

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
LATINO VICTORY FUND

ADDRESS (number and street) PO BOX 34104
Check if different than previously reported. (ACC) WASHINGTON DC 20005

2. FEC IDENTIFICATION NUMBER CITY STATE ZIP CODE
C C00562777 3. IS THIS REPORT NEW OR AMENDED (N) (A)

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

5. Covering Period 06 / 01 / 2022 through 06 / 30 / 2022

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete. Gonzalez, Maria, R., ,

Type or Print Name of Treasurer

Signature of Treasurer Gonzalez, Maria, R., , [Electronically Filed] Date 07 / 18 / 2022

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

**LATINO VICTORY FUND**

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="2022"/>		665524.68
(b) Cash on Hand at Beginning of Reporting Period.....	396300.93	
(c) Total Receipts (from Line 19) .....	92287.07	356549.92
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	488588.00	1022074.60
7. Total Disbursements (from Line 31).....	89607.30	623093.90
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	398980.70	398980.70
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	

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

**For further information contact:**

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

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

**DETAILED SUMMARY PAGE**  
of Receipts

Write or Type Committee Name

**LATINO VICTORY FUND**

Report Covering the Period: From:  /  /  To:  /  /

<b>I. Receipts</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Calendar Year-to-Date</b>
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	31140.00	54190.00
(ii) Unitemized .....	547.07	3483.42
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	31687.07	57673.42
(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) .....	31687.07	57673.42
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.).....	60600.00	298876.50
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)).....▶	92287.07	356549.92
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	92287.07	356549.92

**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 .....	1503.35	3198.84
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	1503.35	3198.84
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	17500.00	55800.00
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 .....	25000.00	25000.00
(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)).....	25000.00	25000.00
29. Other Disbursements (Including Non-Federal Donations).....	45603.95	539095.06
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)) ..	89607.30	623093.90
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	89607.30	623093.90

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 5

<b>III. Net Contributions/ Operating Expenditures</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Calendar Year-to-Date</b>
33. Total Contributions (other than loans) (from Line 11(d), page 3) .....	31687.07	57673.42
34. Total Contribution Refunds (from Line 28(d)) .....	25000.00	25000.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	6687.07	32673.42
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	1503.35	3198.84
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	1503.35	3198.84

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: F3XN

Transaction ID :

The Committee had sufficient funds in its federal account to make contributions to the federal candidates disclosed on Schedule B, Line 23.

Form/Schedule:

Transaction ID:

**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 31
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

NAME OF COMMITTEE (In Full)  
**LATINO VICTORY FUND**

**A. Dominguez, Dorene, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 4540 Duckhorn Drive  
 City Saacramento State CA Zip Code 95834  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) VANIR Occupation (for Individual) CEO  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 06 / 19 / 2022  
**Transaction ID : SA11AI.6115**  
 Amount of Each Receipt this Period 5000.00  
 Memo Item  
 Conduit: ActBlue, Refunded 06/23/22

**B. Dominguez, Dorene, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 4540 Duckhorn Drive  
 City Saacramento State CA Zip Code 95834  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) VANIR Occupation (for Individual) CEO  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 10000.00

Date of Receipt 06 / 19 / 2022  
**Transaction ID : SA11AI.6116**  
 Amount of Each Receipt this Period 5000.00  
 Memo Item  
 Conduit: ActBlue, Refunded 06/23/22

**C. Dominguez, Dorene, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 4540 Duckhorn Drive  
 City Saacramento State CA Zip Code 95834  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) VANIR Occupation (for Individual) CEO  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 15000.00

Date of Receipt 06 / 19 / 2022  
**Transaction ID : SA11AI.6117**  
 Amount of Each Receipt this Period 5000.00  
 Memo Item  
 Conduit: ActBlue, Refunded 06/23/22

<b>SUBTOTAL</b> of Receipts This Page (optional).....	15000.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 OF 31
	<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)  
**LATINO VICTORY FUND**

**A. Dominguez, Dorene, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 4540 Duckhorn Drive  
 City Saacramento State CA Zip Code 95834  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) VANIR Occupation (for Individual) CEO  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 20000.00

Date of Receipt 06 / 19 / 2022  
**Transaction ID : SA11AI.6118**  
 Amount of Each Receipt this Period 5000.00  
 Memo Item  
 Conduit: ActBlue, Refunded 06/23/22

**B. Dominguez, Dorene, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 4540 Duckhorn Drive  
 City Saacramento State CA Zip Code 95834  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) VANIR Occupation (for Individual) CEO  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 25000.00

Date of Receipt 06 / 19 / 2022  
**Transaction ID : SA11AI.6119**  
 Amount of Each Receipt this Period 5000.00  
 Memo Item  
 Conduit: ActBlue, Refunded 06/27/22

**C. Greenburger, Francis, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 55 Fifth Avenue 15th Floor  
 City New York State NY Zip Code 10003  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Time Equities Inc. Occupation (for Individual) Chairman CEO  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 06 / 26 / 2022  
**Transaction ID : SA11AI.6135**  
 Amount of Each Receipt this Period 500.00  
 Memo Item  
 Conduit: ActBlue

<b>SUBTOTAL</b> of Receipts This Page (optional).....	10500.00
<b>TOTAL</b> This Period (last page this line number only).....	



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 9 OF 31
	(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)  
**LATINO VICTORY FUND**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>A. Levine, Becky, , ,</b>			Date of Receipt MM / DD / YYYY 06 / 05 / 2022
Mailing Address PO Box 33171			<b>Transaction ID : SA11AI.6095</b>
City Los Gatos	State CA	Zip Code 95031	Amount of Each Receipt this Period 40.00
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item Conduit: ActBlue
Name of Employer (for Individual) Planned Parenthood Mar Monte		Occupation (for Individual) Grants Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 240.00		

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>B. Montes, Martin, , ,</b>			Date of Receipt MM / DD / YYYY 06 / 30 / 2022
Mailing Address 2047 North Humboldt Blvd			<b>Transaction ID : SA11AI.6147</b>
City Chicago	State IL	Zip Code 60647	Amount of Each Receipt this Period 500.00
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item Conduit: ActBlue
Name of Employer (for Individual) Barnes & Thornburg		Occupation (for Individual) Attorney	
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>C. Reyes, Joel, , ,</b>			Date of Receipt MM / DD / YYYY 06 / 26 / 2022
Mailing Address 238 West Kings Hwy			<b>Transaction ID : SA11AI.6128</b>
City San Antonio	State TX	Zip Code 78212	Amount of Each Receipt this Period 5000.00
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item Conduit: ActBlue
Name of Employer (for Individual) STAAMP		Occupation (for Individual) Doctor	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 5000.00		

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	5540.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 OF 31
	<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)  
**LATINO VICTORY FUND**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>A. Solis Doyle, Patti, , ,</b>			Date of Receipt MM / DD / YYYY 06 / 19 / 2022		
Mailing Address 3719 Morrison Street			<b>Transaction ID : SA11AI.6113</b>		
City Washington	State DC	Zip Code 20015	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item Conduit: ActBlue			
Name of Employer (for Individual) The Brunswick Group		Occupation (for Individual) Partner			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 600.00			

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>B.</b>			Date of Receipt MM / DD / YYYY		
Mailing Address			Amount of Each Receipt this Period		
City	State	Zip Code	<input type="checkbox"/> Memo Item		
FEC ID number of contributing federal political committee. C					
Name of Employer (for Individual)		Occupation (for Individual)			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼			

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>C.</b>			Date of Receipt MM / DD / YYYY		
Mailing Address			Amount of Each Receipt this Period		
City	State	Zip Code	<input type="checkbox"/> Memo Item		
FEC ID number of contributing federal political committee. C					
Name of Employer (for Individual)		Occupation (for Individual)			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Aggregate Year-to-Date ▼			

<b>SUBTOTAL</b> of Receipts This Page (optional).....	100.00
<b>TOTAL</b> This Period (last page this line number only).....	31140.00

**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 11 OF 31
<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)  
**LATINO VICTORY FUND**

**A. ACTBLUE**

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

Mailing Address P.O. BOX 441146

City SOMERVILLE	State MA	Zip Code 02144
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FEC ID number of contributing federal political committee. **C** C00401224

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
06		30		2022

**Transaction ID : SA11C.6239**

Amount of Each Receipt this Period  

31677.07
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Memo Item  
 Total Received Through Conduit This Reporting Period, Federal Account

**B.**

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

Mailing Address

City	State	Zip Code
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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
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Amount of Each Receipt this Period  

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Memo Item

**C.**

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

Mailing Address

City	State	Zip Code
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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
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Amount of Each Receipt this Period  

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Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	0.00
<b>TOTAL</b> This Period (last page this line number only).....▶	0.00

**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 31
<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)  
**LATINO VICTORY FUND**

**A. ACTBLUE**

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

Mailing Address P.O. BOX 441146

City SOMERVILLE	State MA	Zip Code 02144
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FEC ID number of contributing federal political committee. **C** C00401224

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
06		30		2022

**Transaction ID : SA17.6240**

Amount of Each Receipt this Period  

55500.00
----------

Memo Item  
 Total Received Through Conduit This Reporting Period, Non-contribution Account

**B. Buenabenta, Jules, , ,**

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

Mailing Address 515 South Figueroa Street

City Los Angeles	State CA	Zip Code 90071
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Occupation (for Individual)  
 Jules and Associates Inc. CEO

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
06		19		2022

**Transaction ID : SA17.6173**

Amount of Each Receipt this Period  

25000.00
----------

Memo Item  
 Conduit: ActBlue

**C. Chapa, Miguel, , ,**

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

Mailing Address 8927 Carriage Drive

City San Antonio	State TX	Zip Code 78217
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Occupation (for Individual)  
 Chapa Law Group PC Lawyer

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
06		05		2022

**Transaction ID : SA17.6171**

Amount of Each Receipt this Period  

250.00
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Memo Item  
 Conduit: ActBlue

<b>SUBTOTAL</b> of Receipts This Page (optional).....	25250.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 13 OF 31
<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)  
**LATINO VICTORY FUND**

**A. Dominguez, Dorene, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 4540 Duckhorn Drive  
 City Saacramento State CA Zip Code 95834  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) VANIR Occupation (for Individual) CEO  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 30000.00

Date of Receipt 06 / 26 / 2022  
**Transaction ID : SA17.6178**  
 Amount of Each Receipt this Period 25000.00  
 Memo Item  
 Conduit: ActBlue, Non-contribution Account

**B. Duarte, Lisa, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 100 W. Randolph Street #64322  
 City Chicago State IL Zip Code 60664  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Point of Difference Strategies Occupation (for Individual) Entrepreneur  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 20000.00

Date of Receipt 06 / 15 / 2022  
**Transaction ID : SA17.6234**  
 Amount of Each Receipt this Period 5000.00  
 Memo Item  
 Transferred from Federal Account 06/15/22

**C. Martinez, Leopoldo, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1290 Balls Hill Road  
 City McLean State VA Zip Code 22101  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) LMN Consulting LLC Occupation (for Individual) Consultant  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 1500.00

Date of Receipt 06 / 30 / 2022  
**Transaction ID : SA17.6180**  
 Amount of Each Receipt this Period 250.00  
 Memo Item  
 Conduit: ActBlue, Non-contribution Account

<b>SUBTOTAL</b> of Receipts This Page (optional).....	30250.00
<b>TOTAL</b> This Period (last page this line number only).....	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 14 OF 31
<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)  
**LATINO VICTORY FUND**

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

Mailing Address 238 West Kings Hwy

City San Antonio	State TX	Zip Code 78212
---------------------	-------------	-------------------

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

Name of Employer (for Individual) STAAMP	Occupation (for Individual) Doctor
---	---------------------------------------

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
10000.00

Date of Receipt  

M M	/	D D	/	Y Y Y Y
06		26		2022

**Transaction ID : SA17.6179**

Amount of Each Receipt this Period  
5000.00

Memo Item  
Conduit: ActBlue, 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  

M M	/	D D	/	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
-----	---	-----	---	---------

Amount of Each Receipt this Period

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	5000.00
<b>TOTAL</b> This Period (last page this line number only).....	60500.00

**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)  
**LATINO VICTORY FUND**

Full Name (Last, First, Middle Initial) <b>A. ActBlue Technical Services</b>		Date of Disbursement MM / DD / YYYY 06 / 05 / 2022	
Mailing Address 366 Summer Street		FEC Identification Number C [ ] <b>Transaction ID : SB21B.6198</b> Amount of Each Disbursement this Period [ ] 4.56	
City Somerville	State MA	Zip Code 02144	Category/ Type [ ]
Purpose of Disbursement Credit Card Processing 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>B. ActBlue Technical Services</b>		Date of Disbursement MM / DD / YYYY 06 / 12 / 2022	
Mailing Address 366 Summer Street		FEC Identification Number C [ ] <b>Transaction ID : SB21B.6199</b> Amount of Each Disbursement this Period [ ] 2.34	
City Somerville	State MA	Zip Code 02144	Category/ Type [ ]
Purpose of Disbursement Credit Card Processing 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>C. ActBlue Technical Services</b>		Date of Disbursement MM / DD / YYYY 06 / 19 / 2022	
Mailing Address 366 Summer Street		FEC Identification Number C [ ] <b>Transaction ID : SB21B.6200</b> Amount of Each Disbursement this Period [ ] 998.98	
City Somerville	State MA	Zip Code 02144	Category/ Type [ ]
Purpose of Disbursement Credit Card Processing 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:			
<b>SUBTOTAL</b> of Disbursements This Page (optional)..... ▶		[ ] 1005.88	
<b>TOTAL</b> This Period (last page this line number only)..... ▶		[ ]	

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**LATINO VICTORY FUND**

Full Name (Last, First, Middle Initial)  
**A. ActBlue Technical Services**

Mailing Address 366 Summer Street

City Somerville State MA Zip Code 02144

Purpose of Disbursement  
Credit Card Processing Fees

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement  
MM / DD / YYYY  
06 / 26 / 2022

FEC Identification Number  
C  
Transaction ID : SB21B.6201  
Amount of Each Disbursement this Period  
223.62

Memo Item

Full Name (Last, First, Middle Initial)  
**B. ActBlue Technical Services**

Mailing Address 366 Summer Street

City Somerville State MA Zip Code 02144

Purpose of Disbursement  
Credit Card Processing Fees

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement  
MM / DD / YYYY  
06 / 30 / 2022

FEC Identification Number  
C  
Transaction ID : SB21B.6202  
Amount of Each Disbursement this Period  
21.86

Memo Item

Full Name (Last, First, Middle Initial)  
**C. Capital One N.A.**

Mailing Address 1200 F Street NW

City Washington State DC Zip Code 20004

Purpose of Disbursement  
Bank Fees

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement  
MM / DD / YYYY  
06 / 07 / 2022

FEC Identification Number  
C  
Transaction ID : SB21B.6206  
Amount of Each Disbursement this Period  
125.00

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 370.48

**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)  
**LATINO VICTORY FUND**

Full Name (Last, First, Middle Initial)

**A. Capital One N.A.**

Mailing Address 1200 F Street NW

City Washington State DC Zip Code 20004

Purpose of Disbursement  
Bank Fee

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
06 / 17 / 2022

FEC Identification Number

C  
Transaction ID : SB21B.6205  
Amount of Each Disbursement this Period  
25.00

Memo Item

Full Name (Last, First, Middle Initial)

**B. Capital One N.A.**

Mailing Address 1200 F Street NW

City Washington State DC Zip Code 20004

Purpose of Disbursement  
Bank Fees

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
06 / 29 / 2022

FEC Identification Number

C  
Transaction ID : SB21B.6207  
Amount of Each Disbursement this Period  
50.00

Memo Item

Full Name (Last, First, Middle Initial)

**C. CT Corporation**

Mailing Address PO Box 4349

City Carol Stream State IL Zip Code 60197

Purpose of Disbursement  
Registered Agent Fee

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
06 / 01 / 2022

FEC Identification Number

C  
Transaction ID : SB21B.6241  
Amount of Each Disbursement this Period  
29.04

Memo Item

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

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

104.04

# 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)  
**LATINO VICTORY FUND**

**A. Paya Inc.**

Full Name (Last, First, Middle Initial)

Mailing Address 12120 Sunset Hills Road #500

City Reston State VA Zip Code 20190

Purpose of Disbursement Credit Card Processing Fees

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: MM / DD / YYYY  
06 / 02 / 2022

FEC Identification Number: C

Transaction ID : SB21B.6197

Amount of Each Disbursement this Period: 22.95

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

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

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

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: MM / DD / YYYY

FEC Identification Number: C

Amount of Each Disbursement this Period

Memo Item

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	22.95
<b>TOTAL</b> This Period (last page this line number only).....▶	1503.35

**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)  
**LATINO VICTORY FUND**

**A. ARBALLO FOR CONGRESS**

Full Name (Last, First, Middle Initial)  
Mailing Address PO BOX 3406

City FRESNO State CA Zip Code 93650

Purpose of Disbursement Contribution

Candidate Name ARBALLO, PHIL, , ,

Office Sought:  House  Senate  President

Disbursement For: 2022  Primary  General  Other (specify) ▼

State: CA District: 13

Date of Disbursement: 06 / 07 / 2022

FEC Identification Number: C00708479  
Transaction ID : SB23.6214  
Amount of Each Disbursement this Period: 2500.00

Memo Item

**B. DR. RAUL RUIZ FOR CONGRESS**

Full Name (Last, First, Middle Initial)  
Mailing Address PO BOX 1566

City INDIO State CA Zip Code 92202

Purpose of Disbursement Contribution

Candidate Name RUIZ, RAUL, , ,

Office Sought:  House  Senate  President

Disbursement For: 2022  Primary  General  Other (specify) ▼

State: CA District: 25

Date of Disbursement: 06 / 07 / 2022

FEC Identification Number: C00502575  
Transaction ID : SB23.6208  
Amount of Each Disbursement this Period: 2500.00

Memo Item

**C. GABE VASQUEZ FOR CONGRESS**

Full Name (Last, First, Middle Initial)  
Mailing Address DRAWER L

City MESILLA State NM Zip Code 88046

Purpose of Disbursement Contribution

Candidate Name VASQUEZ, GABRIEL, , ,

Office Sought:  House  Senate  President

Disbursement For: 2022  Primary  General  Other (specify) ▼

State: NM District: 02

Date of Disbursement: 06 / 07 / 2022

FEC Identification Number: C00789404  
Transaction ID : SB23.6215  
Amount of Each Disbursement this Period: 2500.00

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 7500.00

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**LATINO VICTORY FUND**

Full Name (Last, First, Middle Initial) <b>A. MAXWELL ALEJANDRO FROST FOR CONGRESS</b>		Date of Disbursement MM / DD / YYYY 06 / 29 / 2022
Mailing Address PO BOX 772671		FEC Identification Number C00786822 <b>Transaction ID : SB23.6230</b>
City ORLANDO	State FL	Zip Code 32877
Purpose of Disbursement MAXWELL ALEJANDRO FROST FOR		Amount of Each Disbursement this Period 2500.00
Candidate Name <b>FROST, MAXWELL ALEJANDRO, , ,</b>		Category/Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: FL	District: 10	

Full Name (Last, First, Middle Initial) <b>B. ROBERT GARCIA FOR CONGRESS</b>		Date of Disbursement MM / DD / YYYY 06 / 07 / 2022
Mailing Address 65 PINE AVE. #348		FEC Identification Number C00797795 <b>Transaction ID : SB23.6218</b>
City LONG BEACH	State CA	Zip Code 90802
Purpose of Disbursement Contribution		Amount of Each Disbursement this Period 2500.00
Candidate Name <b>GARCIA, ROBERT, , ,</b>		Category/Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	<input type="checkbox"/> Memo Item
State: CA	District: 42	

Full Name (Last, First, Middle Initial) <b>C. RUDY SALAS FOR CONGRESS</b>		Date of Disbursement MM / DD / YYYY 06 / 07 / 2022
Mailing Address PO BOX 42257		FEC Identification Number C00791756 <b>Transaction ID : SB23.6221</b>
City BAKERSFIELD	State CA	Zip Code 93384
Purpose of Disbursement Contribution		Amount of Each Disbursement this Period 2500.00
Candidate Name <b>SALAS, RUDY, , ,</b>		Category/Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: CA	District: 22	

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

7500.00

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

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**LATINO VICTORY FUND**

Full Name (Last, First, Middle Initial)

### A. TADDEO FOR CONGRESS

Mailing Address PO BOX 5651

City  
TALLAHASSEE

State  
FL

Zip Code  
32314

Purpose of Disbursement  
Contribution

Candidate Name

**TADDEO, ANNETTE, , ,**

Office Sought:  House  
 Senate  
 President

Disbursement For: 2022  
 Primary  General  
 Other (specify) ▼

State: FL District: 27

Date of Disbursement

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

FEC Identification Number

**C** C00445163

**Transaction ID : SB23.6227**

Amount of Each Disbursement this Period

2500.00

Memo Item

Full Name (Last, First, Middle Initial)

### B.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify)

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y

FEC Identification Number

**C**

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

### C.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y

FEC Identification Number

**C**

Amount of Each Disbursement this Period

Memo Item

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

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

2500.00

17500.00

**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 checked="" 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)  
**LATINO VICTORY FUND**

Full Name (Last, First, Middle Initial) <b>A. Dominguez, Dorene, , ,</b>		Date of Disbursement MM / DD / YYYY 06 / 23 / 2022	
Mailing Address 4540 Duckhorn Drive		FEC Identification Number C [ ] <b>Transaction ID : SB28A.6203</b>	
City Saacramento	State CA	Zip Code 95834	Amount of Each Disbursement this Period [ ] 20000.00
Purpose of Disbursement Contribution Refund		Category/ Type [ ]	Memo Item <input type="checkbox"/>
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) <b>B. Dominguez, Dorene, , ,</b>		Date of Disbursement MM / DD / YYYY 06 / 27 / 2022	
Mailing Address 4540 Duckhorn Drive		FEC Identification Number C [ ] <b>Transaction ID : SB28A.6204</b>	
City Saacramento	State CA	Zip Code 95834	Amount of Each Disbursement this Period [ ] 5000.00
Purpose of Disbursement Contribution Refund		Category/ Type [ ]	Memo Item <input type="checkbox"/>
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) <b>C.</b>		Date of Disbursement MM / DD / YYYY [ ] / [ ] / [ ]	
Mailing Address		FEC Identification Number C [ ]	
City	State	Zip Code	Amount of Each Disbursement this Period [ ]
Purpose of Disbursement		Category/ Type [ ]	Memo Item <input type="checkbox"/>
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	[ ] 25000.00
<b>TOTAL</b> This Period (last page this line number only).....▶	[ ] 25000.00

**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)  
**LATINO VICTORY FUND**

Full Name (Last, First, Middle Initial) <b>A. ActBlue Technical Services</b>		Date of Disbursement MM / DD / YYYY 06 / 03 / 2022
Mailing Address 366 Summer Street		FEC Identification Number C <b>Transaction ID : SB29.6183</b> Amount of Each Disbursement this Period 1.50
City Somerville	State MA	
Zip Code 02144	Purpose of Disbursement Credit Card Processing Fees; Non-contribution Account	Memo Item <input type="checkbox"/>
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. ActBlue Technical Services</b>		Date of Disbursement MM / DD / YYYY 06 / 05 / 2022
Mailing Address 366 Summer Street		FEC Identification Number C <b>Transaction ID : SB29.6163</b> Amount of Each Disbursement this Period 9.88
City Somerville	State MA	
Zip Code 02144	Purpose of Disbursement Credit Card Processing Fees; Non-contribution Account	Memo Item <input type="checkbox"/>
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. ActBlue Technical Services</b>		Date of Disbursement MM / DD / YYYY 06 / 19 / 2022
Mailing Address 366 Summer Street		FEC Identification Number C <b>Transaction ID : SB29.6164</b> Amount of Each Disbursement this Period 592.50
City Somerville	State MA	
Zip Code 02144	Purpose of Disbursement Credit Card Processing Fees; Non-contribution Account	Memo Item <input type="checkbox"/>
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

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

603.88

**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)  
**LATINO VICTORY FUND**

Full Name (Last, First, Middle Initial) <b>A. ActBlue Technical Services</b>		Date of Disbursement MM / DD / YYYY 06 / 26 / 2022	
Mailing Address 366 Summer Street		FEC Identification Number C [ ] <b>Transaction ID : SB29.6165</b> Amount of Each Disbursement this Period 1185.00	
City Somerville	State MA	Zip Code 02144	Category/ Type [ ]
Purpose of Disbursement Credit Card Processing Fees; Non-contribution Account		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>B. ActBlue Technical Services</b>		Date of Disbursement MM / DD / YYYY 06 / 30 / 2022	
Mailing Address 366 Summer Street		FEC Identification Number C [ ] <b>Transaction ID : SB29.6166</b> Amount of Each Disbursement this Period 9.88	
City Somerville	State MA	Zip Code 02144	Category/ Type [ ]
Purpose of Disbursement Credit Card Processing Fees; Non-contribution Account		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>C. Alessandro James D'Amico Campaign</b>		Date of Disbursement MM / DD / YYYY 06 / 30 / 2022	
Mailing Address 6619 S. Dixie Highway # 148		FEC Identification Number C [ ] <b>Transaction ID : SB29.6194</b> Amount of Each Disbursement this Period 1000.00	
City Miami	State FL	Zip Code 33143	Category/ Type [ ]
Purpose of Disbursement Contribution, Non-contribution Account		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:			

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	2194.88
<b>TOTAL</b> This Period (last page this line number only).....▶	[ ]



# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**LATINO VICTORY FUND**

Full Name (Last, First, Middle Initial)

**A. America Votes**

Mailing Address PO Box 33516

City Washington State DC Zip Code 20033

Purpose of Disbursement Donation, Non-contribution Account

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 06 / 09 / 2022

FEC Identification Number: C

Transaction ID : **SB29.6154**

Amount of Each Disbursement this Period: 5000.00

Memo Item

Full Name (Last, First, Middle Initial)

**B. Capital One N.A.**

Mailing Address 1200 F Street NW

City Washington State DC Zip Code 20004

Purpose of Disbursement Bank Fee, Non-contribution Account

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 06 / 29 / 2022

FEC Identification Number: C

Transaction ID : **SB29.6167**

Amount of Each Disbursement this Period: 25.00

Memo Item

Full Name (Last, First, Middle Initial)

**C. Capital One N.A.**

Mailing Address 1200 F Street NW

City Washington State DC Zip Code 20004

Purpose of Disbursement Bank Fee, Non-contribution Account

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 06 / 30 / 2022

FEC Identification Number: C

Transaction ID : **SB29.6168**

Amount of Each Disbursement this Period: 25.00

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 5050.00

**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)  
**LATINO VICTORY FUND**

**A. Carlos G Smith Campaign**

Full Name (Last, First, Middle Initial)  
Mailing Address 2237 Stonington Avenue

City Orlando State FL Zip Code 32817

Purpose of Disbursement Contribution, Non-contribution Account

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: 06 / 30 / 2022

FEC Identification Number: C  
Transaction ID : SB29.6192  
Amount of Each Disbursement this Period: 1000.00

Memo Item

**B. CT Corporation**

Full Name (Last, First, Middle Initial)  
Mailing Address PO Box 4349

City Carol Stream State IL Zip Code 60197

Purpose of Disbursement Registered Agent Fee, Non-contribution Account

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: 06 / 01 / 2022

FEC Identification Number: C  
Transaction ID : SB29.6196  
Amount of Each Disbursement this Period: 261.36

Memo Item

**C. Eunice Ortiz for SD18**

Full Name (Last, First, Middle Initial)  
Mailing Address 2800 S. Adams Street Unit 5651

City Tallahassee State FL Zip Code 32314

Purpose of Disbursement Contribution, Non-contribution Account

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: 06 / 30 / 2022

FEC Identification Number: C  
Transaction ID : SB29.6188  
Amount of Each Disbursement this Period: 1000.00

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 2261.36

**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)  
**LATINO VICTORY FUND**

**A. Gonzalez, Erika, , ,**

Full Name (Last, First, Middle Initial)

Mailing Address 238 W King Highway

City San Antonio State TX Zip Code 78212

Purpose of Disbursement  
Contribution Refund, Non-contribution Account

Candidate Name

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

State: District:

Date of Disbursement: 06 / 19 / 2022

FEC Identification Number: C

Transaction ID : SB29.6175

Amount of Each Disbursement this Period: 10000.00

Memo Item

**B. Janelle Perez Campaign**

Full Name (Last, First, Middle Initial)

Mailing Address 1742 W Flagler Street

City Miami State FL Zip Code 33135

Purpose of Disbursement  
Contribution, Non-contribution Account

Candidate Name

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

State: District:

Date of Disbursement: 06 / 30 / 2022

FEC Identification Number: C

Transaction ID : SB29.6190

Amount of Each Disbursement this Period: 1000.00

Memo Item

**C. Janet Cruz for State Senate District 14**

Full Name (Last, First, Middle Initial)

Mailing Address PO Box 4544

City Tampa State FL Zip Code 33677

Purpose of Disbursement  
Contribution, Non-contribution Account

Candidate Name

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

State: District:

Date of Disbursement: 06 / 30 / 2022

FEC Identification Number: C

Transaction ID : SB29.6186

Amount of Each Disbursement this Period: 1000.00

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 12000.00

**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)  
**LATINO VICTORY FUND**

Full Name (Last, First, Middle Initial)

**A. Latino Victory Fund Non-contribution Account**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
06	/	15	/	2022

Mailing Address PO OX 34104

City WASHINGTON State DC Zip Code 20005

FEC Identification Number

**C** C00562777

Purpose of Disbursement  
Transfer Lisa Duarte's Contribution from Federal to Non-contribution Account

**Transaction ID : SB29.6235**

Candidate Name

Amount of Each Disbursement this Period

5000.00

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

Memo Item

Full Name (Last, First, Middle Initial)

**B. Linda Hidalgo for Harris County Judge**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
06	/	17	/	2022

Mailing Address PO Box 8392

City Houston State TX Zip Code 77288

FEC Identification Number

**C**

Purpose of Disbursement  
Contribution

**Transaction ID : SB29.6225**

Candidate Name

Amount of Each Disbursement this Period

2500.00

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

Memo Item

Full Name (Last, First, Middle Initial)

**C. Lisa for Nevada**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
06	/	03	/	2022

Mailing Address PO Box 17156

City Las Vegas State NV Zip Code 89114

FEC Identification Number

**C**

Purpose of Disbursement  
Contribution, Non-contribution Account

**Transaction ID : SB29.6152**

Candidate Name

Amount of Each Disbursement this Period

2500.00

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

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)  
**LATINO VICTORY FUND**

**A. Marina Torres for LA City Attorney 2022**

Full Name (Last, First, Middle Initial)

Mailing Address 312 Clay Street #300

City Oakland State CA Zip Code 94607

Purpose of Disbursement Contribution, Non-contribution Account

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement 06 / 13 / 2022

FEC Identification Number C

Transaction ID : SB29.6155

Amount of Each Disbursement this Period 1000.00

Memo Item

**B. Moe's River North LLC**

Full Name (Last, First, Middle Initial)

Mailing Address 155 W. Kinzie Street

City Chicago State IL Zip Code 60654

Purpose of Disbursement Catering, Non-contribution Account

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement 06 / 29 / 2022

FEC Identification Number C

Transaction ID : SB29.6169

Amount of Each Disbursement this Period 8426.40

Memo Item

**C. Paya Inc.**

Full Name (Last, First, Middle Initial)

Mailing Address 12120 Sunset Hills Road #500

City Reston State VA Zip Code 20190

Purpose of Disbursement Credit Card Processing Fees, Non-contribution Account

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement 06 / 02 / 2022

FEC Identification Number C

Transaction ID : SB29.6151

Amount of Each Disbursement this Period 22.50

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 9448.90

**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)  
**LATINO VICTORY FUND**

Full Name (Last, First, Middle Initial)  
**A. Paya Inc.**

Mailing Address 12120 Sunset Hills Road #500

City Reston State VA Zip Code 20190

Purpose of Disbursement  
Credit Card Processing Fees, Non-contribution Account

Candidate Name

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

State: District:

Date of Disbursement  
MM / DD / YYYY  
06 / 02 / 2022

FEC Identification Number  
C [ ]  
**Transaction ID : SB29.6184**  
Amount of Each Disbursement this Period  
[ ] 22.50

Memo Item

Full Name (Last, First, Middle Initial)  
**B. Rick Chavez Zbur for Assembly**

Mailing Address 1787 Tribute Road Suite K

City Sacramento State CA Zip Code 95815

Purpose of Disbursement  
Contribution, Non-contribution Account

Candidate Name

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

State: District:

Date of Disbursement  
MM / DD / YYYY  
06 / 13 / 2022

FEC Identification Number  
C [ ]  
**Transaction ID : SB29.6159**  
Amount of Each Disbursement this Period  
[ ] 1000.00

Memo Item

Full Name (Last, First, Middle Initial)  
**C. Solis for Supervisor**

Mailing Address 16633 Ventura Blvd., # 1008

City Encino State CA Zip Code 91436

Purpose of Disbursement  
Contribution, Non-contribution Account

Candidate Name

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

State: District:

Date of Disbursement  
MM / DD / YYYY  
06 / 13 / 2022

FEC Identification Number  
C [ ]  
**Transaction ID : SB29.6157**  
Amount of Each Disbursement this Period  
[ ] 1000.00

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ [ ] 2022.50

**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 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)  
**LATINO VICTORY FUND**

Full Name (Last, First, Middle Initial)

### A. Stripe

Mailing Address 185 Berry Street Suite 550

City San Francisco State CA Zip Code 94107

Purpose of Disbursement  
Credit Card Processing Fees, Non-contribution Account

Candidate Name

Office Sought:  House  Senate  President

State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

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

FEC Identification Number

C [ ]

Transaction ID : SB29.6182

Amount of Each Disbursement this Period

[ ] 2.43

Memo Item

Full Name (Last, First, Middle Initial)

### B. Tom Perez for Maryland

Mailing Address PO Box 5389

City Takoma Park State MD Zip Code 20193

Purpose of Disbursement  
Contribution, Non-contribution Account

Candidate Name

Office Sought:  House  Senate  President

State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

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

FEC Identification Number

C [ ]

Transaction ID : SB29.6161

Amount of Each Disbursement this Period

[ ] 2000.00

Memo Item

Full Name (Last, First, Middle Initial)

### C.

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:  House  Senate  President

State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
[ ]	[ ]		[ ]	[ ]		[ ]	[ ]	[ ]	[ ]

FEC Identification Number

C [ ]

Amount of Each Disbursement this Period

[ ]

Memo Item

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

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

[ ] 2002.43

[ ] 45583.95