

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines. 12FE4M5
PODER PAC

ADDRESS (number and street) 3520 Maple Court
Check if different than previously reported. (ACC) Falls Church VA 22041

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

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

5. Covering Period 01 / 01 / 2015 through 06 / 30 / 2015

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

Type or Print Name of Treasurer Catherine Pino

Signature of Treasurer Catherine Pino [Electronically Filed] Date 07 / 24 / 2015

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name

PODER PAC

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

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2015"/>		8046.96
(b) Cash on Hand at Beginning of Reporting Period.....	8046.96	
(c) Total Receipts (from Line 19)	13205.00	13205.00
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	21251.96	21251.96
7. Total Disbursements (from Line 31).....	17037.59	17037.59
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	4214.37	4214.37
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	

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

For further information contact:

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

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

DETAILED SUMMARY PAGE of Receipts

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name

PODER PAC

Report Covering the Period: From: M M / D D / Y Y Y Y Y 01 / 01 / 2015 To: M M / D D / Y Y Y Y Y 06 / 30 / 2015

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).....	9250.00	9250.00
(ii) Unitemized	955.00	955.00
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	10205.00	10205.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	3000.00	3000.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	13205.00	13205.00
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	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))..... ▶	13205.00	13205.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	13205.00	13205.00

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

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	7037.59	7037.59
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	7037.59	7037.59
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	10000.00	10000.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Party Expenditures (2 U.S.C. §441a(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	0.00	0.00
30. Federal Election Activity (2 U.S.C. §431(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)) ..	17037.59	17037.59
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	17037.59	17037.59

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

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)	13205.00	13205.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	13205.00	13205.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) ▶	7037.59	7037.59
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)▶	7037.59	7037.59

**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 16
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

NAME OF COMMITTEE (In Full)
PODER PAC

A. Lisa Gina Baltazar
Full Name (Last, First, Middle Initial)

Mailing Address 201 E 25th St
Apt 9D

City New York State NY Zip Code 10010-3006

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

Name of Employer Zurich North America Occupation Attorney

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
06 / 24 / 2015

Transaction ID : C10261616

Amount of Each Receipt this Period
1000.00

B. Ingrid Duran
Full Name (Last, First, Middle Initial)

Mailing Address 3520 Maple Ct

City Falls Church State VA Zip Code 22041-2016

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

Name of Employer D&P Creative Strategies, LLC Occupation Business Owner

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
04 / 23 / 2015

Transaction ID : C10229563

Amount of Each Receipt this Period
1000.00

C. Larry Gonzalez
Full Name (Last, First, Middle Initial)

Mailing Address 1714 3rd Street NE Apt. A

City Washington State DC Zip Code 20002

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

Name of Employer The Raben Group Occupation Lobbyist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
05 / 08 / 2015

Transaction ID : C10236412

Amount of Each Receipt this Period
250.00

SUBTOTAL of Receipts This Page (optional).....▶	2250.00
TOTAL This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 7 OF 16
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
PODER PAC

A. Carmen Guzman Lowrey
 Full Name (Last, First, Middle Initial)
 Mailing Address 1443 Woodacre Dr
 City State Zip Code
 McLean VA 22101-2534
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Self Political Consultant
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 08 / 2015
Transaction ID : C10236409
 Amount of Each Receipt this Period
 250.00

B. Ikeita Cantu Hinojosa
 Full Name (Last, First, Middle Initial)
 Mailing Address 1443 Woodacre Drive
 City State Zip Code
 Mc Lean VA 22101
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Self Consultant
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 08 / 2015
Transaction ID : C10236374
 Amount of Each Receipt this Period
 250.00

C. Cynthia Jasso-Rotunno
 Full Name (Last, First, Middle Initial)
 Mailing Address 531 8th St NE
 City State Zip Code
 Washington DC 20002-5235
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Agency for International Development Public Engagement & Partnerships
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 08 / 2015
Transaction ID : C10236371
 Amount of Each Receipt this Period
 250.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 750.00
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 8 OF 16
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
PODER PAC

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

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 06 / 2015
Transaction ID : C10234693
 Amount of Each Receipt this Period
 5000.00

B. Betty Paugh
 Full Name (Last, First, Middle Initial)
 Mailing Address 1010 Massachusetts Ave NW
 Unit 1010
 City Washington State DC Zip Code 20001-5415
 FEC ID number of contributing federal political committee. **C**
 Name of Employer BPO Consulting Occupation Founder
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 02 / 2015
Transaction ID : C10233713
 Amount of Each Receipt this Period
 250.00

C. Susan Santana
 Full Name (Last, First, Middle Initial)
 Mailing Address 6543 Chesterfield Ave
 City Mc Lean State VA Zip Code 22101-5231
 FEC ID number of contributing federal political committee. **C**
 Name of Employer ATT Occupation lawyer
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 08 / 2015
Transaction ID : C10236376
 Amount of Each Receipt this Period
 250.00

SUBTOTAL of Receipts This Page (optional).....▶	5500.00
TOTAL This Period (last page this line number only).....▶	

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

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

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NAME OF COMMITTEE (In Full)
PODER PAC

Full Name (Last, First, Middle Initial)
A. Joe Velasquez

Mailing Address 1617 Inlet Ct

City Reston State VA Zip Code 20190-4429

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

Name of Employer self Occupation consultant

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 23 / 2015
Transaction ID : C10229567

Amount of Each Receipt this Period
500.00

Full Name (Last, First, Middle Initial)
B. Andrea Zuniga

Mailing Address 2225 N Street NW Apt. 226

City Washington State DC Zip Code 20036

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

Name of Employer AFL-CIO Occupation Immigration and Civil Rights Lobbyist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 08 / 2015
Transaction ID : C10236416

Amount of Each Receipt this Period
250.00

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

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

SUBTOTAL of Receipts This Page (optional).....▶	750.00
TOTAL This Period (last page this line number only).....▶	9250.00

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

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NAME OF COMMITTEE (In Full)
PODER PAC

Full Name (Last, First, Middle Initial)
A. BRYAN CAVE LLP POLITICAL ACTION COMMITTEE

Mailing Address 1155 F Street NW Ste. 500

City Washington State DC Zip Code 20004-1357

FEC ID number of contributing federal political committee. **C** C00332643

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 08 / 2015
Transaction ID : C10236377

Amount of Each Receipt this Period
1000.00

Full Name (Last, First, Middle Initial)
B. Leadership of Today and Tomorrow

Mailing Address 700 13th Street NW Suite 600

City Washington State DC Zip Code 20005

FEC ID number of contributing federal political committee. **C** C00299149

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 01 / 23 / 2015
Transaction ID : C10172390

Amount of Each Receipt this Period
2000.00

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

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

SUBTOTAL of Receipts This Page (optional).....▶	3000.00
TOTAL This Period (last page this line number only).....▶	3000.00

**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"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
PODER PAC

Full Name (Last, First, Middle Initial)

A. Bernadette Cala

Mailing Address 1201 Janneys Lane

City Alexandria State VA Zip Code 22302

Purpose of Disbursement consulting - compliance

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
05 / 01 / 2015

Transaction ID : D573298

Amount of Each Disbursement this Period

100.00

Full Name (Last, First, Middle Initial)

B. Building Fund 423

Mailing Address 423 B New Jersey Avenue SE

City Washington State DC Zip Code 20003

Purpose of Disbursement meeting expense - room rental

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
04 / 23 / 2015

Transaction ID : D573299

Amount of Each Disbursement this Period

500.00

Full Name (Last, First, Middle Initial)

C. NGP Van, Inc.

Mailing Address 1101 15th Street, NW Suite 500

City Washington State DC Zip Code 20005

Purpose of Disbursement campaign software

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
02 / 12 / 2015

Transaction ID : D570730

Amount of Each Disbursement this Period

1200.00

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

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

1800.00

**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"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
PODER PAC

Full Name (Last, First, Middle Initial)

A. PNC Merchant Services

Mailing Address One PNC Plaza

City Pittsburgh State PA Zip Code 15265

Purpose of Disbursement
credit card fee

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
01 / 31 / 2015

Transaction ID : D577265

Amount of Each Disbursement this Period

30.00

Full Name (Last, First, Middle Initial)

B. PNC Merchant Services

Mailing Address One PNC Plaza

City Pittsburgh State PA Zip Code 15265

Purpose of Disbursement
credit card fee

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
02 / 28 / 2015

Transaction ID : D577266

Amount of Each Disbursement this Period

39.95

Full Name (Last, First, Middle Initial)

C. PNC Merchant Services

Mailing Address One PNC Plaza

City Pittsburgh State PA Zip Code 15265

Purpose of Disbursement
credit card fee

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
03 / 30 / 2015

Transaction ID : D577267

Amount of Each Disbursement this Period

39.95

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

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

109.90

**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"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
PODER PAC

Full Name (Last, First, Middle Initial) A. PNC Merchant Services		Date of Disbursement MM / DD / YYYY 04 / 30 / 2015
Mailing Address One PNC Plaza		Transaction ID : D577268
City Pittsburgh	State PA	
Purpose of Disbursement credit card fee	Candidate Name	Amount of Each Disbursement this Period 65.46
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:	Category/Type	

Full Name (Last, First, Middle Initial) B. PNC Merchant Services		Date of Disbursement MM / DD / YYYY 05 / 31 / 2015
Mailing Address One PNC Plaza		Transaction ID : D577269
City Pittsburgh	State PA	
Purpose of Disbursement credit card fee	Candidate Name	Amount of Each Disbursement this Period 166.61
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:	Category/Type	

Full Name (Last, First, Middle Initial) C. PNC Merchant Services		Date of Disbursement MM / DD / YYYY 06 / 30 / 2015
Mailing Address One PNC Plaza		Transaction ID : D577270
City Pittsburgh	State PA	
Purpose of Disbursement credit card fee	Candidate Name	Amount of Each Disbursement this Period 40.32
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:	Category/Type	

SUBTOTAL of Disbursements This Page (optional).....▶	272.39
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"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
PODER PAC

A. Utrecht, Kleinfeld, Fiori, Zeglis & Partners

Full Name (Last, First, Middle Initial)

Mailing Address 1900 M Street, NW Suite 500

City Washington State DC Zip Code 20036

Purpose of Disbursement legal fees

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: MM / DD / YYYY
02 / 12 / 2015

Transaction ID : **D570729**

Amount of Each Disbursement this Period
4855.30

Category/Type

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

Amount of Each Disbursement this Period

Category/Type

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

Amount of Each Disbursement this Period

Category/Type

SUBTOTAL of Disbursements This Page (optional).....▶	4855.30
TOTAL This Period (last page this line number only).....▶	7037.59

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

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
PODER PAC

Full Name (Last, First, Middle Initial)

A. ANA SOL-GUTIERREZ FOR CONGRESS

Mailing Address 3317 Turner Ln

City Chevy Chase State MD Zip Code 20815-3217

Purpose of Disbursement contribution

Candidate Name

Ana Sol-Guierrez

Office Sought: House Senate President
State: MD District: 08

Disbursement For: 2016
 Primary General
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
06 / 24 / 2015

Transaction ID : D575499

Amount of Each Disbursement this Period

2000.00

Category/
Type

Full Name (Last, First, Middle Initial)

B. BARRAGAN FOR CONGRESS

Mailing Address 1840 S Gaffey St
421

City San Pedro State CA Zip Code 90731-5324

Purpose of Disbursement contribution

Candidate Name

Nanette Barragan

Office Sought: House Senate President
State: CA District: 44

Disbursement For: 2016
 Primary General
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
06 / 24 / 2015

Transaction ID : D575498

Amount of Each Disbursement this Period

2000.00

Category/
Type

Full Name (Last, First, Middle Initial)

C. FLORES FOR CONGRESS

Mailing Address 420 North Nellis Blvd.

City Las Vegas State NV Zip Code 89110

Purpose of Disbursement contribution

Candidate Name

Lucy Flores

Office Sought: House Senate President
State: NV District: 04

Disbursement For: 2016
 Primary General
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
06 / 24 / 2015

Transaction ID : D575502

Amount of Each Disbursement this Period

2000.00

Category/
Type

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

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

6000.00

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
PODER PAC

Full Name (Last, First, Middle Initial)

A. JOSELINE PENA-MELNYK FOR CONGRESS

Mailing Address 9011 Gettysburg Lane

City State Zip Code
College Park MD 20740

Purpose of Disbursement
contribution

Candidate Name

Joseline Pena-Melnyk

Office Sought: House
 Senate
 President
State: MD District: 04

Disbursement For: 2016
 Primary General
 Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	24	/	2015

Transaction ID : D575500

Amount of Each Disbursement this Period

2000.00

Full Name (Last, First, Middle Initial)

B. TADDEO FOR CONGRESS

Mailing Address P.O. Box 432094

City State Zip Code
Miami FL 33243

Purpose of Disbursement
contribution

Candidate Name

Annette Taddeo

Office Sought: House
 Senate
 President
State: FL District: 26

Disbursement For: 2016
 Primary General
 Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	24	/	2015

Transaction ID : D575501

Amount of Each Disbursement this Period

2000.00

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
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Amount of Each Disbursement this Period

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

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

4000.00

10000.00
