

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) 700 14TH STREET NW, 2ND FLOOR WASHINGTON DC 20005

2. FEC IDENTIFICATION NUMBER C C00562777 3. IS THIS REPORT NEW (N) OR AMENDED (A)

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, Aug 20, Sep 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

5. Covering Period 08 / 01 / 2018 through 08 / 31 / 2018

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

Signature of Treasurer Saenz, Adrian, , , [Electronically Filed] Date 09 / 19 / 2018

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)

Page 2

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="2018"/>		118362.65
(b) Cash on Hand at Beginning of Reporting Period.....	535645.30	
(c) Total Receipts (from Line 19)	179983.00	2060353.99
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	715628.30	2178716.64
7. Total Disbursements (from Line 31).....	456955.39	1920043.73
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	258672.91	258672.91
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

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).....	17850.00	147970.00
(ii) Unitemized	7133.00	17674.94
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	24983.00	165644.94
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	7000.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	24983.00	172644.94
12. Transfers From Affiliated/Other Party Committees.....	0.00	125.00
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	7.05
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	5000.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	155000.00	1882577.00
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)).....▶	179983.00	2060353.99
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	179983.00	2060353.99

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	858.14	77592.23
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	858.14	77592.23
22. Transfers to Affiliated/Other Party Committees.....	0.00	1986.95
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	73322.11
24. Independent Expenditures (use Schedule E)	393001.24	1027855.37
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	400.00
(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	400.00
29. Other Disbursements (Including Non-Federal Donations).....	63096.01	738887.07
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)) ..	456955.39	1920043.73
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	456955.39	1920043.73

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)	24983.00	172644.94
34. Total Contribution Refunds (from Line 28(d))	0.00	400.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	24983.00	172244.94
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	858.14	77592.23
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	7.05
38. Net Operating Expenditures (subtract Line 37 from Line 36)	858.14	77585.18

**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 6 OF 37
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

NAME OF COMMITTEE (In Full)
LATINO VICTORY FUND

A. Avila, Edward, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1814 S Marengo Ave
 Apt 23
 City Alhambra State CA Zip Code 91803-3061
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Project Restore Occupation (for Individual) President
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 08 / 27 / 2018
Transaction ID : SA11AI.6641
 Amount of Each Receipt this Period 500.00
 Memo Item

B. Bocanegra, Miguel, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4406 28th Ave S
 City Seattle State WA Zip Code 98108-6106
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MacDonald Hoague and Bayless Occupation (for Individual) Attorney
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 08 / 24 / 2018
Transaction ID : SA11AI.6614
 Amount of Each Receipt this Period 1000.00
 Memo Item

C. Chan, Andrew, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2033 2nd Ave
 Apt 1706
 City Seattle State WA Zip Code 98121-2253
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MacDonald Hoague & Bayless Occupation (for Individual) Attorney
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 08 / 28 / 2018
Transaction ID : SA11AI.6661
 Amount of Each Receipt this Period 1000.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	2500.00
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 37
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
LATINO VICTORY FUND

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. Chang-Diaz, Sonia, , ,		Date of Receipt MM / DD / YYYY 08 / 14 / 2018 Transaction ID : SA11AI.6578
Mailing Address 3 Bremen Terrace		Amount of Each Receipt this Period 100.00
City Boston	State MA	Zip Code 02130-3709
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item
Name of Employer (for Individual) Commonwealth of MA	Occupation (for Individual) State Senator	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Coffin, Robert, , ,		Date of Receipt MM / DD / YYYY 08 / 27 / 2018 Transaction ID : SA11AI.6739
Mailing Address 1139 5th Place		Amount of Each Receipt this Period 1000.00
City Las Vegas	State NV	Zip Code 89104
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item
Name of Employer (for Individual) City of Las Vegas	Occupation (for Individual) Councilman	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. Ek, John, , ,		Date of Receipt MM / DD / YYYY 08 / 29 / 2018 Transaction ID : SA11AI.6681
Mailing Address 1717 Linda Vista Ave Ste 2750		Amount of Each Receipt this Period 5000.00
City Pasadena	State CA	Zip Code 91103-1133
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item
Name of Employer (for Individual) Ek Sunkin Klink & Bai	Occupation (for Individual) Government Affairs Consultant	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 5000.00	

SUBTOTAL of Receipts This Page (optional).....▶	6100.00
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 37
	<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)
LATINO VICTORY FUND

A. Ford, Timothy, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2106 3rd Ave N
 City Seattle State WA Zip Code 98109-2304
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MacDonal Hoague Occupation (for Individual) Lawyer
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 08 / 20 / 2018
Transaction ID : SA11AI.6603
 Amount of Each Receipt this Period 1000.00
 Memo Item

B. Frank, Kay, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2812 Broadway E
 City Seattle State WA Zip Code 98102-3936
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MacDonal Hoague Bayless Occupation (for Individual) Attorney
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1500.00

Date of Receipt 08 / 20 / 2018
Transaction ID : SA11AI.6599
 Amount of Each Receipt this Period 1500.00
 Memo Item

C. Greenfield, Ester, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 728 Boylston Ave E Apt A
 City Seattle State WA Zip Code 98102-4629
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MBH Occupation (for Individual) Attorney
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 08 / 27 / 2018
Transaction ID : SA11AI.6653
 Amount of Each Receipt this Period 250.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	2750.00
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 37
	<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)
LATINO VICTORY FUND

A. Guadarrama, Belinda, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P.O. Box 4438
 City Petaluma State CA Zip Code 94955
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GC Micro Occupation (for Individual) CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2500.00

Date of Receipt 08 / 29 / 2018
Transaction ID : SA11AI.6738
 Amount of Each Receipt this Period 2500.00
 Memo Item

B. Hagin, Leslie, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7 Highland Dr Apt 601
 City Seattle State WA Zip Code 98109-3275
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MacDonald Hoague & Bayless Occupation (for Individual) Lawyer
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1500.00

Date of Receipt 08 / 26 / 2018
Transaction ID : SA11AI.6629
 Amount of Each Receipt this Period 1500.00
 Memo Item

C. Rivera, Frederick, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO Box 4100
 City Seattle State WA Zip Code 98194-0100
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Seattle Mariners Occupation (for Individual) Attorney
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 08 / 28 / 2018
Transaction ID : SA11AI.6659
 Amount of Each Receipt this Period 1000.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	5000.00
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 10 OF 37
	<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)
LATINO VICTORY FUND

A. Sanchez, Corinne, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 307 Lawson Pl
 City Glendale State CA Zip Code 91202-1210
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) El Proyecto del Barrio, Inc. Occupation (for Individual) Administrator
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 27 / 2018
Transaction ID : SA11AI.6639
 Amount of Each Receipt this Period
 500.00
 Memo Item

B. Tapia, Corinne, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1849 N Ditman Ave
 City Los Angeles State CA Zip Code 90032-3716
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) COVA Partners LLC Occupation (for Individual) Construction Management
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 27 / 2018
Transaction ID : SA11AI.6637
 Amount of Each Receipt this Period
 500.00
 Memo Item

C. Urteaga, Robert, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 750 Garland Ave Apt 206
 City Los Angeles State CA Zip Code 90017-4489
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Santa Maria Group Occupation (for Individual) Senior Consultant
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 29 / 2018
Transaction ID : SA11AI.6696
 Amount of Each Receipt this Period
 500.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	1500.00
TOTAL This Period (last page this line number only).....	17850.00

**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 11 OF 37
<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)
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	/	D D	/	Y Y Y Y
08		31		2018

Transaction ID : SA11C.6552

Amount of Each Receipt this Period

783.00

Memo Item
 Total Received Through Conduit This Reporting Period

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
-----	---	-----	---	---------

Amount of Each Receipt this Period

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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
-----	---	-----	---	---------

Amount of Each Receipt this Period

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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 12 OF 37
<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. 5000 Broadway Productions

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 5030 Broadway Suite 807

City New York	State NY	Zip Code 10034
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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 ▼
100000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		06		2018

Transaction ID : SA17.6703

Amount of Each Receipt this Period
100000.00

Memo Item
Non-contribution Account

B. Ek, John, , ,

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 1717 Linda Vista Ave Ste 2750

City Pasadena	State CA	Zip Code 91103-1133
------------------	-------------	------------------------

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

Name of Employer (for Individual) Occupation (for Individual)
Ek Sunkin Klink & Bai Government Affairs Consultant

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
10000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		29		2018

Transaction ID : SA17.6751

Amount of Each Receipt this Period
5000.00

Memo Item
Non-contribution Account

C. UNITED FOOD AND COMMERCIAL WORKERS INTERNATIONAL UNION ACTIVE BALLOT CLUB

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 1775 K STREET, NW

City WASHINGTON	State DC	Zip Code 20006
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00002766

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

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
50000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		31		2018

Transaction ID : SA17.6731

Amount of Each Receipt this Period
50000.00

Memo Item
Non-contribution Account

SUBTOTAL of Receipts This Page (optional).....	155000.00
TOTAL This Period (last page this line number only).....	155000.00

**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

A. ActBlue Technical Services

Full Name (Last, First, Middle Initial)

Mailing Address 366 Summer Street

City Somerville State MA Zip Code 02144

Purpose of Disbursement
Credit Card Processing Fees

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 08 / 05 / 2018

FEC Identification Number: C

Transaction ID : **SB21B.6744**

Amount of Each Disbursement this Period: 8.03

Memo Item

B. ActBlue Technical Services

Full Name (Last, First, Middle Initial)

Mailing Address 366 Summer Street

City Somerville State MA Zip Code 02144

Purpose of Disbursement
Credit Card Processing Fees

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 08 / 12 / 2018

FEC Identification Number: C

Transaction ID : **SB21B.6745**

Amount of Each Disbursement this Period: 5.37

Memo Item

C. ActBlue Technical Services

Full Name (Last, First, Middle Initial)

Mailing Address 366 Summer Street

City Somerville State MA Zip Code 02144

Purpose of Disbursement
Credit Card Processing Fees

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 08 / 19 / 2018

FEC Identification Number: C

Transaction ID : **SB21B.6746**

Amount of Each Disbursement this Period: 2.58

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 15.98

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

A. ActBlue Technical Services

Full Name (Last, First, Middle Initial)

Mailing Address 366 Summer Street

City Somerville State MA Zip Code 02144

Purpose of Disbursement
Credit Card Processing Fees

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: MM / DD / YYYY
08 / 26 / 2018

FEC Identification Number
C []
Transaction ID : **SB21B.6747**
Amount of Each Disbursement this Period
[] 0.40

Memo Item

B. ActBlue Technical Services

Full Name (Last, First, Middle Initial)

Mailing Address 366 Summer Street

City Somerville State MA Zip Code 02144

Purpose of Disbursement
Credit Card Processing Fees

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: MM / DD / YYYY
08 / 31 / 2018

FEC Identification Number
C []
Transaction ID : **SB21B.6748**
Amount of Each Disbursement this Period
[] 14.67

Memo Item

C. Lewis Roca Rothgerber Christie

Full Name (Last, First, Middle Initial)

Mailing Address 201 East Washington Street
Suite 1200

City Phoenix State AZ Zip Code 85004

Purpose of Disbursement
Legal Services

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: MM / DD / YYYY
08 / 15 / 2018

FEC Identification Number
C []
Transaction ID : **SB21B.6728**
Amount of Each Disbursement this Period
[] 793.84

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ [] 808.91

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

A. Sage Payment Solutions

Full Name (Last, First, Middle Initial)

Mailing Address 12120 Sunset Hills Road

City Reston State VA Zip Code 20190

Purpose of Disbursement Credit Card Processing Fees

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: MM / DD / YYYY
08 / 02 / 2018

FEC Identification Number: C

Transaction ID : SB21B.6743

Amount of Each Disbursement this Period: 15.74

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).....▶	15.74
TOTAL This Period (last page this line number only).....▶	840.63

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. Capital One

Full Name (Last, First, Middle Initial)

Mailing Address 925 15th Street NW

City Washington State DC Zip Code 20005

Purpose of Disbursement Bank Fee, Non-contribution Account

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 08 / 21 / 2018

FEC Identification Number: C

Transaction ID : SB29.6705

Amount of Each Disbursement this Period: 25.00

Memo Item

B. Capital One

Full Name (Last, First, Middle Initial)

Mailing Address 925 15th Street NW

City Washington State DC Zip Code 20005

Purpose of Disbursement Bank Fee, Non-contribution Account

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 08 / 23 / 2018

FEC Identification Number: C

Transaction ID : SB29.6706

Amount of Each Disbursement this Period: 25.00

Memo Item

C. Capital One

Full Name (Last, First, Middle Initial)

Mailing Address 925 15th Street NW

City Washington State DC Zip Code 20005

Purpose of Disbursement Bank Fee, Non-contribution Account

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 08 / 24 / 2018

FEC Identification Number: C

Transaction ID : SB29.6707

Amount of Each Disbursement this Period: 25.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 75.00

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

Full Name (Last, First, Middle Initial)

A. Capital One

Mailing Address 925 15th Street NW

City Washington State DC Zip Code 20005

Purpose of Disbursement
Bank Fee, Non-contribution Account

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : **SB29.6708**

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

B. Capital One

Mailing Address 925 15th Street NW

City Washington State DC Zip Code 20005

Purpose of Disbursement
Bank Fee, Non-contribution Account

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : **SB29.6709**

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

C. Capital One

Mailing Address 925 15th Street NW

City Washington State DC Zip Code 20005

Purpose of Disbursement
Bank Fee, Non-contribution Account

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : **SB29.6710**

Amount of Each Disbursement this Period

Memo Item

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

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

Full Name (Last, First, Middle Initial)

A. Capital One

Mailing Address 925 15th Street NW

City Washington State DC Zip Code 20005

Purpose of Disbursement
Bank Fee, Non-contribution Account

Candidate Name

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

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : SB29.6711
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

B. Capital One

Mailing Address 925 15th Street NW

City Washington State DC Zip Code 20005

Purpose of Disbursement
Bank Fee, Non-contribution Account

Candidate Name

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

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : SB29.6712
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

C. Latino Victory Project

Mailing Address 700 14th Street NW Suite 200

City Washington State DC Zip Code 20005

Purpose of Disbursement
Payroll Expense, Non-contribution Account

Candidate Name

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

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : SB29.6715
Amount of Each Disbursement this Period

Memo Item

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

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

Full Name (Last, First, Middle Initial) A. Macias, Annette, , ,		Date of Disbursement MM / DD / YYYY 08 / 13 / 2018	
Mailing Address 21009 Pedregoso Lane		FEC Identification Number C [] Transaction ID : SB29.6715.0 Amount of Each Disbursement this Period [] 5259.38	
City San Antonio	State TX	Zip Code 78258	Category/ Type []
Purpose of Disbursement Salary		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
Candidate Name			Memo Item <input checked="" type="checkbox"/>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:		

Full Name (Last, First, Middle Initial) B. Le Brusq, Sara, , ,		Date of Disbursement MM / DD / YYYY 08 / 13 / 2018	
Mailing Address 700 14th Street NW 2nd Floor		FEC Identification Number C [] Transaction ID : SB29.6715.1 Amount of Each Disbursement this Period [] 3665.50	
City Washington	State DC	Zip Code 20005	Category/ Type []
Purpose of Disbursement Salary		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
Candidate Name			Memo Item <input checked="" type="checkbox"/>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:		

Full Name (Last, First, Middle Initial) C. Alex, Cristobal, J., ,		Date of Disbursement MM / DD / YYYY 08 / 13 / 2018	
Mailing Address 700 14th Street NW 2nd Floor		FEC Identification Number C [] Transaction ID : SB29.6715.2 Amount of Each Disbursement this Period [] 9987.33	
City Washington	State DC	Zip Code 20005	Category/ Type []
Purpose of Disbursement Salary		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
Candidate Name			Memo Item <input checked="" type="checkbox"/>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:		

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

Full Name (Last, First, Middle Initial) A. Garcia, Monica, , ,		Date of Disbursement MM / DD / YYYY 08 / 13 / 2018	
Mailing Address 700 14th Street NW 2nd Floor			
City Washington	State DC	Zip Code 20005	
Purpose of Disbursement Salary		<input type="checkbox"/>	
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:	<input checked="" type="checkbox"/> Memo Item		

FEC Identification Number
C
Transaction ID : SB29.6715.3
Amount of Each Disbursement this Period
2889.66

Full Name (Last, First, Middle Initial) B. Gonzalez, Maria, , ,		Date of Disbursement MM / DD / YYYY 08 / 13 / 2018	
Mailing Address 700 14th Street NW, 2nd Floor			
City Washington	State DC	Zip Code 20005	
Purpose of Disbursement Salary		<input type="checkbox"/>	
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:	<input checked="" type="checkbox"/> Memo Item		

FEC Identification Number
C
Transaction ID : SB29.6715.4
Amount of Each Disbursement this Period
3081.04

Full Name (Last, First, Middle Initial) C. Loisel, Abby, , ,		Date of Disbursement MM / DD / YYYY 08 / 13 / 2018	
Mailing Address 700 14th Street NW 2nd Floor			
City Washington	State DC	Zip Code 20005	
Purpose of Disbursement Salary		<input type="checkbox"/>	
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:	<input checked="" type="checkbox"/> Memo Item		

FEC Identification Number
C
Transaction ID : SB29.6715.5
Amount of Each Disbursement this Period
2974.58

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

Full Name (Last, First, Middle Initial) A. Fuentes, Olac, , ,		Date of Disbursement MM / DD / YYYY 08 / 13 / 2018	
Mailing Address 700 14th Street NW 2nd Floor		FEC Identification Number C [] Transaction ID : SB29.6715.6 Amount of Each Disbursement this Period [] 2974.83	
City Washington	State DC	Zip Code 20005	Category/ Type []
Purpose of Disbursement Salary		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
Candidate Name			Amount of Each Disbursement this Period [] 2974.83
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:	<input checked="" type="checkbox"/> Memo Item	
Full Name (Last, First, Middle Initial) B. Torres, Jess, , ,		Date of Disbursement MM / DD / YYYY 08 / 13 / 2018	
Mailing Address 700 14th Street NW, 2nd Floor		FEC Identification Number C [] Transaction ID : SB29.6715.7 Amount of Each Disbursement this Period [] 3346.88	
City Washington	State DC	Zip Code 20005	Category/ Type []
Purpose of Disbursement Salary		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
Candidate Name			Amount of Each Disbursement this Period [] 3346.88
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		State: District:	<input checked="" type="checkbox"/> Memo Item
Full Name (Last, First, Middle Initial) C. Silva, Jorge, , ,		Date of Disbursement MM / DD / YYYY 08 / 13 / 2018	
Mailing Address 700 14th Street NW 2nd Floor		FEC Identification Number C [] Transaction ID : SB29.6715.8 Amount of Each Disbursement this Period [] 3825.00	
City Washington	State DC	Zip Code 20005	Category/ Type []
Purpose of Disbursement Salary		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
Candidate Name			Amount of Each Disbursement this Period [] 3825.00
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		State: District:	<input checked="" type="checkbox"/> Memo Item
SUBTOTAL of Disbursements This Page (optional)..... ▶		[] 0.00	
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. Latino Victory Project

Full Name (Last, First, Middle Initial)

Mailing Address 700 14th Street NW Suite 200

City Washington State DC Zip Code 20005

Purpose of Disbursement Payroll Taxes and Employee Benefits, Non-contribution Account

Candidate Name

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

State: District:

Date of Disbursement: 08 / 13 / 2018

FEC Identification Number: C

Transaction ID : SB29.6726

Amount of Each Disbursement this Period: 5616.25

Memo Item

B. Latino Victory Project

Full Name (Last, First, Middle Initial)

Mailing Address 700 14th Street NW Suite 200

City Washington State DC Zip Code 20005

Purpose of Disbursement Office Rent and Overhead, Non-contribution Account

Candidate Name

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

State: District:

Date of Disbursement: 08 / 13 / 2018

FEC Identification Number: C

Transaction ID : SB29.6727

Amount of Each Disbursement this Period: 4603.50

Memo Item

C. Lewis Roca Rothgerber Christie

Full Name (Last, First, Middle Initial)

Mailing Address 201 East Washington Street Suite 1200

City Phoenix State AZ Zip Code 85004

Purpose of Disbursement Legal Services, Non-contribution Account

Candidate Name

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

State: District:

Date of Disbursement: 08 / 15 / 2018

FEC Identification Number: C

Transaction ID : SB29.6730

Amount of Each Disbursement this Period: 7144.56

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 17364.31

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

Full Name (Last, First, Middle Initial) A. Mosiac Media Strategy Group		Date of Disbursement MM / DD / YYYY 08 / 27 / 2018
Mailing Address 1250 I Street NW Suite 1003		FEC Identification Number C [] Transaction ID : SB29.6750 Amount of Each Disbursement this Period [] 5000.00
City Washington	State DC	Zip Code 20005
Purpose of Disbursement Independent Exp., Phones & Texts, FL HD-30, Non-contribution Account		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. Raquel Teran for Arizona House of Representatives		Date of Disbursement MM / DD / YYYY 08 / 21 / 2018
Mailing Address PO Box 39917		FEC Identification Number C [] Transaction ID : SB29.6741 Amount of Each Disbursement this Period [] 2500.00
City Phoenix	State AZ	Zip Code 85069
Purpose of Disbursement Contribution		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. Sage Payment Solutions		Date of Disbursement MM / DD / YYYY 08 / 02 / 2018
Mailing Address 12120 Sunset Hills Road		FEC Identification Number C [] Transaction ID : SB29.6702 Amount of Each Disbursement this Period [] 2.50
City Reston	State VA	Zip Code 20190
Purpose of Disbursement Credit Card Processing Fees, Non-contribution Account		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)..... ▶

7502.50

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

63071.01

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

NAME OF COMMITTEE (In Full) LATINO VICTORY FUND	FEC IDENTIFICATION NUMBER ▼ C C00562777
---	--

Check if 24-hour report 48-hour report New report Amends report filed on / /

Full Name of Payee <input type="checkbox"/> Memo Item Latino Victory Project		Date of Public Distribution/Dissemination <input type="text"/> / <input type="text"/> / <input type="text"/>	
Mailing Address 700 14th Street NW Suite 200		Amount <input type="text"/>	
City Washington	State DC	Zip Code 20005	Transaction ID : SE.6494
Purpose of Expenditure Voter Data, Non-contribution Account		Category/ Type <input type="text"/>	Date of Disbursement or Obligation <input type="text"/> / <input type="text"/> / <input type="text"/>
Name of Federal Candidate: MATIAS, JUANA, , ,		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House District: <u>03</u> <input type="checkbox"/> President <input type="checkbox"/> Senate State: <u>MA</u>
Calendar Year-To-Date Per Election for Office Sought <input type="text"/>		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ _____	

Full Name of Payee <input type="checkbox"/> Memo Item Mosaic Media Strategy Group		Date of Public Distribution/Dissemination <input type="text"/> / <input type="text"/> / <input type="text"/>	
Mailing Address 1250 I Street NW Suite 1003		Amount <input type="text"/>	
City Washington	State DC	Zip Code 20005	Transaction ID : SE.6406
Purpose of Expenditure Web Page, Non-contribution Account		Category/ Type <input type="text"/>	Date of Disbursement or Obligation <input type="text"/> / <input type="text"/> / <input type="text"/>
Name of Federal Candidate: SOTO, DARREN, , ,		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House District: <u>09</u> <input type="checkbox"/> President <input type="checkbox"/> Senate State: <u>FL</u>
Calendar Year-To-Date Per Election for Office Sought <input type="text"/>		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ _____	

(a) SUBTOTAL of Itemized Independent Expenditures	<input type="text"/>
(b) SUBTOTAL of Unitemized Independent Expenditures.....	<input type="text"/>
(c) TOTAL Independent Expenditures	<input type="text"/>

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

Saenz, Adrian, , ,

[Electronically Filed]

Date / /

Signature

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

NAME OF COMMITTEE (In Full) LATINO VICTORY FUND	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px;"> C C00562777 </div>
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Check if 24-hour report 48-hour report ▶ New report Amends report filed on M M / D D / Y Y Y Y Y Y

Full Name of Payee <input type="checkbox"/> Memo Item Mosaic Media Strategy Group	Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 08 / 22 / 2018						
Mailing Address 1250 I Street NW Suite 1003	Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">5000.00</div> Transaction ID : SE.6461 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 08 / 22 / 2018						
<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:33%;">City</td> <td style="width:33%;">State</td> <td style="width:33%;">Zip Code</td> </tr> <tr> <td>Washington</td> <td>DC</td> <td>20005</td> </tr> </table>		City	State	Zip Code	Washington	DC	20005
City		State	Zip Code				
Washington	DC	20005					
Purpose of Expenditure Internet Advertising, Non-contribution Account							
Name of Federal Candidate: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose MATIAS, JUANA, , ,	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> President <input type="checkbox"/> Senate District: 03 State: MA						
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">5000.00</div>	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶						

Full Name of Payee <input type="checkbox"/> Memo Item Solidarity Strategies	Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 08 / 14 / 2018						
Mailing Address 1090 Vermont Avenue NW Suite 300	Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">32218.48</div> Transaction ID : SE.6392 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 08 / 14 / 2018						
<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:33%;">City</td> <td style="width:33%;">State</td> <td style="width:33%;">Zip Code</td> </tr> <tr> <td>Washington</td> <td>DC</td> <td>20005</td> </tr> </table>		City	State	Zip Code	Washington	DC	20005
City		State	Zip Code				
Washington	DC	20005					
Purpose of Expenditure Direct Mail, Non-contribution Account							
Name of Federal Candidate: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose SOTO, DARREN, , ,	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> President <input type="checkbox"/> Senate District: 09 State: FL						
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">56218.48</div>	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶						

(a) SUBTOTAL of Itemized Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px; text-align: right;">37218.48</div>
(b) SUBTOTAL of Unitemized Independent Expenditures..... ▶	<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>
(c) TOTAL Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>

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

Signature Saenz, Adrian, , , [Electronically Filed] Date M M / D D / Y Y Y Y Y Y
 09 / 19 / 2018

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

NAME OF COMMITTEE (In Full) LATINO VICTORY FUND	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px;"> C C00562777 </div>
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Check if 24-hour report 48-hour report ▶ New report Amends report filed on M M / D D / Y Y Y Y Y Y

Full Name of Payee <input type="checkbox"/> Memo Item Solidarity Strategies	Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 08 / 14 / 2018						
Mailing Address 1090 Vermont Avenue NW Suite 300	Amount <div style="border: 1px solid black; padding: 2px; text-align: right;"> 3000.00 </div> Transaction ID : SE.6394 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 08 / 14 / 2018						
<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:33%;">City</td> <td style="width:33%;">State</td> <td style="width:33%;">Zip Code</td> </tr> <tr> <td>Washington</td> <td>DC</td> <td>20005</td> </tr> </table>		City	State	Zip Code	Washington	DC	20005
City		State	Zip Code				
Washington	DC	20005					
Purpose of Expenditure Data File, Non-contribution Account							
Name of Federal Candidate: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose SOTO, DARREN, , ,	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> President <input type="checkbox"/> Senate District: 09 State: FL						
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;"> 59218.48 </div>	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶						

Full Name of Payee <input type="checkbox"/> Memo Item Solidarity Strategies	Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 08 / 16 / 2018						
Mailing Address 1090 Vermont Avenue NW Suite 300	Amount <div style="border: 1px solid black; padding: 2px; text-align: right;"> 32218.48 </div> Transaction ID : SE.6400 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 08 / 16 / 2018						
<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:33%;">City</td> <td style="width:33%;">State</td> <td style="width:33%;">Zip Code</td> </tr> <tr> <td>Washington</td> <td>DC</td> <td>20005</td> </tr> </table>		City	State	Zip Code	Washington	DC	20005
City		State	Zip Code				
Washington	DC	20005					
Purpose of Expenditure Direct Mail, Non-contribution Account							
Name of Federal Candidate: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose SOTO, DARREN, , ,	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> President <input type="checkbox"/> Senate District: 09 State: FL						
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;"> 104436.96 </div>	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶						

(a) SUBTOTAL of Itemized Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px; text-align: right;"> 35218.48 </div>
(b) SUBTOTAL of Unitemized Independent Expenditures..... ▶	<div style="border: 1px solid black; padding: 2px; text-align: right;"> 0.00 </div>
(c) TOTAL Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px; text-align: right;"> 35218.48 </div>

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

Saenz, Adrian, , ,

[Electronically Filed]

Date M M / D D / Y Y Y Y Y Y
 09 / 19 / 2018

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full)
LATINO VICTORY FUND
FEC IDENTIFICATION NUMBER
C C00562777

Check if 24-hour report 48-hour report
New report Amends report filed on

Full Name of Payee: Solidarity Strategies
Mailing Address: 1090 Vermont Avenue NW Suite 300
City: Washington State: DC Zip Code: 20005
Purpose of Expenditure: Direct Mail, Non-contribution Account
Name of Federal Candidate: SOTO, DARREN, , ,
Office Sought: House District: 09 State: FL
Disbursement For: Primary
Amount: 32218.48
Transaction ID: SE.6447

Full Name of Payee: Solidarity Strategies
Mailing Address: 1090 Vermont Avenue NW Suite 300
City: Washington State: DC Zip Code: 20005
Purpose of Expenditure: Printing, Non-contribution Account
Name of Federal Candidate: MATIAS, JUANA, , ,
Office Sought: House District: 03 State: MA
Disbursement For: Primary
Amount: 850.00
Transaction ID: SE.6492

(a) SUBTOTAL of Itemized Independent Expenditures: 33068.48
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

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

Saenz, Adrian, , ,

[Electronically Filed]

Date

09 / 19 / 2018

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full)
LATINO VICTORY FUND
FEC IDENTIFICATION NUMBER
C C00562777

Check if 24-hour report 48-hour report
New report Amends report filed on

Full Name of Payee: The Hamilton Campaign Network LLC
Mailing Address: 5030 Broadway, Suite 810
City: New York, State: NY, Zip Code: 10034
Purpose of Expenditure: Media Production, Non-contribution Account
Category/Type:
Name of Federal Candidate: SOTO, DARREN, , , Support
Office Sought: House, District: 09, State: FL
Amount: 9000.00
Transaction ID: SE.6382
Date of Disbursement or Obligation: 08/07/2018
Disbursement For: Primary

Full Name of Payee: The Hamilton Campaign Network LLC
Mailing Address: 5030 Broadway, Suite 810
City: New York, State: NY, Zip Code: 10034
Purpose of Expenditure: Media Production, Non-contribution Account
Category/Type:
Name of Federal Candidate: GRAYSON, ALAN MARK, , , Oppose
Office Sought: House, District: 09, State: FL
Amount: 1000.00
Transaction ID: SE.6486
Date of Disbursement or Obligation: 08/07/2018
Disbursement For: Primary

(a) SUBTOTAL of Itemized Independent Expenditures: 10000.00
(b) SUBTOTAL of Unitemized Independent Expenditures:
(c) TOTAL Independent Expenditures:

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

Saenz, Adrian, , ,

[Electronically Filed]

Date

09 / 19 / 2018

Signature

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

NAME OF COMMITTEE (In Full) LATINO VICTORY FUND	FEC IDENTIFICATION NUMBER ▼ C C00562777
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Check if 24-hour report 48-hour report New report Amends report filed on / /

Full Name of Payee <input type="checkbox"/> Memo Item The Hamilton Campaign Network LLC		Date of Public Distribution/Dissemination <input type="text"/> / <input type="text"/> / <input type="text"/>
Mailing Address 5030 Broadway, Suite 810		Amount <input type="text"/> 6000.00
City New York	State NY	
Zip Code 10034		Transaction ID : SE.6386
Purpose of Expenditure Community Advertising, Non-contribution Account		Date of Disbursement or Obligation <input type="text"/> / <input type="text"/> / <input type="text"/>
Name of Federal Candidate: SOTO, DARREN, , ,		Office Sought: <input checked="" type="checkbox"/> House District: 09 <input type="checkbox"/> President <input type="checkbox"/> Senate State: FL
Calendar Year-To-Date Per Election for Office Sought <input type="text"/> 16000.00		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶

Full Name of Payee <input type="checkbox"/> Memo Item The Hamilton Campaign Network LLC		Date of Public Distribution/Dissemination <input type="text"/> / <input type="text"/> / <input type="text"/>
Mailing Address 5030 Broadway, Suite 810		Amount <input type="text"/> 8000.00
City New York	State NY	
Zip Code 10034		Transaction ID : SE.6389
Purpose of Expenditure Endorsement Communications, Non-contribution Account		Date of Disbursement or Obligation <input type="text"/> / <input type="text"/> / <input type="text"/>
Name of Federal Candidate: SOTO, DARREN, , ,		Office Sought: <input checked="" type="checkbox"/> House District: 09 <input type="checkbox"/> President <input type="checkbox"/> Senate State: FL
Calendar Year-To-Date Per Election for Office Sought <input type="text"/> 24000.00		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures	<input type="text"/> 14000.00
(b) SUBTOTAL of Unitemized Independent Expenditures.....	<input type="text"/>
(c) TOTAL Independent Expenditures	<input type="text"/>

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

Saenz, Adrian, , ,

[Electronically Filed]

Date / /

Signature

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

NAME OF COMMITTEE (In Full) LATINO VICTORY FUND	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px;"> C C00562777 </div>
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Check if 24-hour report 48-hour report ▶ New report Amends report filed on M M / D D / Y Y Y Y Y Y

Full Name of Payee <input type="checkbox"/> Memo Item The Hamilton Campaign Network LLC	Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 08 / 15 / 2018						
Mailing Address 5030 Broadway, Suite 810	Amount <div style="border: 1px solid black; padding: 2px; text-align: right;"> M M / D D / Y Y Y Y Y Y 13000.00 </div> Transaction ID : SE.6397 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 08 / 15 / 2018						
<table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:33%;">City</td> <td style="width:33%;">State</td> <td style="width:33%;">Zip Code</td> </tr> <tr> <td>New York</td> <td>NY</td> <td>10034</td> </tr> </table>		City	State	Zip Code	New York	NY	10034
City		State	Zip Code				
New York	NY	10034					
Purpose of Expenditure Community Advertising (Signs, Posters, etc.), Non-contribution Account							
Name of Federal Candidate: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose SOTO, DARREN, , ,	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> President <input type="checkbox"/> Senate District: 09 State: FL						
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;"> M M / D D / Y Y Y Y Y Y 72218.48 </div>	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶						

Full Name of Payee <input type="checkbox"/> Memo Item The Hamilton Campaign Network LLC	Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 08 / 16 / 2018						
Mailing Address 5030 Broadway, Suite 810	Amount <div style="border: 1px solid black; padding: 2px; text-align: right;"> M M / D D / Y Y Y Y Y Y 1684.00 </div> Transaction ID : SE.6403 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 08 / 16 / 2018						
<table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:33%;">City</td> <td style="width:33%;">State</td> <td style="width:33%;">Zip Code</td> </tr> <tr> <td>New York</td> <td>NY</td> <td>10034</td> </tr> </table>		City	State	Zip Code	New York	NY	10034
City		State	Zip Code				
New York	NY	10034					
Purpose of Expenditure Text Messaging, Non-contribution Account							
Name of Federal Candidate: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose SOTO, DARREN, , ,	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> President <input type="checkbox"/> Senate District: 09 State: FL						
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;"> M M / D D / Y Y Y Y Y Y 106120.96 </div>	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶						

(a) SUBTOTAL of Itemized Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px; text-align: right;"> M M / D D / Y Y Y Y Y Y 14684.00 </div>
(b) SUBTOTAL of Unitemized Independent Expenditures..... ▶	<div style="border: 1px solid black; padding: 2px; text-align: right;"> M M / D D / Y Y Y Y Y Y 0.00 </div>
(c) TOTAL Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px; text-align: right;"> M M / D D / Y Y Y Y Y Y 14684.00 </div>

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

Signature Saenz, Adrian, , , *[Electronically Filed]* Date M M / D D / Y Y Y Y Y Y
 09 / 19 / 2018

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full)
LATINO VICTORY FUND
FEC IDENTIFICATION NUMBER
C C00562777

Check if 24-hour report 48-hour report
New report Amends report filed on

Full Name of Payee: The Hamilton Campaign Network LLC
Mailing Address: 5030 Broadway, Suite 810
City: New York, State: NY, Zip Code: 10034
Purpose of Expenditure: Community Advertising and Organizing, Non-contribution Account
Date of Public Distribution/Dissemination: 08/17/2018
Amount: 16000.00
Transaction ID: SE.6408
Date of Disbursement or Obligation: 08/17/2018
Name of Federal Candidate: SOTO, DARREN, , ,
Office Sought: House, District: 09, State: FL
Disbursement For: Primary

Full Name of Payee: The Hamilton Campaign Network LLC
Mailing Address: 5030 Broadway, Suite 810
City: New York, State: NY, Zip Code: 10034
Purpose of Expenditure: Outdoor Advertising, Non-contribution Account
Date of Public Distribution/Dissemination: 08/17/2018
Amount: 5000.00
Transaction ID: SE.6410
Date of Disbursement or Obligation: 08/17/2018
Name of Federal Candidate: SOTO, DARREN, , ,
Office Sought: House, District: 09, State: FL
Disbursement For: Primary

(a) SUBTOTAL of Itemized Independent Expenditures 21000.00
(b) SUBTOTAL of Unitemized Independent Expenditures.....
(c) TOTAL Independent Expenditures

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

Saenz, Adrian, , ,

[Electronically Filed]

Date 09/19/2018

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full)
LATINO VICTORY FUND
FEC IDENTIFICATION NUMBER
C C00562777

Check if 24-hour report 48-hour report
New report Amends report filed on

Full Name of Payee: The Hamilton Campaign Network LLC
Mailing Address: 5030 Broadway, Suite 810
City: New York, State: NY, Zip Code: 10034
Purpose of Expenditure: Text Messaging, Non-contribution Account
Date of Public Distribution/Dissemination: 08/17/2018
Amount: 1684.00
Transaction ID: SE.6412
Date of Disbursement or Obligation: 08/17/2018
Name of Federal Candidate: SOTO, DARREN, , , Support
Office Sought: House, District: 09, State: FL
Calendar Year-To-Date Per Election for Office Sought: 130804.96
Disbursement For: Primary

Full Name of Payee: The Hamilton Campaign Network LLC
Mailing Address: 5030 Broadway, Suite 810
City: New York, State: NY, Zip Code: 10034
Purpose of Expenditure: Media, Non-contribution Account
Date of Public Distribution/Dissemination: 08/21/2018
Amount: 150000.00
Transaction ID: SE.6451
Date of Disbursement or Obligation: 08/21/2018
Name of Federal Candidate: SOTO, DARREN, , , Support
Office Sought: House, District: 09, State: FL
Calendar Year-To-Date Per Election for Office Sought: 313023.44
Disbursement For: Primary

(a) SUBTOTAL of Itemized Independent Expenditures 151684.00
(b) SUBTOTAL of Unitemized Independent Expenditures.....
(c) TOTAL Independent Expenditures

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

Saenz, Adrian, , ,

[Electronically Filed]

Date 09/19/2018

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full)
LATINO VICTORY FUND
FEC IDENTIFICATION NUMBER
C C00562777

Check if 24-hour report 48-hour report
New report Amends report filed on

Full Name of Payee: The Hamilton Campaign Network LLC
Mailing Address: 5030 Broadway, Suite 810
City: New York, State: NY, Zip Code: 10034
Purpose of Expenditure: Text Messaging, Non-contribution Account
Date of Public Distribution/Dissemination: 08/21/2018
Amount: 1684.00
Transaction ID: SE.6455
Date of Disbursement or Obligation: 08/21/2018
Name of Federal Candidate: SOTO, DARREN, , , Support
Office Sought: House, District: 09, State: FL
Calendar Year-To-Date Per Election for Office Sought: 314707.44
Disbursement For: Primary

Full Name of Payee: The Hamilton Campaign Network LLC
Mailing Address: 5030 Broadway, Suite 810
City: New York, State: NY, Zip Code: 10034
Purpose of Expenditure: Digital Advertising, Non-contribution Account
Date of Public Distribution/Dissemination: 08/21/2018
Amount: 50000.00
Transaction ID: SE.6458
Date of Disbursement or Obligation: 08/21/2018
Name of Federal Candidate: SOTO, DARREN, , , Support
Office Sought: House, District: 09, State: FL
Calendar Year-To-Date Per Election for Office Sought: 364707.44
Disbursement For: Primary

(a) SUBTOTAL of Itemized Independent Expenditures 51684.00
(b) SUBTOTAL of Unitemized Independent Expenditures.....
(c) TOTAL Independent Expenditures

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

Saenz, Adrian, , ,

[Electronically Filed]

Date 09/19/2018

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full)
LATINO VICTORY FUND
FEC IDENTIFICATION NUMBER
C C00562777

Check if 24-hour report 48-hour report
New report Amends report filed on

Full Name of Payee
The Hamilton Campaign Network LLC
Mailing Address
5030 Broadway, Suite 810
City
New York State
NY Zip Code
10034
Purpose of Expenditure
Text Messaging
Category/Type
Amount
1684.00
Transaction ID : SE.6464
Date of Disbursement or Obligation
08 / 23 / 2018

Name of Federal Candidate:
SOTO, DARREN, ,
Support Oppose
Office Sought:
House Senate State: FL
District: 09
Disbursement For:
Primary General
Other (specify)

Full Name of Payee
The Hamilton Campaign Network LLC
Mailing Address
5030 Broadway, Suite 810
City
New York State
NY Zip Code
10034
Purpose of Expenditure
Outdoor Advertising
Category/Type
Amount
6000.00
Transaction ID : SE.6475
Date of Disbursement or Obligation
08 / 24 / 2018

Name of Federal Candidate:
SOTO, DARREN, ,
Support Oppose
Office Sought:
House Senate State: FL
District: 09
Disbursement For:
Primary General
Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 7684.00
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

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

Saenz, Adrian, ,
Signature

[Electronically Filed]

Date
09 / 19 / 2018

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full)
LATINO VICTORY FUND
FEC IDENTIFICATION NUMBER
C C00562777

Check if 24-hour report 48-hour report
New report Amends report filed on

Full Name of Payee: The Hamilton Campaign Network LLC
Mailing Address: 5030 Broadway, Suite 810
City: New York, State: NY, Zip Code: 10034
Purpose of Expenditure: Community Advertising
Date of Public Distribution/Dissemination: 08/25/2018
Amount: 6000.00
Transaction ID: SE.6478
Date of Disbursement or Obligation: 08/25/2018

Name of Federal Candidate: SOTO, DARREN, ,
Support/Office Sought: House, District: 09, State: FL
Calendar Year-To-Date Per Election for Office Sought: 378391.44
Disbursement For: Primary

Full Name of Payee: The Hamilton Campaign Network LLC
Mailing Address: 5030 Broadway, Suite 810
City: New York, State: NY, Zip Code: 10034
Purpose of Expenditure: Text Messaging
Date of Public Distribution/Dissemination: 08/26/2018
Amount: 1684.00
Transaction ID: SE.6481
Date of Disbursement or Obligation: 08/26/2018

Name of Federal Candidate: SOTO, DARREN, ,
Support/Office Sought: House, District: 09, State: FL
Calendar Year-To-Date Per Election for Office Sought: 380075.44
Disbursement For: Primary

(a) SUBTOTAL of Itemized Independent Expenditures: 7684.00
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

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Saenz, Adrian, , [Electronically Filed]
Signature Date: 09/19/2018

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

NAME OF COMMITTEE (In Full) LATINO VICTORY FUND	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00562777 </div>
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Check if 24-hour report 48-hour report ➤ New report Amends report filed on M M / D D / Y Y Y Y Y Y

Full Name of Payee <input type="checkbox"/> Memo Item The Hamilton Campaign Network LLC	Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 08 / 27 / 2018						
Mailing Address 5030 Broadway, Suite 810	Amount 424.20 Transaction ID : SE.6483 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 08 / 27 / 2018						
<table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:33%;">City</td> <td style="width:33%;">State</td> <td style="width:33%;">Zip Code</td> </tr> <tr> <td>New York</td> <td>NY</td> <td>10034</td> </tr> </table>		City	State	Zip Code	New York	NY	10034
City		State	Zip Code				
New York	NY	10034					
Purpose of Expenditure Text Messaging, Non-contribution Account							
Name of Federal Candidate: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose SOTO, DARREN, , ,	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> President <input type="checkbox"/> Senate District: 09 State: FL						
Calendar Year-To-Date Per Election for Office Sought 380499.64	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶						

Full Name of Payee <input type="checkbox"/> Memo Item The Hamilton Campaign Network LLC	Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 08 / 28 / 2018						
Mailing Address 5030 Broadway, Suite 810	Amount 1684.00 Transaction ID : SE.6713 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 08 / 28 / 2018						
<table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:33%;">City</td> <td style="width:33%;">State</td> <td style="width:33%;">Zip Code</td> </tr> <tr> <td>New York</td> <td>NY</td> <td>10034</td> </tr> </table>		City	State	Zip Code	New York	NY	10034
City		State	Zip Code				
New York	NY	10034					
Purpose of Expenditure Text Messaging							
Name of Federal Candidate: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose SOTO, DARREN, , ,	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> President <input type="checkbox"/> Senate District: 09 State: FL						
Calendar Year-To-Date Per Election for Office Sought 382183.64	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶						

(a) SUBTOTAL of Itemized Independent Expenditures ▶	2108.20
(b) SUBTOTAL of Unitemized Independent Expenditures..... ▶	
(c) TOTAL Independent Expenditures ▶	

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Saenz, Adrian, , ,

[Electronically Filed]

Date M M / D D / Y Y Y Y Y Y
09 / 19 / 2018

Signature

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

NAME OF COMMITTEE (In Full) LATINO VICTORY FUND	FEC IDENTIFICATION NUMBER ▼ C C00562777
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Check if 24-hour report 48-hour report New report Amends report filed on / /

Full Name of Payee <input type="checkbox"/> Memo Item The Hamilton Campaign Network LLC		Date of Public Distribution/Dissemination <input type="text"/> / <input type="text"/> / <input type="text"/>	
Mailing Address 5030 Broadway, Suite 810		Amount <input type="text"/>	
City New York	State NY	Zip Code 10034	Transaction ID : SE.6714
Purpose of Expenditure Text Messaging		Category/ Type <input type="text"/>	Date of Disbursement or Obligation <input type="text"/> / <input type="text"/> / <input type="text"/>
Name of Federal Candidate: SOTO, DARREN, , ,		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House District: <u>09</u> <input type="checkbox"/> President <input type="checkbox"/> Senate State: <u>FL</u>
Calendar Year-To-Date Per Election for Office Sought <input type="text"/>		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ _____	

Full Name of Payee <input type="checkbox"/> Memo Item		Date of Public Distribution/Dissemination	
Mailing Address		Amount	
City	State	Zip Code	Date of Disbursement or Obligation
Purpose of Expenditure		Category/ Type <input type="text"/>	<input type="text"/> / <input type="text"/> / <input type="text"/>
Name of Federal Candidate:		<input type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input type="checkbox"/> Senate State: _____
Calendar Year-To-Date Per Election for Office Sought <input type="text"/>		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ _____	

(a) SUBTOTAL of Itemized Independent Expenditures	<input type="text"/>
(b) SUBTOTAL of Unitemized Independent Expenditures.....	<input type="text"/>
(c) TOTAL Independent Expenditures	<input type="text"/>

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Saenz, Adrian, , , [Electronically Filed] Date / /

Signature