

**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

United for Progress PAC

ADDRESS (number and street)

700 13th Street NW

Suite 600

☐ Check if different than previously reported. (ACC)

Washington

DC

20005

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C C00627141

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)☐ Convention (12C)☒ General (12G)☐ Special (12S)☐ Runoff (12R)

Election on

M M M

11

D D D

03

Y Y Y Y Y Y Y

2020

in the  
State of

(d) 30-Day

POST-Election

Report for the:

☐ General (30G)☐ Runoff (30R)☐ Special (30S)

Election on

M M M

D D D

Y Y Y Y Y Y Y

in the  
State of

5. Covering Period

M M M

10

D D D

01

Y Y Y Y Y Y Y

2020

through

M M M

10

D D D

14

Y Y Y Y Y Y Y

2020

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

Vilar, Juan Marcos, , ,

Type or Print Name of Treasurer

Signature of Treasurer

Vilar, Juan Marcos, , ,

[Electronically Filed]

Date

M M M

10

D D D

22

Y Y Y Y Y Y Y

2020

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

Office  
Use  
Only**FEC FORM 3X**  
Rev. 05/2016

# SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 05/2016)

Page 2

Write or Type Committee Name

United for Progress PAC

Report Covering the Period:

From:

M M	/	D D	/	Y Y Y Y Y
10		01		2020

To:

M M	/	D D	/	Y Y Y Y Y
10		14		2020

	COLUMN A This Period	COLUMN B Calendar Year-to-Date															
6. (a) Cash on Hand January 1, <table><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td colspan="5">2020</td></tr></table>	Y	Y	Y	Y	Y	2020						<table><tr><td colspan="5">33983.35</td></tr></table>	33983.35				
Y	Y	Y	Y	Y													
2020																	
33983.35																	
(b) Cash on Hand at Beginning of Reporting Period.....	<table><tr><td colspan="5">852554.58</td></tr></table>	852554.58															
852554.58																	
(c) Total Receipts (from Line 19) .....	<table><tr><td colspan="5">500000.00</td></tr></table>	500000.00					<table><tr><td colspan="5">1744075.06</td></tr></table>	1744075.06									
500000.00																	
1744075.06																	
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<table><tr><td colspan="5">1352554.58</td></tr></table>	1352554.58					<table><tr><td colspan="5">1778058.41</td></tr></table>	1778058.41									
1352554.58																	
1778058.41																	
7. Total Disbursements (from Line 31).....	<table><tr><td colspan="5">679560.60</td></tr></table>	679560.60					<table><tr><td colspan="5">1105064.43</td></tr></table>	1105064.43									
679560.60																	
1105064.43																	
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	<table><tr><td colspan="5">672993.98</td></tr></table>	672993.98					<table><tr><td colspan="5">672993.98</td></tr></table>	672993.98									
672993.98																	
672993.98																	
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<table><tr><td colspan="5">0.00</td></tr></table>	0.00															
0.00																	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<table><tr><td colspan="5">49453.94</td></tr></table>	49453.94															
49453.94																	



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

## For further information contact:

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

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

# **DETAILED SUMMARY PAGE** of Receipts

FEC Form 3X (Rev. 05/2016)

Page 3

Write or Type Committee Name

United for Progress PAC

Report Covering the Period:

From:

M M	/	D D	/	Y Y Y Y
10		01		2020

To:

M M	/	D D	/	Y Y Y Y
10		14		2020

**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).....

500000.00

537500.00

(ii) Unitemized .....

0.00

0.00

(iii) TOTAL (add

Lines 11(a)(i) and (ii).....▶

500000.00

537500.00

(b) Political Party Committees .....

0.00

0.00

(c) Other Political Committees

(such as PACs).....

0.00

1200000.00

(d) Total Contributions (add Lines

11(a)(iii), (b), and (c)) (Carry

Totals to Line 33, page 5) .....

500000.00

1737500.00

## 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.).....

0.00

6575.06

## 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)) .....

500000.00

1744075.06

## 20. Total Federal Receipts

(subtract Line 18(c) from Line 19) .....

500000.00

1744075.06

# **DETAILED SUMMARY PAGE** of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 4

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 .....	513189.00	674961.26
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	513189.00	674961.26
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditures (use Schedule E) .....	121438.40	128638.40
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).....	44933.20	301464.77
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)) ..	679560.60	1105064.43
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	679560.60	1105064.43

**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) .....	500000.00	1737500.00
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	500000.00	1737500.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	513189.00	674961.26
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	513189.00	674961.26

# SCHEDULE A (FEC Form 3X)

## ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 6 OF 22

(check only one)

<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)

United for Progress PAC

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

A. Bloomberg, Michael, R., ,

Mailing Address PO Box 1060

City  
New YorkState  
NYZip Code  
10150-1060FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Bloomberg Inc.

Occupation (for Individual)

Founder

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		05		2020

Transaction ID : VSHEPPC3WK3

Amount of Each Receipt this Period

500000.00

☐ Memo Item

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

B.

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 M	/	D D D	/	Y Y Y Y Y Y

Amount of Each Receipt this Period

☐ Memo Item

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

C.

Mailing Address

City

State

Zip Code

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y

Amount of Each Receipt this Period

☐ Memo Item

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

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

500000.00

500000.00

# **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)

PAGE 7 OF 22

☒ 21b ☐ 22 ☐ 23 ☐ 26 ☐ 27  
☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

**United for Progress PAC**

Full Name (Last, First, Middle Initial)

## **A. Berlin Rosen, LTD**

Mailing Address 15 Maiden Ln  
Ste 1600

City  
New York

State  
NY

Zip Code  
10038-5111

Purpose of Disbursement  
Printing

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Category/  
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
10 / 14 / 2020

FEC Identification Number

C

Transaction ID : VSGFEA1EA

Amount of Each Disbursement this Period

63600.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

## **B. Vilar Strategy Group, LLC**

Mailing Address 10524 Moss Park Rd  
Ste 204-625

City  
Orlando

State  
FL

Zip Code  
32832-5898

Purpose of Disbursement  
Strategic Consulting Services

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Category/  
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
10 / 01 / 2020

FEC Identification Number

C

Transaction ID : VSGFEA1AY

Amount of Each Disbursement this Period

5000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

## **C. Hamilton Campaign Network LLC**

Mailing Address 5030 Broadway  
Ste 810

City  
New York

State  
NY

Zip Code  
10034-1666

Purpose of Disbursement  
Media Buy & Media Production Costs

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Category/  
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
10 / 06 / 2020

FEC Identification Number

C

Transaction ID : VSGFEA1EY

Amount of Each Disbursement this Period

384580.00

☐ Memo Item

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

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

453180.00

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 8 OF 22

<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)

**United for Progress PAC**

Full Name (Last, First, Middle Initial)

**A. Zouain Enterprises**

Mailing Address 2559 Gresham Dr

City  
OrlandoState  
FLZip Code  
32807-6411Purpose of Disbursement  
Media Production Services

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

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

FEC Identification Number

**C****Transaction ID : VSGFEA1AY**

Amount of Each Disbursement this Period

4875.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. La Prensa**

Mailing Address 545 N Mills Ave

City  
OrlandoState  
FLZip Code  
32803-5346Purpose of Disbursement  
Newspaper Ad

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

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

FEC Identification Number

**C****Transaction ID : VSGFEA1DY**

Amount of Each Disbursement this Period

1200.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. iHeartMedia + Entertainment**

Mailing Address 20880 Stone Oak Pkwy

City  
San AntonioState  
TXZip Code  
78258-7460Purpose of Disbursement  
Digital Ad Buy

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

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

FEC Identification Number

**C****Transaction ID : VSGFEA1E7**

Amount of Each Disbursement this Period

33500.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

39575.00



**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 9 OF 22

<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)

**United for Progress PAC**

Full Name (Last, First, Middle Initial)

**A. Alianza for Progress Inc.**Mailing Address 10524 Moss Park Rd  
Ste 204-605City  
OrlandoState  
FLZip Code  
32832-5898Purpose of Disbursement  
Media Buy

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y Y Y
10		14		2020

FEC Identification Number

**C****Transaction ID : VSGFEA1EA**

Amount of Each Disbursement this Period

20434.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B.**

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M	/	D D	/	Y Y 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  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M	/	D D	/	Y Y 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).....▶

20434.00

513189.00

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 10 OF 22

<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)

**United for Progress PAC**

Full Name (Last, First, Middle Initial)

**A. Berlin Rosen, LTD**Mailing Address 15 Maiden Ln  
Ste 1600City  
New YorkState  
NYZip Code  
10038-5111Purpose of Disbursement  
Nonfederal Direct Mail - FL House District 27

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		13		2020

FEC Identification Number

**C****Transaction ID : VSGFEA1DY**

Amount of Each Disbursement this Period

6272.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Anna for Florida**

Mailing Address PO Box 536154

City  
OrlandoState  
FLZip Code  
32853-6154Purpose of Disbursement  
Nonfederal In-Kind Contribution

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		05		2020

FEC Identification Number

**C****Transaction ID : VSGFEA1BF**

Amount of Each Disbursement this Period

54.55

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Marcos Lopez for Osceola County Sheriff**

Mailing Address 3485 Middlebrook Pl

City  
Saint CloudState  
FLZip Code  
34773-6056Purpose of Disbursement  
Nonfederal In-Kind Contribution

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		05		2020

FEC Identification Number

**C****Transaction ID : VSGFEA1BF**

Amount of Each Disbursement this Period

54.55

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

6381.10

**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 PageFOR LINE NUMBER:  
(check only one)

PAGE 11 OF 22

<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)

**United for Progress PAC**

Full Name (Last, First, Middle Initial)

**A. Victor Torres for SD 15**

Mailing Address PO Box 141098

City  
OrlandoState  
FLZip Code  
32814-1098Purpose of Disbursement  
Nonfederal In-Kind Contribution

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y Y Y
10		05		2020

FEC Identification Number

**C****Transaction ID : VSGFEA1BEI**

Amount of Each Disbursement this Period

54.55

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Monique Worrell for State's Attorney**

Mailing Address PO Box 784566

City  
Winter GardenState  
FLZip Code  
34778-4566Purpose of Disbursement  
Nonfederal In-Kind Contribution

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y Y Y
10		05		2020

FEC Identification Number

**C****Transaction ID : VSGFEA1BFc**

Amount of Each Disbursement this Period

54.55

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Berlin Rosen, LTD**Mailing Address 15 Maiden Ln  
Ste 1600City  
New YorkState  
NYZip Code  
10038-5111Purpose of Disbursement  
Nonfederal Direct Mail - FL House District 50

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y Y Y
10		13		2020

FEC Identification Number

**C****Transaction ID : VSGFEA1DY**

Amount of Each Disbursement this Period

13081.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

13190.10

# **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)

PAGE 12 OF 22

☐ 21b ☐ 22 ☐ 23 ☐ 26 ☐ 27  
☐ 28a ☐ 28b ☐ 28c ☒ 29 ☐ 30b

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

NAME OF COMMITTEE (In Full)

**United for Progress PAC**

Full Name (Last, First, Middle Initial)

## **A. Nina Yoakum for FL District 50 Campaign**

Mailing Address 3564 Avalon Park Blvd  
# 116

City  
Orlando

State  
FL

Zip Code  
32828-7365

Purpose of Disbursement  
Nonfederal In-Kind Contribution

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

Category/  
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
10 / 05 / 2020

FEC Identification Number

C

Transaction ID : VSGFEA1BF.

Amount of Each Disbursement this Period

54.55

☐ Memo Item

Full Name (Last, First, Middle Initial)

## **B. Berlin Rosen, LTD**

Mailing Address 15 Maiden Ln  
Ste 1600

City  
New York

State  
NY

Zip Code  
10038-5111

Purpose of Disbursement  
Nonfederal Direct Mail - FL House District 50

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

Category/  
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
10 / 08 / 2020

FEC Identification Number

C

Transaction ID : VSGFEA1CF6

Amount of Each Disbursement this Period

13297.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

## **C. Berlin Rosen, LTD**

Mailing Address 15 Maiden Ln  
Ste 1600

City  
New York

State  
NY

Zip Code  
10038-5111

Purpose of Disbursement  
Nonfederal Direct Mail - FL House District 27

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

Category/  
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
10 / 13 / 2020

FEC Identification Number

C

Transaction ID : VSGFEA1FM

Amount of Each Disbursement this Period

11410.00

☐ Memo Item

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

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

24761.55

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 13 OF 22

<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

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)

**United for Progress PAC**

Full Name (Last, First, Middle Initial)

**A. Joshua Lopez for District 77**

Mailing Address PO Box 151331

City  
Cape CoralState  
FLZip Code  
33915-1331Purpose of Disbursement  
Nonfederal In-Kind Contribution

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
10			05			2020					

FEC Identification Number

**C****Transaction ID : VSGFEA1BF5**

Amount of Each Disbursement this Period

54.55

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Eliseo Santana Campaign**

Mailing Address 1400 Byram Dr

City  
ClearwaterState  
FLZip Code  
33755-1504Purpose of Disbursement  
Nonfederal In-Kind Contribution

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
10			05			2020					

FEC Identification Number

**C****Transaction ID : VSGFEA1BF5**

Amount of Each Disbursement this Period

54.55

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y

FEC Identification Number

**C**

Amount of Each Disbursement this Period

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

109.10

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

44441.85

**SCHEDULE D (FEC Form 3X)****DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate  
schedule(s)  
for each  
numbered line)

PAGE 14 OF 22

FOR LINE NUMBER:  
(check only one)
☐ 9  
☒ 10

NAME OF COMMITTEE (In Full)

United for Progress PAC

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Alianza for Progress Inc.

Nature of Debt (Purpose):

Canvassing - Estimate

Mailing Address 10524 Moss Park Rd  
Ste 204-605City  
OrlandoState  
FLZip Code  
32832-5898

Outstanding Balance Beginning This Period

0.00

Transaction ID : VSEGY9H9X11

Amount Incurred This Period

3709.51

Payment This Period

0.00

Outstanding Balance at Close of This Period

3709.51

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Alianza for Progress Inc.

Nature of Debt (Purpose):

Canvassing - Estimate

Mailing Address 10524 Moss Park Rd  
Ste 204-605City  
OrlandoState  
FLZip Code  
32832-5898

Outstanding Balance Beginning This Period

0.00

Transaction ID : VSEGY9H9W42

Amount Incurred This Period

24991.02

Payment This Period

0.00

Outstanding Balance at Close of This Period

24991.02

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Alianza for Progress Inc.

Nature of Debt (Purpose):

Canvassing - Estimate

Mailing Address 10524 Moss Park Rd  
Ste 204-605City  
OrlandoState  
FLZip Code  
32832-5898

Outstanding Balance Beginning This Period

16934.58

Transaction ID : VSEGY9H9W34

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

16934.58

1) SUBTOTALS This Period This Page (optional)..... ►

45635.11

2) TOTALS This Period (last page this line number only)..... ►

3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) ..... ►

4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ►

**SCHEDULE D (FEC Form 3X)****DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate  
schedule(s)  
for each  
numbered line)

PAGE 15 OF 22

FOR LINE NUMBER:  
(check only one)
☐ 9  
☒ 10

NAME OF COMMITTEE (In Full)

United for Progress PAC

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Alianza for Progress Inc.

Nature of Debt (Purpose):

Canvassing - Estimate

Mailing Address 10524 Moss Park Rd  
Ste 204-605City  
OrlandoState  
FLZip Code  
32832-5898

Outstanding Balance Beginning This Period

0.00

Transaction ID : VSEGY9H9X29

Amount Incurred This Period

3818.83

Payment This Period

0.00

Outstanding Balance at Close of This Period

3818.83

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Nature of Debt (Purpose):

Mailing Address

City

State

Zip Code

Outstanding Balance Beginning This Period

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Nature of Debt (Purpose):

Mailing Address

City

State

Zip Code

Outstanding Balance Beginning This Period

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period

1) **SUBTOTALS** This Period This Page (optional)..... ►

3818.83

2) **TOTALS** This Period (last page this line number only)..... ►

49453.94

3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only) ..... ►

0.00

4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ►

49453.94

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 16 OF 22  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>United for Progress PAC</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px; display: flex; align-items: center;"> <span style="font-size: 1.5em; margin-right: 10px;">C</span> <span>C00627141</span> </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <span style="margin-left: 20px;">New report</span> Amends report filed on <span style="margin-left: 20px;">MM / DD / YYYY</span>	

Full Name of Payee <span style="float: right;"><input type="checkbox"/> Memo Item</span> <b>La Prensa</b>	Date of Public Distribution/Dissemination <div style="border: 1px solid black; padding: 2px; display: flex; align-items: center;"> <span style="margin: 0 5px;">MM / DD / YYYY</span> <span>10 / 01 / 2020</span> </div>			
Mailing Address <b>545 N Mills Ave</b>	Amount <div style="border: 1px solid black; padding: 2px; display: flex; align-items: center;"> <span style="margin: 0 5px;">MM / DD / YYYY</span> <span>54.55</span> </div>			
<table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:33%; border-bottom: 1px solid black;">City Orlando</td> <td style="width:33%; border-bottom: 1px solid black;">State FL</td> <td style="width:33%; border-bottom: 1px solid black;">Zip Code 32803-5346</td> </tr> </table>		City Orlando	State FL	Zip Code 32803-5346
City Orlando		State FL	Zip Code 32803-5346	
<table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:50%; border-bottom: 1px solid black;">Purpose of Expenditure Newspaper Ad</td> <td style="width:50%; border-bottom: 1px solid black;">Category/Type</td> </tr> </table>	Purpose of Expenditure Newspaper Ad	Category/Type		
Purpose of Expenditure Newspaper Ad	Category/Type			
Name of Federal Candidate: <span style="float: right;"><input checked="" type="checkbox"/> Support    <input type="checkbox"/> Oppose</span> Biden, Joseph, R, , Jr				
Calendar Year-To-Date Per Election for Office Sought <span style="float: right;">177874.64</span>				
Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ▶				

Full Name of Payee <span style="float: right;"><input type="checkbox"/> Memo Item</span> <b>Vazquez Enterprise Multiple Services</b>	Date of Public Distribution/Dissemination <div style="border: 1px solid black; padding: 2px; display: flex; align-items: center;"> <span style="margin: 0 5px;">MM / DD / YYYY</span> <span>10 / 03 / 2020</span> </div>			
Mailing Address <b>1916 N 60th St</b>	Amount <div style="border: 1px solid black; padding: 2px; display: flex; align-items: center;"> <span style="margin: 0 5px;">MM / DD / YYYY</span> <span>3000.00</span> </div>			
<table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:33%; border-bottom: 1px solid black;">City Tampa</td> <td style="width:33%; border-bottom: 1px solid black;">State FL</td> <td style="width:33%; border-bottom: 1px solid black;">Zip Code 33619-3124</td> </tr> </table>		City Tampa	State FL	Zip Code 33619-3124
City Tampa		State FL	Zip Code 33619-3124	
<table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:50%; border-bottom: 1px solid black;">Purpose of Expenditure Sound Truck</td> <td style="width:50%; border-bottom: 1px solid black;">Category/Type</td> </tr> </table>	Purpose of Expenditure Sound Truck	Category/Type		
Purpose of Expenditure Sound Truck	Category/Type			
Name of Federal Candidate: <span style="float: right;"><input type="checkbox"/> Support    <input checked="" type="checkbox"/> Oppose</span> Trump, Donald J., ,				
Calendar Year-To-Date Per Election for Office Sought <span style="float: right;">177874.64</span>				
Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ▶				

<b>(a) SUBTOTAL</b> of Itemized Independent Expenditures .....	<div style="border: 1px solid black; padding: 2px; display: flex; align-items: center;"> <span style="margin: 0 5px;">MM / DD / YYYY</span> <span>3054.55</span> </div>
<b>(b) SUBTOTAL</b> of Unitemized Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px; display: flex; align-items: center;"> <span style="margin: 0 5px;">MM / DD / YYYY</span> <span></span> </div>
<b>(c) TOTAL</b> Independent Expenditures .....	<div style="border: 1px solid black; padding: 2px; display: flex; align-items: center;"> <span style="margin: 0 5px;">MM / DD / YYYY</span> <span></span> </div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Vilar, Juan Marcos, ,

[Electronically Filed]

Date

MM / DD / YYYY
10 / 22 / 2020

Signature



**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 17 OF 22  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>United for Progress PAC</b>				FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00627141	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <span style="margin-left: 20px;">New report</span> <span style="margin-left: 20px;">Amends report filed on</span> <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span>					
Full Name of Payee <b>Alianza for Progress Inc.</b> *			<input checked="" type="checkbox"/> Memo Item		Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 13 / 2020
Mailing Address 10524 Moss Park Rd Ste 204-605			Amount <span style="border: 1px solid black; padding: 2px;">3709.51</span>		
City Orlando	State FL	Zip Code 32832-5898	Transaction ID : <b>VSGFEA1EQE2</b> Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span>		
Purpose of Expenditure Canvassing - Estimate		Category/ Type <span style="border: 1px solid black; padding: 2px;"> </span>			
Name of Federal Candidate: Biden, Joseph, R, , Jr			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: <u>00</u> <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: <u>00</u>	
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">177874.64</span>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ▶		
Full Name of Payee <b>La Prensa</b>			<input type="checkbox"/> Memo Item		Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 01 / 2020
Mailing Address 545 N Mills Ave			Amount <span style="border: 1px solid black; padding: 2px;">54.43</span>		
City Orlando	State FL	Zip Code 32803-5346	Transaction ID : <b>VSGFEA1BDT2</b> Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 05 / 2020		
Purpose of Expenditure Newspaper Ad		Category/ Type <span style="border: 1px solid black; padding: 2px;"> </span>			
Name of Federal Candidate: Castor, Kathy, , ,			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House District: <u>14</u> <input type="checkbox"/> President <input type="checkbox"/> Senate State: <u>FL</u>	
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">54.43</span>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ▶		
(a) SUBTOTAL of Itemized Independent Expenditures .....			<span style="border: 1px solid black; padding: 2px;">54.43</span>		
(b) SUBTOTAL of Unitemized Independent Expenditures.....			<span style="border: 1px solid black; padding: 2px;"> </span>		
(c) TOTAL Independent Expenditures .....			<span style="border: 1px solid black; padding: 2px;"> </span>		
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Vilar, Juan Marcos, , , Signature			Date <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 22 / 2020		

[Electronically Filed]

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 18 OF 22  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>United for Progress PAC</b>				FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00627141	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <span style="margin-left: 20px;">New report</span> <span style="margin-left: 20px;">Amends report filed on</span> <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span>					
Full Name of Payee <b>La Prensa</b>			<input type="checkbox"/> Memo Item		
Mailing Address <b>545 N Mills Ave</b>			Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> <b>10 / 01 / 2020</b>		
City <b>Orlando</b>		State <b>FL</b>	Amount <span style="border: 1px solid black; padding: 2px;">54.42</span>		
Purpose of Expenditure <b>Newspaper Ad</b>		Zip Code <b>32803-5346</b>		Transaction ID : <b>VSGFEA1BDS4</b>	
Category/Type		<span style="border: 1px solid black; padding: 2px;"></span>		Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> <b>10 / 05 / 2020</b>	
Name of Federal Candidate: <b>Demings, Val, , ,</b>			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose		
Office Sought:			<input checked="" type="checkbox"/> House District: <b>10</b> <input type="checkbox"/> President <input type="checkbox"/> Senate State: <b>FL</b>		
Calendar Year-To-Date Per Election for Office Sought			<span style="border: 1px solid black; padding: 2px;">54.42</span> Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶		
Full Name of Payee <b>Alianza for Progress Inc.</b>			<input checked="" type="checkbox"/> Memo Item		
Mailing Address <b>10524 Moss Park Rd</b> <b>Ste 204-605</b>			Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> <b>10 / 01 / 2020</b>		
City <b>Orlando</b>		State <b>FL</b>	Amount <span style="border: 1px solid black; padding: 2px;">24991.02</span>		
Purpose of Expenditure <b>Canvassing - Estimate</b>		Zip Code <b>32832-5898</b>		Transaction ID : <b>VSGFEA1ER45</b>	
Category/Type		<span style="border: 1px solid black; padding: 2px;"></span>		Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span>	
Name of Federal Candidate: <b>Biden, Joseph, R, , Jr</b>			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose		
Office Sought:			<input type="checkbox"/> House District: <b>00</b> <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: <b>00</b>		
Calendar Year-To-Date Per Election for Office Sought			<span style="border: 1px solid black; padding: 2px;">177874.64</span> Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶		
<div style="display: flex; justify-content: space-between;"> <div> <p>(a) SUBTOTAL of Itemized Independent Expenditures .....</p> <p>(b) SUBTOTAL of Unitemized Independent Expenditures.....</p> <p>(c) TOTAL Independent Expenditures .....</p> </div> <div style="text-align: right;"> <span style="border: 1px solid black; padding: 2px;">54.42</span>  <span style="border: 1px solid black; padding: 2px;"></span>  <span style="border: 1px solid black; padding: 2px;"></span> </div> </div>					
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature <u>Vilar, Juan Marcos, , ,</u>			Date <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> <span style="border: 1px solid black; padding: 2px;">10 / 22 / 2020</span>		

[Electronically Filed]

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 19 OF 22  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>United for Progress PAC</b>				FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00627141	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report				New report Amends report filed on <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span>	
Full Name of Payee <b>Hamilton Campaign Network LLC</b>			<input type="checkbox"/> Memo Item		
Mailing Address 5030 Broadway Ste 810			Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 12 / 2020		
City New York		State NY	Zip Code 10034-1666		
Purpose of Expenditure Media Buy		Category/ Type <span style="border: 1px solid black; padding: 2px;"> </span>		Amount <span style="border: 1px solid black; padding: 2px;"> </span> 69015.00	
Name of Federal Candidate: Biden, Joseph, R, , Jr			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate District: 00 State: 00 <input checked="" type="checkbox"/> President		
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;"> </span> 177874.64			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ▶		
Full Name of Payee <b>La Prensa</b>			<input type="checkbox"/> Memo Item		
Mailing Address 545 N Mills Ave			Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 01 / 2020		
City Orlando		State FL	Zip Code 32803-5346		
Purpose of Expenditure Newspaper Ad		Category/ Type <span style="border: 1px solid black; padding: 2px;"> </span>		Amount <span style="border: 1px solid black; padding: 2px;"> </span> 54.42	
Name of Federal Candidate: Soto, Darren, , ,			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate District: 09 State: FL <input type="checkbox"/> President		
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;"> </span> 54.42			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ▶		
(a) SUBTOTAL of Itemized Independent Expenditures .....			<span style="border: 1px solid black; padding: 2px;"> </span> 69069.42		
(b) SUBTOTAL of Unitemized Independent Expenditures.....			<span style="border: 1px solid black; padding: 2px;"> </span>		
(c) TOTAL Independent Expenditures .....			<span style="border: 1px solid black; padding: 2px;"> </span>		
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature <u>Vilar, Juan Marcos, , ,</u> <div style="text-align: right;">[Electronically Filed]</div>			Date <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 22 / 2020		

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 20 OF 22  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>United for Progress PAC</b>				<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <b>C</b> C00627141       </div>	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report				New report <input type="checkbox"/> Amends report filed on <input type="text"/> / <input type="text"/> / <input type="text"/>	

  

Full Name of Payee <input type="checkbox"/> Memo Item <b>Alianza for Progress Inc.</b>			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-around;"> <div><input type="text"/> / <input type="text"/> / <input type="text"/></div> <div><input type="text"/> / <input type="text"/> / <input type="text"/></div> <div><input type="text"/> / <input type="text"/> / <input type="text"/></div> </div>		
Mailing Address 10524 Moss Park Rd Ste 204-605			Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">1546.15</div>		
City Orlando	State FL	Zip Code 32832-5898	<b>Transaction ID : VSGFEA1E9V6</b> Date of Disbursement or Obligation <div style="display: flex; justify-content: space-around;"> <div><input type="text"/> / <input type="text"/> / <input type="text"/></div> <div><input type="text"/> / <input type="text"/> / <input type="text"/></div> <div><input type="text"/> / <input type="text"/> / <input type="text"/></div> </div>		
Purpose of Expenditure Printing		Category/ Type <input type="text"/>	<div style="display: flex; justify-content: space-around;"> <div><input type="text"/> / <input type="text"/> / <input type="text"/></div> <div><input type="text"/> / <input type="text"/> / <input type="text"/></div> <div><input type="text"/> / <input type="text"/> / <input type="text"/></div> </div>		
Name of Federal Candidate: Biden, Joseph, R, , Jr			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate		
Calendar Year-To-Date Per Election for Office Sought			<div style="border: 1px solid black; padding: 2px; display: inline-block;">177874.64</div>		

  

Full Name of Payee <input type="checkbox"/> Memo Item <b>La Prensa</b>			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-around;"> <div><input type="text"/> / <input type="text"/> / <input type="text"/></div> <div><input type="text"/> / <input type="text"/> / <input type="text"/></div> <div><input type="text"/> / <input type="text"/> / <input type="text"/></div> </div>		
Mailing Address 545 N Mills Ave			Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">1200.00</div>		
City Orlando	State FL	Zip Code 32803-5346	<b>Transaction ID : VSGFEA1BMT7</b> Date of Disbursement or Obligation <div style="display: flex; justify-content: space-around;"> <div><input type="text"/> / <input type="text"/> / <input type="text"/></div> <div><input type="text"/> / <input type="text"/> / <input type="text"/></div> <div><input type="text"/> / <input type="text"/> / <input type="text"/></div> </div>		
Purpose of Expenditure Newspaper Ad		Category/ Type <input type="text"/>	<div style="display: flex; justify-content: space-around;"> <div><input type="text"/> / <input type="text"/> / <input type="text"/></div> <div><input type="text"/> / <input type="text"/> / <input type="text"/></div> <div><input type="text"/> / <input type="text"/> / <input type="text"/></div> </div>		
Name of Federal Candidate: Trump, Donald J., ,			<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate		
Calendar Year-To-Date Per Election for Office Sought			<div style="border: 1px solid black; padding: 2px; display: inline-block;">177874.64</div>		

  

<b>(a) SUBTOTAL</b> of Itemized Independent Expenditures .....	<div style="border: 1px solid black; padding: 2px; display: inline-block;">2746.15</div>
<b>(b) SUBTOTAL</b> of Unitemized Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>
<b>(c) TOTAL</b> Independent Expenditures .....	<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>

  

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Vilar, Juan Marcos, , ,

Signature

*[Electronically Filed]*

Date  /  /

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 21 OF 22  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>United for Progress PAC</b>				FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00627141	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report				New report Amends report filed on <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span>	
Full Name of Payee <b>Alianza for Progress Inc.</b> *			<input checked="" type="checkbox"/> Memo Item		Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 14 / 2020
Mailing Address 10524 Moss Park Rd Ste 204-605			Amount <span style="border: 1px solid black; padding: 2px;">3818.83</span>		Transaction ID : <b>VSGFEA1EQF9</b> Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span>
City Orlando	State FL	Zip Code 32832-5898			
Purpose of Expenditure Canvassing - Estimate		Category/ Type <span style="border: 1px solid black; padding: 2px;"> </span>			
Name of Federal Candidate: Biden, Joseph, R, , Jr			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose		Office Sought: <input type="checkbox"/> House District: 00 <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: 00
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">177874.64</span>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ▶		
Full Name of Payee <b>La Prensa</b>			<input type="checkbox"/> Memo Item		Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 01 / 2020
Mailing Address 545 N Mills Ave			Amount <span style="border: 1px solid black; padding: 2px;">54.43</span>		Transaction ID : <b>VSGFEA1BDV9</b> Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 05 / 2020
City Orlando	State FL	Zip Code 32803-5346			
Purpose of Expenditure Newspaper Ad		Category/ Type <span style="border: 1px solid black; padding: 2px;"> </span>			
Name of Federal Candidate: Curtis, Clint, , ,			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose		Office Sought: <input checked="" type="checkbox"/> House District: 06 <input type="checkbox"/> President <input type="checkbox"/> Senate State: FL
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">54.43</span>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ▶		
(a) SUBTOTAL of Itemized Independent Expenditures .....				<span style="border: 1px solid black; padding: 2px;">54.43</span>	
(b) SUBTOTAL of Unitemized Independent Expenditures.....				<span style="border: 1px solid black; padding: 2px;"> </span>	
(c) TOTAL Independent Expenditures .....				<span style="border: 1px solid black; padding: 2px;"> </span>	
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Vilar, Juan Marcos, , , Signature			[Electronically Filed]		Date <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 22 / 2020

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 22 OF 22  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>United for Progress PAC</b>				FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00627141	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report				New report Amends report filed on <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span>	
Full Name of Payee <b>Hamilton Campaign Network LLC</b>			<input type="checkbox"/> Memo Item Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 08 / 2020		
Mailing Address 5030 Broadway Ste 810			Amount <span style="border: 1px solid black; padding: 2px;">46405.00</span>		
City New York		State NY	Zip Code 10034-1666		Transaction ID : <b>VSGFEA1CNX9</b>
Purpose of Expenditure Media Buy & Media Production Costs			Category/Type <span style="border: 1px solid black; padding: 2px;"> </span>		Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 06 / 2020
Name of Federal Candidate: Biden, Joseph, R, , Jr			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose		Office Sought: <input type="checkbox"/> House District: 00 <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: 00
Calendar Year-To-Date Per Election for Office Sought			<span style="border: 1px solid black; padding: 2px;">177874.64</span>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶
Full Name of Payee			<input type="checkbox"/> Memo Item Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span>		
Mailing Address			Amount <span style="border: 1px solid black; padding: 2px;"> </span>		
City		State	Zip Code		Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span>
Purpose of Expenditure			Category/Type <span style="border: 1px solid black; padding: 2px;"> </span>		
Name of Federal Candidate:			<input type="checkbox"/> Support <input type="checkbox"/> Oppose		Office Sought: <input type="checkbox"/> House District: <input type="checkbox"/> President <input type="checkbox"/> Senate State:
Calendar Year-To-Date Per Election for Office Sought			<span style="border: 1px solid black; padding: 2px;"> </span>		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶
<div style="display: flex; justify-content: space-between;"> <div> <b>(a) SUBTOTAL</b> of Itemized Independent Expenditures .....         </div> <div style="border: 1px solid black; padding: 2px; text-align: right;">46405.00</div> </div> <div style="display: flex; justify-content: space-between; margin-top: 10px;"> <div><b>(b) SUBTOTAL</b> of Unitemized Independent Expenditures.....</div> <div style="border: 1px solid black; padding: 2px; text-align: right;"> </div> </div> <div style="display: flex; justify-content: space-between; margin-top: 10px;"> <div><b>(c) TOTAL</b> Independent Expenditures .....</div> <div style="border: 1px solid black; padding: 2px; text-align: right;">121438.40</div> </div>					
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Vilar, Juan Marcos, , , Signature			[Electronically Filed]		Date <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 22 / 2020