

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**
PODER PAC

ADDRESS (number and street) **6601 RANNOCH ROAD**
Check if different than previously reported. (ACC) **BETHESDA MD 20817**

2. FEC IDENTIFICATION NUMBER ▼ CITY ▲ STATE ▲ ZIP CODE ▲
C C00452276 3. IS THIS REPORT NEW (N) OR AMENDED (A)

4. TYPE OF REPORT (Choose One)
(a) Quarterly Reports:
 April 15 Quarterly Report (Q1)
 July 15 Quarterly Report (Q2)
 October 15 Quarterly Report (Q3)
 January 31 Year-End Report (YE)
 July 31 Mid-Year Report (Non-election Year Only) (MY)
 Termination Report (TER)
(b) Monthly Report Due On:
 Feb 20 (M2) May 20 (M5) Aug 20 (M8) Nov 20 (M11) (Non-Election Year Only)
 Mar 20 (M3) Jun 20 (M6) Sep 20 (M9) Dec 20 (M12) (Non-Election Year Only)
 Apr 20 (M4) Jul 20 (M7) Oct 20 (M10) Jan 31 (YE)
(c) 12-Day PRE-Election Report for the:
 Primary (12P) General (12G) Runoff (12R)
 Convention (12C) Special (12S)
Election on / / in the State of
(d) 30-Day POST-Election Report for the:
 General (30G) Runoff (30R) Special (30S)
Election on / / in the State of

5. Covering Period / / through / /

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

Signature of Treasurer Pino, Catherine, , , [Electronically Filed] Date / /

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 52 U.S.C. § 30109.

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 05/2016)

Page 2

Write or Type Committee Name

PODER 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="2016"/>	<input type="text" value="2057.43"/>	<input type="text" value="2057.43"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="3000.18"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="40650.00"/>	<input type="text" value="47323.00"/>
(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="43650.18"/>	<input type="text" value="49380.43"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="32970.00"/>	<input type="text" value="38700.25"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="10680.18"/>	<input type="text" value="10680.18"/>
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

Write or Type Committee Name

PODER 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).....	15650.00	22150.00
(ii) Unitemized	1600.00	1680.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	17250.00	23830.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	5000.00	5093.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	22250.00	28923.00
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.).....	18400.00	18400.00
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)).....▶	40650.00	47323.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	40650.00	47323.00

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	13470.00	17200.25
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	13470.00	17200.25
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	9500.00	11500.00
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).....	10000.00	10000.00
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)) ..	32970.00	38700.25
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	32970.00	38700.25

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)	22250.00	28923.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	22250.00	28923.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	13470.00	17200.25
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	13470.00	17200.25

**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 24
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
PODER PAC

A. Aguilera, Esther, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 624 Potomac Ave
 City Silver Spring State MD Zip Code 20910-5219
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) LCDA Occupation (for Individual) CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 07 / 06 / 2016
Transaction ID : C10507365
 Amount of Each Receipt this Period 1000.00
 Memo Item

B. Aponte, Mari Carmen, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4201 Linnean Ave NW
 City Washington State DC Zip Code 20008-3808
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self-employed Occupation (for Individual) Lawyer
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 07 / 25 / 2016
Transaction ID : C10520389
 Amount of Each Receipt this Period 300.00
 Memo Item

C. Buerkle, Caroline, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 403 Apache St # A
 City Taos State NM Zip Code 87571-5242
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self-employed Occupation (for Individual) Consultant
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 07 / 22 / 2016
Transaction ID : C10515746
 Amount of Each Receipt this Period 1000.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	2300.00
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 24
	<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)
PODER PAC

A. Bustos, Miguel, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2757 Harrison St
 City San Francisco State CA Zip Code 94110-3319
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Wells Fargo Occupation (for Individual) Senior Vice President
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 07 / 22 / 2016
Transaction ID : C10515846
 Amount of Each Receipt this Period 1000.00
 Memo Item

B. Castro, Thomas, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6212 Olympia Dr
 City Houston State TX Zip Code 77057-3528
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) El Dorado Capital Occupation (for Individual) President & CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 07 / 14 / 2016
Transaction ID : C10513248
 Amount of Each Receipt this Period 1000.00
 Memo Item

C. Echaveste, Maria, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1511 Arch St
 City Berkeley State CA Zip Code 94708-1828
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Nuestro Futuro Consulting Occupation (for Individual) Consultant/lawyer
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 07 / 18 / 2016
Transaction ID : C10513855
 Amount of Each Receipt this Period 1000.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	3000.00
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 8 OF 24
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
PODER PAC

A. Garcia, Gloria, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4444 Connecticut Ave NW
 City Washington State DC Zip Code 20008-2318
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CHCI Occupation (for Individual) SVP External Affairs
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 07 / 07 / 2016
Transaction ID : C10507920
 Amount of Each Receipt this Period 1000.00
 Memo Item

B. Gonzales, Susan, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 33 Park Ter
 City Mill Valley State CA Zip Code 94941-2949
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Facebook Occupation (for Individual) community outreach
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 07 / 12 / 2016
Transaction ID : C10511755
 Amount of Each Receipt this Period 1000.00
 Memo Item

C. Guzman, Ana, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 220 Belvidere Dr
 City San Antonio State TX Zip Code 78212-2001
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Retired Occupation (for Individual) Educator
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 07 / 07 / 2016
Transaction ID : C10507921
 Amount of Each Receipt this Period 1000.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 3000.00
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 24
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
PODER PAC

A. Lomellin, Carmen, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1200 N Nash St
 Apt 539
 City Arlington State VA Zip Code 22209-3644
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self-employed Occupation (for Individual) diplomat
 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
 07 / 06 / 2016
Transaction ID : C10507617
 Amount of Each Receipt this Period
 1000.00
 Memo Item

B. Montoya, Elisa, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6008 Tomas Ct NW
 City Los Ranchos State NM Zip Code 87107-7102
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self-employed Occupation (for Individual) Lawyer
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1100.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 07 / 2016
Transaction ID : C10508425
 Amount of Each Receipt this Period
 1100.00
 Memo Item

C. Montoya, Regina, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5230 Lobello Dr
 City Dallas State TX Zip Code 75229-5513
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Office of Regina Montoya Occupation (for Individual) Attorney
 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
 07 / 07 / 2016
Transaction ID : C10508751
 Amount of Each Receipt this Period
 1000.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	3100.00
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 24
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
PODER PAC

A. Moore, Minyon, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1401 Montague St NW
 City Washington State DC Zip Code 20011-2852
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Dewey Square Group Occupation (for Individual) Principal
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 07 / 07 / 2016
Transaction ID : C10508513
 Amount of Each Receipt this Period 1000.00
 Memo Item

B. Padilla, Patricia, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 770 P St NW Apt 429
 City Washington State DC Zip Code 20001-3371
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) United Nations Foundation Occupation (for Individual) Executive Director of Global Events
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 07 / 12 / 2016
Transaction ID : C10511747
 Amount of Each Receipt this Period 250.00
 Memo Item

C. Seidman, Ricki, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5542 Nevada Ave NW
 City Washington State DC Zip Code 20015-1784
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) TSD, Inc. Occupation (for Individual) consultant
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 07 / 06 / 2016
Transaction ID : C10507616
 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: (check only one)	PAGE 11 OF 24
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
PODER PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. Soliz-Chapa, Jackie, , ,		Date of Receipt M M M / D D D / Y Y Y Y Y Y 07 / 13 / 2016 Transaction ID : C10512977
Mailing Address 1109 E Riverside Dr		Amount of Each Receipt this Period 500.00
City Austin	State TX	Zip Code 78704-1335
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item
Name of Employer (for Individual) Affinity Design	Occupation (for Individual) Owner	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Terzano, Virginia, , ,		Date of Receipt M M M / D D D / Y Y Y Y Y Y 07 / 11 / 2016 Transaction ID : C10511507
Mailing Address 731 Warren Dr		Amount of Each Receipt this Period 500.00
City Annapolis	State MD	Zip Code 21403-2809
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item
Name of Employer (for Individual) Dewey Square Group	Occupation (for Individual) Public Relations	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. Villarreal, Maria, , ,		Date of Receipt M M M / D D D / Y Y Y Y Y Y 07 / 23 / 2016 Transaction ID : C10515869
Mailing Address 112 Wells Ridgewood Ct		Amount of Each Receipt this Period 1000.00
City San Antonio	State TX	Zip Code 78212
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item
Name of Employer (for Individual) retired	Occupation (for Individual) retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 1000.00	

SUBTOTAL of Receipts This Page (optional).....▶	2000.00
TOTAL This Period (last page this line number only).....▶	15650.00

**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 24
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
PODER PAC

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Communication Workers of America PAC

Mailing Address 501 3rd Street, NW
Washington

City Washington State DC Zip Code 20001

FEC ID number of contributing federal political committee. **C** C00002089

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
MM / DD / YYYY
09 / 16 / 2016

Transaction ID : C10557713

Amount of Each Receipt this Period
5000.00

Memo Item

non-contribution account

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
MM / DD / YYYY

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
MM / DD / YYYY

Amount of Each Receipt this Period

Memo Item

SUBTOTAL of Receipts This Page (optional).....	5000.00
TOTAL This Period (last page this line number only).....	5000.00

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 13 OF 24
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
PODER PAC

A. CGM Consultants
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 13707 Cape Bluff

City San Antonio	State TX	Zip Code 78216
---------------------	-------------	-------------------

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 ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	01	/	2016

Transaction ID : C10531174

Amount of Each Receipt this Period
250.00

Memo Item

non-contribution account

B. CGM Consultants
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 13707 Cape Bluff

City San Antonio	State TX	Zip Code 78216
---------------------	-------------	-------------------

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 ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	06	/	2016

Transaction ID : C10543668

Amount of Each Receipt this Period
250.00

Memo Item

non-contribution account

C. Comcast Corporation & NBCUniversal Political Action Committee
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address One Comcast Center
1701 JFK Boulevard

City Philadelphia	State PA	Zip Code 19103
----------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00248716

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

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	21	/	2016

Transaction ID : C10515479

Amount of Each Receipt this Period
5000.00

Memo Item

non-contribution account

SUBTOTAL of Receipts This Page (optional).....	5500.00
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 24
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
PODER PAC

A. Longoria, Eva, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9100 Wilshire Blvd
 Ste 1000
 City Beverly Hills State CA Zip Code 90212-3415
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self-employed Occupation (for Individual) Actor
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt **07 / 06 / 2016**
Transaction ID : C10508443
 Amount of Each Receipt this Period 5000.00
 Memo Item
 non-contribution account

B. PG&E Corporation Employees EnergyPAC
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 77 Beale Street
 Po Box 770000 B29H
 City San Francisco State CA Zip Code 94177
 FEC ID number of contributing federal political committee. **C** C00177469
 Name of Employer (for Individual) Occupation (for Individual)
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt **07 / 21 / 2016**
Transaction ID : C10515480
 Amount of Each Receipt this Period 5000.00
 Memo Item
 non-contribution account

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
 Amount of Each Receipt this Period
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	10000.00
TOTAL This Period (last page this line number only).....	15500.00

**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)
PODER PAC

Full Name (Last, First, Middle Initial)

A. Cardinal Bank

Mailing Address 8270 Greensboro Drive
Ste 500

City McLean State VA Zip Code 22102

Purpose of Disbursement bank fee

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: MM / DD / YYYY
07 / 01 / 2016

FEC Identification Number: C

Transaction ID : D601037

Amount of Each Disbursement this Period: 2.00

Memo Item

Full Name (Last, First, Middle Initial)

B. Cardinal Bank

Mailing Address 8270 Greensboro Drive
Ste 500

City McLean State VA Zip Code 22102

Purpose of Disbursement bank fee

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: MM / DD / YYYY
07 / 31 / 2016

FEC Identification Number: C

Transaction ID : D601038

Amount of Each Disbursement this Period: 2.00

Memo Item

Full Name (Last, First, Middle Initial)

C. NGP Van, Inc.

Mailing Address 1101 15th Street, NW
Suite 500

City Washington State DC Zip Code 20005

Purpose of Disbursement campaign software

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: MM / DD / YYYY
07 / 07 / 2016

FEC Identification Number: C

Transaction ID : D591185

Amount of Each Disbursement this Period: 1200.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 1204.00

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)
PODER PAC

Full Name (Last, First, Middle Initial) A. PNC Merchant Services		Date of Disbursement MM / DD / YYYY 07 / 31 / 2016	
Mailing Address One PNC Plaza		FEC Identification Number C [] Transaction ID : D601035 Amount of Each Disbursement this Period [] 667.51	
City Pittsburgh	State PA	Zip Code 15265	Category/ Type []
Purpose of Disbursement credit card fees		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) ▼		Memo Item <input type="checkbox"/>
State: District:			

Full Name (Last, First, Middle Initial) B. PNC Merchant Services		Date of Disbursement MM / DD / YYYY 08 / 31 / 2016	
Mailing Address One PNC Plaza		FEC Identification Number C [] Transaction ID : D601036 Amount of Each Disbursement this Period [] 249.59	
City Pittsburgh	State PA	Zip Code 15265	Category/ Type []
Purpose of Disbursement credit card fees		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) ▼		Memo Item <input type="checkbox"/>
State: District:			

Full Name (Last, First, Middle Initial) C. PNC Merchant Services		Date of Disbursement MM / DD / YYYY 09 / 30 / 2016	
Mailing Address One PNC Plaza		FEC Identification Number C [] Transaction ID : D601057 Amount of Each Disbursement this Period [] 73.90	
City Pittsburgh	State PA	Zip Code 15265	Category/ Type []
Purpose of Disbursement credit card fee		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) ▼		Memo Item <input type="checkbox"/>
State: District:			

SUBTOTAL of Disbursements This Page (optional).....▶	[] 991.00
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)
PODER PAC

Full Name (Last, First, Middle Initial) A. Utrecht, Kleinfeld, Fiori, Partners		Date of Disbursement MM / DD / YYYY 08 / 31 / 2016
Mailing Address 1900 M Street, NW Suite 500		FEC Identification Number C [] Transaction ID : D593743 Amount of Each Disbursement this Period [] 1275.00
City Washington	State DC	Zip Code 20036
Purpose of Disbursement legal fees		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. D&P Creative Strategies, LLC		Date of Disbursement MM / DD / YYYY 08 / 21 / 2016
Mailing Address 6601 Rannoch Road		FEC Identification Number C [] Transaction ID : D593634 Amount of Each Disbursement this Period [] 10000.00
City Bethesda	State MD	Zip Code 20817
Purpose of Disbursement meeting expense (see itemized)		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. 24 Hour Wristbands		Date of Disbursement MM / DD / YYYY 08 / 21 / 2016
Mailing Address 14550 Beechnut St		FEC Identification Number C [] Transaction ID : D601043 Amount of Each Disbursement this Period [] 160.09
City Houston	State TX	Zip Code 77083
Purpose of Disbursement meeting expense - buttons		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 checked="" type="checkbox"/> Memo Item	

SUBTOTAL of Disbursements This Page (optional).....▶	[] 11275.00
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)
PODER PAC

A. Amtrak

Full Name (Last, First, Middle Initial)

Mailing Address 50 Massachusetts Ave NE

City Washington State DC Zip Code 20002

Purpose of Disbursement meeting expense - transportation

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: MM / DD / YYYY
08 / 21 / 2016

FEC Identification Number: C

Transaction ID : D601047

Amount of Each Disbursement this Period: 247.50

Memo Item

B. Choice Photography

Full Name (Last, First, Middle Initial)

Mailing Address PO Box 26401

City Washington State DC Zip Code 20001

Purpose of Disbursement meeting expense - photography

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: MM / DD / YYYY
08 / 21 / 2016

FEC Identification Number: C

Transaction ID : D601041

Amount of Each Disbursement this Period: 350.00

Memo Item

C. Dino Party Center

Full Name (Last, First, Middle Initial)

Mailing Address 1638 S 9th St

City Philadelphia State PA Zip Code 19148

Purpose of Disbursement meeting expense - balloons

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: MM / DD / YYYY
08 / 21 / 2016

FEC Identification Number: C

Transaction ID : D601045

Amount of Each Disbursement this Period: 81.62

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 0.00

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)
PODER PAC

A. Loews Hotel

Full Name (Last, First, Middle Initial)

Mailing Address 1200 Market St

City Philadelphia State PA Zip Code 19107

Purpose of Disbursement mtg.exp. - room rental, food, AV

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 08 / 21 / 2016

FEC Identification Number: C

Transaction ID : D601042

Amount of Each Disbursement this Period: 8738.90

Memo Item

B. Sheraton

Full Name (Last, First, Middle Initial)

Mailing Address 201 N 17th St

City Philadelphia State PA Zip Code 19103

Purpose of Disbursement meeting expense - lodging

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 08 / 21 / 2016

FEC Identification Number: C

Transaction ID : D601048

Amount of Each Disbursement this Period: 249.06

Memo Item

C. Successories

Full Name (Last, First, Middle Initial)

Mailing Address 2915 S. Congress Ave

City Delray Beach State FL Zip Code 33445

Purpose of Disbursement meeting expense - gift award

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 08 / 21 / 2016

FEC Identification Number: C

Transaction ID : D601046

Amount of Each Disbursement this Period: 137.99

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 0.00

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)
PODER PAC

A. Walmart

Full Name (Last, First, Middle Initial)

Mailing Address 7910 Richmond Hwy

City Alexandria State VA Zip Code 22306

Purpose of Disbursement meeting expense - decorations

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement MM / DD / YYYY 08 / 21 / 2016

FEC Identification Number C

Transaction ID : D601044

Amount of Each Disbursement this Period 37.84

Memo Item

B.

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement MM / DD / YYYY

FEC Identification Number C

Amount of Each Disbursement this Period

Memo Item

C.

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement MM / DD / YYYY

FEC Identification Number C

Amount of Each Disbursement this Period

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 0.00

TOTAL This Period (last page this line number only)..... ▶ 13470.00

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

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
PODER PAC

A. BARRAGAN FOR CONGRESS

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address 1840 S Gaffey St
421

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	9		3	0		2	0	1	6		

City San Pedro State CA Zip Code 90731-5324

FEC Identification Number

Purpose of Disbursement
Contribution

C	C00577353
---	-----------

Candidate Name
Barragan, Nanette, , ,

Category/
Type

Transaction ID : D601017

Amount of Each Disbursement this Period

Office Sought: House Senate President
Disbursement For: 2016 Primary General Other (specify) ▼
State: CA District: 44

2000.00

Memo Item

B. Catherine Cortez Masto for Senate

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address 8020 S Rainbow Blvd
100-112

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	9		3	0		2	0	1	6		

City Las Vegas State NV Zip Code 89139-6483

FEC Identification Number

Purpose of Disbursement
Contribution

C	C00575548
---	-----------

Candidate Name
Masto, Catherine, , ,

Category/
Type

Transaction ID : D601011

Amount of Each Disbursement this Period

Office Sought: House Senate President
Disbursement For: 2016 Primary General Other (specify) ▼
State: NV District:

4500.00

Memo Item

C. Loretta Sanchez for Senate

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address PO Box 6037

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	9		3	0		2	0	1	6		

City Santa Ana State CA Zip Code 92706

FEC Identification Number

Purpose of Disbursement
Contribution

C	C00578344
---	-----------

Candidate Name
Sanchez, Loretta, , ,

Category/
Type

Transaction ID : D601018

Amount of Each Disbursement this Period

Office Sought: House Senate President
Disbursement For: 2016 Primary General Other (specify) ▼
State: CA District:

3000.00

Memo Item

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

9500.00

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

9500.00

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

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
PODER PAC

A. D&P Creative Strategies, LLC

Full Name (Last, First, Middle Initial)

Mailing Address 6601 Rannoch Road

City Bethesda State MD Zip Code 20817

Purpose of Disbursement meeting expense (see itemized)

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 08 / 21 / 2016

FEC Identification Number: C

Transaction ID : D593635

Amount of Each Disbursement this Period: 10000.00

Memo Item

B. 24 Hour Wristbands

Full Name (Last, First, Middle Initial)

Mailing Address 14550 Beechnut St

City Houston State TX Zip Code 77083

Purpose of Disbursement meeting expense - buttons

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 08 / 21 / 2016

FEC Identification Number: C

Transaction ID : D601051

Amount of Each Disbursement this Period: 160.08

Memo Item

C. Amtrak

Full Name (Last, First, Middle Initial)

Mailing Address 50 Massachusetts Ave NE

City Washington State DC Zip Code 20002

Purpose of Disbursement meeting expense - transportation

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 08 / 21 / 2016

FEC Identification Number: C

Transaction ID : D601055

Amount of Each Disbursement this Period: 247.50

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 10000.00

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

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

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
PODER PAC

Full Name (Last, First, Middle Initial)
A. Choice Photography

Mailing Address PO Box 26401

City Washington State DC Zip Code 20001

Purpose of Disbursement meeting expense - photography

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 08 / 21 / 2016

FEC Identification Number: C
Transaction ID : D601049
Amount of Each Disbursement this Period: 350.00

Memo Item

Full Name (Last, First, Middle Initial)
B. Dino Party Center

Mailing Address 1638 S 9th St

City Philadelphia State PA Zip Code 19148

Purpose of Disbursement meeting expense - balloons

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 08 / 21 / 2016

FEC Identification Number: C
Transaction ID : D601053
Amount of Each Disbursement this Period: 81.62

Memo Item

Full Name (Last, First, Middle Initial)
C. Loews Hotel

Mailing Address 1200 Market St

City Philadelphia State PA Zip Code 19107

Purpose of Disbursement mtg.exp. - room rental, food, AV

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 08 / 21 / 2016

FEC Identification Number: C
Transaction ID : D601050
Amount of Each Disbursement this Period: 8738.90

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 0.00

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

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

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
PODER PAC

Full Name (Last, First, Middle Initial) A. Sheraton		Date of Disbursement MM / DD / YYYY 08 / 21 / 2016	
Mailing Address 201 N 17th St		FEC Identification Number C [REDACTED] Transaction ID : D601056 Amount of Each Disbursement this Period [REDACTED] 249.00	
City Philadelphia	State PA	Zip Code 19103	Category/ Type [REDACTED]
Purpose of Disbursement meeting expense - lodging			
Candidate Name		Memo Item <input checked="" type="checkbox"/>	
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. Successories		Date of Disbursement MM / DD / YYYY 08 / 21 / 2016	
Mailing Address 2915 S. Congress Ave		FEC Identification Number C [REDACTED] Transaction ID : D601054 Amount of Each Disbursement this Period [REDACTED] 138.00	
City Delray Beach	State FL	Zip Code 33445	Category/ Type [REDACTED]
Purpose of Disbursement meeting expense - gift award			
Candidate Name		Memo Item <input checked="" type="checkbox"/>	
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. Walmart		Date of Disbursement MM / DD / YYYY 08 / 21 / 2016	
Mailing Address 7910 Richmond Hwy		FEC Identification Number C [REDACTED] Transaction ID : D601052 Amount of Each Disbursement this Period [REDACTED] 37.84	
City Alexandria	State VA	Zip Code 22306	Category/ Type [REDACTED]
Purpose of Disbursement meeting expense - decorations			
Candidate Name		Memo Item <input checked="" type="checkbox"/>	
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).....▶	[REDACTED] 0.00
TOTAL This Period (last page this line number only).....▶	[REDACTED] 10000.00