

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT Example: If typing, type over the lines. 12FE4M5
LATINO VICTORY FUND

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

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

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

5. Covering Period 09/01/2021 through 09/30/2021

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

Signature of Treasurer Gonzalez, Maria, R., , [Electronically Filed] Date 10/19/2021

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

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 05/2016)

Write or Type Committee Name

LATINO VICTORY FUND

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

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2021"/>	<input type="text" value="807883.91"/>	<input type="text" value="807883.91"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="750395.78"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="62069.57"/>	<input type="text" value="334879.06"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<input type="text" value="812465.35"/>	<input type="text" value="1142762.97"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="11809.99"/>	<input type="text" value="342107.61"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="800655.36"/>	<input type="text" value="800655.36"/>
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	

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

For further information contact:

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

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

DETAILED SUMMARY PAGE
of Receipts

Write or Type Committee Name

LATINO VICTORY FUND

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

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	400.00	3200.00
(ii) Unitemized	419.57	4988.13
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	819.57	8188.13
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	5000.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	819.57	13188.13
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	9896.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	61250.00	311794.93
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)).....▶	62069.57	334879.06
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	62069.57	334879.06

DETAILED SUMMARY PAGE
of Disbursements

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures	55.11	2555.02
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	55.11	2555.02
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	6500.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Party Expenditures (52 U.S.C. § 30116(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	30.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	5000.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	5030.00
29. Other Disbursements (Including Non-Federal Donations).....	11754.88	328022.59
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)) ..	11809.99	342107.61
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	11809.99	342107.61

DETAILED SUMMARY PAGE
of Disbursements

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Page 5

III. Net Contributions/ Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	819.57	13188.13
34. Total Contribution Refunds (from Line 28(d))	0.00	5030.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	819.57	8158.13
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	55.11	2555.02
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	9896.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	55.11	- 7340.98

**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 17
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

NAME OF COMMITTEE (In Full)
LATINO VICTORY FUND

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. Carney, Lela, , ,

Mailing Address 143 Tree Frog Ln.

City Santa Cruz State CA Zip Code 95060

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

Name of Employer (for Individual) Self-employed Occupation (for Individual) Acupuncturist

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **225.00**

Date of Receipt **09 / 19 / 2021**

Transaction ID : SA11AI.5034

Amount of Each Receipt this Period **25.00**

Memo Item
Conduit: ActBlue

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

Mailing Address 1604 Shell Ave.

City Midland State TX Zip Code 79705

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

Name of Employer (for Individual) Senovia Foods LLC. Occupation (for Individual) Self-employed

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **1400.00**

Date of Receipt **09 / 05 / 2021**

Transaction ID : SA11AI.5020

Amount of Each Receipt this Period **200.00**

Memo Item
Conduit: ActBlue

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

Mailing Address 61380 Pinehurst Dr

City Washington State MI Zip Code 48094

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

Name of Employer (for Individual) Not Employed Occupation (for Individual) Not Employed

Receipt For: Primary General Other (specify)

Aggregate Year-to-Date ▼ **450.00**

Date of Receipt **09 / 12 / 2021**

Transaction ID : SA11AI.5033

Amount of Each Receipt this Period **50.00**

Memo Item
Conduit: ActBlue

SUBTOTAL of Receipts This Page (optional)..... **275.00**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 17
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
LATINO VICTORY FUND

A. Olivo, Cristobal, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 574 West 192 street
 City New York State NY Zip Code 10040
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Twins Pharmacy Occupation (for Individual) Pharmacy
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 09 / 05 / 2021
Transaction ID : SA11AI.5021
 Amount of Each Receipt this Period 25.00
 Memo Item
 Conduit: ActBlue

B. Solis Doyle, Patti, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3719 Morrison Street
 City Washington State DC Zip Code 20015
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) The Brunswick Group Occupation (for Individual) Partner
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 900.00

Date of Receipt 09 / 19 / 2021
Transaction ID : SA11AI.5044
 Amount of Each Receipt this Period 100.00
 Memo Item
 Conduit: ActBlue

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

Date of Receipt
 Amount of Each Receipt this Period
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	125.00
TOTAL This Period (last page this line number only).....	400.00

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

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

FOR LINE NUMBER: PAGE 8 OF 17
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
LATINO VICTORY FUND

A. ACTBLUE
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P.O. BOX 441146
 City SOMERVILLE State MA Zip Code 02144
 FEC ID number of contributing federal political committee. **C** C00401224
 Name of Employer (for Individual) Occupation (for Individual)
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 30 / 2021
Transaction ID : SA11C.5093
 Amount of Each Receipt this Period
 809.57
 Memo Item
 Total Received Through Conduit This Reporting Period, Federal Account

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

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 Amount of Each Receipt this Period
 Memo Item

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

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 Amount of Each Receipt this Period
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	0.00

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 9 OF 17
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
LATINO VICTORY FUND

A. ACTBLUE

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

Mailing Address P.O. BOX 441146

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		30		2021

Transaction ID : SA17.5094

Amount of Each Receipt this Period

36250.00

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

B.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
AMERICAN FEDERATION OF TEACHERS, AFL-CIO COMMITTEE ON POLITICAL EDUCATION

Mailing Address 555 NEW JERSEY AVENUE, NW

City WASHINGTON	State DC	Zip Code 20001
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FEC ID number of contributing federal political committee. **C** C00028860

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
09		10		2021

Transaction ID : SA17.5095

Amount of Each Receipt this Period

25000.00

Memo Item
 Non-contribution Account

C. Gonzalez, Erika, , ,

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

Mailing Address 238 W King Highway

City San Antonio	State TX	Zip Code 78212
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FEC ID number of contributing federal political committee. **C**

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

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
09		05		2021

Transaction ID : SA17.5090

Amount of Each Receipt this Period

30000.00

Memo Item
 Conduit: ActBlue, Non-contribution Account

SUBTOTAL of Receipts This Page (optional).....▶	55000.00
TOTAL This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 10 OF 17
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
LATINO VICTORY FUND

A. Martinez, Leopoldo, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1290 Balls Hill Road
 City McLean State VA Zip Code 22101
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) LMN Consulting LLC Occupation (for Individual) Consultant
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 4250.00

Date of Receipt 09 / 30 / 2021
Transaction ID : SA17.5092
 Amount of Each Receipt this Period 250.00
 Memo Item
 Conduit: ActBlue, Non-contribution Account

B. Roman, Eneida, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 41 Cedar Street
 City Wellesley State MA Zip Code 02481
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Roman Law Offices Occupation (for Individual) Attorney at Law
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 9000.00

Date of Receipt 09 / 19 / 2021
Transaction ID : SA17.5091
 Amount of Each Receipt this Period 6000.00
 Memo Item
 Conduit: ActBlue, Non-contribution Account

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

Date of Receipt
 Amount of Each Receipt this Period
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	6250.00
TOTAL This Period (last page this line number only).....	61250.00

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
LATINO VICTORY FUND

Full Name (Last, First, Middle Initial) A. ActBlue Technical Services		Date of Disbursement MM / DD / YYYY 09 / 05 / 2021	
Mailing Address 366 Summer Street		FEC Identification Number C [] Transaction ID : SB21B.5097 Amount of Each Disbursement this Period [] 11.48	
City Somerville	State MA	Zip Code 02144	Category/ Type []
Purpose of Disbursement Credit Card Processing Fees		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
Candidate Name			Amount of Each Disbursement this Period [] 11.48
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:	<input type="checkbox"/> Memo Item	
Full Name (Last, First, Middle Initial) B. ActBlue Technical Services		Date of Disbursement MM / DD / YYYY 09 / 12 / 2021	
Mailing Address 366 Summer Street		FEC Identification Number C [] Transaction ID : SB21B.5098 Amount of Each Disbursement this Period [] 3.25	
City Somerville	State MA	Zip Code 02144	Category/ Type []
Purpose of Disbursement Credit Card Processing Fees		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
Candidate Name			Amount of Each Disbursement this Period [] 3.25
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		<input type="checkbox"/> Memo Item	
State: District:			
Full Name (Last, First, Middle Initial) C. ActBlue Technical Services		Date of Disbursement MM / DD / YYYY 09 / 19 / 2021	
Mailing Address 366 Summer Street		FEC Identification Number C [] Transaction ID : SB21B.5099 Amount of Each Disbursement this Period [] 10.00	
City Somerville	State MA	Zip Code 02144	Category/ Type []
Purpose of Disbursement Credit Card Processing Fees		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
Candidate Name			Amount of Each Disbursement this Period [] 10.00
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		<input type="checkbox"/> Memo Item	
State: District:			
SUBTOTAL of Disbursements This Page (optional)..... ▶		[] 24.73	
TOTAL This Period (last page this line number only)..... ▶		[]	

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
LATINO VICTORY FUND

Full Name (Last, First, Middle Initial) A. ActBlue Technical Services		Date of Disbursement MM / DD / YYYY 09 / 26 / 2021
Mailing Address 366 Summer Street		FEC Identification Number C [] Transaction ID : SB21B.5100 Amount of Each Disbursement this Period [] 4.85
City Somerville	State MA	Zip Code 02144
Purpose of Disbursement Credit Card Processing Fees		Category/ Type []
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) B. ActBlue Technical Services		Date of Disbursement MM / DD / YYYY 09 / 30 / 2021
Mailing Address 366 Summer Street		FEC Identification Number C [] Transaction ID : SB21B.5101 Amount of Each Disbursement this Period [] 2.58
City Somerville	State MA	Zip Code 02144
Purpose of Disbursement Credit Card Processing Fees		Category/ Type []
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) C. Paya Inc.		Date of Disbursement MM / DD / YYYY 09 / 02 / 2021
Mailing Address 12120 Sunset Hills Road #500		FEC Identification Number C [] Transaction ID : SB21B.5119 Amount of Each Disbursement this Period [] 22.95
City Reston	State VA	Zip Code 20190
Purpose of Disbursement Credit Card Processing Fees		Category/ Type []
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

SUBTOTAL of Disbursements This Page (optional).....▶	[] 30.38
TOTAL This Period (last page this line number only).....▶	[] 55.11

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
LATINO VICTORY FUND

Full Name (Last, First, Middle Initial) A. ActBlue Technical Services		Date of Disbursement MM / DD / YYYY 09 / 05 / 2021
Mailing Address 366 Summer Street		FEC Identification Number C Transaction ID : SB29.5102 Amount of Each Disbursement this Period 1185.00
City Somerville	State MA	
Zip Code 02144		Memo Item <input type="checkbox"/>
Purpose of Disbursement Credit Card Processing Fees; Non-contribution Account		
Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. ActBlue Technical Services		Date of Disbursement MM / DD / YYYY 09 / 19 / 2021
Mailing Address 366 Summer Street		FEC Identification Number C Transaction ID : SB29.5103 Amount of Each Disbursement this Period 237.00
City Somerville	State MA	
Zip Code 02144		Memo Item <input type="checkbox"/>
Purpose of Disbursement Credit Card Processing Fees; Non-contribution Account		
Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C. ActBlue Technical Services		Date of Disbursement MM / DD / YYYY 09 / 30 / 2021
Mailing Address 366 Summer Street		FEC Identification Number C Transaction ID : SB29.5104 Amount of Each Disbursement this Period 9.88
City Somerville	State MA	
Zip Code 02144		Memo Item <input type="checkbox"/>
Purpose of Disbursement Credit Card Processing Fees; Non-contribution Account		
Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....▶	1431.88
TOTAL This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
LATINO VICTORY FUND

A. Amalgamated Bank

Full Name (Last, First, Middle Initial)

Mailing Address 1825 K Street NW

City Washington State DC Zip Code 20006

Purpose of Disbursement
Bank Fees, Non-contribution Account

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 09 / 28 / 2021

FEC Identification Number: C

Transaction ID : SB29.5118

Amount of Each Disbursement this Period: 20.00

Memo Item

B. Carmen de la Rosa for NYC

Full Name (Last, First, Middle Initial)

Mailing Address 210 Sherman Avenue Suite B

City New York State NY Zip Code 10034

Purpose of Disbursement
Contribution, Non-contribution Account

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 09 / 09 / 2021

FEC Identification Number: C

Transaction ID : SB29.5113

Amount of Each Disbursement this Period: 1000.00

Memo Item

C. Friends of Amanda Farias

Full Name (Last, First, Middle Initial)

Mailing Address 778 Castle Hill Avenue

City Bronx State NY Zip Code 10473

Purpose of Disbursement
Contribution, Non-contribution Account

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 09 / 09 / 2021

FEC Identification Number: C

Transaction ID : SB29.5109

Amount of Each Disbursement this Period: 1000.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 2020.00

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
LATINO VICTORY FUND

A. Friends of Shaun Abreu

Full Name (Last, First, Middle Initial)

Mailing Address 78 Manhattan Avenue Apt. 2C

City New York State NY Zip Code 10025

Purpose of Disbursement Contribution, Non-contribution Account

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement 09 / 09 / 2021

FEC Identification Number C

Transaction ID : SB29.5111

Amount of Each Disbursement this Period 1000.00

Memo Item

B. Jennifer Gutierrez 2021

Full Name (Last, First, Middle Initial)

Mailing Address 335 Melrose Street 2L

City Brooklyn State NY Zip Code 11237

Purpose of Disbursement Contribution, Non-contribution Account

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement 09 / 09 / 2021

FEC Identification Number C

Transaction ID : SB29.5105

Amount of Each Disbursement this Period 1000.00

Memo Item

C. Paya Inc.

Full Name (Last, First, Middle Initial)

Mailing Address 12120 Sunset Hills Road #500

City Reston State VA Zip Code 20190

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

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement 09 / 02 / 2021

FEC Identification Number C

Transaction ID : SB29.5116

Amount of Each Disbursement this Period 22.50

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 2022.50

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
LATINO VICTORY FUND

A. Paya Inc.

Full Name (Last, First, Middle Initial)

Mailing Address 12120 Sunset Hills Road #500

City Reston State VA Zip Code 20190

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

Candidate Name

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

State: District:

Date of Disbursement: 09 / 02 / 2021

FEC Identification Number: C

Transaction ID : **SB29.5117**

Amount of Each Disbursement this Period: 22.50

Memo Item

B. Pierina Sanchez for Council

Full Name (Last, First, Middle Initial)

Mailing Address 2420 Morns Avenue Apt. 3A

City Bronx State NY Zip Code 10468

Purpose of Disbursement
Contribution, Non-contribution Account

Candidate Name

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

State: District:

Date of Disbursement: 09 / 09 / 2021

FEC Identification Number: C

Transaction ID : **SB29.5107**

Amount of Each Disbursement this Period: 1000.00

Memo Item

C. Rayes, Nathalie, , ,

Full Name (Last, First, Middle Initial)

Mailing Address PO Box 34104

City Washington State DC Zip Code 20005

Purpose of Disbursement
Tickets for Committee Event, Non-contribution Account

Candidate Name

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

State: District:

Date of Disbursement: 09 / 14 / 2021

FEC Identification Number: C

Transaction ID : **SB29.5120**

Amount of Each Disbursement this Period: 5258.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 6280.50

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

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
LATINO VICTORY FUND

A. Broadway Direct

Full Name (Last, First, Middle Initial)

Mailing Address 1501 Broadway 14th Floor

City New York State NY Zip Code 10036

Purpose of Disbursement Tickets for Committee Event, Non-contribution Account

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: MM / DD / YYYY
09 / 14 / 2021

FEC Identification Number: C

Transaction ID : SB29.5120.0

Amount of Each Disbursement this Period: 5258.00

Memo Item

B.

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: MM / DD / YYYY

FEC Identification Number: C

Amount of Each Disbursement this Period

Memo Item

C.

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: MM / DD / YYYY

FEC Identification Number: C

Amount of Each Disbursement this Period

Memo Item

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

TOTAL This Period (last page this line number only)..... ▶ 11754.88