTRATIVE FEE

[ ]  
Category/  
Type

Candidate Name

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

Memo Item

Full Name (Last, First, Middle Initial)

**C. FEDERAL ELECTION COMMISSION**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		06		2018

Mailing Address 999 E ST. NW ATTN: FINANCE OFFICE

FEC Identification Number

**C** [ ]  
**Transaction ID : BFD617E646**  
 Amount of Each Disbursement this Period  
 [ ] 2600.00

City WASHINGTON State DC Zip Code 20463-0001

Purpose of Disbursement  
ADMINISTRATIVE FEE

[ ]  
Category/  
Type

Candidate Name

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

Memo Item

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

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

[ ] 5299.54  
 [ ]

**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)  
**HISPANIC VICTORY PAC**

Full Name (Last, First, Middle Initial) <b>A. FIRST VIRGINIA COMMUNITY BANK</b>		Date of Disbursement MM / DD / YYYY 07 / 31 / 2018
Mailing Address 11325 RANDOM HILLS RD		FEC Identification Number C [REDACTED] <b>Transaction ID : B7BD758B6D</b> Amount of Each Disbursement this Period [REDACTED] 393.72
City FAIRFAX	State VA	Zip Code 22030-6051
Purpose of Disbursement BANK CHARGE		Category/ Type [REDACTED]
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:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>B. FIRST VIRGINIA COMMUNITY BANK</b>		Date of Disbursement MM / DD / YYYY 08 / 31 / 2018
Mailing Address 11325 RANDOM HILLS RD		FEC Identification Number C [REDACTED] <b>Transaction ID : B220500B93E</b> Amount of Each Disbursement this Period [REDACTED] 500.58
City FAIRFAX	State VA	Zip Code 22030-6051
Purpose of Disbursement BANK CHARGE		Category/ Type [REDACTED]
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:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>C. FIRST VIRGINIA COMMUNITY BANK</b>		Date of Disbursement MM / DD / YYYY 09 / 30 / 2018
Mailing Address 11325 RANDOM HILLS RD		FEC Identification Number C [REDACTED] <b>Transaction ID : BDE82C0370</b> Amount of Each Disbursement this Period [REDACTED] 536.15
City FAIRFAX	State VA	Zip Code 22030-6051
Purpose of Disbursement BANK CHARGE		Category/ Type [REDACTED]
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:	<input type="checkbox"/> Memo Item	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	[REDACTED] 1430.45
<b>TOTAL</b> This Period (last page this line number only).....▶	[REDACTED]



**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)  
**HISPANIC VICTORY PAC**

Full Name (Last, First, Middle Initial)

**A. FUND RAISING STRATEGIES, INC**

Mailing Address 1420 SPRING HILL RD

City MCLEAN State VA Zip Code 22102

Purpose of Disbursement  
FUNDRAISING DIRECT MAIL POSTAL EXPENSE

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 Y  
08 / 27 / 2018

FEC Identification Number

C  
Transaction ID : B18E3838F6C  
Amount of Each Disbursement this Period  
630.00

Memo Item

Full Name (Last, First, Middle Initial)

**B. HUCKABY DAVIS LISKER**

Mailing Address 228 S WASHINGTON ST  
STE 115

City ALEXANDRIA State VA Zip Code 22314-5404

Purpose of Disbursement  
FEC COMPLIANCE

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 Y  
07 / 30 / 2018

FEC Identification Number

C  
Transaction ID : B4FD87CF16I  
Amount of Each Disbursement this Period  
1107.50

Memo Item

Full Name (Last, First, Middle Initial)

**C. INTERNATIONAL DATA MANAGEMENT**

Mailing Address 3200 W MARKET ST  
STE 302

City FAIRLAWN State OH Zip Code 44333-3326

Purpose of Disbursement  
FUNDRAISING DIRECT MAIL POSTAL EXPENSE

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 Y  
07 / 09 / 2018

FEC Identification Number

C  
Transaction ID : B05D33841B  
Amount of Each Disbursement this Period  
206.74

Memo Item

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

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

1944.24

**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)  
**HISPANIC VICTORY PAC**

Full Name (Last, First, Middle Initial)

**A. INTERNATIONAL DATA MANAGEMENT**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
07		09		2018

Mailing Address 3200 W MARKET ST  
STE 302

City FAIRLAWN State OH Zip Code 44333-3326

Purpose of Disbursement  
FUNDRAISING DIRECT MAIL POSTAL EXPENSE

FEC Identification Number

**C** [Redacted]

Transaction ID : **BC7035B307!**  
Amount of Each Disbursement this Period

[Redacted] 257.11

Memo Item

Candidate Name

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

State: District:

Full Name (Last, First, Middle Initial)

**B. INTERNATIONAL DATA MANAGEMENT**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
07		30		2018

Mailing Address 3200 W MARKET ST  
STE 302

City FAIRLAWN State OH Zip Code 44333-3326

Purpose of Disbursement  
FUNDRAISING DIRECT MAIL POSTAL EXPENSE

FEC Identification Number

**C** [Redacted]

Transaction ID : **BBA47E9BDE**  
Amount of Each Disbursement this Period

[Redacted] 263.68

Memo Item

Candidate Name

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

State: District:

Full Name (Last, First, Middle Initial)

**C. INTERNATIONAL DATA MANAGEMENT**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
07		30		2018

Mailing Address 3200 W MARKET ST  
STE 302

City FAIRLAWN State OH Zip Code 44333-3326

Purpose of Disbursement  
FUNDRAISING DIRECT MAIL PRINTING

FEC Identification Number

**C** [Redacted]

Transaction ID : **BF06565FCA**  
Amount of Each Disbursement this Period

[Redacted] 282.38

Memo Item

Candidate Name

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

State: District:

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

[Redacted] 803.17

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

[Redacted]

**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)  
**HISPANIC VICTORY PAC**

Full Name (Last, First, Middle Initial)

**A. INTERNATIONAL DATA MANAGEMENT**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		13		2018

Mailing Address 3200 W MARKET ST  
STE 302

City FAIRLAWN State OH Zip Code 44333-3326

Purpose of Disbursement  
FUNDRAISING DIRECT MAIL PRINTING

FEC Identification Number

**C**  
**Transaction ID : B44136E6138**  
Amount of Each Disbursement this Period

Candidate Name

Category/  
Type

356.78

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

Memo Item

State: District:

Full Name (Last, First, Middle Initial)

**B. INTERNATIONAL DATA MANAGEMENT**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		20		2018

Mailing Address 3200 W MARKET ST  
STE 302

City FAIRLAWN State OH Zip Code 44333-3326

Purpose of Disbursement  
FUNDRAISING DIRECT MAIL PRINTING

FEC Identification Number

**C**  
**Transaction ID : B492F5D33D/**  
Amount of Each Disbursement this Period

Candidate Name

Category/  
Type

391.36

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

Memo Item

State: District:

Full Name (Last, First, Middle Initial)

**C. INTERNATIONAL DATA MANAGEMENT**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		20		2018

Mailing Address 3200 W MARKET ST  
STE 302

City FAIRLAWN State OH Zip Code 44333-3326

Purpose of Disbursement  
FUNDRAISING DIRECT MAIL POSTAL EXPENSE

FEC Identification Number

**C**  
**Transaction ID : B5335020BC**  
Amount of Each Disbursement this Period

Candidate Name

Category/  
Type

243.09

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

Memo Item

State: District:

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

991.23

**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 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)  
**HISPANIC VICTORY PAC**

Full Name (Last, First, Middle Initial)

**A. INTERNATIONAL DATA MANAGEMENT**

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		1	0		2	0	1	8

Mailing Address 3200 W MARKET ST  
STE 302

FEC Identification Number

**C** [REDACTED]

City FAIRLAWN State OH Zip Code 44333-3326

**Transaction ID : B3A25233CB**  
Amount of Each Disbursement this Period

Purpose of Disbursement  
FUNDRAISING DIRECT MAIL PRINTING

[REDACTED]  
Category/  
Type

[REDACTED] 430.96

Candidate Name

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

Memo Item

State: District:

Full Name (Last, First, Middle Initial)

**B. IVOM SOLUTIONS**

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	7		1	9		2	0	1	8

Mailing Address 1310 EASTERN AVE NE

FEC Identification Number

**C** [REDACTED]

City WASHINGTON State DC Zip Code 20019

**Transaction ID : BFA4D3FBA5**  
Amount of Each Disbursement this Period

Purpose of Disbursement  
MANAGEMENT CONSULTING

[REDACTED]  
Category/  
Type

[REDACTED] 500.00

Candidate Name

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

Memo Item

State: District:

Full Name (Last, First, Middle Initial)

**C. LAZAR, MARCEL, , ,**

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	7		1	9		2	0	1	8

Mailing Address D. CANTEMIR NR. 4

FEC Identification Number

**C** [REDACTED]

City ORADEA, ROMANIA State Zip Code

**Transaction ID : BF82884611!**  
Amount of Each Disbursement this Period

Purpose of Disbursement  
WEBSITE MAINTENANCE

[REDACTED]  
Category/  
Type

[REDACTED] 800.00

Candidate Name

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

Memo Item

State: District:

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

[REDACTED] 1730.96

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

[REDACTED]

**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)  
**HISPANIC VICTORY PAC**

Full Name (Last, First, Middle Initial) <b>A. LAZAR, MARCEL, , ,</b>		Date of Disbursement MM / DD / YYYY 08 / 20 / 2018
Mailing Address D. CANTEMIR NR. 4		FEC Identification Number C [REDACTED] <b>Transaction ID : BF50A26B36.</b> Amount of Each Disbursement this Period 800.00
City ORADEA, ROMANIA	State	Zip Code
Purpose of Disbursement WEBSITE MAINTENANCE		Category/ Type
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:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>B. LAZAR, MARCEL, , ,</b>		Date of Disbursement MM / DD / YYYY 08 / 20 / 2018
Mailing Address D. CANTEMIR NR. 4		FEC Identification Number C [REDACTED] <b>Transaction ID : B8342966C51</b> Amount of Each Disbursement this Period 1378.37
City ORADEA, ROMANIA	State	Zip Code
Purpose of Disbursement WEBSITE MAINTENANCE		Category/ Type
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:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>C. LAZAR, MARCEL, , ,</b>		Date of Disbursement MM / DD / YYYY 09 / 26 / 2018
Mailing Address D. CANTEMIR NR. 4		FEC Identification Number C [REDACTED] <b>Transaction ID : BFC3499A0F</b> Amount of Each Disbursement this Period 500.00
City ORADEA, ROMANIA	State	Zip Code
Purpose of Disbursement WEBSITE MAINTENANCE		Category/ Type
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:	<input type="checkbox"/> Memo Item	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	2678.37
<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)  
**HISPANIC VICTORY PAC**

Full Name (Last, First, Middle Initial)

**A. MDI IMAGING & MAIL**

Mailing Address 21955 CASCADES PARKWAY

City  
DULLES

State  
VA

Zip Code  
20166-9211

Purpose of Disbursement  
FUNDRAISING DIRECT MAIL PRINTING

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Category/  
Type

Date of Disbursement

M M M /  D D D /  Y Y Y Y Y Y  
07 / 16 / 2018

FEC Identification Number

C   
**Transaction ID : B0E3308B92I**  
Amount of Each Disbursement this Period  
 465.12

Memo Item

Full Name (Last, First, Middle Initial)

**B. MDI IMAGING & MAIL**

Mailing Address 21955 CASCADES PARKWAY

City  
DULLES

State  
VA

Zip Code  
20166-9211

Purpose of Disbursement  
FUNDRAISING DIRECT MAIL PRINTING

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Category/  
Type

Date of Disbursement

M M M /  D D D /  Y Y Y Y Y Y  
07 / 23 / 2018

FEC Identification Number

C   
**Transaction ID : B783A519786**  
Amount of Each Disbursement this Period  
 1290.99

Memo Item

Full Name (Last, First, Middle Initial)

**C. NOVA LABEL**

Mailing Address 4819 LYDELL ROAD

City  
CHEVERLY

State  
MD

Zip Code  
20781

Purpose of Disbursement  
FUNDRAISING DIRECT MAIL PRINTING

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Category/  
Type

Date of Disbursement

M M M /  D D D /  Y Y Y Y Y Y  
09 / 17 / 2018

FEC Identification Number

C   
**Transaction ID : B0EB258407**  
Amount of Each Disbursement this Period  
 1476.16

Memo Item

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

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

3232.27

**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)  
**HISPANIC VICTORY PAC**

Full Name (Last, First, Middle Initial) <b>A. OEHLER, MICHAEL, , ,</b>		Date of Disbursement MM / DD / YYYY 09 / 19 / 2018
Mailing Address 43984 BONLEE SQUARE		FEC Identification Number C [REDACTED] <b>Transaction ID : BC3A2109EA</b> Amount of Each Disbursement this Period 500.00
City ASHBURN	State VA	Zip Code 20147-3815
Purpose of Disbursement FINANCIAL CONSULTANT		Category/ Type
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:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>B. OMEGA LIST COMPANY</b>		Date of Disbursement MM / DD / YYYY 07 / 02 / 2018
Mailing Address 1420 SPRING HILL RD STE 490		FEC Identification Number C [REDACTED] <b>Transaction ID : B726841701C</b> Amount of Each Disbursement this Period 410.18
City MCLEAN	State VA	Zip Code 22102-3028
Purpose of Disbursement FUNDRAISING LIST RENTAL EXPENSE		Category/ Type
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:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>C. OMEGA LIST COMPANY</b>		Date of Disbursement MM / DD / YYYY 07 / 02 / 2018
Mailing Address 1420 SPRING HILL RD STE 490		FEC Identification Number C [REDACTED] <b>Transaction ID : BBD9A6CFC</b> Amount of Each Disbursement this Period 139.50
City MCLEAN	State VA	Zip Code 22102-3028
Purpose of Disbursement FUNDRAISING LIST RENTAL EXPENSE		Category/ Type
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:	<input type="checkbox"/> Memo Item	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	1049.68
<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)  
**HISPANIC VICTORY PAC**

**A. OMEGA LIST COMPANY**

Full Name (Last, First, Middle Initial)

Mailing Address 1420 SPRING HILL RD  
STE 490

City MCLEAN State VA Zip Code 22102-3028

Purpose of Disbursement FUNDRAISING LIST RENTAL EXPENSE

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: 07 / 02 / 2018

FEC Identification Number: C

Transaction ID : B989D8A90D

Amount of Each Disbursement this Period: 51.08

Memo Item

**B. OMEGA LIST COMPANY**

Full Name (Last, First, Middle Initial)

Mailing Address 1420 SPRING HILL RD  
STE 490

City MCLEAN State VA Zip Code 22102-3028

Purpose of Disbursement FUNDRAISING LIST RENTAL EXPENSE

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: 07 / 02 / 2018

FEC Identification Number: C

Transaction ID : BD0B1F8D6C

Amount of Each Disbursement this Period: 82.21

Memo Item

**C. OMEGA LIST COMPANY**

Full Name (Last, First, Middle Initial)

Mailing Address 1420 SPRING HILL RD  
STE 490

City MCLEAN State VA Zip Code 22102-3028

Purpose of Disbursement FUNDRAISING LIST RENTAL EXPENSE

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: 07 / 02 / 2018

FEC Identification Number: C

Transaction ID : BC32366DE0

Amount of Each Disbursement this Period: 35.08

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 168.37

**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 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)  
**HISPANIC VICTORY PAC**

Full Name (Last, First, Middle Initial) <b>A. OMEGA LIST COMPANY</b>		Date of Disbursement MM / DD / YYYY 07 / 02 / 2018
Mailing Address 1420 SPRING HILL RD STE 490		FEC Identification Number C [REDACTED] <b>Transaction ID : B207DB1636I</b> Amount of Each Disbursement this Period [REDACTED] 30.69
City MCLEAN	State VA	Zip Code 22102-3028
Purpose of Disbursement FUNDRAISING LIST RENTAL EXPENSE		Category/ Type [REDACTED]
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:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>B. OMEGA LIST COMPANY</b>		Date of Disbursement MM / DD / YYYY 07 / 02 / 2018
Mailing Address 1420 SPRING HILL RD STE 490		FEC Identification Number C [REDACTED] <b>Transaction ID : B1C4B472FCI</b> Amount of Each Disbursement this Period [REDACTED] 50.69
City MCLEAN	State VA	Zip Code 22102-3028
Purpose of Disbursement FUNDRAISING LIST RENTAL EXPENSE		Category/ Type [REDACTED]
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:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>C. OMEGA LIST COMPANY</b>		Date of Disbursement MM / DD / YYYY 07 / 02 / 2018
Mailing Address 1420 SPRING HILL RD STE 490		FEC Identification Number C [REDACTED] <b>Transaction ID : BBDDD78BCI</b> Amount of Each Disbursement this Period [REDACTED] 116.55
City MCLEAN	State VA	Zip Code 22102-3028
Purpose of Disbursement FUNDRAISING LIST RENTAL EXPENSE		Category/ Type [REDACTED]
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:	<input type="checkbox"/> Memo Item	

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

[REDACTED] 197.93

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

[REDACTED]

**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)  
**HISPANIC VICTORY PAC**

Full Name (Last, First, Middle Initial) <b>A. OMEGA LIST COMPANY</b>		Date of Disbursement MM / DD / YYYY 07 / 02 / 2018
Mailing Address 1420 SPRING HILL RD STE 490		FEC Identification Number C [REDACTED] <b>Transaction ID : B07C203E3D</b> Amount of Each Disbursement this Period [REDACTED] 63.82
City MCLEAN	State VA	Zip Code 22102-3028
Purpose of Disbursement FUNDRAISING LIST RENTAL EXPENSE		Category/ Type [REDACTED]
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:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>B. OMEGA LIST COMPANY</b>		Date of Disbursement MM / DD / YYYY 07 / 02 / 2018
Mailing Address 1420 SPRING HILL RD STE 490		FEC Identification Number C [REDACTED] <b>Transaction ID : BBFEE88D88</b> Amount of Each Disbursement this Period [REDACTED] 106.28
City MCLEAN	State VA	Zip Code 22102-3028
Purpose of Disbursement FUNDRAISING LIST RENTAL EXPENSE		Category/ Type [REDACTED]
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:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>C. OMEGA LIST COMPANY</b>		Date of Disbursement MM / DD / YYYY 08 / 13 / 2018
Mailing Address 1420 SPRING HILL RD STE 490		FEC Identification Number C [REDACTED] <b>Transaction ID : B96D931D30</b> Amount of Each Disbursement this Period [REDACTED] 16.11
City MCLEAN	State VA	Zip Code 22102-3028
Purpose of Disbursement FUNDRAISING LIST RENTAL EXPENSE		Category/ Type [REDACTED]
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:	<input type="checkbox"/> Memo Item	

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

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

[REDACTED] 186.21
[REDACTED]

**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)  
**HISPANIC VICTORY PAC**

Full Name (Last, First, Middle Initial) <b>A. OMEGA LIST COMPANY</b>		Date of Disbursement MM / DD / YYYY 08 / 13 / 2018
Mailing Address 1420 SPRING HILL RD STE 490		FEC Identification Number C [REDACTED] <b>Transaction ID : B51B6841B3!</b> Amount of Each Disbursement this Period 19.97
City MCLEAN	State VA	Zip Code 22102-3028
Purpose of Disbursement FUNDRAISING LIST RENTAL EXPENSE		Category/ Type
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:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>B. OMEGA LIST COMPANY</b>		Date of Disbursement MM / DD / YYYY 08 / 13 / 2018
Mailing Address 1420 SPRING HILL RD STE 490		FEC Identification Number C [REDACTED] <b>Transaction ID : B712111F1C!</b> Amount of Each Disbursement this Period 34.99
City MCLEAN	State VA	Zip Code 22102-3028
Purpose of Disbursement FUNDRAISING LIST RENTAL EXPENSE		Category/ Type
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:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>C. OMEGA LIST COMPANY</b>		Date of Disbursement MM / DD / YYYY 08 / 13 / 2018
Mailing Address 1420 SPRING HILL RD STE 490		FEC Identification Number C [REDACTED] <b>Transaction ID : BAD8457781</b> Amount of Each Disbursement this Period 116.55
City MCLEAN	State VA	Zip Code 22102-3028
Purpose of Disbursement FUNDRAISING LIST RENTAL EXPENSE		Category/ Type
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:	<input type="checkbox"/> Memo Item	

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

171.51

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

[REDACTED]

**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)  
**HISPANIC VICTORY PAC**

Full Name (Last, First, Middle Initial) <b>A. OMEGA LIST COMPANY</b>		Date of Disbursement MM / DD / YYYY 08 / 13 / 2018
Mailing Address 1420 SPRING HILL RD STE 490		FEC Identification Number C [REDACTED] <b>Transaction ID : B6F1F5A5AB</b> Amount of Each Disbursement this Period [REDACTED] 116.55
City MCLEAN	State VA	Zip Code 22102-3028
Purpose of Disbursement FUNDRAISING LIST RENTAL EXPENSE		Category/ Type [REDACTED]
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:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>B. OMEGA LIST COMPANY</b>		Date of Disbursement MM / DD / YYYY 08 / 13 / 2018
Mailing Address 1420 SPRING HILL RD STE 490		FEC Identification Number C [REDACTED] <b>Transaction ID : B074485813F</b> Amount of Each Disbursement this Period [REDACTED] 81.38
City MCLEAN	State VA	Zip Code 22102-3028
Purpose of Disbursement FUNDRAISING LIST RENTAL EXPENSE		Category/ Type [REDACTED]
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:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>C. OMEGA LIST COMPANY</b>		Date of Disbursement MM / DD / YYYY 08 / 13 / 2018
Mailing Address 1420 SPRING HILL RD STE 490		FEC Identification Number C [REDACTED] <b>Transaction ID : B1FD2ED608</b> Amount of Each Disbursement this Period [REDACTED] 63.05
City MCLEAN	State VA	Zip Code 22102-3028
Purpose of Disbursement FUNDRAISING LIST RENTAL EXPENSE		Category/ Type [REDACTED]
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:	<input type="checkbox"/> Memo Item	

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

[REDACTED] 260.98

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

[REDACTED]

**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)  
**HISPANIC VICTORY PAC**

Full Name (Last, First, Middle Initial)

**A. OMEGA LIST COMPANY**

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	8		1	3		2	0	1	8

Mailing Address 1420 SPRING HILL RD  
STE 490

City MCLEAN State VA Zip Code 22102-3028

Purpose of Disbursement  
FUNDRAISING LIST RENTAL EXPENSE

FEC Identification Number

C [REDACTED]

Transaction ID : **B4E6441566E**  
Amount of Each Disbursement this Period

[REDACTED] 85.28

Candidate Name

Category/  
Type

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

Memo Item

State: District:

Full Name (Last, First, Middle Initial)

**B. OMEGA LIST COMPANY**

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	8		1	3		2	0	1	8

Mailing Address 1420 SPRING HILL RD  
STE 490

City MCLEAN State VA Zip Code 22102-3028

Purpose of Disbursement  
FUNDRAISING LIST RENTAL EXPENSE

FEC Identification Number

C [REDACTED]

Transaction ID : **BD157AEC49**  
Amount of Each Disbursement this Period

[REDACTED] 94.70

Candidate Name

Category/  
Type

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

Memo Item

State: District:

Full Name (Last, First, Middle Initial)

**C. OMEGA LIST COMPANY**

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	8		1	3		2	0	1	8

Mailing Address 1420 SPRING HILL RD  
STE 490

City MCLEAN State VA Zip Code 22102-3028

Purpose of Disbursement  
FUNDRAISING LIST RENTAL EXPENSE

FEC Identification Number

C [REDACTED]

Transaction ID : **B9F968FE78**  
Amount of Each Disbursement this Period

[REDACTED] 139.50

Candidate Name

Category/  
Type

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

Memo Item

State: District:

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

[REDACTED] 319.48

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

[REDACTED]

**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)  
**HISPANIC VICTORY PAC**

Full Name (Last, First, Middle Initial) <b>A. OMEGA LIST COMPANY</b>		Date of Disbursement MM / DD / YYYY 08 / 13 / 2018
Mailing Address 1420 SPRING HILL RD STE 490		FEC Identification Number C [REDACTED] <b>Transaction ID : B76F65C3EE</b> Amount of Each Disbursement this Period 54.71
City MCLEAN	State VA	Zip Code 22102-3028
Purpose of Disbursement FUNDRAISING LIST RENTAL EXPENSE		Category/ Type
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:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>B. OMEGA LIST COMPANY</b>		Date of Disbursement MM / DD / YYYY 08 / 13 / 2018
Mailing Address 1420 SPRING HILL RD STE 490		FEC Identification Number C [REDACTED] <b>Transaction ID : B0094650EFE</b> Amount of Each Disbursement this Period 37.60
City MCLEAN	State VA	Zip Code 22102-3028
Purpose of Disbursement FUNDRAISING LIST RENTAL EXPENSE		Category/ Type
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:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>C. OMEGA LIST COMPANY</b>		Date of Disbursement MM / DD / YYYY 08 / 13 / 2018
Mailing Address 1420 SPRING HILL RD STE 490		FEC Identification Number C [REDACTED] <b>Transaction ID : B049A031C7</b> Amount of Each Disbursement this Period 49.20
City MCLEAN	State VA	Zip Code 22102-3028
Purpose of Disbursement FUNDRAISING LIST RENTAL EXPENSE		Category/ Type
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:	<input type="checkbox"/> Memo Item	

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

141.51

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

[REDACTED]

**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)  
**HISPANIC VICTORY PAC**

Full Name (Last, First, Middle Initial)  
**A. OMEGA LIST COMPANY**

Mailing Address 1420 SPRING HILL RD  
STE 490

City MCLEAN State VA Zip Code 22102-3028

Purpose of Disbursement  
FUNDRAISING LIST RENTAL EXPENSE

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement: 08 / 20 / 2018

FEC Identification Number: C

Transaction ID : B3C28DA3F0

Amount of Each Disbursement this Period: 58.68

Memo Item

Full Name (Last, First, Middle Initial)  
**B. OMEGA LIST COMPANY**

Mailing Address 1420 SPRING HILL RD  
STE 490

City MCLEAN State VA Zip Code 22102-3028

Purpose of Disbursement  
FUNDRAISING LIST RENTAL EXPENSE

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement: 08 / 20 / 2018

FEC Identification Number: C

Transaction ID : B95636CC56f

Amount of Each Disbursement this Period: 23.44

Memo Item

Full Name (Last, First, Middle Initial)  
**C. OMEGA LIST COMPANY**

Mailing Address 1420 SPRING HILL RD  
STE 490

City MCLEAN State VA Zip Code 22102-3028

Purpose of Disbursement  
FUNDRAISING LIST RENTAL EXPENSE

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement: 08 / 20 / 2018

FEC Identification Number: C

Transaction ID : B29FEB3F54

Amount of Each Disbursement this Period: 60.15

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 142.27

**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 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)  
**HISPANIC VICTORY PAC**

Full Name (Last, First, Middle Initial)

**A. OMEGA LIST COMPANY**

Mailing Address 1420 SPRING HILL RD  
STE 490

City  
MCLEAN

State  
VA

Zip Code  
22102-3028

Purpose of Disbursement  
FUNDRAISING LIST RENTAL EXPENSE

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

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

FEC Identification Number

**C**

**Transaction ID : B82066CD37!**

Amount of Each Disbursement this Period

43.69

Memo Item

Full Name (Last, First, Middle Initial)

**B. OMEGA LIST COMPANY**

Mailing Address 1420 SPRING HILL RD  
STE 490

City  
MCLEAN

State  
VA

Zip Code  
22102-3028

Purpose of Disbursement  
FUNDRAISING LIST RENTAL EXPENSE

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

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

FEC Identification Number

**C**

**Transaction ID : BD6090E2E3!**

Amount of Each Disbursement this Period

43.57

Memo Item

Full Name (Last, First, Middle Initial)

**C. OMEGA LIST COMPANY**

Mailing Address 1420 SPRING HILL RD  
STE 490

City  
MCLEAN

State  
VA

Zip Code  
22102-3028

Purpose of Disbursement  
FUNDRAISING LIST RENTAL EXPENSE

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

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

FEC Identification Number

**C**

**Transaction ID : BD3362D5F3**

Amount of Each Disbursement this Period

65.26

Memo Item

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

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

152.52



**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)  
**HISPANIC VICTORY PAC**

Full Name (Last, First, Middle Initial)

**A. OMEGA LIST COMPANY**

Mailing Address 1420 SPRING HILL RD  
STE 490

City MCLEAN State VA Zip Code 22102-3028

Purpose of Disbursement  
FUNDRAISING LIST RENTAL EXPENSE

Candidate Name

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

State: District:

Date of Disbursement

MM / DD / YYYY  
08 / 20 / 2018

FEC Identification Number

C  
Transaction ID : B6F70C8782  
Amount of Each Disbursement this Period  
116.55

Memo Item

Full Name (Last, First, Middle Initial)

**B. OMEGA LIST COMPANY**

Mailing Address 1420 SPRING HILL RD  
STE 490

City MCLEAN State VA Zip Code 22102-3028

Purpose of Disbursement  
FUNDRAISING LIST RENTAL EXPENSE

Candidate Name

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

State: District:

Date of Disbursement

MM / DD / YYYY  
08 / 20 / 2018

FEC Identification Number

C  
Transaction ID : BFDEC3269A  
Amount of Each Disbursement this Period  
38.08

Memo Item

Full Name (Last, First, Middle Initial)

**C. OMEGA LIST COMPANY**

Mailing Address 1420 SPRING HILL RD  
STE 490

City MCLEAN State VA Zip Code 22102-3028

Purpose of Disbursement  
FUNDRAISING LIST RENTAL EXPENSE

Candidate Name

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

State: District:

Date of Disbursement

MM / DD / YYYY  
08 / 20 / 2018

FEC Identification Number

C  
Transaction ID : B5C031559D  
Amount of Each Disbursement this Period  
73.01

Memo Item

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

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

227.64

**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)  
**HISPANIC VICTORY PAC**

Full Name (Last, First, Middle Initial)

**A. OMEGA LIST COMPANY**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		20		2018

Mailing Address 1420 SPRING HILL RD  
STE 490

City MCLEAN State VA Zip Code 22102-3028

Purpose of Disbursement  
FUNDRAISING LIST RENTAL EXPENSE

FEC Identification Number

**C**  
**Transaction ID : BA9CC61EB/**  
Amount of Each Disbursement this Period

Candidate Name

Category/  
Type

46.22

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

Memo Item

State: District:

Full Name (Last, First, Middle Initial)

**B. OMEGA LIST COMPANY**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		20		2018

Mailing Address 1420 SPRING HILL RD  
STE 490

City MCLEAN State VA Zip Code 22102-3028

Purpose of Disbursement  
FUNDRAISING LIST RENTAL EXPENSE

FEC Identification Number

**C**  
**Transaction ID : B9BD169CA2**  
Amount of Each Disbursement this Period

Candidate Name

Category/  
Type

116.25

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

Memo Item

State: District:

Full Name (Last, First, Middle Initial)

**C. OMEGA LIST COMPANY**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		17		2018

Mailing Address 1420 SPRING HILL RD  
STE 490

City MCLEAN State VA Zip Code 22102-3028

Purpose of Disbursement  
FUNDRAISING LIST RENTAL EXPENSE

FEC Identification Number

**C**  
**Transaction ID : B89F231FEE**  
Amount of Each Disbursement this Period

Candidate Name

Category/  
Type

39.99

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

Memo Item

State: District:

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

202.46

**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 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)  
**HISPANIC VICTORY PAC**

Full Name (Last, First, Middle Initial) <b>A. OMEGA LIST COMPANY</b>		Date of Disbursement MM / DD / YYYY 09 / 17 / 2018
Mailing Address 1420 SPRING HILL RD STE 490		FEC Identification Number C [ ] <b>Transaction ID : BD0716BD6C</b> Amount of Each Disbursement this Period [ ] 110.44
City MCLEAN	State VA	Zip Code 22102-3028
Purpose of Disbursement FUNDRAISING LIST RENTAL EXPENSE		Category/ Type [ ]
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:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>B. OMEGA LIST COMPANY</b>		Date of Disbursement MM / DD / YYYY 09 / 17 / 2018
Mailing Address 1420 SPRING HILL RD STE 490		FEC Identification Number C [ ] <b>Transaction ID : BE25769BA4I</b> Amount of Each Disbursement this Period [ ] 28.30
City MCLEAN	State VA	Zip Code 22102-3028
Purpose of Disbursement FUNDRAISING LIST RENTAL EXPENSE		Category/ Type [ ]
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:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>C. OMEGA LIST COMPANY</b>		Date of Disbursement MM / DD / YYYY 09 / 17 / 2018
Mailing Address 1420 SPRING HILL RD STE 490		FEC Identification Number C [ ] <b>Transaction ID : B8283248001</b> Amount of Each Disbursement this Period [ ] 116.25
City MCLEAN	State VA	Zip Code 22102-3028
Purpose of Disbursement FUNDRAISING LIST RENTAL EXPENSE		Category/ Type [ ]
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:	<input type="checkbox"/> Memo Item	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	[ ] 254.99
<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)  
**HISPANIC VICTORY PAC**

Full Name (Last, First, Middle Initial) <b>A. OMEGA LIST COMPANY</b>		Date of Disbursement MM / DD / YYYY 09 / 17 / 2018
Mailing Address 1420 SPRING HILL RD STE 490		FEC Identification Number C <b>Transaction ID : BC05E995E8</b> Amount of Each Disbursement this Period 116.25
City MCLEAN	State VA	
Zip Code 22102-3028		Memo Item <input type="checkbox"/>
Purpose of Disbursement FUNDRAISING LIST RENTAL EXPENSE		
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. OMEGA LIST COMPANY</b>		Date of Disbursement MM / DD / YYYY 09 / 17 / 2018
Mailing Address 1420 SPRING HILL RD STE 490		FEC Identification Number C <b>Transaction ID : B6532B8D25</b> Amount of Each Disbursement this Period 104.60
City MCLEAN	State VA	
Zip Code 22102-3028		Memo Item <input type="checkbox"/>
Purpose of Disbursement FUNDRAISING LIST RENTAL EXPENSE		
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. OMEGA LIST COMPANY</b>		Date of Disbursement MM / DD / YYYY 09 / 17 / 2018
Mailing Address 1420 SPRING HILL RD STE 490		FEC Identification Number C <b>Transaction ID : B2FE9A10CE</b> Amount of Each Disbursement this Period 67.87
City MCLEAN	State VA	
Zip Code 22102-3028		Memo Item <input type="checkbox"/>
Purpose of Disbursement FUNDRAISING LIST RENTAL EXPENSE		
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:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	288.72
<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)  
**HISPANIC VICTORY PAC**

Full Name (Last, First, Middle Initial) <b>A. OMEGA LIST COMPANY</b>		Date of Disbursement MM / DD / YYYY 09 / 17 / 2018
Mailing Address 1420 SPRING HILL RD STE 490		FEC Identification Number C [REDACTED] <b>Transaction ID : BA3D3F2FEC</b> Amount of Each Disbursement this Period [REDACTED] 356.70
City MCLEAN	State VA	Zip Code 22102-3028
Purpose of Disbursement FUNDRAISING LIST RENTAL EXPENSE		Category/ Type [REDACTED]
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:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>B. OMEGA LIST COMPANY</b>		Date of Disbursement MM / DD / YYYY 09 / 17 / 2018
Mailing Address 1420 SPRING HILL RD STE 490		FEC Identification Number C [REDACTED] <b>Transaction ID : B47722EF05E</b> Amount of Each Disbursement this Period [REDACTED] 19.27
City MCLEAN	State VA	Zip Code 22102-3028
Purpose of Disbursement FUNDRAISING LIST RENTAL EXPENSE		Category/ Type [REDACTED]
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:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>C. OMEGA LIST COMPANY</b>		Date of Disbursement MM / DD / YYYY 09 / 17 / 2018
Mailing Address 1420 SPRING HILL RD STE 490		FEC Identification Number C [REDACTED] <b>Transaction ID : B97595D671:</b> Amount of Each Disbursement this Period [REDACTED] 529.39
City MCLEAN	State VA	Zip Code 22102-3028
Purpose of Disbursement FUNDRAISING LIST RENTAL EXPENSE		Category/ Type [REDACTED]
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:	<input type="checkbox"/> Memo Item	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	[REDACTED] 905.36
<b>TOTAL</b> This Period (last page this line number only).....▶	[REDACTED]

**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)  
**HISPANIC VICTORY PAC**

Full Name (Last, First, Middle Initial)

**A. OMEGA LIST COMPANY**

Mailing Address 1420 SPRING HILL RD  
STE 490

City MCLEAN State VA Zip Code 22102-3028

Purpose of Disbursement  
FUNDRAISING LIST RENTAL EXPENSE

Candidate Name

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

State: District:

Date of Disbursement

M M M /  D D D /  Y Y Y Y Y Y  
09 / 17 / 2018

FEC Identification Number

C   
**Transaction ID : BA6926F54E**  
Amount of Each Disbursement this Period  
 61.24

Memo Item

Full Name (Last, First, Middle Initial)

**B. OMEGA LIST COMPANY**

Mailing Address 1420 SPRING HILL RD  
STE 490

City MCLEAN State VA Zip Code 22102-3028

Purpose of Disbursement  
FUNDRAISING LIST RENTAL EXPENSE

Candidate Name

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

State: District:

Date of Disbursement

M M M /  D D D /  Y Y Y Y Y Y  
09 / 17 / 2018

FEC Identification Number

C   
**Transaction ID : B814A042F54**  
Amount of Each Disbursement this Period  
 31.76

Memo Item

Full Name (Last, First, Middle Initial)

**C. POSTMASTER**

Mailing Address 4410 BROOKFIELD CORPORATE DR

City CHANTILLY State VA Zip Code 20153-8001

Purpose of Disbursement  
FUNDRAISING DIRECT MAIL POSTAL EXPENSE

Candidate Name

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

State: District:

Date of Disbursement

M M M /  D D D /  Y Y Y Y Y Y  
08 / 27 / 2018

FEC Identification Number

C   
**Transaction ID : B9A7301B41**  
Amount of Each Disbursement this Period  
 630.00

Memo Item

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

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

723.00

**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)  
**HISPANIC VICTORY PAC**

Full Name (Last, First, Middle Initial)

**A. RST MARKETING**

Mailing Address 1272 CORPORATE PARK DR

City  
FOREST

State  
VA

Zip Code  
24551-2277

Purpose of Disbursement  
FUNDRAISING DIRECT MAIL POSTAL EXPENSE

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 Y  
07 / 16 / 2018

FEC Identification Number

C [REDACTED]

Transaction ID : **B407C396C7**  
Amount of Each Disbursement this Period

[REDACTED] 2400.00

Memo Item

Full Name (Last, First, Middle Initial)

**B. WASHINGTON INTELLIGENCE BUREAU**

Mailing Address 4128 PEPSI PL

City  
CHANTILLY

State  
VA

Zip Code  
20151-1501

Purpose of Disbursement  
BOOKKEEPING

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 Y  
07 / 30 / 2018

FEC Identification Number

C [REDACTED]

Transaction ID : **B59CD18CD4**  
Amount of Each Disbursement this Period

[REDACTED] 1236.17

Memo Item

Full Name (Last, First, Middle Initial)

**C. WASHINGTON INTELLIGENCE BUREAU**

Mailing Address 4128 PEPSI PL

City  
CHANTILLY

State  
VA

Zip Code  
20151-1501

Purpose of Disbursement  
DIRECT MAIL ADMINISTRATIVE EXPENSE

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 Y  
07 / 30 / 2018

FEC Identification Number

C [REDACTED]

Transaction ID : **BEB58C7640**  
Amount of Each Disbursement this Period

[REDACTED] 244.24

Memo Item

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

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

[REDACTED] 3880.41

[REDACTED]

**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)  
**HISPANIC VICTORY PAC**

Full Name (Last, First, Middle Initial)

**A. WASHINGTON INTELLIGENCE BUREAU**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		20		2018

Mailing Address 4128 PEPSI PL

FEC Identification Number

**C** [ ]  
**Transaction ID : B793A1607D**  
 Amount of Each Disbursement this Period  
 [ ] 1231.91

City CHANTILLY State VA Zip Code 20151-1501

Purpose of Disbursement  
BOOKKEEPING

[ ]  
Category/  
Type

Candidate Name

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

Memo Item

Full Name (Last, First, Middle Initial)

**B. WASHINGTON INTELLIGENCE BUREAU**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		20		2018

Mailing Address 4128 PEPSI PL

FEC Identification Number

**C** [ ]  
**Transaction ID : B7290D7B3B**  
 Amount of Each Disbursement this Period  
 [ ] 257.62

City CHANTILLY State VA Zip Code 20151-1501

Purpose of Disbursement  
DIRECT MAIL ADMINISTRATIVE EXPENSE

[ ]  
Category/  
Type

Candidate Name

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

Memo Item

Full Name (Last, First, Middle Initial)

**C. WASHINGTON INTELLIGENCE BUREAU**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		17		2018

Mailing Address 4128 PEPSI PL

FEC Identification Number

**C** [ ]  
**Transaction ID : B795653BF3**  
 Amount of Each Disbursement this Period  
 [ ] 280.88

City CHANTILLY State VA Zip Code 20151-1501

Purpose of Disbursement  
DIRECT MAIL ADMINISTRATIVE EXPENSE

[ ]  
Category/  
Type

Candidate Name

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

Memo Item

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

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

[ ] 1770.41

[ ]



**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

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)  
**HISPANIC VICTORY PAC**

Full Name (Last, First, Middle Initial)

**A. WASHINGTON INTELLIGENCE BUREAU**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09	/	17	/	2018

Mailing Address 4128 PEPSI PL

FEC Identification Number

C
---

**Transaction ID : B04976025C**  
Amount of Each Disbursement this Period

1403.41
---------

Memo Item

City CHANTILLY State VA Zip Code 20151-1501

Purpose of Disbursement  
BOOKKEEPING

Category/Type
---------------

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Full Name (Last, First, Middle Initial)

**B. ZIP MAILING SERVICES, INC.**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
07	/	02	/	2018

Mailing Address 6304 SHERIFF RD  
STE Z

FEC Identification Number

C
---

**Transaction ID : BDC689517F**  
Amount of Each Disbursement this Period

1200.00
---------

Memo Item

City LANDOVER State MD Zip Code 20785-4361

Purpose of Disbursement  
FUNDRAISING DIRECT MAIL POSTAL EXPENSE

Category/Type
---------------

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Full Name (Last, First, Middle Initial)

**C. ZIP MAILING SERVICES, INC.**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
07	/	16	/	2018

Mailing Address 6304 SHERIFF RD  
STE Z

FEC Identification Number

C
---

**Transaction ID : BE8508128A**  
Amount of Each Disbursement this Period

841.73
--------

Memo Item

City LANDOVER State MD Zip Code 20785-4361

Purpose of Disbursement  
FUNDRAISING DIRECT MAIL PRINTING

Category/Type
---------------

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

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

3445.14
---------

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

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**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)  
**HISPANIC VICTORY PAC**

Full Name (Last, First, Middle Initial) <b>A. ZIP MAILING SERVICES, INC.</b>		Date of Disbursement MM / DD / YYYY 07 / 16 / 2018
Mailing Address 6304 SHERIFF RD STE Z		FEC Identification Number C <b>Transaction ID : B6C3B165A2</b> Amount of Each Disbursement this Period 257.30
City LANDOVER	State MD	
Purpose of Disbursement FUNDRAISING DIRECT MAIL PRINTING		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. ZIP MAILING SERVICES, INC.</b>		Date of Disbursement MM / DD / YYYY 07 / 30 / 2018
Mailing Address 6304 SHERIFF RD STE Z		FEC Identification Number C <b>Transaction ID : BC5ED7C081</b> Amount of Each Disbursement this Period 2961.54
City LANDOVER	State MD	
Purpose of Disbursement FUNDRAISING DIRECT MAIL PRINTING		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. ZIP MAILING SERVICES, INC.</b>		Date of Disbursement MM / DD / YYYY 08 / 06 / 2018
Mailing Address 6304 SHERIFF RD STE Z		FEC Identification Number C <b>Transaction ID : B9436B79D8</b> Amount of Each Disbursement this Period 60.23
City LANDOVER	State MD	
Purpose of Disbursement FUNDRAISING DIRECT MAIL PRINTING		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).....▶	3279.07
<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)  
**HISPANIC VICTORY PAC**

Full Name (Last, First, Middle Initial) <b>A. ZIP MAILING SERVICES, INC.</b>		Date of Disbursement MM / DD / YYYY 08 / 06 / 2018
Mailing Address 6304 SHERIFF RD STE Z		FEC Identification Number C Transaction ID : B4CD44D1E6 Amount of Each Disbursement this Period 261.95
City LANDOVER	State MD	
Purpose of Disbursement FUNDRAISING DIRECT MAIL PRINTING		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. ZIP MAILING SERVICES, INC.</b>		Date of Disbursement MM / DD / YYYY 08 / 06 / 2018
Mailing Address 6304 SHERIFF RD STE Z		FEC Identification Number C Transaction ID : B74D4DEFDF Amount of Each Disbursement this Period 54.21
City LANDOVER	State MD	
Purpose of Disbursement FUNDRAISING DIRECT MAIL PRINTING		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. ZIP MAILING SERVICES, INC.</b>		Date of Disbursement MM / DD / YYYY 08 / 06 / 2018
Mailing Address 6304 SHERIFF RD STE Z		FEC Identification Number C Transaction ID : BDAECF9A1 Amount of Each Disbursement this Period 1225.01
City LANDOVER	State MD	
Purpose of Disbursement FUNDRAISING DIRECT MAIL PRINTING		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:		

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

1541.17

**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 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)  
**HISPANIC VICTORY PAC**

Full Name (Last, First, Middle Initial)

**A. ZIP MAILING SERVICES, INC.**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		20		2018

Mailing Address 6304 SHERIFF RD  
STE Z

City LANDOVER State MD Zip Code 20785-4361

Purpose of Disbursement  
FUNDRAISING DIRECT MAIL PRINTING

FEC Identification Number

C [REDACTED]

**Transaction ID : B5280D362C:**  
Amount of Each Disbursement this Period

[REDACTED] 386.03

Candidate Name

Category/Type

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

Memo Item

Full Name (Last, First, Middle Initial)

**B. ZIP MAILING SERVICES, INC.**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		04		2018

Mailing Address 6304 SHERIFF RD  
STE Z

City LANDOVER State MD Zip Code 20785-4361

Purpose of Disbursement  
FUNDRAISING DIRECT MAIL PRINTING

FEC Identification Number

C [REDACTED]

**Transaction ID : B16D08AA81I**  
Amount of Each Disbursement this Period

[REDACTED] 1019.28

Candidate Name

Category/Type

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

Memo Item

Full Name (Last, First, Middle Initial)

**C. ZIP MAILING SERVICES, INC.**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		10		2018

Mailing Address 6304 SHERIFF RD  
STE Z

City LANDOVER State MD Zip Code 20785-4361

Purpose of Disbursement  
FUNDRAISING DIRECT MAIL PRINTING

FEC Identification Number

C [REDACTED]

**Transaction ID : B4F7FAD73E**  
Amount of Each Disbursement this Period

[REDACTED] 19.00

Candidate Name

Category/Type

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

Memo Item

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

[REDACTED] 1424.31

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

[REDACTED] 81621.68

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full)
HISPANIC VICTORY PAC
FEC IDENTIFICATION NUMBER
C C00614453

Check if 24-hour report 48-hour report
New report Amends report filed on

Full Name of Payee
RST MARKETING
Mailing Address
1272 CORPORATE PARK DR
City
FOREST State
VA Zip Code
24551-2277
Purpose of Expenditure
DIRECT MAIL EXPENSE
Category/Type
Date of Public Distribution/Dissemination
07 / 25 / 2018
Amount
1200.01
Transaction ID : E4C2A6C4CCFB241FF9F6
Date of Disbursement or Obligation
07 / 25 / 2018

Name of Federal Candidate:
O'ROURKE, ROBERT, (BETO),
Support Oppose
Office Sought:
House Senate
District: State: TX
Calendar Year-To-Date
Per Election for Office Sought
36239.96
Disbursement For:
Primary General
2018 Other (specify)

Full Name of Payee
RST MARKETING
Mailing Address
1272 CORPORATE PARK DR
City
FOREST State
VA Zip Code
24551-2277
Purpose of Expenditure
DIRECT MAIL EXPENSE
Category/Type
Date of Public Distribution/Dissemination
07 / 25 / 2018
Amount
1200.01
Transaction ID : E901B673D17F94749AD5
Date of Disbursement or Obligation
07 / 25 / 2018

Name of Federal Candidate:
CRUZ, RAFAEL EDWARD, TED,
Support Oppose
Office Sought:
House Senate
District: State: TX
Calendar Year-To-Date
Per Election for Office Sought
36239.96
Disbursement For:
Primary General
2018 Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures ..... 2400.02
(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.

Signature
OEHLER, MICHAEL, ,
[Electronically Filed]

Date
10 / 15 / 2018

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full)
HISPANIC VICTORY PAC
FEC IDENTIFICATION NUMBER
C C00614453

Check if 24-hour report 48-hour report
New report Amends report filed on

Full Name of Payee
WASHINGTON MEDIA GROUP
Mailing Address
1250 I STREET NW
SUITE 800
City
WASHINGTON
State
DC
Zip Code
20005-5911
Purpose of Expenditure
DIGITAL ADVERTISING
Category/Type
Date of Public Distribution/Dissemination
09 / 24 / 2018
Amount
10000.00
Transaction ID : E9B5B3024384D413BBF8
Date of Disbursement or Obligation
09 / 24 / 2018

Name of Federal Candidate:
CRUZ, RAFAEL EDWARD, TED,
Support
Office Sought:
House
Senate
District:
State: TX
Disbursement For:
Primary
General
Other (specify)

Full Name of Payee
ZIP MAILING SERVICES, INC.
Mailing Address
6304 SHERIFF RD
STE Z
City
LANDOVER
State
MD
Zip Code
20785-4361
Purpose of Expenditure
DIRECT MAIL EXPENSE
Category/Type
Date of Public Distribution/Dissemination
07 / 30 / 2018
Amount
3974.98
Transaction ID : E4263B17A5A1D46D0B35
Date of Disbursement or Obligation
07 / 30 / 2018

Name of Federal Candidate:
CRUZ, RAFAEL EDWARD, TED,
Support
Office Sought:
House
Senate
District:
State: TX
Disbursement For:
Primary
General
Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures ..... 13974.98
(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.

Signature OEHLER, MICHAEL, , ,

[Electronically Filed]

Date 10 / 15 / 2018

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full)
HISPANIC VICTORY PAC
FEC IDENTIFICATION NUMBER
C C00614453

Check if 24-hour report 48-hour report
New report Amends report filed on

Full Name of Payee
ZIP MAILING SERVICES, INC.
Mailing Address
6304 SHERIFF RD
STE Z
City
LANDOVER State
MD Zip Code
20785-4361
Purpose of Expenditure
DIRECT MAIL EXPENSE
Category/Type
Amount
3974.98
Transaction ID : ED0F2B246794C42EEB5E
Date of Disbursement or Obligation
07 / 30 / 2018

Name of Federal Candidate:
O'ROURKE, ROBERT, (BETO),
Support Oppose
Office Sought:
House Senate State: TX
Disbursement For:
Primary General
Other (specify)

Full Name of Payee
ZIP MAILING SERVICES, INC.
Mailing Address
6304 SHERIFF RD
STE Z
City
LANDOVER State
MD Zip Code
20785-4361
Purpose of Expenditure
DIRECT MAIL EXPENSE
Category/Type
Amount
1479.63
Transaction ID : E5D63000233B94B349AA
Date of Disbursement or Obligation
08 / 31 / 2018

Name of Federal Candidate:
O'ROURKE, ROBERT, (BETO),
Support Oppose
Office Sought:
House Senate State: TX
Disbursement For:
Primary General
Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures ..... 5454.61
(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.

Signature
OEHLER, MICHAEL, ,

[Electronically Filed]

Date
10 / 15 / 2018

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full)
HISPANIC VICTORY PAC
FEC IDENTIFICATION NUMBER
C C00614453

Check if 24-hour report 48-hour report
New report Amends report filed on

Full Name of Payee
ZIP MAILING SERVICES, INC.
Mailing Address
6304 SHERIFF RD
STE Z
City
LANDOVER State
MD Zip Code
20785-4361
Purpose of Expenditure
DIRECT MAIL EXPENSE
Category/Type
Date of Public Distribution/Dissemination
08 / 31 / 2018
Amount
1479.63
Transaction ID : E928C968EB90C43DD940
Date of Disbursement or Obligation
08 / 31 / 2018

Name of Federal Candidate:
CRUZ, RAFAEL EDWARD, TED,
Support Oppose
Office Sought:
House Senate
District: State: TX
Calendar Year-To-Date
Per Election for Office Sought
47149.18
Disbursement For:
Primary General
Other (specify)

Full Name of Payee
ZIP MAILING SERVICES, INC.
Mailing Address
6304 SHERIFF RD
STE Z
City
LANDOVER State
MD Zip Code
20785-4361
Purpose of Expenditure
DIRECT MAIL EXPENSE
Category/Type
Date of Public Distribution/Dissemination
09 / 05 / 2018
Amount
5376.00
Transaction ID : E8B294BC9B5CD49F9946
Date of Disbursement or Obligation
09 / 05 / 2018

Name of Federal Candidate:
CRUZ, RAFAEL EDWARD, TED,
Support Oppose
Office Sought:
House Senate
District: State: TX
Calendar Year-To-Date
Per Election for Office Sought
57901.18
Disbursement For:
Primary General
Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures ..... 6855.63
(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.

Signature OEHLER, MICHAEL, , , [Electronically Filed]

Date 10 / 15 / 2018



SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full)
HISPANIC VICTORY PAC
FEC IDENTIFICATION NUMBER
C C00614453

Check if 24-hour report 48-hour report
New report Amends report filed on

Full Name of Payee
ZIP MAILING SERVICES, INC.
Mailing Address
6304 SHERIFF RD
STE Z
City
LANDOVER State
MD Zip Code
20785-4361
Purpose of Expenditure
DIRECT MAIL EXPENSE
Category/Type
Amount
5376.00
Transaction ID : EE4834E62D22A4B079BA
Date of Disbursement or Obligation
09 / 05 / 2018

Name of Federal Candidate:
O'ROURKE, ROBERT, (BETO),
Support Oppose
Office Sought:
House Senate State: TX
Disbursement For:
Primary General
Other (specify)

Full Name of Payee
Mailing Address
City
State
Zip Code
Purpose of Expenditure
Category/Type
Date of Public Distribution/Dissemination
Amount
Date of Disbursement or Obligation

Name of Federal Candidate:
Support Oppose
Office Sought:
House Senate State:
Disbursement For:
Primary General
Other (specify)

Table with 2 columns: Description and Amount.
(a) SUBTOTAL of Itemized Independent Expenditures 5376.00
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures 34061.24

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.

Signature: OEHLER, MICHAEL, , [Electronically Filed]

Date: 10 / 15 / 2018