PAGE 1 / 22

FEC

# REPORT OF RECEIPTS AND DISBURSEMENTS

FORM 3X	For C	other Than An A	uthorized	Commit	tee		Office U	se Only	
NAME OF     COMMITTEE (in f		OR PRINT ▼		mple: If typ the lines.	oing, type	12FE	4M5		
LATINO VICTO	RY FUND			1 1 1 1		1 1 1		1 1 1	1
						1 1 1			
ADDRESS (number and	street) PO	BOX 34104							
Check if differ than previous reported. (AC	rent W	ASHINGTON				DC	2000	5	
2. <b>FEC IDENTIFICA</b>	TION NUMBE	R ▼	CITY 🛦			STATE A		ZIP COD	DE 🛦
C C00562777		3.	IS THIS REPORT	×	NEW (N) <b>OR</b>		AMENDED (A)		
4. TYPE OF REPO (Choose One)  (a) Quarterly Repo	prts:	Report Due On:	Feb 20 (M2) Mar 20 (M3) Apr 20 (M4)		May 20 (M5 Jun 20 (M6) Jul 20 (M7)		Aug 20 (M8) Sep 20 (M9) Oct 20 (M10)		Nov 20 (M11) (Non-Election Year Only) Dec 20 (M12) (Non-Election Year Only) Jan 31 (YE)
July 15 Quarterly October 1 Quarterly January 3	Report (Q3)	(c) 12-Day PRE-Election Report for the		Primary (12 Convention		=	eral (12G)	in the State of	Runoff (12R)
July 31 M	lid-Year lon-election () (MY)	(d) 30-Day POST-Election Report for the		General (30	OG)	Run	off (30R)	in the State of	Special (30S)
5. Covering Period	08	01 / 202	3	through	M M	/ D 31	20	23	
I certify that I have exa Type or Print Name of	G	port and to the best onzalez, Maria, R., ,	of my know	vledge and	belief it is t	rue, correc	t and comple	te.	
Signature of Treasurer	Gonzalez, M	faria, R., ,					M M / D		2023
NOTE: Submission of fa	lse, erroneous,	or incomplete informa	ation may sul	bject the pe	erson signing	this Report	to the penalti	es of 52	U.S.C. § 30109
Office Use								FORI Rev. 05/20	

**SUMMARY PAGE** OF RECEIPTS AND DISBURSEMENTS FEC Form 3X (Rev. 05/2016) Page 2 Write or Type Committee Name LATINO VICTORY FUND 80 2023 08 31 2023 Report Covering the Period: From: To: **COLUMN A COLUMN B** This Period Calendar Year-to-Date (a) Cash on Hand 768662.21 January 1. 2023 (b) Cash on Hand at 1039803.30 Beginning of Reporting Period..... 2292.22 574322.41 (c) Total Receipts (from Line 19) ..... (d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 1342984.62 1042095.52 6(a) and 6(c) for Column B)..... 484436.78 183547.68 7. Total Disbursements (from Line 31)...... 8. Cash on Hand at Close of Reporting Period 858547.84 858547.84 (subtract Line 7 from Line 6(d))..... Debts and Obligations Owed TO the Committee (Itemize all on 0.00 Schedule C and/or Schedule D) .....

×

 Debts and Obligations Owed BY the Committee (Itemize all on

Schedule C and/or Schedule D) .....

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

For further information, contact the Federal Election Commission at 800-424-9530 or visit www.fec.gov

0.00

### **DETAILED SUMMARY PAGE**

of Receipts

FEC Form 3X (Rev. 05/2016)

Write or Type Committee Name

### LATINO VICTORY FUND

Report Covering the Period: From: 08 01 2023 To: 08 31 2023							
I. Receipts	COLUMN B Calendar Year-to-Date						
` '							
	150.00	7050.00					
(i) Itemized (use Schedule A)	130.00	7030.00					
(ii) Unitomized	275.00	2916.00					
	4 4	4 4					
	425.00	9966.00					
(b) Political Party Committees	0.00	0.00					
(such as PACs)	0.00	2500.00					
(d) Total Contributions (add Lines							
11(a)(iii), (b), and (c)) (Carry	105.00	12466.00					
	425.00	12466.00					
	0.00	0.00					
Party Committees	0.00	0.00					
All Loans Possived	0.00	0.00					
All Loans neceived	45 45 45	45 45 45					
an Denoumente Descived	0.00	0.00					
· ·	0.00	7					
	0.00	0.00					
	45 45	4					
	0.00	1000.00					
Other Federal Receipts	45	4 4					
(Dividends, Interest, etc.)	1867.22	560856.41					
Transfers from Non-Federal and Levin Funds	4 4	4 4					
(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					
	Contributions (other than loans) From:  (a) Individuals/Persons Other    Than Political Committees    (i) Itemized (use Schedule A)	Contributions (other than loans) From:  (a) Individuals/Persons Other Than Political Committees (i) Itemized (use Schedule A)					

### **DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 4

II. Disbursements  ting Expenditures:  COLUMN A  Total This Period					
Total Tillo I Gliou	Calendar Year-to-Date				
0.00	0.00				
0.00	0.00				
0.00	0.00				
1636.87	16593.71				
1636.87	16593.71				
1000.07	10000.77				
0.00	0.00				
0.00	10000.00				
4 4					
11492.00	11492.00				
0.00	0.00				
0.00	0.00				
0.00	0.00				
0.00	5.00				
0.00	5.00				
0.00	0.00				
0.00	5000.00				
0.00	3000.00				
0.00	5005.00				
170418.81	441346.07				
01(20))					
` "					
0.00	0.00				
0.00	0.00				
0.00	0.00				
0.00	0.00				
0.00	0.00				
0.00	0.00				
183547.68	484436.78				
4 4	45 45 1 45 1 45				
183547.68	484436.78				
	0.00 1636.87 1636.87 0.00 0.00 11492.00 0.00 0.00 0.00 0.00 0.00 0.00 170418.81 01(20))				

### **DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 05/2016)	of Disbursements	Page <b>5</b>
III. Net Contributions/ Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	425.00	12466.00
34. Total Contribution Refunds (from Line 28(d))	0.00	5005.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	425.00	7461.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))▶	1636.87	16593.71
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	1636.87	16593.71

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

FOR LINE NUMBER: **PAGE** (check only one) X 11a 11b 11c

22 6 OF Use separate schedule(s) for each category of the 12 Detailed Summary Page 13 14 15 16 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 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Garrett, Christopher, , , Date of Receipt Mailing Address 1430 Clay St 2023 City Zip Code State Transaction ID: SA11AI.8950 CA 94109 San Francisco Amount of Each Receipt this Period FEC ID number of contributing C 50.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Software Engineer LinkedIn Conduit: ActBlue Receipt For: Aggregate Year-to-Date ▼ Primary General 400.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Solis Doyle, Patti, , , Date of Receipt Mailing Address 3719 Morrison Street 08 20 2023 City State Zip Code Transaction ID : SA11AI.8944 Washington DC 20015 Amount of Each Receipt this Period FEC ID number of contributing 100.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) The Brunswick Group Partner Conduit: ActBlue Receipt For: Aggregate Year-to-Date ▼ Primary General 800,00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Date of Receipt Mailing Address City State Zip Code Amount of Each Receipt this Period FEC ID number of contributing C federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify)

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

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

150.00

150.00

CHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 7 OF 22 (check only one)				
TEMIZED RECEIPTS		for each category of the Detailed Summary Page	11a 11b X 11c 12 13 14 15 16 17				
Any information copied from such Reports a per for commercial purposes, other than usin NAME OF COMMITTEE (In Full)  LATINO VICTORY FUND	nd Statements ma g the name and ad	y not be sold or used by any poddress of any political committe	person for the purpose of soliciting contributions be to solicit contributions from such committee.				
Full Name of Individual (Last, First, Midd ACTBLUE	e Initial) or Full Or	rganization Name	Date of Receipt				
Mailing Address P.O. BOX 441146			08 31 2023				
City SOMERVILLE	State MA	Zip Code 02144	Transaction ID : SA11C.8984  Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	C C00	401224	425.00				
Name of Employer (for Individual)	Occu	pation (for Individual)	× Memo Item				
Receipt For:  Primary General  Other (specify) ▼	Aggregate `	Year-to-Date ▼	Total Received From Conduit During This Repo				
Full Name of Individual (Last, First, Midd Mailing Address	Date of Receipt						
City	State	Zip Code	_				
FEC ID number of contributing federal political committee.	C		Amount of Each Receipt this Period  Memo Item				
Name of Employer (for Individual)  Receipt For:  Primary General  Other (specify) ▼		year-to-Date ▼					
Full Name of Individual (Last, First, Midd	e Initial) or Full Or	rganization Name	Date of Receipt				
Mailing Address  City	State	Zip Code	M = M / D = D / Y = Y = Y				
	State	Zip Code	Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	C						
Name of Employer (for Individual)	Occu	pation (for Individual)	Memo Item				
Receipt For: Primary General Other (specify)		Year-to-Date ▼	]				
SUBTOTAL of Receipts This Page (options	il)		0.00				
TOTAL This Period (last nage this line num	ahaw amba)		0.00				

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

## S П

SCHEDULE A (FEC Form 3)	<b>(</b> )	Use separate schedule(s)	FOR LINE NUMBER: PAGE 8 OF 22								
TEMIZED RECEIPTS	RECEIPTS for each category of the				(check only one)						
		Detailed Summary Page	11a	11b	11c12						
			13	14	15	16	<b>X</b> 17				
Any information copied from such Reports a or for commercial purposes, other than using	nd Statements mag the name and a	ay not be sold or used by any paddress of any political committee	person for the pure to solicit contr	irpose of so ibutions fror	liciting n such	contribu commit	itions itee.				
NAME OF COMMITTEE (In Full)											
/ LATINO VICTORY FUND											
Full Name of Individual (Last, First, Middle A. ACTBLUE	e Initial) or Full C	Organization Name	Date of F	Receipt							
Mailing Address P.O. BOX 441146			M M M 08	/ D D D 31	/ Y	2023	Y				
City	State	Zip Code	Transac	tion ID : SA	17.898	35					
SOMERVILLE	MA	02144	Amount o	f Each Rec	eipt thi	s Period	ı				
FEC ID number of contributing federal political committee.	C Co	0401224		7	7	1867	.22				
Name of Employer (for Individual)	Occ	upation (for Individual)		no Item							
Receipt For:	Aggragata	Voor to Dato ▼		Total Received From Conduit During This Report Period-Non-contribution Account							
Primary General	Aggregate	Year-to-Date ▼									
Other (specify) ▼		g- 1 g- 1 g- 1	_								
Full Name of Individual (Last, First, Middle Gonzalez, Erika, , ,	e Initial) or Full C	Organization Name	Date of F	Receipt							
Mailing Address 238 W King Highway			08	/ 30	/ Y	2023	Y				
City	State	Zip Code	Transac	tion ID : SA	17.905	51	_				
San Antonio	TX	78212		f Each Rec			t				
FEC ID number of contributing federal political committee.	C			7	7	700	.00				
Name of Employer (for Individual)	Occ	upation (for Individual)	Mem	no Item							
STAAMP		/sician	Conduit: A	ctblue, Non-	Contrib	ution Ac	count				
Receipt For:	Aggregate	Year-to-Date ▼	Oorlaait. A	cibiac, Non	Contino	duon Ac	Count				
Primary General	/ iggi ogalo	Total to Bato .	-								
Other (specify) ▼	L	700.00									
Full Name of Individual (Last, First, Middle Gonzalez, Erika, , ,	e Initial) or Full C	Organization Name	Date of F	Receipt							
Mailing Address 238 W King Highway			M M M 08	/ 31	/ Y	2023	Y				
City	State	Zip Code	Transac	ction ID : SA	17.90						
San Antonio	TX	78212	Amount o	f Each Rec	eipt thi	s Period	t				
FEC ID number of contributing federal political committee.	C			,	,	350	.00				
Name of Employer (for Individual) STAAMP	I	upation (for Individual) sician		no Item .ctblue, Non-	-Contrib	oution A	ccount				
Receipt For:	Aggregate	Year-to-Date ▼		,							
Primary General	11.1	<del> </del>	7								
Other (specify)		1050.00	_								
Primary General		1050.00	]	, , , , ,	5	1050					

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

SCHEDULE A (FEC Form 3X)	1		FOR LINE NUMBER: PAGE 9 OF 22
` `	•	Use separate schedule(s)	FOR LINE NUMBER: PAGE 9 OF 22 (check only one)
TEMIZED RECEIPTS		for each category of the	11a 11b 11c 12
		Detailed Summary Page	13 14 15 16 X 17
Any information copied from such Reports and or for commercial purposes, other than using t	Statements matches the name and a	Lay not be sold or used by any pe ddress of any political committee	erson for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full)			
LATINO VICTORY FUND			
Full Name of Individual (Last, First, Middle Lopez, Esteban, , ,	Initial) or Full C	rganization Name	Date of Receipt
Mailing Address 6817 West Avenue			08 30 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State	Zip Code	Transaction ID : SA17.9052
San Antonio	TX	78213	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		250.00
Name of Employer (for Individual)	Occ	upation (for Individual)	Memo Item
Google Cloud		ket Lead	Conduit: Actblue, Non-Contribution Account
Receipt For:	Aggregate	Year-to-Date ▼	Conduit. Actibide, Non-Contribution Account
Primary General	33 13		
Other (specify) ▼		250.00	
Full Name of Individual (Last, First, Middle	Initial) or Full C	rganization Name	<u> </u>
Martinez, Leopoldo, , ,			Date of Receipt
Mailing Address 1290 Balls Hill Road			08 03 7 2023
City	State	Zip Code	Transaction ID : SA17.9025
City McLean	State VA	Zip Code 22101	Transaction ID : SA17.9025  Amount of Each Receipt this Period
•			
McLean  FEC ID number of contributing federal political committee.	C	22101	Amount of Each Receipt this Period
McLean  FEC ID number of contributing	VA C		Amount of Each Receipt this Period  250.00  Memo Item
McLean  FEC ID number of contributing federal political committee.  Name of Employer (for Individual)	C Occ Med	22101 upation (for Individual)	Amount of Each Receipt this Period 250.00
McLean  FEC ID number of contributing federal political committee.  Name of Employer (for Individual)  LMN Consulting LLC  Receipt For:  Primary General	C Occ Med	upation (for Individual) dia Consultant Year-to-Date ▼	Amount of Each Receipt this Period  250.00  Memo Item
McLean  FEC ID number of contributing federal political committee.  Name of Employer (for Individual)  LMN Consulting LLC  Receipt For:	C Occ Med	22101  upation (for Individual) dia Consultant	Amount of Each Receipt this Period  250.00  Memo Item
McLean  FEC ID number of contributing federal political committee.  Name of Employer (for Individual)  LMN Consulting LLC  Receipt For:  Primary General	VA C Occ Med Aggregate	upation (for Individual) dia Consultant  Year-to-Date ▼  1000,00	Amount of Each Receipt this Period  250.00  Memo Item
McLean  FEC ID number of contributing federal political committee.  Name of Employer (for Individual)  LMN Consulting LLC  Receipt For:  Primary General  Other (specify) ▼	VA C Occ Med Aggregate	upation (for Individual) dia Consultant  Year-to-Date ▼  1000,00	Amount of Each Receipt this Period  250.00  Memo Item  Conduit: Actblue, Non-Contribution Account
McLean  FEC ID number of contributing federal political committee.  Name of Employer (for Individual)  LMN Consulting LLC  Receipt For:  Primary General Other (specify) ▼  Full Name of Individual (Last, First, Middle	VA C Occ Med Aggregate	upation (for Individual) dia Consultant  Year-to-Date ▼  1000,00	Amount of Each Receipt this Period  250.00  Memo Item  Conduit: Actblue, Non-Contribution Account  Date of Receipt
McLean  FEC ID number of contributing federal political committee.  Name of Employer (for Individual)  LMN Consulting LLC  Receipt For:  Primary General Other (specify) ▼  Full Name of Individual (Last, First, Middle)  Mailing Address	Occ Med Aggregate	upation (for Individual) dia Consultant  Year-to-Date ▼  1000.00  Irganization Name	Amount of Each Receipt this Period  250.00  Memo Item  Conduit: Actblue, Non-Contribution Account  Date of Receipt
McLean  FEC ID number of contributing federal political committee.  Name of Employer (for Individual)  LMN Consulting LLC  Receipt For:  Primary General Other (specify) ▼  Full Name of Individual (Last, First, Middle)  Mailing Address  City  FEC ID number of contributing	Occ Med Aggregate Initial) or Full C	upation (for Individual) dia Consultant  Year-to-Date ▼  1000.00  Irganization Name	Amount of Each Receipt this Period  250.00  Memo Item  Conduit: Actblue, Non-Contribution Account  Date of Receipt
McLean  FEC ID number of contributing federal political committee.  Name of Employer (for Individual)  LMN Consulting LLC  Receipt For:  Primary General Other (specify) ▼  Full Name of Individual (Last, First, Middle)  Mailing Address  City  FEC ID number of contributing federal political committee.	Occ. Med Aggregate Initial) or Full Occ. State C	upation (for Individual) dia Consultant  Year-to-Date ▼  1000.00  Irganization Name  Zip Code	Amount of Each Receipt this Period  250.00  Memo Item  Conduit: Actblue, Non-Contribution Account  Date of Receipt  M. M. / D. D. / Y. Y. Y. Y.  Amount of Each Receipt this Period
McLean  FEC ID number of contributing federal political committee.  Name of Employer (for Individual)  LMN Consulting LLC  Receipt For:  Primary General  Other (specify) ▼  Full Name of Individual (Last, First, Middle)  Mailing Address  City  FEC ID number of contributing federal political committee.  Name of Employer (for Individual)  Receipt For:  Primary General	Occ. Med Aggregate Initial) or Full Occ. State C	upation (for Individual) dia Consultant  Year-to-Date ▼  1000.00  Irganization Name	Amount of Each Receipt this Period  250.00  Memo Item  Conduit: Actblue, Non-Contribution Account  Date of Receipt  M. M. / D. D. / Y. Y. Y. Y.  Amount of Each Receipt this Period
McLean  FEC ID number of contributing federal political committee.  Name of Employer (for Individual)  LMN Consulting LLC  Receipt For:  Primary General  Other (specify) ▼  Full Name of Individual (Last, First, Middle)  Mailing Address  City  FEC ID number of contributing federal political committee.  Name of Employer (for Individual)  Receipt For:	Occ. Med Aggregate Initial) or Full Occ. State C	upation (for Individual) dia Consultant  Year-to-Date ▼  1000.00  Irganization Name  Zip Code	Amount of Each Receipt this Period  250.00  Memo Item  Conduit: Actblue, Non-Contribution Account  Date of Receipt  M. M. / D. D. / Y. Y. Y. Y.  Amount of Each Receipt this Period
McLean  FEC ID number of contributing federal political committee.  Name of Employer (for Individual)  LMN Consulting LLC  Receipt For:  Primary General  Other (specify) ▼  Full Name of Individual (Last, First, Middle)  Mailing Address  City  FEC ID number of contributing federal political committee.  Name of Employer (for Individual)  Receipt For:  Primary General	Occ. Med. Aggregate  Initial) or Full Occ. Occ. Aggregate  Aggregate	upation (for Individual) dia Consultant  Year-to-Date ▼  1000.00  Trganization Name  Zip Code  upation (for Individual)  Year-to-Date ▼	Amount of Each Receipt this Period  250.00  Memo Item  Conduit: Actblue, Non-Contribution Account  Date of Receipt  M. M. / D. D. / Y. Y. Y. Y.  Amount of Each Receipt this Period

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

1550.00

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SCHEDULE B (FEC Form 3X)	11		FOR LINE	OR LINE NUMBER: PAGE 10 OF 22			
ITEMIZED DISBURSEMENTS		rate schedule(s) category of the	(check only	' — ' —	7.os	] 00	
	Detailed S	Summary Page	X 21b 28a	22 28b	23 28c	26 27 29 30b	
Any information conicd from such Donarts and Clater							
Any information copied from such Reports and Statem or for commercial purposes, other than using the nam							
NAME OF COMMITTEE (In Full)							
LATINO VICTORY FUND							
Full Name (Last, First, Middle Initial)							
ActBlue Technical Services				Date of D	isburseme	nt	
Mailing Address 366 Summer Street				08	06	2023	
,	tate	Zip Code		FEC Ident	ification N	umber	
Somerville Purpose of Disbursement	MA	02144					
Credit Card Processing Fees				C			
Candidate Name						SB21B.8988	
Canadate Hamo			Category/ Type	Amount of	Each Dis	bursement this Period	
Office Sought: House Disbursem	nent For:		1,700	1		4.49	
Senate	Primary	General			-	45	
President State: District:	Other (spec	eify) ▼		Memo	Item		
Full Name (Last, First, Middle Initial)							
B. ActBlue Technical Services				Date of D	isburseme		
Mailing Address 366 Summer Street				08	13	2023	
Maining Address 500 Summer Street				00	10	2020	
,	state	Zip Code		FEC Ident	ification N	umber	
Somerville Purpose of Disbursement	MA	02144					
Credit Card Processing Fees				C			
Candidate Name			Catananii			SB21B.8989	
			Category/ Type	Amount o	Each Dis	bursement this Period	
Office Sought: House Disbursem	ent For:			1		2.74	
	Primary	General			, , , , , , , , , , , , , , , , , , , ,	,	
	Other (spec	eify)		Memo	Item		
State: District:				_			
Full Name (Last, First, Middle Initial)  C. AstPlus Tooksiss Convises				Date of D	isburseme	nt	
ActBlue Technical Services				M M	D D	/ Y Y Y Y Y	
Mailing Address 366 Summer Street				08	20	2023	
City	state	Zip Code		FEC Ident	ification N	umher	
	MA	02144			oadon N		
Purpose of Disbursement				C			
Credit Card Processing Fees Candidate Name			Cotogo::/			: SB21B.8990 bursement this Period	
			Category/ Type	Amount o	Lacii Dis	Dursement this Pellod	
Office Sought: House Disbursem	ent For:			1 [	45	4.99	
	Primary	General				,	
	Other (spec	eify) 🔻		Memo	Item		
State: District:							
SUPTOTAL of Dishurasments This Dags (artists)			_			12.22	
SUBTOTAL of Disbursements This Page (optional)			······		7	7	
TOTAL This Period (last page this line number only).							

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SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS	Use separate schedule(s)	FOR LINE (check only	INE NUMBER: PAGE 11 OF 22 only one)			
	for each category of the Detailed Summary Page	X 21b 28a	22 23 26 27 28b 28c 29 30b			
Any information copied from such Reports and Statem or for commercial purposes, other than using the name	nents may not be sold or use e and address of any politic	ed by any perso	on for the purpose of soliciting contributions solicit contributions from such committee.			
NAME OF COMMITTEE (In Full)						
LATINO VICTORY FUND						
Full Name (Last, First, Middle Initial)			Data of Diahusa saat			
ActBlue Technical Services			Date of Disbursement			
Mailing Address 366 Summer Street			08 27 2023			
,	State Zip Code MA 02144		FEC Identification Number			
Purpose of Disbursement	02144					
'			C			
Credit Card Processing Fees Candidate Name			Transaction ID : SB21B.8991			
Candidate Name		Category/ Type	Amount of Each Disbursement this Period			
Office Sought: House Disbursem	nent For:	.,,,,,	3.42			
	Primary General					
State: District:	Other (specify) ▼		Memo Item			
Full Name (Last, First, Middle Initial)						
B. ActBlue Technical Services			Date of Disbursement			
Mailing Address 366 Summer Street			08 31 2023			
· · · · · · · · · · · · · · · · · · ·	State Zip Code		FEC Identification Number			
Somerville Purpose of Disbursement	MA 02144		0			
Credit Card Processing Fees			C			
Candidate Name		Category/ Type	Transaction ID: SB21B.8992 Amount of Each Disbursement this Period			
Office Sought: House Disbursem			1.23			
	Primary General					
State: President O	Other (specify)		Memo Item			
Full Name (Last, First, Middle Initial)			Data of Dishusansant			
Capital One N.A.			Date of Disbursement			
Mailing Address 1200 F Street NW			08 01 2023			
	State Zip Code		FEC Identification Number			
· · · · · · · · · · · · · · · · · · ·	DC 20004					
Purpose of Disbursement Wire Transfer Fee			C			
Candidate Name		Category/	Transaction ID: SB21B.9008  Amount of Each Disbursement this Period			
Office Sought: House Disbursem	nent For:	Туре	15.00			
	Primary General		<u> </u>			
	Other (specify)					
State: District:	(-p)/ <b>V</b>		Memo Item			
			10.07			
SUBTOTAL of Disbursements This Page (optional)		············· <b>&gt;</b>	19.65			
TOTAL This Period (last page this line number only).						

	Detailed	Charles and Time D	X 21b	22 23 26 27
		Summary Page	28a	28b 28c 29 30b
ny information copied from such Reports and State for commercial purposes, other than using the na				
NAME OF COMMITTEE (In Full)		, point		
LATINO VICTORY FUND				
Full Name (Last, First, Middle Initial)				Date of Disbursement
Capital One N.A.				Mam / Dab / Yayayay
Mailing Address 1200 F Street NW				08 07 2023
City	State DC	Zip Code		FEC Identification Number
Washington Purpose of Disbursement		20004		
Wire Transfer Fee				C
Candidate Name			0-1	Transaction ID : SB21B.9010
			Category/ Type	Amount of Each Disbursement this Period
Office Sought: House Disburse	ement For:		717.7	15.00
Senate	Primary	General		
President State: District:	Other (spe	ecify) 🔻		Memo Item
Full Name (Last, First, Middle Initial)				
Capital One N.A.				Date of Disbursement
Mailing Address 1200 F Street NW				08 14 2023
	T-	T_		
City	State	Zip Code		FEC Identification Number
Washington Purpose of Disbursement	DC	20004		
Credit Card Processing Fees				C
Candidate Name			Category/ Type	Transaction ID: SB21B.9011 Amount of Each Disbursement this Period
Office Sought: House Disburse	ement For:		20.5	15.00
Senate	Primary	General		7 7 7
State: President  District:	Other (spe	ecify)		Memo Item
Full Name (Last, First, Middle Initial)				Data of Dist
Capital One N.A.				Date of Disbursement
Mailing Address 1200 F Street NW				08 21 2023
City	State	Zip Code		FEC Identification Number
Washington	DC	20004		
Purpose of Disbursement				C
Credit Card Processing Fees Candidate Name			Category/	Transaction ID : SB21B.9012 Amount of Each Disbursement this Period
Office Sought: House Disburs	ement For:		Туре	15.00
Senate Disputs	Primary	General		7 7 7
President	Other (spe			Mome there
State: District:		•		Memo Item
SUBTOTAL of Disbursements This Page (optional)  FOTAL This Period (last page this line number onl				45.00

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the Detailed Summary Page  Use separate schedule(s) (check or Detailed Summary Page				
			28a	28b 28c 29 30b	
Any information copied from such Reports and State or for commercial purposes, other than using the na					
NAME OF COMMITTEE (In Full)					
LATINO VICTORY FUND					
Full Name (Last, First, Middle Initial)				Data of Diahumana	
<sup>A.</sup> Capital One N.A.				Date of Disbursement	
Mailing Address 1200 F Street NW				08 28 2023	
City	State	Zip Code		FEC Identification Number	
Washington	DC	20004			
Purpose of Disbursement				C	
Credit Card Processing Fees Candidate Name				Transaction ID : SB21B.9013	
Candidate Natife			Category/ Type	Amount of Each Disbursement this Period	
Office Sought: House Disburse	ment For:		i ype	15.00	
Senate	Primary	General		7 7 7	
President	Other (spec			Memo Item	
State: District:					
Full Name (Last, First, Middle Initial)					
Capital One N.A.				Date of Disbursement	
Mailing Address 1200 F Street NW				08 31 2023	
City	State	Zip Code		FEC Identification Number	
Washington Purpose of Disbursement	DC	20004			
Credit Card Processing Fees				C	
Candidate Name			Category/ Type	Transaction ID: SB21B.9014 Amount of Each Disbursement this Period	
Office Sought: House Disburse	ment For:		75~	25.00	
Senate	Primary	General		4 4	
State: President State:	Other (spec	cify)		Memo Item	
Full Name (Last, First, Middle Initial)		<del>-</del>			
Paragon Solutions				Date of Disbursement	
Mailing Address 2141 E Broadway Rd Ste 202				08 02 2023	
City	State	Zip Code		FEC Identification Number	
Tempe	AZ	85282			
Purpose of Disbursement Credit Card Processing Fees				C	
Candidate Name			Category/ Type	Transaction ID: SB21B.9009  Amount of Each Disbursement this Period	
Office Sought: House Disburse	ment For:		.,,,,	20.00	
Senate	Primary	General		7 7	
President	Other (spec	cify) ▼		Memo Item	
State: District:				Memo item	
SUBTOTAL of Disbursements This Page (optional).			<b>&gt;</b>	60.00	
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TOTAL This Period (last page this line number only	/)				

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SCHEDULE B (FEC Form 3X)			FOR LINE	E NUMBER: PAGE 14 OF 22			
ITEMIZED DISBURSEMENTS		rate schedule(s) category of the	(check only				
		Summary Page	X 21b 28a	22 28b	23 28c	26 27 29 30b	
Any information copied from such Reports and Statem	l nents may n	not he sold or use					
or for commercial purposes, other than using the name							
NAME OF COMMITTEE (In Full)							
LATINO VICTORY FUND							
Full Name (Last, First, Middle Initial)				Data of	Diahuwaa		
A. The Money Wheel LLC				Date of	Disburse		
Mailing Address 1325 W Holly St				08	3	1 2023	
,	State AZ	Zip Code		FEC Ide	entification	n Number	
Phoenix Purpose of Disbursement	AZ	85007					
•				C			
Compliance & Accounting Services Candidate Name						ID : SB21B.9015	
			Category/ Type	Amount	of Each	Disbursement this Period	
Office Sought: House Disbursen	nent For:		- 7			1500.00	
	Primary	General			7	7	
State: District:	Other (spec	eify) ▼		Me	mo Item		
Full Name (Last, First, Middle Initial)							
B.				Date of	Disburse	ement	
				M = M	/ D	D / Y Y Y Y Y	
Mailing Address					l L.		
City	State	Zip Code		FEC Ide	entification	n Number	
Purpose of Disbursement							
				C			
Candidate Name			Category/	Amount	of Each	Disbursement this Period	
			Type	_			
Office Sought: House Disbursem					_		
	Primary	General					
President State: District:	Other (spec	iiy)		Me	mo Item		
Full Name (Last, First, Middle Initial)							
C.				Date of	Disburse	ement	
Mailing Address				M = M	/ D	D / Y Y Y Y	
Mailing Address							
City	State	Zip Code		FEC Ide	entification	n Number	
Purpose of Disbursement		1		С			
Candidate Name			Category/ Type	Amount	of Each	Disbursement this Period	
Office Sought: House Disbursen	nent For:		- 7				
Senate	Primary	General			7	4- 4-	
	Other (spec	sify) ▼		Me	mo Item		
State: District:				<u> </u>			
SUBTOTAL of Disbursements This Page (optional)					L-20 -	1500.00	
				_	7	1000.00	
TOTAL This Period (last page this line number only)						1636.87	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS	Use separate sche for each category Detailed Summary	of the	FOR LINE I (check only 21b	one) 22 23 26 27
		<u> </u>	28a	28b 28c X 29 30b
Any information copied from such Reports and Statem or for commercial purposes, other than using the nam	nents may not be so le and address of ar	ld or used ny political	by any perso	on for the purpose of soliciting contributions solicit contributions from such committee
NAME OF COMMITTEE (In Full)		, ,		
LATINO VICTORY FUND				
Full Name (Last, First, Middle Initial)				Data of Dishuranment
A. ActBlue Technical Services				Date of Disbursement
Mailing Address 366 Summer Street				08 06 2023
-	State Zip Coo			FEC Identification Number
	MA 02144			
Purpose of Disbursement	t			C
Credit Card Processing Fees, Non-Contribution Acc Candidate Name	count	L		Transaction ID: SB29.8993
Candidate Ivanie		'	Category/ Type	Amount of Each Disbursement this Period
Office Sought: House Disbursem	nent For:		турс	10.36
		eneral		7 7 7
President	Other (specify) ▼			Memo Item
State: District:				World Roll
Full Name (Last, First, Middle Initial)				
B. ActBlue Technical Services		Date of Disbursement		
	M M / D D / Y Y Y Y			
Mailing Address 366 Summer Street	N			08 13 2023
,	State Zip Coo MA 02144			FEC Identification Number
Purpose of Disbursement	02144			С
Credit Card Processing Fees, Non-Contribution Acc				
Candidate Name			Category/ Type	Transaction ID: SB29.8994  Amount of Each Disbursement this Period
Office Sought: House Disbursem	nent For:			0.40
	,	eneral		
President State: District:	Other (specify)			Memo Item
Full Name (Last, First, Middle Initial)				
C. ActBlue Technical Services				Date of Disbursement
Mailing Address 366 Summer Street				08 20 2023
,	State Zip Cod	de		FEC Identification Number
	MA 02144			
Purpose of Disbursement	.a.unt	I		C
Credit Card Processing Fees, Non-Contribution Accondidate Name	ount		Category/ Type	Transaction ID: SB29.8995 Amount of Each Disbursement this Period
Office Sought: House Disbursem	nent For:		1,460	1.60
		eneral		4 4
	Other (specify) ▼			Memo Item
State: District:				Metric Itelli
SUBTOTAL of Disbursements This Page (optional)			······	12.36
TOTAL This Period (last page this line number only).				

ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE (check only 21b 28a	
Any information copied from such Reports and Statem or for commercial purposes, other than using the nam  NAME OF COMMITTEE (In Full)  LATINO VICTORY FUND			
Full Name (Last, First, Middle Initial)  A. ActBlue Technical Services  Mailing Address 366 Summer Street	Date of Disbursement  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y		
Somerville Purpose of Disbursement Credit Card Processing Fees, Non-Contribution Acc Candidate Name  Office Sought: House Disbursem Senate		Category/ Type	FEC Identification Number  C  Transaction ID: SB29.8996  Amount of Each Disbursement this Period  1.79  Memo Item
Full Name (Last, First, Middle Initial)  B. ActBlue Technical Services  Mailing Address 366 Summer Street  City Somerville	Date of Disbursement  08 31 2023  FEC Identification Number		
Purpose of Disbursement Credit Card Processing Fees, Non-Contribution Acc Candidate Name  Office Sought: House Disbursem Senate		Category/ Type	Transaction ID : SB29.8997 Amount of Each Disbursement this Period  59.66  Memo Item
C. Capital One N.A.  Mailing Address 1200 F Street NW			Date of Disbursement  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Washington Purpose of Disbursement Wire Transfer Fee-Non-Contribution Account Candidate Name  Office Sought: House Disbursem		Category/ Type	FEC Identification Number  C  Transaction ID: SB29.9007  Amount of Each Disbursement this Period  25.00
	Primary ☐ General Other (specify) ▼		Memo Item
SUBTOTAL of Disbursements This Page (optional)  TOTAL This Period (last page this line number only).			86.45

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS	Use separate schedule(s	FOR LINE (check only	•
	Detailed Summary Page	28a	28b 28c X 29 30b
Any information copied from such Reports and Statem or for commercial purposes, other than using the name			
NAME OF COMMITTEE (In Full)	and address of any politi	.sa. sommittee (C	. John John Darons Holl Such Collillillet.
LATINO VICTORY FUND			
Full Name (Last, First, Middle Initial)			Date of Dishursement
<sup>A.</sup> Charter Linkz			Date of Disbursement
Mailing Address 1110 South Avenue			08 14 2023
,	State Zip Code		FEC Identification Number
Staten Island Purpose of Disbursement	NY 10314		
Transportation Services, Non-Contribution Account			C
Candidate Name			Transaction ID : SB29.9003
		Category/ Type	Amount of Each Disbursement this Period
Office Sought: House Disburser	nent For:	.,,,,,	2400.00
	Primary General		7 7 7
	Other (specify) ▼		Memo Item
State: District:			
Full Name (Last, First, Middle Initial)			Date of Disbursement
Charter Linkz			
Mailing Address 1110 South Avenue			08 25 2023
,	State Zip Code		FEC Identification Number
Claterriciana	NY 10314		
Purpose of Disbursement  Transportation Services Non-Contribution Account			C
Transportation Services, Non-Contribution Account Candidate Name	Transaction ID : SB29.9006 Amount of Each Disbursement this Period		
Office Sought: House Disbursem	nent For:	Type	2400.00
	Primary General		7 7 7
President	Other (specify)		Memo Item
State: District:			
Full Name (Last, First, Middle Initial)  C. Latino Victory Project			Date of Disbursement
Mailing Address PO Box 34104			08 / 17 / 2023
City	State Zip Code		EEC Identification Number
Washington	DC 20005		FEC Identification Number
Purpose of Disbursement			
Management Fees, Non-Contribution Account Candidate Name		Transaction ID : SB29.9019	
Санициате магне		Category/ Type	Amount of Each Disbursement this Period
Office Sought: House Disbursem	nent For:	ı ype	24896.91
	Primary General		7 7
	Other (specify) ▼		Memo Item
State: District:			Memo item
SUBTOTAL of Disbursements This Page (optional)		·····	29696.91
TOTAL This Period (last page this line number only).			1

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS	Use separate schedule(s for each category of the	(orlook orli)	one)		
	Detailed Summary Page	21b 28a	22 23 26 27 28b 28c X 29 30b		
Any information copied from such Reports and Statem or for commercial purposes, other than using the nam					
NAME OF COMMITTEE (In Full)					
LATINO VICTORY FUND					
Full Name (Last, First, Middle Initial)			Date of Disbursement		
Latino Victory Project			Mam / Dab / Yayayay		
Mailing Address PO Box 34104			08 17 2023		
,	State Zip Code DC 20005		FEC Identification Number		
Purpose of Disbursement	1		C		
Contribution, Non-Contribution Account			Transaction ID : SB29.9020		
Candidate Name		Category/	Amount of Each Disbursement this Period		
Office Sought: House Disbursem	nent For:	Type	29103.09		
Senate	Primary General				
President State: District:	Other (specify) ▼		Memo Item		
Full Name (Last, First, Middle Initial)					
B. Latino Victory Project		Date of Disbursement			
Mailing Address PO Box 34104			08 31 2023		
•	State Zip Code		FEC Identification Number		
Tracimi gran	DC 20005				
Purpose of Disbursement  Management Fees, Non-Contribution Account		C			
Candidate Name		Category/ Type	Transaction ID: SB29.9018 Amount of Each Disbursement this Period		
Office Sought: House Disbursem		, -1	100000.00		
	Primary General Other (specify)				
State: District:	Other (specify)		Memo Item		
Full Name (Last, First, Middle Initial)	_		Date of Disbursement		
Paragon Solutions			Mam / Dan / Yayayay		
Mailing Address 2141 E Broadway Rd Ste 202	_	_	08 02 2023		
City	State Zip Code		FEC Identification Number		
Tempe Purpose of Disbursement	AZ 85282		C		
	Purpose of Disbursement  Credit Card Processing Fees, Non-Contribution Account				
Candidate Name		Category/ Type	Transaction ID: SB29.8998  Amount of Each Disbursement this Period		
Office Sought: House Disbursem	nent For:	1 .75-2	20.00		
	Primary General				
State: District:	Other (specify) ▼		Memo Item		
			400400.00		
SUBTOTAL of Disbursements This Page (optional)		·····	129123.09		
TOTAL This Period (last page this line number only).					

SCHEDULE B (FEC Form 3X)	Use separate schedule(s	FOR LINE (check only	•
ITEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	21b 28a	22 23 26 27 28b 28c X 29 30b
Any information copied from such Reports and Statem or for commercial purposes, other than using the nam			
NAME OF COMMITTEE (In Full)			
LATINO VICTORY FUND			
Full Name (Last, First, Middle Initial)			Date of Dishuragment
State of Nevada Secretary of State			Date of Disbursement
Mailing Address 101 N. Carson Street Suite 3			08 15 2023
,	State Zip Code NV 89701		FEC Identification Number
Purpose of Disbursement	00701		C
Payment for Late Filing fee-Non-Contribution Accou	ınt		
Candidate Name		Category/	Transaction ID : SB29.9005  Amount of Each Disbursement this Period
		Type	
Office Sought: House Disburser			10000.00
	Primary General		
	Other (specify) ▼		Memo Item
Full Name (Last, First, Middle Initial)			Date of Disbursement
The Money Wheel LLC			
Mailing Address 1325 W Holly St			08 31 2023
,	State Zip Code		FEC Identification Number
	AZ 85007		
Purpose of Disbursement			C
Compliance & Accounting Services-Non-Contribution  Candidate Name	Transaction ID : SB29.9001		
Sandidate Name		Category/ Type	Amount of Each Disbursement this Period
Office Sought: House Disbursem	nent For	Туре	1500.00
	Primary General		7 7 7
	Mama Harr		
State: District:	Other (specify)		Memo Item
Full Name (Last, First, Middle Initial)			
<b>.</b>			Date of Disbursement
Marillon, Address			M - M / D - D / Y - Y - Y
Mailing Address			
City	State Zip Code		FEC Identification Number
Purpose of Disbursement			С
•			O
Candidate Name		Category/ Type	Amount of Each Disbursement this Period
Office Sought: House Disburserr	nent For:	31.	
Senate	Primary General		7 7
	Other (specify) ▼		Memo Item
State: District:			
			11500.00
SUBTOTAL of Disbursements This Page (optional)		······	11500.00
TOTAL This Period (last page this line number only).			170418.81
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## SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

TEMIZED INDEPENDENT EXPENDITORES				PAGE 20 OF 22 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)				FEC IDENTIFICATION NUMBER ▼
LATINO VICTORY FUND				C C00562777
Check if 24-hour report 48-hour report	New repo	ort Amends repo	ort filed on	M M / D D / Y Y Y Y
Full Name of Payee		☐ Memo	Item Date	e of Public Distribution/Dissemination
Anthony Rojas				M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 736 W 181st				
Apt 2C			Amo	ount
City	State	Zip Code		300.00
New York	NY	10033		nsaction ID : SE.8848 e of Disbursement or Obligation
Purpose of Expenditure		Category/		M = M / D = D / Y = Y = Y
Mailer Design Fee		Type	_	08 23 2023
Name of Federal Candidate:		X Support	Office Sou	ght: X House District: 01
MATOS, SABINA, , ,		Oppose	Pres	ident Senate State: RI
Calendar Year-To-Date Per Election for Office Sought	, , ,	1275.00	Disbursement 2023	ent For: ☐ Primary ☐ General  Other (specify) ▶ Special-Primary
Full Name of Payee		☐ Memo	Item Date	e of Public Distribution/Dissemination
Lino Press NY				08 / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 4482 Broadway				
,			Amo	punt
City	State	Zip Code		975.00
New York	NY	10040	II.	nsaction ID : SE.8835 e of Disbursement or Obligation
Purpose of Expenditure		Category/		08 17 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Printing		Type		00 17 2020
Name of Federal Candidate:		X Support	Office Sou	ght: House District: 01
MATOS, SABINA, , ,		Oppose	Pres	ident Senate State: RI
Calendar Year-To-Date		975.00	Disbursem	_ , _
Per Election for Office Sought	7 - 1 - 1 - 7 -	373.00	2023	Other (specify)  Special-Primary
(a) SUBTOTAL of Itemized Independent Expenditures			. [	1275.00
(b) SUBTOTAL of Unitemized Independent Expenditure	es		. •	
(c) TOTAL Independent Expenditures			• [	
Under penalty of perjury I certify that the independent with, or at the request or suggestion of, any candidate party committee) any political party committee or its	te or authorized			
Gonzalez, Maria, R., ,		_	M M	/ D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Signature		_ Date	9 09	20 2023

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

TEMIZED INDEPENDENT EXPENDITURES				PAGE 21 OF 22 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)				
LATINO VICTORY FUND				FEC IDENTIFICATION NUMBER ▼
EATING VIGTORY FORD				C C00562777
Check if 24-hour report 48-hour report	New repo	ort Amends repo	ort filed on	/ = M / D = D / Y = Y = Y = Y
Full Name of Payee		☐ Memo	Item Date	of Public Distribution/Dissemination
Lino Press NY			1	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 4482 Broadway			Amou	unt
City	State	Zip Code	$ \Gamma$	8987.00
New York	NY	10040		saction ID : SE.8851 of Disbursement or Obligation
Purpose of Expenditure	ı	Category/		M M / D D / Y Y Y Y
Direct Mail		Type	_     L	08 25 2023
Name of Federal Candidate:		Support	Office Soug	ht: House District: 01
MATOS, SABINA, , ,		Oppose	Presid	dent Senate State: RI
Calendar Year-To-Date Per Election for Office Sought	<b>7</b>     <b>7</b>	10262.00	Disburseme	nt For: ☐ Primary ☐ General  Other (specify) ▶ Special-Primary
Full Name of Payee		Memo	Item Date	of Public Distribution/Dissemination
Lino Press NY			Г	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 4482 Broadway				00 20 2020
4402 Bloadway			Amo	unt
City	State	Zip Code	$ \Gamma$	700.00
New York	NY	10040		saction ID : SE.8853 of Disbursement or Obligation
Purpose of Expenditure		Category/		M M / D D / Y Y Y
Signs		Type	_	08 25 2023
Name of Federal Candidate:		X Support	Office Soug	ht: X House District: 01
MATOS, SABINA, , ,		Oppose	Presid	□ PI
Calendar Year-To-Date		10962.00	Disburseme	nt For: Primary General
Per Election for Office Sought	7 7	10902.00	2023	Other (specify)  Special-Primary
(a) SUBTOTAL of Itemized Independent Expenditures			· -	9687.00
(b) SUBTOTAL of Unitemized Independent Expenditure	res		<b>•</b>	
(c) TOTAL Independent Expenditures				
			, F	7
Under penalty of perjury I certify that the independe with, or at the request or suggestion of, any candida party committee) any political party committee or its	ate or authorized			
Gonzalez, Maria, R., ,			M = M /	D D / Y Y Y Y Y
Signature		_ Date	9 09	20 2023

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

			FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)			FEC IDENTIFICATION NUMBER ▼
LATINO VICTORY FUND			
EMINO VIOTORET FORD			C C00562777
Check if 24-hour report 48-hour report	New re	eport Amends repo	ort filed on
Full Name of Payee		Memo	Item Date of Public Distribution/Dissemination
Lino Press NY			08 26 / Y Y Y Y Y Y
Mailing Address 4482 Broadway			00 20 2023
,			Amount
City	State	Zip Code	530.00
New York	NY	10040	Transaction ID : SE.8855 Date of Disbursement or Obligation
Purpose of Expenditure		Category/	Date of Disbursement of Obligation
T-Shirts		Type	08 25 2023
Name of Federal Candidate:		Support	Office Sought:  House District: 01
MATOS, SABINA, , ,		Oppose	President Senate State: RI
Calendar Year-To-Date		11492.00	Disbursement For: Primary General
Per Election for Office Sought	7 7	11492.00	2023
Full Name of Payee		☐ Memo	Item Date of Public Distribution/Dissemination
			M M / D D / Y Y Y Y
Mailing Address			
			Amount
City	State	Zip Code	
			Date of Disbursement or Obligation
Purpose of Expenditure		Category/	M M / D D / Y Y Y Y
		Type	
Name of Federal Candidate:		Support	Office Sought: House District:
		Oppose	President Senate State:
Calendar Year-To-Date			Disbursement For: Primary General
Per Election for Office Sought	7 7		Other (specify) ►
(a) SUBTOTAL of Itemized Independent Expenditure	s		. ▶ 530.00
(b) SUBTOTAL of Unitemized Independent Expendit	ures		<b>•</b>
(a) TOTAL Independent Figure additions			
(c) TOTAL Independent Expenditures			11492.00
Under penalty of perjury I certify that the independ	lant avnanditura	as raparted barain wara	not made in concertion, concultation, or concert
with, or at the request or suggestion of, any candic party committee) any political party committee or its	date or authorize		
Gonzalez, Maria, R., ,			M M / D D / Y Y Y Y
Signature		Date	e 09 20 2023
-			