

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 VOTERS ACTION FUND

ADDRESS (number and street) **3556 SULLIVANT AVE SUITE 105B**
Check if different than previously reported. (ACC) **COLUMBUS OH 43204**

2. FEC IDENTIFICATION NUMBER ▼ CITY ▲ STATE ▲ ZIP CODE ▲
C C00626549 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 / / in the State of
(d) 30-Day POST-Election Report for the:
 General (30G) Runoff (30R) Special (30S)
Election on **11** / **08** / **2016** in the State of **OH**

5. Covering Period **10** / **20** / **2016** through **11** / **28** / **2016**

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

Signature of Treasurer Frazee, Gary, , , [Electronically Filed] Date **01** / **09** / **2017**

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 VOTERS ACTION 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="2016"/>	<input type="text" value="0.00"/>	<input type="text" value="0.00"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="63690.24"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="0.00"/>	<input type="text" value="74675.00"/>
(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="63690.24"/>	<input type="text" value="74675.00"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="48936.99"/>	<input type="text" value="59921.75"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="14753.25"/>	<input type="text" value="14753.25"/>
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="25.00"/>	

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. 05/2016)

Write or Type Committee Name

LATINO VOTERS ACTION 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).....	0.00	0.00
(ii) Unitemized	0.00	0.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	74650.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	0.00	74650.00
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received	0.00	25.00
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)).....▶	0.00	74675.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	0.00	74675.00

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	48936.99	59921.75
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	48936.99	59921.75
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditures (use Schedule E)	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	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements (Including Non-Federal Donations).....	0.00	0.00
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)) ..	48936.99	59921.75
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	48936.99	59921.75

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 05/2016)

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)	0.00	74650.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	0.00	74650.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	48936.99	59921.75
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	48936.99	59921.75

**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

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 VOTERS ACTION FUND

Full Name (Last, First, Middle Initial) A. American Management Services		Date of Disbursement M M / D D / Y Y Y Y Y Y 11 / 28 / 2016	
Mailing Address 93 Granville St		FEC Identification Number C [REDACTED] Transaction ID : SB21B.4137 Amount of Each Disbursement this Period [REDACTED] 1000.00	
City Gahanna State OH Zip Code 43230	Purpose of Disbursement Accounting Fee Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type 001 <input type="checkbox"/> Memo Item
Full Name (Last, First, Middle Initial) B. Arbini-Carbonell, Julia, , ,		Date of Disbursement M M / D D / Y Y Y Y Y Y 11 / 28 / 2016	
Mailing Address 3556 Sullivant Ave Suite 105B		FEC Identification Number C [REDACTED] Transaction ID : SB21B.4131 Amount of Each Disbursement this Period [REDACTED] 4000.00	
City Columbus State OH Zip Code 43204	Purpose of Disbursement Bookkeeping Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type 001 <input type="checkbox"/> Memo Item
Full Name (Last, First, Middle Initial) C. Arbini-Carbonell, Julia, , ,		Date of Disbursement M M / D D / Y Y Y Y Y Y 11 / 28 / 2016	
Mailing Address 3556 Sullivant Ave Suite 105B		FEC Identification Number C [REDACTED] Transaction ID : SB21B.4132 Amount of Each Disbursement this Period [REDACTED] 383.24	
City Columbus State OH Zip Code 43204	Purpose of Disbursement Reimbursement- Office Supplies Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type 001 <input type="checkbox"/> Memo Item
SUBTOTAL of Disbursements This Page (optional)..... ▶		[REDACTED] 5383.24	
TOTAL This Period (last page this line number only)..... ▶		[REDACTED]	

**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

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 VOTERS ACTION FUND

Full Name (Last, First, Middle Initial) A. Barrios, Antonio, , ,		Date of Disbursement MM / DD / YYYY 10 / 24 / 2016	
Mailing Address 310 W 7th Street Apt. 1221		FEC Identification Number C [REDACTED] Transaction ID : SB21B.4182 Amount of Each Disbursement this Period [REDACTED] 350.00	
City Lorain	State OH	Zip Code 44053	Category/ Type 001
Purpose of Disbursement Payment for canvass operation		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input type="checkbox"/>
State: District:			

Full Name (Last, First, Middle Initial) B. Barrios, Antonio, , ,		Date of Disbursement MM / DD / YYYY 11 / 07 / 2016	
Mailing Address 310 W 7th Street Apt. 1221		FEC Identification Number C [REDACTED] Transaction ID : SB21B.4178 Amount of Each Disbursement this Period [REDACTED] 850.00	
City Lorain	State OH	Zip Code 44053	Category/ Type 001
Purpose of Disbursement Payment for canvass operation		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input type="checkbox"/>
State: District:			

Full Name (Last, First, Middle Initial) C. Barrios, Israel, , ,		Date of Disbursement MM / DD / YYYY 10 / 24 / 2016	
Mailing Address 1218 Industrial Ave		FEC Identification Number C [REDACTED] Transaction ID : SB21B.4183 Amount of Each Disbursement this Period [REDACTED] 2000.00	
City Lorain	State OH	Zip Code 44055	Category/ Type 001
Purpose of Disbursement Payment for canvass operation		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input type="checkbox"/>
State: District:			

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

[REDACTED] 3200.00

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

[REDACTED]

**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

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 VOTERS ACTION FUND

A. Barrios, Israel, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 1218 Industrial Ave

City Lorain State OH Zip Code 44055

Purpose of Disbursement Payment for canvass operation

Candidate Name

Office Sought: House Senate President

Disbursement For: 2016 Primary General Other (specify) ▼

State: District:

Date of Disbursement: 11 / 07 / 2016

FEC Identification Number: C

Transaction ID : SB21B.4177

Amount of Each Disbursement this Period: 4000.00

Memo Item

B. Farfan, Vilma, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 4035 Park Fulton Apt 413

City Cleveland State OH Zip Code 44144

Purpose of Disbursement Payment for canvass operation

Candidate Name

Office Sought: House Senate President

Disbursement For: 2016 Primary General Other (specify) ▼

State: District:

Date of Disbursement: 10 / 24 / 2016

FEC Identification Number: C

Transaction ID : SB21B.4184

Amount of Each Disbursement this Period: 500.00

Memo Item

C. Farfan, Vilma, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 4035 Park Fulton Apt 413

City Cleveland State OH Zip Code 44144

Purpose of Disbursement Payment for canvass operation

Candidate Name

Office Sought: House Senate President

Disbursement For: 2016 Primary General Other (specify) ▼

State: District:

Date of Disbursement: 11 / 07 / 2016

FEC Identification Number: C

Transaction ID : SB21B.4176

Amount of Each Disbursement this Period: 850.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 5350.00

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 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

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 VOTERS ACTION FUND

Full Name (Last, First, Middle Initial) A. Hunter, Carnahan, Shoub, Byard & Harshman		Date of Disbursement MM / DD / YYYY 11 / 02 / 2016
Mailing Address 3360 Tremont Rd Suite 230		FEC Identification Number C [REDACTED] Transaction ID : SB21B.4129 Amount of Each Disbursement this Period [REDACTED] 1629.26
City Columbus	State OH	Zip Code 43221
Purpose of Disbursement Legal Fees		Category/Type 001
Candidate Name		Memo Item <input type="checkbox"/>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. Hunter, Carnahan, Shoub, Byard & Harshman		Date of Disbursement MM / DD / YYYY 11 / 28 / 2016
Mailing Address 3360 Tremont Rd Suite 230		FEC Identification Number C [REDACTED] Transaction ID : SB21B.4130 Amount of Each Disbursement this Period [REDACTED] 2454.33
City Columbus	State OH	Zip Code 43221
Purpose of Disbursement Legal Fees		Category/Type 001
Candidate Name		Memo Item <input type="checkbox"/>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C. Hurlt, Shawna, , ,		Date of Disbursement MM / DD / YYYY 10 / 24 / 2016
Mailing Address 410 W. Crawford		FEC Identification Number C [REDACTED] Transaction ID : SB21B.4185 Amount of Each Disbursement this Period [REDACTED] 350.00
City Toledo	State OH	Zip Code 43612
Purpose of Disbursement Payment for canvass operation		Category/Type 001
Candidate Name		Memo Item <input type="checkbox"/>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

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

4433.59

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

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 VOTERS ACTION FUND

A. Hurlt, Shawna, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 410 W. Crawford

City Toledo State OH Zip Code 43612

Purpose of Disbursement Payment for canvass operation

Candidate Name

Office Sought: House Senate President

Disbursement For: 2016 Primary General Other (specify) ▼

State: District:

Date of Disbursement: 11 / 07 / 2016

FEC Identification Number: C

Transaction ID : SB21B.4175

Amount of Each Disbursement this Period: 350.00

Memo Item

B. Laboy, Lillian, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 14768 Bennington Dr

City Strongsville State OH Zip Code 44136

Purpose of Disbursement Payment for canvass operation

Candidate Name

Office Sought: House Senate President

Disbursement For: 2016 Primary General Other (specify) ▼

State: District:

Date of Disbursement: 10 / 24 / 2016

FEC Identification Number: C

Transaction ID : SB21B.4186

Amount of Each Disbursement this Period: 500.00

Memo Item

C. Laboy, Lillian, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 14768 Bennington Dr

City Strongsville State OH Zip Code 44136

Purpose of Disbursement Payment for canvass operation

Candidate Name

Office Sought: House Senate President

Disbursement For: 2016 Primary General Other (specify) ▼

State: District:

Date of Disbursement: 11 / 07 / 2016

FEC Identification Number: C

Transaction ID : SB21B.4174

Amount of Each Disbursement this Period: 850.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 1700.00

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 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

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 VOTERS ACTION FUND

Full Name (Last, First, Middle Initial) A. Martinez, Arturo, , ,			Date of Disbursement M M / D D / Y Y Y Y Y Y 10 / 24 / 2016	
Mailing Address 410 W Crawford St			FEC Identification Number C [REDACTED] Transaction ID : SB21B.4187 Amount of Each Disbursement this Period [REDACTED] 350.00	
City Toledo State OH Zip Code 43612	Purpose of Disbursement Payment for canvass operation Candidate Name		Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<input type="checkbox"/> Memo Item	
Full Name (Last, First, Middle Initial) B. Martinez, Arturo, , ,			Date of Disbursement M M / D D / Y Y Y Y Y Y 11 / 07 / 2016	
Mailing Address 410 W Crawford St			FEC Identification Number C [REDACTED] Transaction ID : SB21B.4179 Amount of Each Disbursement this Period [REDACTED] 350.00	
City Toledo State OH Zip Code 43612	Purpose of Disbursement Payment for canvass operation Candidate Name		Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<input type="checkbox"/> Memo Item	
Full Name (Last, First, Middle Initial) C. Mendiola, Felisitas, , ,			Date of Disbursement M M / D D / Y Y Y Y Y Y 11 / 07 / 2016	
Mailing Address 315 Crosse Rd			FEC Identification Number C [REDACTED] Transaction ID : SB21B.4173 Amount of Each Disbursement this Period [REDACTED] 600.00	
City Amherst State OH Zip Code 44001	Purpose of Disbursement Payment for canvass operation Candidate Name		Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<input type="checkbox"/> Memo Item	
SUBTOTAL of Disbursements This Page (optional)..... ▶			[REDACTED] 1300.00	
TOTAL This Period (last page this line number only)..... ▶			[REDACTED]	

**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

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 VOTERS ACTION FUND

A. Morales, Damen, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 310 W 7th Street
Apt. 904

City Lorain State OH Zip Code 44052

Purpose of Disbursement
Payment for canvass operation

Candidate Name

Office Sought: House Senate President
Disbursement For: 2016
 Primary General Other (specify) ▼

State: District:

Date of Disbursement: 11 / 07 / 2016

FEC Identification Number: C [redacted]
Transaction ID : SB21B.4172
Amount of Each Disbursement this Period: 850.00

Memo Item

B. Ortiz, Esteban, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 1920 Collingwood Blvd
Apt 911

City Toledo State OH Zip Code 43604

Purpose of Disbursement
Contractor Payment: Regional Director

Candidate Name
LATINO VOTERS ACTION FUND

Office Sought: House Senate President
Disbursement For: 2016
 Primary General Other (specify) ▼

State: District:

Date of Disbursement: 10 / 24 / 2016

FEC Identification Number: C C00626549
Transaction ID : SB21B.4189
Amount of Each Disbursement this Period: 4000.00

Memo Item

C. Perez, Sara, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 1411 Page St

City Toledo State OH Zip Code 43608

Purpose of Disbursement
Payment for canvass operation

Candidate Name

Office Sought: House Senate President
Disbursement For: 2016
 Primary General Other (specify) ▼

State: District:

Date of Disbursement: 10 / 24 / 2016

FEC Identification Number: C [redacted]
Transaction ID : SB21B.4190
Amount of Each Disbursement this Period: 2000.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 6850.00

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 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

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 VOTERS ACTION FUND

A. Perez, Sara, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 1411 Page St

City Toledo State OH Zip Code 43608

Purpose of Disbursement Payment for canvass operation

Candidate Name

Office Sought: House Senate President

Disbursement For: 2016 Primary General Other (specify) ▼

State: District:

Date of Disbursement: 11 / 07 / 2016

FEC Identification Number: C

Transaction ID : SB21B.4171

Amount of Each Disbursement this Period: 3350.00

Memo Item

B. Pica Pica Properties

Full Name (Last, First, Middle Initial)

Mailing Address 5398 Country Meadow Court

City Westerville State OH Zip Code 43082

Purpose of Disbursement Office Rent

Candidate Name

Office Sought: House Senate President

Disbursement For: 2016 Primary General Other (specify) ▼

State: District:

Date of Disbursement: 11 / 28 / 2016

FEC Identification Number: C

Transaction ID : SB21B.4140

Amount of Each Disbursement this Period: 4500.00

Memo Item

C. Rodas, Max, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 4009 Clague Rd

City North Olmsted State OH Zip Code 44070

Purpose of Disbursement Payment for canvass operation

Candidate Name

Office Sought: House Senate President

Disbursement For: 2016 Primary General Other (specify) ▼

State: District:

Date of Disbursement: 10 / 24 / 2016

FEC Identification Number: C

Transaction ID : SB21B.4191

Amount of Each Disbursement this Period: 400.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 8250.00

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 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

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 VOTERS ACTION FUND

Full Name (Last, First, Middle Initial) A. Rodas, Max, , ,			Date of Disbursement M M / D D / Y Y Y Y Y Y 10 / 24 / 2016	
Mailing Address 4009 Clague Rd			FEC Identification Number C [] Transaction ID : SB21B.4192 Amount of Each Disbursement this Period [] 2000.00	
City North Olmested	State OH	Zip Code 44070	Category/Type 001	
Purpose of Disbursement Payment for canvass operation			Memo Item <input type="checkbox"/>	
Candidate Name			Amount of Each Disbursement this Period [] 2000.00	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input type="checkbox"/>	
State: District:			Amount of Each Disbursement this Period [] 2000.00	
Full Name (Last, First, Middle Initial) B. Rodas, Max, , ,			Date of Disbursement M M / D D / Y Y Y Y Y Y 10 / 28 / 2016	
Mailing Address 4009 Clague Rd			FEC Identification Number C [] Transaction ID : SB21B.4168 Amount of Each Disbursement this Period [] 100.00	
City North Olmested	State OH	Zip Code 44070	Category/Type 001	
Purpose of Disbursement Reimbursement of storage costs			Memo Item <input type="checkbox"/>	
Candidate Name			Amount of Each Disbursement this Period [] 100.00	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input type="checkbox"/>	
State: District:			Amount of Each Disbursement this Period [] 100.00	
Full Name (Last, First, Middle Initial) C. Rodas, Max, , ,			Date of Disbursement M M / D D / Y Y Y Y Y Y 11 / 07 / 2016	
Mailing Address 4009 Clague Rd			FEC Identification Number C [] Transaction ID : SB21B.4169 Amount of Each Disbursement this Period [] 3000.00	
City North Olmested	State OH	Zip Code 44070	Category/Type 001	
Purpose of Disbursement Payment for canvass operation			Memo Item <input type="checkbox"/>	
Candidate Name			Amount of Each Disbursement this Period [] 3000.00	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input type="checkbox"/>	
State: District:			Amount of Each Disbursement this Period [] 3000.00	
SUBTOTAL of Disbursements This Page (optional)..... ▶			[] 5100.00	
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 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

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 VOTERS ACTION FUND

A. Rodas, Max, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 4009 Clague Rd

City North Olmested State OH Zip Code 44070

Purpose of Disbursement Payment for canvass operation

Candidate Name

Office Sought: House Senate President

Disbursement For: 2016 Primary General Other (specify) ▼

State: District:

Date of Disbursement: 11 / 07 / 2016

FEC Identification Number: C

Transaction ID : **SB21B.4170**

Amount of Each Disbursement this Period: 850.00

Memo Item

B. Suarez, Betzabeth, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 309 Nantucket Place Apt F

City Vermilion State OH Zip Code 44089

Purpose of Disbursement Payment for canvass operation

Candidate Name

Office Sought: House Senate President

Disbursement For: 2016 Primary General Other (specify) ▼

State: District:

Date of Disbursement: 11 / 07 / 2016

FEC Identification Number: C

Transaction ID : **SB21B.4180**

Amount of Each Disbursement this Period: 600.00

Memo Item

C. Vicente, Josue, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 3556 Sullivant Ave

City Columbus State OH Zip Code 43204

Purpose of Disbursement Consulting

Candidate Name

Office Sought: House Senate President

Disbursement For: 2016 Primary General Other (specify) ▼

State: District:

Date of Disbursement: 11 / 28 / 2016

FEC Identification Number: C

Transaction ID : **SB21B.4138**

Amount of Each Disbursement this Period: 5500.00

Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶	6950.00
TOTAL This Period (last page this line number only).....▶	48516.83

SCHEDULE C (FEC Form 3X)

LOANS

NAME OF COMMITTEE (In Full) **LATINO VOTERS ACTION FUND** Transaction ID : **SC/10.4124**

LOAN SOURCE Full Name (Last, First, Middle Initial) Arbini-Carbonell, Julia, , ,			<input checked="" type="checkbox"/> Memo Item	Election: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address 3556 Sullivant Ave Suite 105B				
City Columbus	State OH	ZIP Code 43204		

Original Amount of Loan 25.00	Cumulative Payment To Date 0.00	Balance Outstanding at Close of This Period 25.00
----------------------------------	------------------------------------	--

TERMS

Date Incurred MM / DD / YYYY 09 / 16 / 2016	Date Due MM / DD / YYYY 10/31/2016	Interest Rate 0.00 % (apr)	Secured: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
---	--	-------------------------------	---

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer		
Mailing Address	Occupation		
City	State	ZIP Code	Amount Guaranteed Outstanding: []
2. Full Name (Last, First, Middle Initial)	Name of Employer		
Mailing Address	Occupation		
City	State	ZIP Code	Amount Guaranteed Outstanding: []
3. Full Name (Last, First, Middle Initial)	Name of Employer		
Mailing Address	Occupation		
City	State	ZIP Code	Amount Guaranteed Outstanding: []
4. Full Name (Last, First, Middle Initial)	Name of Employer		
Mailing Address	Occupation		
City	State	ZIP Code	Amount Guaranteed Outstanding: []

SUBTOTALS This Period This Page (optional)	▶	[] 25.00
TOTALS This Period (last page in this line only)	▶	[] 25.00

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

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

Form/Schedule: SC/10

Transaction ID : SC/10.4124

Amendment from paper filing; Sent UPS on 10/13/2016

Form/Schedule:

Transaction ID: