

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) 1717 PENNSYLVANIA AVE NW STE 1025 WASHINGTON DC 20006-3951

2. FEC IDENTIFICATION NUMBER C00614453 3. IS THIS REPORT 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 Report (selected), 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 01 / 01 / 2017 through 06 / 30 / 2017

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

Signature of Treasurer SANCHEZ CANETE, JESUS, D, [Electronically Filed] Date 07 / 31 / 2017

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)

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="2017"/>	<input type="text" value="13416.94"/>	<input type="text" value="13416.94"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="13416.94"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="109059.03"/>	<input type="text" value="109059.03"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<input type="text" value="122475.97"/>	<input type="text" value="122475.97"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="96956.82"/>	<input type="text" value="96956.82"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="25519.15"/>	<input type="text" value="25519.15"/>
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	

This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission
999 E Street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3X (Rev. 05/2016)

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).....	21943.00	21943.00
(ii) Unitemized	87116.03	87116.03
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	109059.03	109059.03
(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)	109059.03	109059.03
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.).....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)).....▶	109059.03	109059.03
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	109059.03	109059.03

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	96956.82	96956.82
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	96956.82	96956.82
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)	0.00	0.00
25. Coordinated Party Expenditures (52 U.S.C. § 30116(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements (Including Non-Federal Donations).....	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)) ..	96956.82	96956.82
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	96956.82	96956.82

DETAILED SUMMARY PAGE
of Disbursements

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Page 5

III. Net Contributions/ Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	109059.03	109059.03
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	109059.03	109059.03
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	96956.82	96956.82
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	96956.82	96956.82

**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 6 OF 73
	<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. AKINA, ARLINE, L, MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 99-025 LOHEA PL
 City AIEA State HI Zip Code 96701-3035
 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 04 / 13 / 2017
Transaction ID : AE6B6B98D103145D5A95
 Amount of Each Receipt this Period 100.00
 Memo Item

B. AKINA, ARLINE, L, MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 99-025 LOHEA PL
 City AIEA State HI Zip Code 96701-3035
 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 ▼ 375.00

Date of Receipt 06 / 20 / 2017
Transaction ID : A07CE0B08F1C04FC3951
 Amount of Each Receipt this Period 75.00
 Memo Item

C. BAKER, EDWARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1589 ROSEWOOD DR
 City HEALDSBURG State CA Zip Code 95448-3257
 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 01 / 10 / 2017
Transaction ID : A73623B9A975547C3B84
 Amount of Each Receipt this Period 500.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	675.00
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 7 OF 73
	<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. 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
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) WAREHOUSE INC Occupation (for Individual) SEMI RET
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 02 / 24 / 2017
Transaction ID : A54EA5C3C0947426DBF2
 Amount of Each Receipt this Period 250.00
 Memo Item

B. BONNEY, ROGER, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8580 WOODWAY DR APT 1104
 City HOUSTON State TX Zip Code 77063
 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 06 / 13 / 2017
Transaction ID : A40CAE15FD49F422DBF5
 Amount of Each Receipt this Period 200.00
 Memo Item

C. BOYLAN, MICHAEL, B, MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5110 SAN FELIPE ST UNIT 271W
 City HOUSTON State TX Zip Code 77056-3667
 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 04 / 03 / 2017
Transaction ID : A3AC45D2F16B64AFFAA1
 Amount of Each Receipt this Period 250.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	700.00
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 8 OF 73
	<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. BUESCHEL, HOWARD, A, MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 107 UPPER FERRY RD
 City TRENTON State NJ Zip Code 08628
 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 06 / 08 / 2017
Transaction ID : A04EA462CAD634DE6BFC
 Amount of Each Receipt this Period 300.00
 Memo Item

B. CRAWFORD, DONALD, B, MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 3003
 725 SKIPPACK PIKE BLDG 21
 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 ▼ 350.00

Date of Receipt 06 / 20 / 2017
Transaction ID : A539819516D3B4AE9A02
 Amount of Each Receipt this Period 250.00
 Memo Item

C. FREEMAN, THOMAS, M, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1525 SCOTCH RIDGE RD
 City SCHENECTADY State NY Zip Code 12306
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SUNY Occupation (for Individual) PROFESSOR
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 05 / 2017
Transaction ID : AA60F96B257E640DE8B2
 Amount of Each Receipt this Period 250.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	800.00
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 9 OF 73
	<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. GILBERT, LAMBERT, O, MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 8548 VINE VALLEY DR

City SUN VALLEY	State CA	Zip Code 91352-3659
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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 ▼
1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	11	/	2017

Transaction ID : A44064AE0FB704057859

Amount of Each Receipt this Period
1000.00

Memo Item

B. GUINN, ALFRED, B, MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1111 7TH ST

City WICHITA FALLS	State TX	Zip Code 76301-2301
-----------------------	-------------	------------------------

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

Name of Employer (for Individual) WALSH & WATTS INC	Occupation (for Individual) VICE PRESIDENT
--	---

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
01	/	26	/	2017

Transaction ID : AA13CEF3A8FCA4DAA8DE

Amount of Each Receipt this Period
250.00

Memo Item

C. HAMM, EDWARD, H, MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 243 S BEACH RD

City HOBE SOUND	State FL	Zip Code 33455-2512
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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 ▼
1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	14	/	2017

Transaction ID : AFD9091B6318944DDB4F

Amount of Each Receipt this Period
1000.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	2250.00
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:	PAGE 10 OF 73
	(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. HEIDE, CHARLES, H, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5825 6TH PL
 City KENOSHA State WI Zip Code 53144-7216
 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 03 / 30 / 2017
Transaction ID : AF5E1EF17AEAA44EAA38
 Amount of Each Receipt this Period 300.00
 Memo Item

B. HILLMAN, TATNALL, LEA, CAPT,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 504 W BLEEKER ST
 City ASPEN State CO Zip Code 81611-1228
 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 03 / 31 / 2017
Transaction ID : A19B6CDD2697E4887B3A
 Amount of Each Receipt this Period 1000.00
 Memo Item

C. HILLMAN, TATNALL, LEA, CAPT,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 504 W BLEEKER ST
 City ASPEN State CO Zip Code 81611-1228
 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 ▼ 6000.00

Date of Receipt 05 / 09 / 2017
Transaction ID : A60B775E7CB6A4086B7D
 Amount of Each Receipt this Period 5000.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	6300.00
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 11 OF 73
	<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. JOHNSON, LARRY, W, MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 910 MOONGLO RD
 SPC 29
 City BUHL State ID Zip Code 83316
 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 05 / 24 / 2017
Transaction ID : A43CE613E31EB4BAF915
 Amount of Each Receipt this Period 500.00
 Memo Item

B. KENDALL, LINDA, G, MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 50 CLUB HOUSE RD
 City KEY LARGO State FL Zip Code 33037-3600
 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 01 / 31 / 2017
Transaction ID : A935C0F62DA4E4C2AAA8
 Amount of Each Receipt this Period 300.00
 Memo Item

C. KENDALL, LINDA, G, MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 50 CLUB HOUSE RD
 City KEY LARGO State FL Zip Code 33037-3600
 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 03 / 10 / 2017
Transaction ID : ABB814C4C26DE49609CB
 Amount of Each Receipt this Period 300.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	1100.00
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 12 OF 73
	<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. KENDALL, LINDA, G, MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 50 CLUB HOUSE RD
 City KEY LARGO State FL Zip Code 33037-3600
 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 04 / 06 / 2017
Transaction ID : A43884821599C450CA0C
 Amount of Each Receipt this Period 500.00
 Memo Item

B. KIDSON, H, DONALD, MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1457 12TH ST
 City SANTA MONICA State CA Zip Code 90401-3003
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) ILLUSTRATOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 01 / 04 / 2017
Transaction ID : AE6136823E32D4BDC9EA
 Amount of Each Receipt this Period 300.00
 Memo Item

C. MARTIN, JOYCE, V, MRS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1900 E GIRARD PL APT 703
 City ENGLEWOOD State CO Zip Code 80113-3112
 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 04 / 03 / 2017
Transaction ID : A28DD5B2D1295494CA96
 Amount of Each Receipt this Period 1000.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	1800.00
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 13 OF 73
	<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. MASON, BRUCE, E, MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4214 ASHFIELD PL

City SOUTHPORT	State NC	Zip Code 28461
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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 ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	09	/	2017

Transaction ID : A2A5E17E6A11440C2B4A

Amount of Each Receipt this Period
500.00

Memo Item

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

Mailing Address 8052 GIOVANNI LN

City OOLTEWAH	State TN	Zip Code 37363
------------------	-------------	-------------------

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
06	/	13	/	2017

Transaction ID : AC28B60DE17034C2CB43

Amount of Each Receipt this Period
500.00

Memo Item

C. MEISSNER, MIKE, , MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2 WEEPING SPRUCE PL

City CONROE	State TX	Zip Code 77384-4773
----------------	-------------	------------------------

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

Name of Employer (for Individual) CHEVRON PHILLIPS CHEMICAL COMPANY	Occupation (for Individual) FINANCE MANAGER
--	--

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
04	/	21	/	2017

Transaction ID : AB4EEB771E17A4B7BB9B

Amount of Each Receipt this Period
300.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	1300.00
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 14 OF 73
	<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. MORLEY, JOHN, C, MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2491 FAIRMOUNT BLVD
BLDG 3

City CLEVELAND	State OH	Zip Code 44106
-------------------	-------------	-------------------

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
05		05		2017

Transaction ID : ADA7FF2148C614E9187B

Amount of Each Receipt this Period
290.00

Memo Item

B. MUZI, FREDERICK, O J, MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 10 POWISSET ST

City DOVER	State MA	Zip Code 02030-1601
---------------	-------------	------------------------

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
03		08		2017

Transaction ID : AF95189AB35B049B7B72

Amount of Each Receipt this Period
500.00

Memo Item

C. MYERS, JANET, E, ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 26 S GRANT ST

City WAYNESBORO	State PA	Zip Code 17268-1516
--------------------	-------------	------------------------

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

M M M	/	D D D	/	Y Y Y Y Y Y
06		08		2017

Transaction ID : A8EEEB78CE8594D3FAA1

Amount of Each Receipt this Period
28.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	818.00
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 15 OF 73
	<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. NEYHART, PETER, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 144 BEHREND S AVE
 City JUNEAU State AK Zip Code 99801
 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 06 / 20 / 2017
Transaction ID : A8F191F9C6E424793A90
 Amount of Each Receipt this Period 500.00
 Memo Item

B. PACKER, DUANE, L, MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1118 SLIM WILLIAMS WAY
 City JUNEAU State AK Zip Code 99801-8758
 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 04 / 24 / 2017
Transaction ID : A67E6380CACFA4C26921
 Amount of Each Receipt this Period 250.00
 Memo Item

C. PACKER, DUANE, L, MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1118 SLIM WILLIAMS WAY
 City JUNEAU State AK Zip Code 99801-8758
 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 06 / 21 / 2017
Transaction ID : A49B4B525E7144FC38C2
 Amount of Each Receipt this Period 250.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	1000.00
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 16 OF 73
	<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. PALMER, EDITH, P, MRS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 282 LAROE RD
 City CHESTER State NY Zip Code 10918-2435
 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 02 / 21 / 2017
Transaction ID : A7BC7B90019E04AE795D
 Amount of Each Receipt this Period 1000.00
 Memo Item

B. PEARSON, JOHN, E, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 62 MIDDLE DUNSTABLE RD
 City NASHUA State NH Zip Code 03062-2215
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RPL PROPERTIES LLC Occupation (for Individual) REAL ESTATE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 04 / 10 / 2017
Transaction ID : A41771B40FDEB4096B3A
 Amount of Each Receipt this Period 250.00
 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 ▼ 245.00

Date of Receipt 04 / 03 / 2017
Transaction ID : ABA0514AA9C8B4A1BA72
 Amount of Each Receipt this Period 75.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	1325.00
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 73
	<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. 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 ▼ 295.00

Date of Receipt 06 / 13 / 2017
Transaction ID : AE1D1AFBDA5C1458B8AF
 Amount of Each Receipt this Period 50.00
 Memo Item

B. RUTHERFORD, WILLIAM, L, , MD
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 42
 City GENESEO State IL Zip Code 61254-0042
 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 ▼ 500.00

Date of Receipt 02 / 06 / 2017
Transaction ID : A9C77312D3DC0499A9CC
 Amount of Each Receipt this Period 500.00
 Memo Item

C. SCOTT, DOROTHY, R, MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5105 SEABREEZE WAY
 City OXNARD State CA Zip Code 93035
 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 06 / 23 / 2017
Transaction ID : A25ACFDB942634D90818
 Amount of Each Receipt this Period 300.00
 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 18 OF 73
	<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. SCOTT, PENELOPE, , DR., MD
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 11824 FALLS RD

City COCKEYSVILLE	State MD	Zip Code 21030-1605
----------------------	-------------	------------------------

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
06	/	08	/	2017

Transaction ID : A40911AC40B0A4847A8E

Amount of Each Receipt this Period
150.00

Memo Item

B. SMEED, CLAIRE, , MS.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3200 21ST ST
STE 401

City BAKERSFIELD	State CA	Zip Code 93301-3108
---------------------	-------------	------------------------

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
05	/	04	/	2017

Transaction ID : A7743C100F6A04988993

Amount of Each Receipt this Period
200.00

Memo Item

C. SNEESBY, JACK, T, MR., DDS
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 14555 E HAMPDEN AVE
APT 304

City AURORA	State CO	Zip Code 80014-5046
----------------	-------------	------------------------

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

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

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
04	/	17	/	2017

Transaction ID : A6E84655BBAA34B5E817

Amount of Each Receipt this Period
100.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	450.00
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 19 OF 73
	<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. 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
---------------------	-------------	-------------------

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 / D D / Y Y Y Y Y Y
 06 / 15 / 2017

Transaction ID : AD34CF9516AF44F6CB62

Amount of Each Receipt this Period
300.00

Memo Item

B. STADLER, JOAN, P, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1755 N STATE ROUTE 560

City URBANA	State OH	Zip Code 43078-9666
----------------	-------------	------------------------

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 ▼
225.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 12 / 2017

Transaction ID : A6FA3A264AC374556A0C

Amount of Each Receipt this Period
100.00

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 ▼
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 03 / 2017

Transaction ID : ACC9321EEE68141D08D0

Amount of Each Receipt this Period
250.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	650.00
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:	PAGE 20 OF 73
	(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. SUNDE, DAVID, A, MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2610 FREMONT AVE S
 APT 102
 City MINNEAPOLIS State MN Zip Code 55408-1172
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) DITECH Occupation (for Individual) COMPUTEROPERATO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 05 / 08 / 2017
Transaction ID : A06FC372A35A8498DB50
 Amount of Each Receipt this Period 500.00
 Memo Item

B. TROTH, ROBERT, S, MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3003 GULF SHORE BLVD N
 APT 301
 City NAPLES State FL Zip Code 34103-3912
 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 06 / 26 / 2017
Transaction ID : AAA2FF09A83914B98B6A
 Amount of Each Receipt this Period 250.00
 Memo Item

C. WASMER, PEDRO, E, MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 642 BOUGAINVILLEA RD
 City NAPLES State FL Zip Code 34102-5525
 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 06 / 09 / 2017
Transaction ID : A43E7C1F62D6A4BECBB9
 Amount of Each Receipt this Period 250.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	1000.00
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 21 OF 73
	<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. WELLEMEYER, JOHN, C, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 89 ROSEDALE RD
 City PRINCETON State NJ Zip Code 08540-6701
 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
 02 / 21 / 2017
Transaction ID : A6C59FE7CCC5041BBA11
 Amount of Each Receipt this Period
 250.00
 Memo Item

B. WILLARD, HENRY, K, MR., II
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 3269
 City SHEPHERDSTOWN State WV Zip Code 25443
 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
 06 / 07 / 2017
Transaction ID : A40B97B58267145AA8CF
 Amount of Each Receipt this Period
 500.00
 Memo Item

C. 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
 06 / 06 / 2017
Transaction ID : A848E3EEF5D07461B8AD
 Amount of Each Receipt this Period
 100.00
 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 22 OF 73
	<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. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
ZIMMERMAN, LOIS, R, MS.,

Mailing Address 1095 PINELLAS POINT DR S
APT 486

City SAINT PETERSBURG State FL Zip Code 33705-6392

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 ▼
210.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 04 / 2017

Transaction ID : ADD68CC7740B142CDA0C

Amount of Each Receipt this Period
75.00

Memo Item

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

Mailing Address

City State Zip Code

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt
 M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

Memo Item

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

Mailing Address

City State Zip Code

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

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

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt
 M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

Memo Item

SUBTOTAL of Receipts This Page (optional).....	75.00
TOTAL This Period (last page this line number only).....	21943.00

**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. CAMPAIGN FUNDING DIRECT

Mailing Address 1420 SPRING HILL ROAD
SUITE 490

City MCLEAN State VA Zip Code 22102-3028

Purpose of Disbursement
AGENCY FEE

Candidate Name

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

State: District:

Date of Disbursement

MM / DD / YYYY
01 / 09 / 2017

FEC Identification Number

C
Transaction ID : B82B18C013
Amount of Each Disbursement this Period
270.68

Memo Item

Full Name (Last, First, Middle Initial)

B. CAMPAIGN FUNDING DIRECT

Mailing Address 1420 SPRING HILL ROAD
SUITE 490

City MCLEAN State VA Zip Code 22102-3028

Purpose of Disbursement
AGENCY FEE - DIRECT MAIL - CONSULTING

Candidate Name

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

State: District:

Date of Disbursement

MM / DD / YYYY
01 / 30 / 2017

FEC Identification Number

C
Transaction ID : B92C5AE272I
Amount of Each Disbursement this Period
2467.35

Memo Item

Full Name (Last, First, Middle Initial)

C. CAMPAIGN FUNDING DIRECT

Mailing Address 1420 SPRING HILL ROAD
SUITE 490

City MCLEAN State VA Zip Code 22102-3028

Purpose of Disbursement
AGENCY FEE

Candidate Name

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

State: District:

Date of Disbursement

MM / DD / YYYY
02 / 13 / 2017

FEC Identification Number

C
Transaction ID : BECE650332
Amount of Each Disbursement this Period
532.65

Memo Item

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

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

3270.68

**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

Mailing Address 1420 SPRING HILL ROAD
SUITE 490

City MCLEAN State VA Zip Code 22102-3028

Purpose of Disbursement
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
03 / 20 / 2017

FEC Identification Number

C
Transaction ID : B814988589E
Amount of Each Disbursement this Period
144.23

Memo Item

Full Name (Last, First, Middle Initial)

B. CAMPAIGN FUNDING DIRECT

Mailing Address 1420 SPRING HILL ROAD
SUITE 490

City MCLEAN State VA Zip Code 22102-3028

Purpose of Disbursement
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
04 / 24 / 2017

FEC Identification Number

C
Transaction ID : BD7620AB2B
Amount of Each Disbursement this Period
211.35

Memo Item

Full Name (Last, First, Middle Initial)

C. CAMPAIGN FUNDING DIRECT

Mailing Address 1420 SPRING HILL ROAD
SUITE 490

City MCLEAN State VA Zip Code 22102-3028

Purpose of Disbursement
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
04 / 24 / 2017

FEC Identification Number

C
Transaction ID : B837BA44B9
Amount of Each Disbursement this Period
135.98

Memo Item

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

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

491.56

**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

Mailing Address 1420 SPRING HILL ROAD
SUITE 490

City MCLEAN State VA Zip Code 22102-3028

Purpose of Disbursement
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
04 / 24 / 2017

FEC Identification Number

C
Transaction ID : B0E9E484E7I
Amount of Each Disbursement this Period
 1628.03

Memo Item

Full Name (Last, First, Middle Initial)

B. CAMPAIGN FUNDING DIRECT

Mailing Address 1420 SPRING HILL ROAD
SUITE 490

City MCLEAN State VA Zip Code 22102-3028

Purpose of Disbursement
DIRECT MAIL CREATIVE

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
05 / 15 / 2017

FEC Identification Number

C
Transaction ID : BFD0D1989A
Amount of Each Disbursement this Period
 410.70

Memo Item

Full Name (Last, First, Middle Initial)

C. CAMPAIGN FUNDING DIRECT

Mailing Address 1420 SPRING HILL ROAD
SUITE 490

City MCLEAN State VA Zip Code 22102-3028

Purpose of Disbursement
DIRECT MAIL CREATIVE

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
05 / 30 / 2017

FEC Identification Number

C
Transaction ID : BC0C930BCI
Amount of Each Disbursement this Period
 110.03

Memo Item

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

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

2148.76

**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

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
05		30		2017

Mailing Address 1420 SPRING HILL ROAD
SUITE 490

FEC Identification Number

C []
Transaction ID : B5B8EE40AE
Amount of Each Disbursement this Period
[] 2109.15

City MCLEAN State VA Zip Code 22102-3028

Purpose of Disbursement
DIRECT MAIL CREATIVE

[]
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

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
05		30		2017

Mailing Address 1420 SPRING HILL ROAD
SUITE 490

FEC Identification Number

C []
Transaction ID : BBAAB67734
Amount of Each Disbursement this Period
[] 521.33

City MCLEAN State VA Zip Code 22102-3028

Purpose of Disbursement
DIRECT MAIL CREATIVE

[]
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
04		10		2017

Mailing Address 8000 VILLA PARK DRIVE

FEC Identification Number

C []
Transaction ID : B1B97277B9
Amount of Each Disbursement this Period
[] 1259.28

City RICHMOND State VA Zip Code 23228-6500

Purpose of Disbursement
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)..... ▶

[] 3889.76

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. COLORTREE GROUP, INC.

Mailing Address 8000 VILLA PARK DRIVE

City
RICHMOND

State
VA

Zip Code
23228-6500

Purpose of Disbursement
PRINTING

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	0		2	0	1	7

FEC Identification Number

C

Transaction ID : B4D3BC810F

Amount of Each Disbursement this Period

2175.12

Memo Item

Full Name (Last, First, Middle Initial)

B. COLORTREE GROUP, INC.

Mailing Address 8000 VILLA PARK DRIVE

City
RICHMOND

State
VA

Zip Code
23228-6500

Purpose of Disbursement
DIRECT MAIL PRINTING

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		1	5		2	0	1	7

FEC Identification Number

C

Transaction ID : B4D82EA7FA

Amount of Each Disbursement this Period

1414.04

Memo Item

Full Name (Last, First, Middle Initial)

C. COLORTREE GROUP, INC.

Mailing Address 8000 VILLA PARK DRIVE

City
RICHMOND

State
VA

Zip Code
23228-6500

Purpose of Disbursement
DIRECT MAIL PRINTING

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		1	5		2	0	1	7

FEC Identification Number

C

Transaction ID : B7B120B669

Amount of Each Disbursement this Period

2291.72

Memo Item

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

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

5880.88

**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
06		26		2017

Mailing Address 8000 VILLA PARK DRIVE

FEC Identification Number

C

Transaction ID : BA347DE4C0
Amount of Each Disbursement this Period

1621.80

Memo Item

City RICHMOND State VA Zip Code 23228-6500

Purpose of Disbursement
DIRECT MAIL PRINTING

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
06		26		2017

Mailing Address 8000 VILLA PARK DRIVE

FEC Identification Number

C

Transaction ID : BF26DF84392
Amount of Each Disbursement this Period

1414.04

Memo Item

City RICHMOND State VA Zip Code 23228-6500

Purpose of Disbursement
DIRECT MAIL PRINTING

Category/Type

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

C. CP DIRECT

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02		06		2017

Mailing Address 4600A BOSTON WAY

FEC Identification Number

C

Transaction ID : B9A8C187E5
Amount of Each Disbursement this Period

3286.81

Memo Item

City LANHAM State MD Zip Code 20706-4858

Purpose of Disbursement
PRINTING

Category/Type

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

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

6322.65

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)

A. CP DIRECT

Mailing Address 4600A BOSTON WAY

City LANHAM State MD Zip Code 20706-4858

Purpose of Disbursement
PRINTING

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 Y
04 / 24 / 2017

FEC Identification Number

C
Transaction ID : B091ABB833
Amount of Each Disbursement this Period
2727.00

Memo Item

Full Name (Last, First, Middle Initial)

B. CP DIRECT

Mailing Address 4600A BOSTON WAY

City LANHAM State MD Zip Code 20706-4858

Purpose of Disbursement
DIRECT MAIL PRINTING

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 Y
05 / 22 / 2017

FEC Identification Number

C
Transaction ID : B5A8E8B99C
Amount of Each Disbursement this Period
3778.90

Memo Item

Full Name (Last, First, Middle Initial)

C. ECG DATA CENTER

Mailing Address 1420 SPRING HILL ROAD SUITE 490

City MCLEAN State VA Zip Code 22102

Purpose of Disbursement
BACK-END COST

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 Y
02 / 13 / 2017

FEC Identification Number

C
Transaction ID : B14DF69719
Amount of Each Disbursement this Period
19.80

Memo Item

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

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

6525.70

**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

Mailing Address 1420 SPRING HILL ROAD SUITE 490

City MCLEAN State VA Zip Code 22102

Purpose of Disbursement
COMPUTER - LIST MAINT.

Candidate Name

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

Date of Disbursement

MM / DD / YYYY
02 / 13 / 2017

FEC Identification Number

C
Transaction ID : B76FBF3590I
Amount of Each Disbursement this Period
50.00

Memo Item

Full Name (Last, First, Middle Initial)

B. ECG DATA CENTER

Mailing Address 1420 SPRING HILL ROAD SUITE 490

City MCLEAN State VA Zip Code 22102

Purpose of Disbursement
COMPUTER - LIST MAINT.

Candidate Name

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

Date of Disbursement

MM / DD / YYYY
02 / 13 / 2017

FEC Identification Number

C
Transaction ID : B2C98A412B
Amount of Each Disbursement this Period
50.00

Memo Item

Full Name (Last, First, Middle Initial)

C. ECG DATA CENTER

Mailing Address 1420 SPRING HILL ROAD SUITE 490

City MCLEAN State VA Zip Code 22102

Purpose of Disbursement
COMPUTER - LIST MAINT.

Candidate Name

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

Date of Disbursement

MM / DD / YYYY
02 / 13 / 2017

FEC Identification Number

C
Transaction ID : B191A9D2D1
Amount of Each Disbursement this Period
52.81

Memo Item

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

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

152.81

**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

Mailing Address 1420 SPRING HILL ROAD SUITE 490

City
MCLEAN

State
VA

Zip Code
22102

Purpose of Disbursement
COMPUTER - LIST MAINT.

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Category/
Type

Date of Disbursement

MM / DD / YYYY
02 / 13 / 2017

FEC Identification Number

C
Transaction ID : B3BECF7DE
Amount of Each Disbursement this Period
50.00

Memo Item

Full Name (Last, First, Middle Initial)

B. ECG DATA CENTER

Mailing Address 1420 SPRING HILL ROAD SUITE 490

City
MCLEAN

State
VA

Zip Code
22102

Purpose of Disbursement
BACK-END COST

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Category/
Type

Date of Disbursement

MM / DD / YYYY
03 / 06 / 2017

FEC Identification Number

C
Transaction ID : B5C574095A
Amount of Each Disbursement this Period
89.76

Memo Item

Full Name (Last, First, Middle Initial)

C. ECG DATA CENTER

Mailing Address 1420 SPRING HILL ROAD SUITE 490

City
MCLEAN

State
VA

Zip Code
22102

Purpose of Disbursement
COMPUTER - LIST MAINT.

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Category/
Type

Date of Disbursement

MM / DD / YYYY
03 / 20 / 2017

FEC Identification Number

C
Transaction ID : BB70DCE7B
Amount of Each Disbursement this Period
53.19

Memo Item

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

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

192.95

**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. ECG DATA CENTER

Full Name (Last, First, Middle Initial)

Mailing Address 1420 SPRING HILL ROAD SUITE 490

City MCLEAN State VA Zip Code 22102

Purpose of Disbursement COMPUTER - LIST MAINT.

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 03 / 20 / 2017

FEC Identification Number: C

Transaction ID : B002B8AD6F

Amount of Each Disbursement this Period: 50.00

Memo Item

B. ECG DATA CENTER

Full Name (Last, First, Middle Initial)

Mailing Address 1420 SPRING HILL ROAD SUITE 490

City MCLEAN State VA Zip Code 22102

Purpose of Disbursement COMPUTER - LIST MAINT.

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 03 / 20 / 2017

FEC Identification Number: C

Transaction ID : B302F252128

Amount of Each Disbursement this Period: 50.00

Memo Item

C. ECG DATA CENTER

Full Name (Last, First, Middle Initial)

Mailing Address 1420 SPRING HILL ROAD SUITE 490

City MCLEAN State VA Zip Code 22102

Purpose of Disbursement COMPUTER - POSTAL

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 03 / 20 / 2017

FEC Identification Number: C

Transaction ID : B3C7648DA7

Amount of Each Disbursement this Period: 126.82

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 226.82

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. ECG DATA CENTER

Mailing Address 1420 SPRING HILL ROAD SUITE 490

City MCLEAN State VA Zip Code 22102

Purpose of Disbursement
COMPUTER - LIST MAINT.

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
03 / 20 / 2017

FEC Identification Number

C
Transaction ID : B880870EFA:
Amount of Each Disbursement this Period
50.00

Memo Item

Full Name (Last, First, Middle Initial)

B. ECG DATA CENTER

Mailing Address 1420 SPRING HILL ROAD SUITE 490

City MCLEAN State VA Zip Code 22102

Purpose of Disbursement
COMPUTER - LIST MAINT.

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
03 / 20 / 2017

FEC Identification Number

C
Transaction ID : B39A96BFE2:
Amount of Each Disbursement this Period
50.00

Memo Item

Full Name (Last, First, Middle Initial)

C. ECG DATA CENTER

Mailing Address 1420 SPRING HILL ROAD SUITE 490

City MCLEAN State VA Zip Code 22102

Purpose of Disbursement
COMPUTER - LIST MAINT.

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
03 / 20 / 2017

FEC Identification Number

C
Transaction ID : B5F0662DE5
Amount of Each Disbursement this Period
50.00

Memo Item

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

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

150.00

**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. ECG DATA CENTER

Mailing Address 1420 SPRING HILL ROAD SUITE 490

City **MCLEAN** State **VA** Zip Code **22102**

Purpose of Disbursement
COMPUTER - LIST MAINT.

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : B2C6085120I
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

B. ECG DATA CENTER

Mailing Address 1420 SPRING HILL ROAD SUITE 490

City **MCLEAN** State **VA** Zip Code **22102**

Purpose of Disbursement
COMPUTER - POSTAL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : BC14C5B3C4
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

C. ECG DATA CENTER

Mailing Address 1420 SPRING HILL ROAD SUITE 490

City **MCLEAN** State **VA** Zip Code **22102**

Purpose of Disbursement
COMPUTER - POSTAL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : BF46F19FA1
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. ECG DATA CENTER

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	4				1	0		2	0	1	7		

Mailing Address 1420 SPRING HILL ROAD SUITE 490

FEC Identification Number

C []
Transaction ID : BEE61D80B0
 Amount of Each Disbursement this Period
 [] 41.14

City MCLEAN State VA Zip Code 22102

Purpose of Disbursement
BACK-END COST

[]
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. ECG DATA CENTER

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	4				2	4		2	0	1	7		

Mailing Address 1420 SPRING HILL ROAD SUITE 490

FEC Identification Number

C []
Transaction ID : B0CC8651D7
 Amount of Each Disbursement this Period
 [] 50.00

City MCLEAN State VA Zip Code 22102

Purpose of Disbursement
COMPUTER - LIST MAINT.

[]
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. ECG DATA CENTER

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	4				2	4		2	0	1	7		

Mailing Address 1420 SPRING HILL ROAD SUITE 490

FEC Identification Number

C []
Transaction ID : B0CCF149C
 Amount of Each Disbursement this Period
 [] 50.00

City MCLEAN State VA Zip Code 22102

Purpose of Disbursement
COMPUTER - LIST MAINT.

[]
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)..... ▶

[] 141.14

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. ECG DATA CENTER

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	4			2	4			2	0	1	7		

Mailing Address 1420 SPRING HILL ROAD SUITE 490

FEC Identification Number

C []

Transaction ID : BFB58E6E0A
Amount of Each Disbursement this Period

[] 50.00

Memo Item

City MCLEAN State VA Zip Code 22102

Purpose of Disbursement
COMPUTER - LIST MAINT.

[]
Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Full Name (Last, First, Middle Initial)

B. ECG DATA CENTER

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	4			2	4			2	0	1	7		

Mailing Address 1420 SPRING HILL ROAD SUITE 490

FEC Identification Number

C []

Transaction ID : B36D0C718C
Amount of Each Disbursement this Period

[] 50.00

Memo Item

City MCLEAN State VA Zip Code 22102

Purpose of Disbursement
COMPUTER - LIST MAINT.

[]
Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Full Name (Last, First, Middle Initial)

C. ECG DATA CENTER

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	4			2	4			2	0	1	7		

Mailing Address 1420 SPRING HILL ROAD SUITE 490

FEC Identification Number

C []

Transaction ID : B07C23E3EE
Amount of Each Disbursement this Period

[] 50.00

Memo Item

City MCLEAN State VA Zip Code 22102

Purpose of Disbursement
COMPUTER - LIST MAINT.

[]
Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

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

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

[] 150.00

[]

**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

A. ECG DATA CENTER

Full Name (Last, First, Middle Initial)

Mailing Address 1420 SPRING HILL ROAD SUITE 490

City MCLEAN State VA Zip Code 22102

Purpose of Disbursement DIRECT MAIL LIST MAINTENANCE

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 05 / 15 / 2017

FEC Identification Number: C

Transaction ID : BA55B99569

Amount of Each Disbursement this Period: 50.00

Memo Item

B. ECG DATA CENTER

Full Name (Last, First, Middle Initial)

Mailing Address 1420 SPRING HILL ROAD SUITE 490

City MCLEAN State VA Zip Code 22102

Purpose of Disbursement DIRECT MAIL LIST MAINTENANCE

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 05 / 15 / 2017

FEC Identification Number: C

Transaction ID : B36AAFC263

Amount of Each Disbursement this Period: 50.00

Memo Item

C. ECG DATA CENTER

Full Name (Last, First, Middle Initial)

Mailing Address 1420 SPRING HILL ROAD SUITE 490

City MCLEAN State VA Zip Code 22102

Purpose of Disbursement DIRECT MAIL LIST MAINTENANCE

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 05 / 15 / 2017

FEC Identification Number: C

Transaction ID : B975966A27

Amount of Each Disbursement this Period: 50.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 150.00

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

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input 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

Mailing Address 1420 SPRING HILL ROAD SUITE 490

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	5		1	5		2	0	1	7		

City
MCLEAN

State
VA

Zip Code
22102

FEC Identification Number

C

Transaction ID : BF790286FE

Amount of Each Disbursement this Period

50.00

Purpose of Disbursement
DIRECT MAIL LIST MAINTENANCE

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. ECG DATA CENTER

Mailing Address 1420 SPRING HILL ROAD SUITE 490

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	5		1	5		2	0	1	7		

City
MCLEAN

State
VA

Zip Code
22102

FEC Identification Number

C

Transaction ID : BFCEDE86E

Amount of Each Disbursement this Period

130.50

Purpose of Disbursement
DIRECT MAIL POSTAGE

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. ECG DATA CENTER

Mailing Address 1420 SPRING HILL ROAD SUITE 490

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	5		1	5		2	0	1	7		

City
MCLEAN

State
VA

Zip Code
22102

FEC Identification Number

C

Transaction ID : B965B79542

Amount of Each Disbursement this Period

50.00

Purpose of Disbursement
DIRECT MAIL LIST MAINTENANCE

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)..... ▶

230.50

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. ECG DATA CENTER

Mailing Address 1420 SPRING HILL ROAD SUITE 490

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		1	5		2	0	1	7

City
MCLEAN

State
VA

Zip Code
22102

FEC Identification Number

C

Transaction ID : BBD3E38016
Amount of Each Disbursement this Period

50.00

Memo Item

Purpose of Disbursement
DIRECT MAIL LIST MAINTENANCE

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

B. ECG DATA CENTER

Mailing Address 1420 SPRING HILL ROAD SUITE 490

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		1	5		2	0	1	7

City
MCLEAN

State
VA

Zip Code
22102

FEC Identification Number

C

Transaction ID : B044385EA9C
Amount of Each Disbursement this Period

50.00

Memo Item

Purpose of Disbursement
DIRECT MAIL LIST MAINTENANCE

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

C. ECG DATA CENTER

Mailing Address 1420 SPRING HILL ROAD SUITE 490

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		1	5		2	0	1	7

City
MCLEAN

State
VA

Zip Code
22102

FEC Identification Number

C

Transaction ID : B094B0C457
Amount of Each Disbursement this Period

50.00

Memo Item

Purpose of Disbursement
DIRECT MAIL LIST MAINTENANCE

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

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

150.00

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)

A. ECG DATA CENTER

Mailing Address 1420 SPRING HILL ROAD SUITE 490

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	5		1	5		2	0	1	7		

City
MCLEAN

State
VA

Zip Code
22102

FEC Identification Number

C [REDACTED]

Transaction ID : **B8463FDB92**
Amount of Each Disbursement this Period

[REDACTED] 52.88

Memo Item

Purpose of Disbursement
DIRECT MAIL LIST MAINTENANCE

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

B. ECG DATA CENTER

Mailing Address 1420 SPRING HILL ROAD SUITE 490

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	5		1	5		2	0	1	7		

City
MCLEAN

State
VA

Zip Code
22102

FEC Identification Number

C [REDACTED]

Transaction ID : **BD64289B78I**
Amount of Each Disbursement this Period

[REDACTED] 50.00

Memo Item

Purpose of Disbursement
DIRECT MAIL LIST MAINTENANCE

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

C. ECG DATA CENTER

Mailing Address 1420 SPRING HILL ROAD SUITE 490

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	5		1	5		2	0	1	7		

City
MCLEAN

State
VA

Zip Code
22102

FEC Identification Number

C [REDACTED]

Transaction ID : **B471E0A8BI**
Amount of Each Disbursement this Period

[REDACTED] 50.00

Memo Item

Purpose of Disbursement
DIRECT MAIL LIST MAINTENANCE

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

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

[REDACTED] 152.88

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

Mailing Address 1420 SPRING HILL ROAD SUITE 490

City **MCLEAN** State **VA** Zip Code **22102**

Purpose of Disbursement
DIRECT MAIL LIST MAINTENANCE

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : B6BE5F95BF
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

B. ECG DATA CENTER

Mailing Address 1420 SPRING HILL ROAD SUITE 490

City **MCLEAN** State **VA** Zip Code **22102**

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

/ /

FEC Identification Number

Transaction ID : BA29C147F7I
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

C. ECG DATA CENTER

Mailing Address 1420 SPRING HILL ROAD SUITE 490

City **MCLEAN** State **VA** Zip Code **22102**

Purpose of Disbursement
DIRECT MAIL LIST MAINTENANCE

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : B3B38AD43C
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. ECG DATA CENTER

Mailing Address 1420 SPRING HILL ROAD SUITE 490

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		1	5		2	0	1	7

City MCLEAN State VA Zip Code 22102

FEC Identification Number

C [REDACTED]

Purpose of Disbursement
DIRECT MAIL POSTAGE

Transaction ID : B205AFE34E
Amount of Each Disbursement this Period

Candidate Name

Category/Type

[REDACTED] 725.19

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

Memo Item

State: District:

Full Name (Last, First, Middle Initial)

B. ECG DATA CENTER

Mailing Address 1420 SPRING HILL ROAD SUITE 490

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		1	5		2	0	1	7

City MCLEAN State VA Zip Code 22102

FEC Identification Number

C [REDACTED]

Purpose of Disbursement
DIRECT MAIL LIST MAINTENANCE

Transaction ID : B746DB8945E
Amount of Each Disbursement this Period

Candidate Name

Category/Type

[REDACTED] 50.00

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

Memo Item

State: District:

Full Name (Last, First, Middle Initial)

C. ECG DATA CENTER

Mailing Address 1420 SPRING HILL ROAD SUITE 490

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		2	2		2	0	1	7

City MCLEAN State VA Zip Code 22102

FEC Identification Number

C [REDACTED]

Purpose of Disbursement
DIRECT MAIL LIST MAINTENANCE

Transaction ID : B92B52B55C
Amount of Each Disbursement this Period

Candidate Name

Category/Type

[REDACTED] 50.00

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

Memo Item

State: District:

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

[REDACTED] 825.19

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

A. ECG DATA CENTER

Full Name (Last, First, Middle Initial)

Mailing Address 1420 SPRING HILL ROAD SUITE 490

City MCLEAN State VA Zip Code 22102

Purpose of Disbursement DIRECT MAIL LIST MAINTENANCE

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 05 / 22 / 2017

FEC Identification Number: C

Transaction ID : B5B4B45EA5

Amount of Each Disbursement this Period: 50.00

Memo Item

B. ECG DATA CENTER

Full Name (Last, First, Middle Initial)

Mailing Address 1420 SPRING HILL ROAD SUITE 490

City MCLEAN State VA Zip Code 22102

Purpose of Disbursement DIRECT MAIL LIST MAINTENANCE

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 05 / 22 / 2017

FEC Identification Number: C

Transaction ID : B8D205E05BI

Amount of Each Disbursement this Period: 50.00

Memo Item

C. ECG DATA CENTER

Full Name (Last, First, Middle Initial)

Mailing Address 1420 SPRING HILL ROAD SUITE 490

City MCLEAN State VA Zip Code 22102

Purpose of Disbursement DIRECT MAIL LIST MAINTENANCE

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 05 / 22 / 2017

FEC Identification Number: C

Transaction ID : BA7CE27D6

Amount of Each Disbursement this Period: 50.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 150.00

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

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input 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

Mailing Address 1420 SPRING HILL ROAD SUITE 490

City **MCLEAN** State **VA** Zip Code **22102**

Purpose of Disbursement
DIRECT MAIL LIST MAINTENANCE

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : BA41AFD070
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

B. ECG DATA CENTER

Mailing Address 1420 SPRING HILL ROAD SUITE 490

City **MCLEAN** State **VA** Zip Code **22102**

Purpose of Disbursement
DIRECT MAIL LIST MAINTENANCE

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : BC8D38739E'
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

C. ECG DATA CENTER

Mailing Address 1420 SPRING HILL ROAD SUITE 490

City **MCLEAN** State **VA** Zip Code **22102**

Purpose of Disbursement
DIRECT MAIL LIST MAINTENANCE

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : B5FF808299I
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:
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<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

Mailing Address 1420 SPRING HILL ROAD SUITE 490

City **MCLEAN** State **VA** Zip Code **22102**

Purpose of Disbursement
DIRECT MAIL LIST MAINTENANCE

Candidate Name

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

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : BC79376E27I
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

B. ECG DATA CENTER

Mailing Address 1420 SPRING HILL ROAD SUITE 490

City **MCLEAN** State **VA** Zip Code **22102**

Purpose of Disbursement
DIRECT MAIL LIST MAINTENANCE

Candidate Name

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

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : B70D774C7F4
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

C. ECG DATA CENTER

Mailing Address 1420 SPRING HILL ROAD SUITE 490

City **MCLEAN** State **VA** Zip Code **22102**

Purpose of Disbursement
DIRECT MAIL POSTAGE

Candidate Name

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

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : B284DDF43C
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. ECG DATA CENTER

Mailing Address 1420 SPRING HILL ROAD SUITE 490

City **MCLEAN** State **VA** Zip Code **22102**

Purpose of Disbursement
DIRECT MAIL LIST MAINTENANCE

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : BA0439BA48
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

B. ECG DATA CENTER

Mailing Address 1420 SPRING HILL ROAD SUITE 490

City **MCLEAN** State **VA** Zip Code **22102**

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

/ /

FEC Identification Number

Transaction ID : BC82D8B924
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

C. ECG DATA CENTER

Mailing Address 1420 SPRING HILL ROAD SUITE 490

City **MCLEAN** State **VA** Zip Code **22102**

Purpose of Disbursement
DIRECT MAIL LIST MAINTENANCE

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : B2116D1562
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. ECG DATA CENTER

Mailing Address 1420 SPRING HILL ROAD SUITE 490

City
MCLEAN

State
VA

Zip Code
22102

Purpose of Disbursement
DIRECT MAIL LIST MAINTENANCE

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Category/
Type

Date of Disbursement

MM / DD / YYYY
06 / 26 / 2017

FEC Identification Number

C
Transaction ID : **BCAEE871C**
Amount of Each Disbursement this Period

50.00

Memo Item

Full Name (Last, First, Middle Initial)

B. ECG DATA CENTER

Mailing Address 1420 SPRING HILL ROAD SUITE 490

City
MCLEAN

State
VA

Zip Code
22102

Purpose of Disbursement
DIRECT MAIL LIST MAINTENANCE

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Category/
Type

Date of Disbursement

MM / DD / YYYY
06 / 26 / 2017

FEC Identification Number

C
Transaction ID : **B57BBD95F1**
Amount of Each Disbursement this Period

50.00

Memo Item

Full Name (Last, First, Middle Initial)

C. ECG DATA CENTER

Mailing Address 1420 SPRING HILL ROAD SUITE 490

City
MCLEAN

State
VA

Zip Code
22102

Purpose of Disbursement
DIRECT MAIL LIST MAINTENANCE

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Category/
Type

Date of Disbursement

MM / DD / YYYY
06 / 26 / 2017

FEC Identification Number

C
Transaction ID : **B1947F2B29**
Amount of Each Disbursement this Period

50.00

Memo Item

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

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

150.00

**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. ECG DATA CENTER

Mailing Address 1420 SPRING HILL ROAD SUITE 490

City
MCLEAN

State
VA

Zip Code
22102

Purpose of Disbursement
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
06 / 26 / 2017

FEC Identification Number

C [REDACTED]

Transaction ID : B37A6DE09E
Amount of Each Disbursement this Period

[REDACTED] 50.00

Memo Item

Full Name (Last, First, Middle Initial)

B. ECG DATA CENTER

Mailing Address 1420 SPRING HILL ROAD SUITE 490

City
MCLEAN

State
VA

Zip Code
22102

Purpose of Disbursement
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
06 / 26 / 2017

FEC Identification Number

C [REDACTED]

Transaction ID : B6BFDDAC4F
Amount of Each Disbursement this Period

[REDACTED] 50.00

Memo Item

Full Name (Last, First, Middle Initial)

C. ECG DATA CENTER

Mailing Address 1420 SPRING HILL ROAD SUITE 490

City
MCLEAN

State
VA

Zip Code
22102

Purpose of Disbursement
DIRECT MAIL POSTAGE

Candidate Name

Office Sought:
 House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
06 / 26 / 2017

FEC Identification Number

C [REDACTED]

Transaction ID : B6E3C6674F
Amount of Each Disbursement this Period

[REDACTED] 130.12

Memo Item

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

[REDACTED] 230.12

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:
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<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. FIRST VIRGINIA COMMUNITY BANK

Mailing Address 11325 RANDOM HILLS ROAD

City FAIRFAX State VA Zip Code 22030-6051

Purpose of Disbursement
BANK CHARGES

Candidate Name

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

State: District:

Date of Disbursement

MM / DD / YYYY
04 / 30 / 2017

FEC Identification Number

C
Transaction ID : BA31B1B8C6
Amount of Each Disbursement this Period
149.91

Memo Item

Full Name (Last, First, Middle Initial)

B. FIRST VIRGINIA COMMUNITY BANK

Mailing Address 11325 RANDOM HILLS ROAD

City FAIRFAX State VA Zip Code 22030-6051

Purpose of Disbursement
BANK CHARGES

Candidate Name

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

State: District:

Date of Disbursement

MM / DD / YYYY
05 / 31 / 2017

FEC Identification Number

C
Transaction ID : BA0E6501084
Amount of Each Disbursement this Period
91.00

Memo Item

Full Name (Last, First, Middle Initial)

C. FIRST VIRGINIA COMMUNITY BANK

Mailing Address 11325 RANDOM HILLS ROAD

City FAIRFAX State VA Zip Code 22030-6051

Purpose of Disbursement
BANK CHARGES

Candidate Name

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

State: District:

Date of Disbursement

MM / DD / YYYY
06 / 30 / 2017

FEC Identification Number

C
Transaction ID : B0079FDD86
Amount of Each Disbursement this Period
492.65

Memo Item

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

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

733.56

**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. INTEGRAM

Mailing Address 22695 COMMERCE CENTER COURT

City DULLES State VA Zip Code 20166

Purpose of Disbursement
POSTAGE - MAILHOUSE

Candidate Name

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

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : BECFD692CE
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

B. INTEGRAM

Mailing Address 22695 COMMERCE CENTER COURT

City DULLES State VA Zip Code 20166

Purpose of Disbursement
MAILHOUSE/LASER

Candidate Name

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

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : BDC2320BB5
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

C. INTEGRAM

Mailing Address 22695 COMMERCE CENTER COURT

City DULLES State VA Zip Code 20166

Purpose of Disbursement
PRINTING

Candidate Name

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

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : B9B05134D8
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. OMEGA LIST COMPANY

Mailing Address 1420 SPRING HILL ROAD SUITE 490

City MCLEAN State VA Zip Code 22100

Purpose of Disbursement LIST RENTAL EXP. Category/Type

Candidate Name

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

State: District:

Date of Disbursement: 01 / 09 / 2017

FEC Identification Number: **C**

Transaction ID : **BA8D138481**

Amount of Each Disbursement this Period: 73.68

Memo Item

Full Name (Last, First, Middle Initial)
B. OMEGA LIST COMPANY

Mailing Address 1420 SPRING HILL ROAD SUITE 490

City MCLEAN State VA Zip Code 22100

Purpose of Disbursement LIST RENTAL EXP. Category/Type

Candidate Name

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

State: District:

Date of Disbursement: 01 / 09 / 2017

FEC Identification Number: **C**

Transaction ID : **B2F57197233**

Amount of Each Disbursement this Period: 62.43

Memo Item

Full Name (Last, First, Middle Initial)
C. OMEGA LIST COMPANY

Mailing Address 1420 SPRING HILL ROAD SUITE 490

City MCLEAN State VA Zip Code 22100

Purpose of Disbursement LIST RENTAL EXP. Category/Type

Candidate Name

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

State: District:

Date of Disbursement: 01 / 09 / 2017

FEC Identification Number: **C**

Transaction ID : **B05358A4E4**

Amount of Each Disbursement this Period: 62.29

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... 198.40

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 ROAD SUITE 490

City
MCLEAN

State
VA

Zip Code
22100

Purpose of Disbursement
LIST RENTAL EXP.

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
01 / 09 / 2017

FEC Identification Number

C
Transaction ID : B185CC8F6C
Amount of Each Disbursement this Period
56.69

Memo Item

Full Name (Last, First, Middle Initial)

B. OMEGA LIST COMPANY

Mailing Address 1420 SPRING HILL ROAD SUITE 490

City
MCLEAN

State
VA

Zip Code
22100

Purpose of Disbursement
LIST RENTAL EXP.

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
01 / 09 / 2017

FEC Identification Number

C
Transaction ID : B83BA56A40I
Amount of Each Disbursement this Period
647.75

Memo Item

Full Name (Last, First, Middle Initial)

C. OMEGA LIST COMPANY

Mailing Address 1420 SPRING HILL ROAD SUITE 490

City
MCLEAN

State
VA

Zip Code
22100

Purpose of Disbursement
LIST RENTAL EXP.

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
01 / 09 / 2017

FEC Identification Number

C
Transaction ID : B1CA753331
Amount of Each Disbursement this Period
116.53

Memo Item

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

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

820.97

**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
01		09		2017

Mailing Address 1420 SPRING HILL ROAD SUITE 490

FEC Identification Number

C	Transaction ID : BFA02AA4FE Amount of Each Disbursement this Period 63.98
---	--

City MCLEAN State VA Zip Code 22100

Purpose of Disbursement
LIST RENTAL EXP.

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. OMEGA LIST COMPANY

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
01		09		2017

Mailing Address 1420 SPRING HILL ROAD SUITE 490

FEC Identification Number

C	Transaction ID : BA65AD9DC8 Amount of Each Disbursement this Period 725.00
---	---

City MCLEAN State VA Zip Code 22100

Purpose of Disbursement
LIST RENTAL EXP.

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. OMEGA LIST COMPANY

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
01		09		2017

Mailing Address 1420 SPRING HILL ROAD SUITE 490

FEC Identification Number

C	Transaction ID : B1E45A6DE6 Amount of Each Disbursement this Period 725.00
---	---

City MCLEAN State VA Zip Code 22100

Purpose of Disbursement
LIST RENTAL EXP.

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)..... ▶

1513.98

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 ROAD SUITE 490

City: MCLEAN State: VA Zip Code: 22100

Purpose of Disbursement
LIST RENTAL EXP.

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
01 / 09 / 2017

FEC Identification Number

C [REDACTED]

Transaction ID : B216661761A
Amount of Each Disbursement this Period

[REDACTED] 692.33

Memo Item

Full Name (Last, First, Middle Initial)

B. OMEGA LIST COMPANY

Mailing Address 1420 SPRING HILL ROAD SUITE 490

City: MCLEAN State: VA Zip Code: 22100

Purpose of Disbursement
LIST RENTAL EXP.

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
02 / 06 / 2017

FEC Identification Number

C [REDACTED]

Transaction ID : B7687E003DI
Amount of Each Disbursement this Period

[REDACTED] 65.68

Memo Item

Full Name (Last, First, Middle Initial)

C. OMEGA LIST COMPANY

Mailing Address 1420 SPRING HILL ROAD SUITE 490

City: MCLEAN State: VA Zip Code: 22100

Purpose of Disbursement
LIST RENTAL EXP.

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
02 / 06 / 2017

FEC Identification Number

C [REDACTED]

Transaction ID : B6035F0D7B
Amount of Each Disbursement this Period

[REDACTED] 56.01

Memo Item

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

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

[REDACTED] 814.02

[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

A. OMEGA LIST COMPANY

Full Name (Last, First, Middle Initial)

Mailing Address 1420 SPRING HILL ROAD SUITE 490

City MCLEAN State VA Zip Code 22100

Purpose of Disbursement LIST RENTAL EXP.

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 02 / 06 / 2017

FEC Identification Number: C

Transaction ID : **BAD511DA3F**

Amount of Each Disbursement this Period: 67.08

Memo Item

B. OMEGA LIST COMPANY

Full Name (Last, First, Middle Initial)

Mailing Address 1420 SPRING HILL ROAD SUITE 490

City MCLEAN State VA Zip Code 22100

Purpose of Disbursement LIST RENTAL EXP.

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 02 / 06 / 2017

FEC Identification Number: C

Transaction ID : **BE5ED871194**

Amount of Each Disbursement this Period: 69.80

Memo Item

C. OMEGA LIST COMPANY

Full Name (Last, First, Middle Initial)

Mailing Address 1420 SPRING HILL ROAD SUITE 490

City MCLEAN State VA Zip Code 22100

Purpose of Disbursement LIST RENTAL EXP.

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 04 / 24 / 2017

FEC Identification Number: C

Transaction ID : **B811506CA8**

Amount of Each Disbursement this Period: 393.39

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 530.27

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 ROAD SUITE 490

City
MCLEAN

State
VA

Zip Code
22100

Purpose of Disbursement
LIST RENTAL EXP.

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Category/
Type

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : B255C42A3B
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

B. OMEGA LIST COMPANY

Mailing Address 1420 SPRING HILL ROAD SUITE 490

City
MCLEAN

State
VA

Zip Code
22100

Purpose of Disbursement
LIST RENTAL EXP.

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Category/
Type

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : BC5D66D978I
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

C. OMEGA LIST COMPANY

Mailing Address 1420 SPRING HILL ROAD SUITE 490

City
MCLEAN

State
VA

Zip Code
22100

Purpose of Disbursement
LIST RENTAL EXP.

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Category/
Type

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : BDE808D728
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. OMEGA LIST COMPANY

Mailing Address 1420 SPRING HILL ROAD SUITE 490

City MCLEAN State VA Zip Code 22100

Purpose of Disbursement
LIST RENTAL EXP.

Candidate Name

Office Sought: House Senate President

State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
04 / 24 / 2017

FEC Identification Number

C
Transaction ID : **BF1826F7FE**
Amount of Each Disbursement this Period
105.88

Memo Item

Full Name (Last, First, Middle Initial)

B. OMEGA LIST COMPANY

Mailing Address 1420 SPRING HILL ROAD SUITE 490

City MCLEAN State VA Zip Code 22100

Purpose of Disbursement
LIST RENTAL EXP.

Candidate Name

Office Sought: House Senate President

State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
04 / 24 / 2017

FEC Identification Number

C
Transaction ID : **B9773B7F6D**
Amount of Each Disbursement this Period
116.25

Memo Item

Full Name (Last, First, Middle Initial)

C. OMEGA LIST COMPANY

Mailing Address 1420 SPRING HILL ROAD SUITE 490

City MCLEAN State VA Zip Code 22100

Purpose of Disbursement
LIST RENTAL EXP.

Candidate Name

Office Sought: House Senate President

State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
04 / 24 / 2017

FEC Identification Number

C
Transaction ID : **B9793B8507**
Amount of Each Disbursement this Period
57.57

Memo Item

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

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

279.40

**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 ROAD SUITE 490

City
MCLEAN

State
VA

Zip Code
22100

Purpose of Disbursement
LIST RENTAL EXP.

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Category/
Type

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : B0A112B28B
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

B. OMEGA LIST COMPANY

Mailing Address 1420 SPRING HILL ROAD SUITE 490

City
MCLEAN

State
VA

Zip Code
22100

Purpose of Disbursement
DIRECT MAIL LIST RENTAL

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Category/
Type

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : B89FB52F88F
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

C. OMEGA LIST COMPANY

Mailing Address 1420 SPRING HILL ROAD SUITE 490

City
MCLEAN

State
VA

Zip Code
22100

Purpose of Disbursement
DIRECT MAIL LIST RENTAL

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Category/
Type

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : BE7E63200A
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. OMEGA LIST COMPANY

Mailing Address 1420 SPRING HILL ROAD SUITE 490

City MCLEAN State VA Zip Code 22100

Purpose of Disbursement
DIRECT MAIL LIST RENTAL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement: 05 / 22 / 2017

FEC Identification Number: C

Transaction ID : B7EEB617BE

Amount of Each Disbursement this Period: 95.16

Memo Item

Full Name (Last, First, Middle Initial)
B. OMEGA LIST COMPANY

Mailing Address 1420 SPRING HILL ROAD SUITE 490

City MCLEAN State VA Zip Code 22100

Purpose of Disbursement
DIRECT MAIL LIST RENTAL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement: 05 / 22 / 2017

FEC Identification Number: C

Transaction ID : B4044B65281

Amount of Each Disbursement this Period: 119.88

Memo Item

Full Name (Last, First, Middle Initial)
C. OMEGA LIST COMPANY

Mailing Address 1420 SPRING HILL ROAD SUITE 490

City MCLEAN State VA Zip Code 22100

Purpose of Disbursement
DIRECT MAIL LIST RENTAL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement: 05 / 22 / 2017

FEC Identification Number: C

Transaction ID : B8BE0B3AC

Amount of Each Disbursement this Period: 70.70

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 285.74

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 ROAD SUITE 490

City MCLEAN State VA Zip Code 22100

Purpose of Disbursement
DIRECT MAIL LIST RENTAL

Candidate Name

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

Date of Disbursement

MM / DD / YYYY
05 / 22 / 2017

FEC Identification Number

C
Transaction ID : BAF3475653
Amount of Each Disbursement this Period
81.03

Memo Item

Full Name (Last, First, Middle Initial)

B. OMEGA LIST COMPANY

Mailing Address 1420 SPRING HILL ROAD SUITE 490

City MCLEAN State VA Zip Code 22100

Purpose of Disbursement
DIRECT MAIL LIST RENTAL

Candidate Name

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

Date of Disbursement

MM / DD / YYYY
05 / 22 / 2017

FEC Identification Number

C
Transaction ID : B9141F99D70
Amount of Each Disbursement this Period
518.25

Memo Item

Full Name (Last, First, Middle Initial)

C. OMEGA LIST COMPANY

Mailing Address 1420 SPRING HILL ROAD SUITE 490

City MCLEAN State VA Zip Code 22100

Purpose of Disbursement
DIRECT MAIL LIST RENTAL

Candidate Name

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

Date of Disbursement

MM / DD / YYYY
05 / 22 / 2017

FEC Identification Number

C
Transaction ID : B22FD00E29
Amount of Each Disbursement this Period
546.12

Memo Item

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

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

1145.40

**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 ROAD SUITE 490

City MCLEAN State VA Zip Code 22100

Purpose of Disbursement
DIRECT MAIL LIST RENTAL

Candidate Name

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

Date of Disbursement

M M / D D / Y Y Y Y Y Y
05 / 22 / 2017

FEC Identification Number

C
Transaction ID : **BCA6AEC5F**
Amount of Each Disbursement this Period
19.04

Memo Item

Full Name (Last, First, Middle Initial)

B. OMEGA LIST COMPANY

Mailing Address 1420 SPRING HILL ROAD SUITE 490

City MCLEAN State VA Zip Code 22100

Purpose of Disbursement
DIRECT MAIL LIST RENTAL

Candidate Name

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

Date of Disbursement

M M / D D / Y Y Y Y Y Y
05 / 22 / 2017

FEC Identification Number

C
Transaction ID : **BAFE6BFB17**
Amount of Each Disbursement this Period
63.91

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
POSTAGE FEE

Candidate Name

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

Date of Disbursement

M M / D D / Y Y Y Y Y Y
04 / 12 / 2017

FEC Identification Number

C
Transaction ID : **B71E37B3B1**
Amount of Each Disbursement this Period
225.00

Memo Item

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

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

307.95

**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. POSTMASTER

Mailing Address 4410 BROOKFIELD CORPORATE DR

City CHANTILLY State VA Zip Code 20153-8001

Purpose of Disbursement
POSTAGE FEE

Candidate Name

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

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	2		2	0	1	7

FEC Identification Number

C [Redacted]
Transaction ID : B3A844EB70
Amount of Each Disbursement this Period
[Redacted] 1185.00

Memo Item

Full Name (Last, First, Middle Initial)

B. USPS

Mailing Address 475 L'ENFANT PLAZA SW
ROOM 4012

City WASHINGTON State DC Zip Code 20260-0004

Purpose of Disbursement
POSTAGE FEE

Candidate Name

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

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	2		2	7		2	0	1	7

FEC Identification Number

C [Redacted]
Transaction ID : B7E99051CBI
Amount of Each Disbursement this Period
[Redacted] 620.00

Memo Item

Full Name (Last, First, Middle Initial)

C. WASHINGTON INTELLIGENCE BUREAU

Mailing Address 4128 PEPSI PLACE

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
0	2		0	6		2	0	1	7

FEC Identification Number

C [Redacted]
Transaction ID : B3AF964A2C
Amount of Each Disbursement this Period
[Redacted] 294.91

Memo Item

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

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

2	0	9	9	1
---	---	---	---	---

2	0	9	9	1
---	---	---	---	---

**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
02		06		2017

Mailing Address 4128 PEPSI PLACE

FEC Identification Number

C []

Transaction ID : B21EBF2917
Amount of Each Disbursement this Period

[] 26.58

Memo Item

City CHANTILLY State VA Zip Code 20151-1501

Purpose of Disbursement
BACK-END COST

[]
Category/
Type

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

B. WASHINGTON INTELLIGENCE BUREAU

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		06		2017

Mailing Address 4128 PEPSI PLACE

FEC Identification Number

C []

Transaction ID : BF247A9E6E1
Amount of Each Disbursement this Period

[] 106.56

Memo Item

City CHANTILLY State VA Zip Code 20151-1501

Purpose of Disbursement
BACK-END COST

[]
Category/
Type

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

C. WASHINGTON INTELLIGENCE BUREAU

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		06		2017

Mailing Address 4128 PEPSI PLACE

FEC Identification Number

C []

Transaction ID : B59D04D8D7
Amount of Each Disbursement this Period

[] 580.58

Memo Item

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:

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

[] 713.72

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. WASHINGTON INTELLIGENCE BUREAU

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
04		10		2017

Mailing Address 4128 PEPSI PLACE

FEC Identification Number

C

Transaction ID : B03367DEB0
Amount of Each Disbursement this Period

39.08

Memo Item

City CHANTILLY State VA Zip Code 20151-1501

Purpose of Disbursement
BACK-END COST

--

Candidate Name

Category/
Type

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

State: District:

Full Name (Last, First, Middle Initial)

B. WASHINGTON INTELLIGENCE BUREAU

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
04		10		2017

Mailing Address 4128 PEPSI PLACE

FEC Identification Number

C

Transaction ID : BB2ECAA0E0
Amount of Each Disbursement this Period

530.56

Memo Item

City CHANTILLY State VA Zip Code 20151-1501

Purpose of Disbursement
BOOKKEEPING

--

Candidate Name

Category/
Type

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

State: District:

Full Name (Last, First, Middle Initial)

C. WASHINGTON INTELLIGENCE BUREAU

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
05		15		2017

Mailing Address 4128 PEPSI PLACE

FEC Identification Number

C

Transaction ID : B7FC83DF8C
Amount of Each Disbursement this Period

21.52

Memo Item

City CHANTILLY State VA Zip Code 20151-1501

Purpose of Disbursement
DIRECT MAIL ADMINISTRATIVE EXPENSE

--

Candidate Name

Category/
Type

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

State: District:

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

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

591.16

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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)

A. WASHINGTON INTELLIGENCE BUREAU

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
05		15		2017

Mailing Address 4128 PEPSI PLACE

FEC Identification Number

C

Transaction ID : BCE18F3603
Amount of Each Disbursement this Period

375.95

Memo Item

City CHANTILLY State VA Zip Code 20151-1501

Purpose of Disbursement
BOOKKEEPING

--

Candidate Name

Category/
Type

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

State: District:

Full Name (Last, First, Middle Initial)

B. WASHINGTON INTELLIGENCE BUREAU

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
06		26		2017

Mailing Address 4128 PEPSI PLACE

FEC Identification Number

C

Transaction ID : BC057167B6
Amount of Each Disbursement this Period

105.70

Memo Item

City CHANTILLY State VA Zip Code 20151-1501

Purpose of Disbursement
DIRECT MAIL ADMINISTRATIVE EXPENSE

--

Candidate Name

Category/
Type

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

State: District:

Full Name (Last, First, Middle Initial)

C. WASHINGTON INTELLIGENCE BUREAU

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
06		26		2017

Mailing Address 4128 PEPSI PLACE

FEC Identification Number

C

Transaction ID : B1820B9E64
Amount of Each Disbursement this Period

766.07

Memo Item

City CHANTILLY State VA Zip Code 20151-1501

Purpose of Disbursement
BOOKKEEPING

--

Candidate Name

Category/
Type

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

State: District:

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

1247.72

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)

A. ZIP MAILING SERVICES, INC.

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02		13		2017

Mailing Address 6304 SHERIFF ROAD
SUITE Z

City HYATTSVILLE State MD Zip Code 20785-4361

Purpose of Disbursement
MAILHOUSE/LASER

Candidate Name

Category/
Type

FEC Identification Number

C []
Transaction ID : BDC46520EA
Amount of Each Disbursement this Period
[] 1234.24

Memo Item

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

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
02		27		2017

Mailing Address 6304 SHERIFF ROAD
SUITE Z

City HYATTSVILLE State MD Zip Code 20785-4361

Purpose of Disbursement
DIRECT MAIL - POSTAGE

Candidate Name

Category/
Type

FEC Identification Number

C []
Transaction ID : BA8559337F#
Amount of Each Disbursement this Period
[] 8320.00

Memo Item

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

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
03		06		2017

Mailing Address 6304 SHERIFF ROAD
SUITE Z

City HYATTSVILLE State MD Zip Code 20785-4361

Purpose of Disbursement
MAILHOUSE/LASER

Candidate Name

Category/
Type

FEC Identification Number

C []
Transaction ID : B48E6970A3
Amount of Each Disbursement this Period
[] 266.33

Memo Item

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

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

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

9820.57

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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) A. ZIP MAILING SERVICES, INC.		Date of Disbursement MM / DD / YYYY 03 / 06 / 2017
Mailing Address 6304 SHERIFF ROAD SUITE Z		FEC Identification Number C Transaction ID : BAE3E30DFE Amount of Each Disbursement this Period 1006.54
City HYATTSVILLE	State MD	
Zip Code 20785-4361		Memo Item <input type="checkbox"/>
Purpose of Disbursement POSTAGE - MS INV ADJUSTMENT		
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. ZIP MAILING SERVICES, INC.		Date of Disbursement MM / DD / YYYY 04 / 10 / 2017
Mailing Address 6304 SHERIFF ROAD SUITE Z		FEC Identification Number C Transaction ID : BA4918F2AF' Amount of Each Disbursement this Period 9475.00
City HYATTSVILLE	State MD	
Zip Code 20785-4361		Memo Item <input type="checkbox"/>
Purpose of Disbursement POSTAGE - MAILHOUSE		
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) C. ZIP MAILING SERVICES, INC.		Date of Disbursement MM / DD / YYYY 04 / 24 / 2017
Mailing Address 6304 SHERIFF ROAD SUITE Z		FEC Identification Number C Transaction ID : BFFA609FEE Amount of Each Disbursement this Period 1525.00
City HYATTSVILLE	State MD	
Zip Code 20785-4361		Memo Item <input type="checkbox"/>
Purpose of Disbursement POSTAGE - MAILHOUSE		
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).....▶	12006.54
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
05		15		2017

Mailing Address 6304 SHERIFF ROAD
SUITE Z

City HYATTSVILLE State MD Zip Code 20785-4361

Purpose of Disbursement
DIRECT MAIL PRINTING

FEC Identification Number

C
Transaction ID : BB313FBD06
Amount of Each Disbursement this Period

Candidate Name

Category/
Type

103.57

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

Memo Item

State: District:

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
05		15		2017

Mailing Address 6304 SHERIFF ROAD
SUITE Z

City HYATTSVILLE State MD Zip Code 20785-4361

Purpose of Disbursement
DIRECT MAIL PRINTING

FEC Identification Number

C
Transaction ID : B88497BB521
Amount of Each Disbursement this Period

Candidate Name

Category/
Type

798.29

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

Memo Item

State: District:

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
05		15		2017

Mailing Address 6304 SHERIFF ROAD
SUITE Z

City HYATTSVILLE State MD Zip Code 20785-4361

Purpose of Disbursement
DIRECT MAIL POSTAGE

FEC Identification Number

C
Transaction ID : B943A8918D
Amount of Each Disbursement this Period

Candidate Name

Category/
Type

8210.00

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

Memo Item

State: District:

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

9111.86

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 MM / DD / YYYY 05 / 22 / 2017
Mailing Address 6304 SHERIFF ROAD SUITE Z		FEC Identification Number C [] Transaction ID : BC04D9A46C Amount of Each Disbursement this Period [] 201.25
City HYATTSVILLE	State MD	Zip Code 20785-4361
Purpose of Disbursement DIRECT MAIL PRINTING		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. ZIP MAILING SERVICES, INC.		Date of Disbursement MM / DD / YYYY 06 / 05 / 2017
Mailing Address 6304 SHERIFF ROAD SUITE Z		FEC Identification Number C [] Transaction ID : B0724435DB! Amount of Each Disbursement this Period [] 2300.00
City HYATTSVILLE	State MD	Zip Code 20785-4361
Purpose of Disbursement DIRECT MAIL POSTAGE		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) C. ZIP MAILING SERVICES, INC.		Date of Disbursement MM / DD / YYYY 06 / 19 / 2017
Mailing Address 6304 SHERIFF ROAD SUITE Z		FEC Identification Number C [] Transaction ID : BFEA617D4! Amount of Each Disbursement this Period [] 12850.00
City HYATTSVILLE	State MD	Zip Code 20785-4361
Purpose of Disbursement DIRECT MAIL POSTAGE		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)..... ▶

15351.25

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 MM / DD / YYYY 06 / 26 / 2017
Mailing Address 6304 SHERIFF ROAD SUITE Z		FEC Identification Number C [] Transaction ID : B645B0BE0A Amount of Each Disbursement this Period [] 67.18
City HYATTSVILLE	State MD	Zip Code 20785-4361
Purpose of Disbursement DIRECT MAIL PRINTING		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. ZIP MAILING SERVICES, INC.		Date of Disbursement MM / DD / YYYY 06 / 26 / 2017
Mailing Address 6304 SHERIFF ROAD SUITE Z		FEC Identification Number C [] Transaction ID : B05DF1DB0E Amount of Each Disbursement this Period [] 246.76
City HYATTSVILLE	State MD	Zip Code 20785-4361
Purpose of Disbursement DIRECT MAIL PRINTING		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) C.		Date of Disbursement MM / DD / YYYY [] / [] / []
Mailing Address		FEC Identification Number C [] Amount of Each Disbursement this Period []
City	State	Zip Code
Purpose of Disbursement		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).....▶	[] 313.94
TOTAL This Period (last page this line number only).....▶	[] 96550.35

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 71 OF 73
	FOR LINE NUMBER: (check only one)
<input type="checkbox"/>	9
<input checked="" type="checkbox"/>	10

NAME OF COMMITTEE (In Full)
HISPANIC VICTORY PAC

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor CAMPAIGN FUNDING DIRECT			Nature of Debt (Purpose): AGENCY FEE - DIRECT MAIL - CONSULTING
Mailing Address 1420 SPRING HILL ROAD SUITE 490			
City MCLEAN	State VA	Zip Code 22102-3028	

Outstanding Balance Beginning This Period <input type="text" value="270.68"/>	Transaction ID : D582546C687604E50AF5	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="270.68"/>	Outstanding Balance at Close of This Period <input type="text" value="0.00"/>

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor CAMPAIGN FUNDING DIRECT			Nature of Debt (Purpose): AGENCY FEE - DIRECT MAIL - CONSULTING
Mailing Address 1420 SPRING HILL ROAD SUITE 490			
City MCLEAN	State VA	Zip Code 22102-3028	

Outstanding Balance Beginning This Period <input type="text" value="2467.35"/>	Transaction ID : DE41CB5BB572E4898BEB	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="2467.35"/>	Outstanding Balance at Close of This Period <input type="text" value="0.00"/>

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor ECG DATA CENTER			Nature of Debt (Purpose): DIRECT MAIL - LIST MAINTENANCE
Mailing Address 1420 SPRING HILL ROAD SUITE 490			
City MCLEAN	State VA	Zip Code 22102	

Outstanding Balance Beginning This Period <input type="text" value="50.00"/>	Transaction ID : DCA32B1FAA0F34B34BFF	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="50.00"/>	Outstanding Balance at Close of This Period <input type="text" value="0.00"/>

1) SUBTOTALS This Period This Page (optional)..... ▶	<input type="text" value="0.00"/>
2) TOTALS This Period (last page this line number only)..... ▶	<input type="text"/>
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) ▶	<input type="text"/>
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	<input type="text"/>

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 72 OF 73
	FOR LINE NUMBER: (check only one)
<input type="checkbox"/> 9	<input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)
HISPANIC VICTORY PAC

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor ECG DATA CENTER			Nature of Debt (Purpose): DIRECT MAIL - LIST MAINTENANCE
Mailing Address 1420 SPRING HILL ROAD SUITE 490			
City MCLEAN	State VA	Zip Code 22102	

Outstanding Balance Beginning This Period 49.83		Transaction ID : D6937197B651248AC985	
Amount Incurred This Period 0.00	Payment This Period 49.83	Outstanding Balance at Close of This Period 0.00	

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor OMEGA LIST COMPANY			Nature of Debt (Purpose): LIST RENTAL EXPENSES
Mailing Address 1420 SPRING HILL ROAD SUITE 490			
City MCLEAN	State VA	Zip Code 22100	

Outstanding Balance Beginning This Period 2142.33		Transaction ID : D6A7F5EAEF8914457A5B	
Amount Incurred This Period 0.00	Payment This Period 2142.33	Outstanding Balance at Close of This Period 0.00	

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor OMEGA LIST COMPANY			Nature of Debt (Purpose): LIST RENTAL EXPENSES
Mailing Address 1420 SPRING HILL ROAD SUITE 490			
City MCLEAN	State VA	Zip Code 22100	

Outstanding Balance Beginning This Period 1083.35		Transaction ID : D68D55F68E54A4CCD8D2	
Amount Incurred This Period 0.00	Payment This Period 1083.35	Outstanding Balance at Close of This Period 0.00	

1) SUBTOTALS This Period This Page (optional).....▶	0.00
2) TOTALS This Period (last page this line number only).....▶	
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....▶	
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)▶	

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 73 OF 73
	FOR LINE NUMBER: (check only one)
<input type="checkbox"/>	9
<input checked="" type="checkbox"/>	10

NAME OF COMMITTEE (In Full)
HISPANIC VICTORY PAC

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor ZIP MAILING SERVICES, INC.			Nature of Debt (Purpose): DIRECT MAIL - PRINTING
Mailing Address 6304 SHERIFF ROAD SUITE Z			
City HYATTSVILLE	State MD	Zip Code 20785-4361	

Outstanding Balance Beginning This Period		Transaction ID : D66A3FB0F95324179BBD	
155.83			
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	
0.00	155.83	0.00	

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor			Nature of Debt (Purpose):
Mailing Address			
City	State	Zip Code	

Outstanding Balance Beginning This Period			
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor			Nature of Debt (Purpose):
Mailing Address			
City	State	Zip Code	

Outstanding Balance Beginning This Period			
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	

1) SUBTOTALS This Period This Page (optional)..... ▶	0.00
2) TOTALS This Period (last page this line number only)..... ▶	0.00
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) ▶	
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	