

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS For Other Than An Authorized Committee

Office Use Only

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

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

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

4. TYPE OF REPORT (Choose One)
(a) Quarterly Reports:
 April 15 Quarterly Report (Q1)
 July 15 Quarterly Report (Q2)
 October 15 Quarterly Report (Q3)
 January 31 Year-End Report (YE)
 July 31 Mid-Year Report (Non-election Year Only) (MY)
 Termination Report (TER)
(b) Monthly Report Due On:
 Feb 20 (M2)  May 20 (M5)  Aug 20 (M8)  Nov 20 (M11) (Non-Election Year Only)
 Mar 20 (M3)  Jun 20 (M6)  Sep 20 (M9)  Dec 20 (M12) (Non-Election Year Only)
 Apr 20 (M4)  Jul 20 (M7)  Oct 20 (M10)  Jan 31 (YE)
(c) 12-Day PRE-Election Report for the:
 Primary (12P)  General (12G)  Runoff (12R)
 Convention (12C)  Special (12S)
Election on M M / D D / Y Y Y Y Y Y in the State of
(d) 30-Day POST-Election Report for the:
 General (30G)  Runoff (30R)  Special (30S)
Election on M M / D D / Y Y Y Y Y Y in the State of

5. Covering Period 12 / 01 / 2023 through 12 / 31 / 2023

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

Signature of Treasurer Gonzalez, Maria, R., , Date 02 / 22 / 2024

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

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 05/2016)

Write or Type Committee Name

LATINO VICTORY FUND

Report Covering the Period: From: 12 / 01 / 2023 To: 12 / 31 / 2023

Table with 2 columns: COLUMN A This Period, COLUMN B Calendar Year-to-Date. Rows include: 6. (a) Cash on Hand January 1, 2023 (768662.21); (b) Cash on Hand at Beginning of Reporting Period (753638.21); (c) Total Receipts (from Line 19) (56906.44 / 652316.17); (d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) (810544.65 / 1420978.38); 7. Total Disbursements (from Line 31) (98440.45 / 708874.18); 8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) (712104.20 / 712104.20); 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).

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

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

**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).....	265.00	7815.00
(ii) Unitemized .....	210.00	3496.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	475.00	11311.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	7500.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) .....	475.00	18811.00
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received .....	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	1500.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	1000.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	56431.44	631005.17
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)).....▶	56906.44	652316.17
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	56906.44	652316.17

**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 .....	1863.85	43171.70
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	1863.85	43171.70
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	5000.00	15000.00
24. Independent Expenditures (use Schedule E) .....	0.00	19552.00
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	5.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	5000.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	5005.00
29. Other Disbursements (Including Non-Federal Donations).....	91576.60	626145.48
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)) ..	98440.45	708874.18
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	98440.45	708874.18

**DETAILED SUMMARY PAGE**  
of Disbursements

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Page 5

<b>III. Net Contributions/ Operating Expenditures</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Calendar Year-to-Date</b>
33. Total Contributions (other than loans) (from Line 11(d), page 3) .....	475.00	18811.00
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	5005.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	475.00	13806.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	1863.85	43171.70
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	1500.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	1863.85	41671.70

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER:	PAGE 6 OF 20
(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
<input type="checkbox"/> 13	<input type="checkbox"/> 14
<input type="checkbox"/> 15	<input type="checkbox"/> 12
	<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**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**A. Garrett, Christopher, , ,**

Mailing Address 1430 Clay St

City San Francisco	State CA	Zip Code 94109
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) LinkedIn	Occupation (for Individual) Software Engineer
---	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
550.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 21 / 2023

**Transaction ID : SA11AI.9408**

Amount of Each Receipt this Period  
50.00

Memo Item  
Conduit: ActBlue

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**B. Lewis, Michael, , ,**

Mailing Address 7536 S Ivanhoe Circle

City Centennial	State CO	Zip Code 80112
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Janssen	Occupation (for Individual) Scientist
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
350.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 06 / 2023

**Transaction ID : SA11AI.9389**

Amount of Each Receipt this Period  
50.00

Memo Item  
Conduit: ActBlue

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**C. Lynch, Tom, , ,**

Mailing Address 210 2nd St NW

City Parshall	State ND	Zip Code 58770
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Not Employed	Occupation (for Individual) Not Employed
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Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
205.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 30 / 2023

**Transaction ID : SA11AI.9417**

Amount of Each Receipt this Period  
15.00

Memo Item  
Conduit: ActBlue

<b>SUBTOTAL</b> of Receipts This Page (optional).....	115.00
<b>TOTAL</b> 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 20
	<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**

**A. Olivo, Cristobal, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 574 West 192 street  
 City New York State NY Zip Code 10040  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Twins Pharmacy Occupation (for Individual) Pharmacy  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt 12 / 03 / 2023  
**Transaction ID : SA11AI.9380**  
 Amount of Each Receipt this Period 25.00  
 Memo Item  
 Conduit: Actblue

**B. Rodriguez, Yamelsie, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 8507 West Madison Drive  
 City Niles State IL Zip Code 60714  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Planned Parenthood of the St Louis Reg Occupation (for Individual) President & CEO  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt 12 / 10 / 2023  
**Transaction ID : SA11AI.9390**  
 Amount of Each Receipt this Period 25.00  
 Memo Item  
 Conduit: ActBlue

**C. Solis Doyle, Patti, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 3719 Morrison Street  
 City Washington State DC Zip Code 20015  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) The Brunswick Group Occupation (for Individual) Partner  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 1100.00

Date of Receipt 12 / 17 / 2023  
**Transaction ID : SA11AI.9404**  
 Amount of Each Receipt this Period 100.00  
 Memo Item  
 Conduit: ActBlue

<b>SUBTOTAL</b> of Receipts This Page (optional).....	150.00
<b>TOTAL</b> This Period (last page this line number only).....	265.00

**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 8 OF 20
<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
12		31		2023

**Transaction ID : SA11C.9424**

Amount of Each Receipt this Period  

475.00
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Memo Item

Total Received From Conduit During This Reporting Period

**B. 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
12		31		2023

**Transaction ID : SA11C.9456**

Amount of Each Receipt this Period  

1431.44
---------

Memo Item

Total Received Through Conduit During This Reporting Period, Non-Contribution Account

**C.**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Mailing Address

City	State	Zip Code
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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 ▼

Date of Receipt  

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

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Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	0.00
<b>TOTAL</b> This Period (last page this line number only).....▶	0.00



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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 9 OF 20
<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. Acosta, Vasthi, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 98 Park Ter E  
 City New York State NY Zip Code 10034  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Not Employed Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 12 / 21 / 2023  
**Transaction ID : SA17.9444**  
 Amount of Each Receipt this Period 500.00  
 Memo Item  
 Conduit: ActBlue, Non-Contribution Account

**B. AFT SOLIDARITY**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 555 NEW JERSEY AVE N.W.  
 City WASHINGTON State DC Zip Code 20001  
 FEC ID number of contributing federal political committee. **C** C30003065  
 Name of Employer (for Individual) Occupation (for Individual)  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 150000.00

Date of Receipt 12 / 06 / 2023  
**Transaction ID : SA17.9458**  
 Amount of Each Receipt this Period 50000.00  
 Memo Item  
 Contribution, Non-Contribution Account

**C. Campuzano, Sol-Angel, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 16032 Circle Diamond Rd  
 City Sylmar State CA Zip Code 91342  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Not Employed Occupation (for Individual) Retired  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 12 / 21 / 2023  
**Transaction ID : SA17.9448**  
 Amount of Each Receipt this Period 30.00  
 Memo Item  
 Conduit: ActBlue, Non-Contribution Account

<b>SUBTOTAL</b> of Receipts This Page (optional).....	50530.00
<b>TOTAL</b> This Period (last page this line number only).....	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 10 OF 20  
(check only one)

<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**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**A. Crane, Jiilaurie, , ,**

Mailing Address 1447 Strado Doro

City Venice	State FL	Zip Code 34292
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Not Employed	Occupation (for Individual) Retired
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Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
210.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 10 / 2023

**Transaction ID : SA17.9436**

Amount of Each Receipt this Period  
10.00

Memo Item  
Conduit: ActBlue, Non-Contribution Account

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**B. Crane, Jiilaurie, , ,**

Mailing Address 1447 Strado Doro

City Venice	State FL	Zip Code 34292
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Not Employed	Occupation (for Individual) Retired
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Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
220.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 17 / 2023

**Transaction ID : SA17.9438**

Amount of Each Receipt this Period  
10.00

Memo Item  
Conduit: ActBlue, Non-Contribution Account

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**C. Mendez, Zenaida, , ,**

Mailing Address 790 11th Ave  
Suite 26A

City Manhattan	State NY	Zip Code 10019
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Manhattan Neighborhood Network	Occupation (for Individual) Director
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Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 21 / 2023

**Transaction ID : SA17.9442**

Amount of Each Receipt this Period  
250.00

Memo Item  
Conduit: ActBlue, Non-Contribution Account

<b>SUBTOTAL</b> of Receipts This Page (optional).....	270.00
<b>TOTAL</b> 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 11 OF 20
<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.** Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Oyola, Maria, , ,

Mailing Address 8500 Pennsylvania Ave

City Upper Marlboro	State MD	Zip Code 20772
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) EAS Regional Council of Carpen	Occupation (for Individual) Council Representative
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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
12	/	19	/	2023

**Transaction ID : SA17.9447**

Amount of Each Receipt this Period  
500.00

Memo Item  
Conduit: ActBlue, Non-Contribution Account

**B.** Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Salas, Ron, , ,

Mailing Address 323 W Drake  
Ste 116

City Fort Collins	State CO	Zip Code 80526
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) The Salas Law Firm	Occupation (for Individual) Attorney
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Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
242.64

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	20	/	2023

**Transaction ID : SA17.9450**

Amount of Each Receipt this Period  
20.22

Memo Item  
Conduit: ActBlue, Non-Contribution Account

**C.** Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Sheet Metal Air Rail Transportation Political Education League

Mailing Address 1750 New York Ave NW  
Suite 600

City Washington	State DC	Zip Code 20006
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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 ▼  
5000.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	08	/	2023

**Transaction ID : SA17.9459**

Amount of Each Receipt this Period  
5000.00

Memo Item  
Contribution, Non-Contribution Account

<b>SUBTOTAL</b> of Receipts This Page (optional).....	5520.22
<b>TOTAL</b> This Period (last page this line number only).....	56320.22

# 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 Fee

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: MM / DD / YYYY  
12 / 03 / 2023

FEC Identification Number: C  
Transaction ID : **SB21B.9381**  
Amount of Each Disbursement this Period: 1.31

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  
12 / 10 / 2023

FEC Identification Number: C  
Transaction ID : **SB21B.9396**  
Amount of Each Disbursement this Period: 6.35

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  
Conduit: ActBlue

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: MM / DD / YYYY  
12 / 17 / 2023

FEC Identification Number: C  
Transaction ID : **SB21B.9405**  
Amount of Each Disbursement this Period: 5.50

Memo Item

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	13.16
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**LATINO VICTORY FUND**

Full Name (Last, First, Middle Initial)

**A. ActBlue Technical Services**

Mailing Address 366 Summer Street

City  
Somerville

State  
MA

Zip Code  
02144

Purpose of Disbursement  
Credit Card Processing Fees

001

Category/  
Type

Candidate Name

Office Sought:  
 House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
12			24			2023			

FEC Identification Number

C  
Transaction ID : SB21B.9416

Amount of Each Disbursement this Period

4.05
------

Memo Item

Full Name (Last, First, Middle Initial)

**B. ActBlue Technical Services**

Mailing Address 366 Summer Street

City  
Somerville

State  
MA

Zip Code  
02144

Purpose of Disbursement  
Credit Card Processing Fees

001

Category/  
Type

Candidate Name

Office Sought:  
 House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
12			31			2023			

FEC Identification Number

C  
Transaction ID : SB21B.9423

Amount of Each Disbursement this Period

1.64
------

Memo Item

Full Name (Last, First, Middle Initial)

**C. Capital One N.A.**

Mailing Address 1200 F Street NW

City  
Washington

State  
DC

Zip Code  
20004

Purpose of Disbursement  
Wire Transfer Fee

001

Category/  
Type

Candidate Name

Office Sought:  
 House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
12			01			2023			

FEC Identification Number

C  
Transaction ID : SB21B.9463

Amount of Each Disbursement this Period

15.00
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Memo Item

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

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

20.69
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# 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. Capital One N.A.**

Full Name (Last, First, Middle Initial)

Mailing Address 1200 F Street NW

City Washington State DC Zip Code 20004

Purpose of Disbursement  
Wire Transfer Fee  001  
Candidate Name

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

Date of Disbursement: 12 / 04 / 2023

FEC Identification Number: C  
Transaction ID : SB21B.9465  
Amount of Each Disbursement this Period: 15.00

Memo Item

**B. Capital One N.A.**

Full Name (Last, First, Middle Initial)

Mailing Address 1200 F Street NW

City Washington State DC Zip Code 20004

Purpose of Disbursement  
Wire Transfer Fee  001  
Candidate Name

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

Date of Disbursement: 12 / 11 / 2023

FEC Identification Number: C  
Transaction ID : SB21B.9466  
Amount of Each Disbursement this Period: 15.00

Memo Item

**C. Capital One N.A.**

Full Name (Last, First, Middle Initial)

Mailing Address 1200 F Street NW

City Washington State DC Zip Code 20004

Purpose of Disbursement  
Wire Transfer Fee  001  
Candidate Name

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

Date of Disbursement: 12 / 25 / 2023

FEC Identification Number: C  
Transaction ID : SB21B.9467  
Amount of Each Disbursement this Period: 25.00

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 55.00

**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

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NAME OF COMMITTEE (In Full)  
**LATINO VICTORY FUND**

**A. Capital One N.A.**

Full Name (Last, First, Middle Initial)

Mailing Address 1200 F Street NW

City Washington State DC Zip Code 20004

Purpose of Disbursement  
Wire Transfer Fee  001  
Candidate Name

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

State: District:

Date of Disbursement: 12 / 26 / 2023

FEC Identification Number: C  
Transaction ID : SB21B.9472  
Amount of Each Disbursement this Period: 15.00

Memo Item

**B. Capital One N.A.**

Full Name (Last, First, Middle Initial)

Mailing Address 1200 F Street NW

City Washington State DC Zip Code 20004

Purpose of Disbursement  
Wire Transfer Fee  001  
Candidate Name

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

State: District:

Date of Disbursement: 12 / 27 / 2023

FEC Identification Number: C  
Transaction ID : SB21B.9473  
Amount of Each Disbursement this Period: 25.00

Memo Item

**C. Paragon Solutions**

Full Name (Last, First, Middle Initial)

Mailing Address 2141 E Broadway Rd Ste 202

City Tempe State AZ Zip Code 85282

Purpose of Disbursement  
Credit Card Processing Fee  001  
Candidate Name

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

State: District:

Date of Disbursement: 12 / 04 / 2023

FEC Identification Number: C  
Transaction ID : SB21B.9464  
Amount of Each Disbursement this Period: 20.00

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 60.00

**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

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NAME OF COMMITTEE (In Full)  
**LATINO VICTORY FUND**

**A. The Money Wheel LLC**

Full Name (Last, First, Middle Initial)

Mailing Address 1325 W Holly St

City Phoenix State AZ Zip Code 85007

Purpose of Disbursement  
Compliance Services

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: 12 / 11 / 2023

FEC Identification Number: C

Transaction ID : SB21B.9468

Amount of Each Disbursement this Period: 1500.00

Memo Item

**B.**

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement:

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:

FEC Identification Number: C

Amount of Each Disbursement this Period:

Memo Item

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	1500.00
<b>TOTAL</b> This Period (last page this line number only).....▶	1648.85



# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 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. ROLAND GUTIERREZ FOR TEXAS**

Full Name (Last, First, Middle Initial)

Mailing Address 104 BABCOCK ROAD  
STE 107

City SAN ANTONIO State TX Zip Code 78201

Purpose of Disbursement  
Contribution

Candidate Name  
GUTIERREZ, ROLAND, , ,

Office Sought:  House  Senate  President  
State: TX District: 00

Disbursement For: 2024  
 Primary  General  
 Other (specify) ▼

Date of Disbursement  
M M / D D / Y Y Y Y Y Y  
12 / 27 / 2023

FEC Identification Number  
C C00844977  
**Transaction ID : SB23.9483**

Amount of Each Disbursement this Period  
5000.00

Memo Item

**B.**

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify)

Date of Disbursement  
M M / D D / Y Y Y Y Y Y

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  
M M / D D / Y Y Y Y Y Y

FEC Identification Number  
C

Amount of Each Disbursement this Period

Memo Item

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	5000.00
<b>TOTAL</b> This Period (last page this line number only).....▶	5000.00

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

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

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input 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) <b>A. ActBlue Technical Services</b>		Date of Disbursement MM / DD / YYYY 12 / 03 / 2023	
Mailing Address 366 Summer Street		FEC Identification Number C [REDACTED] <b>Transaction ID : SB29.9426</b>	
City Somerville	State MA	Zip Code 02144	Amount of Each Disbursement this Period [REDACTED] 0.28
Purpose of Disbursement Credit Card Processing Fees, Non-Contribution Account		Category/ Type 001	<input type="checkbox"/> Memo Item
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:			

Full Name (Last, First, Middle Initial) <b>B. ActBlue Technical Services</b>		Date of Disbursement MM / DD / YYYY 12 / 10 / 2023	
Mailing Address 366 Summer Street		FEC Identification Number C [REDACTED] <b>Transaction ID : SB29.9437</b>	
City Somerville	State MA	Zip Code 02144	Amount of Each Disbursement this Period [REDACTED] 3.39
Purpose of Disbursement Credit Card Processing Fees, Non-Contribution Account		Category/ Type 001	<input type="checkbox"/> Memo Item
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:			

Full Name (Last, First, Middle Initial) <b>C. ActBlue Technical Services</b>		Date of Disbursement MM / DD / YYYY 12 / 17 / 2023	
Mailing Address 366 Summer Street		FEC Identification Number C [REDACTED] <b>Transaction ID : SB29.9439</b>	
City Somerville	State MA	Zip Code 02144	Amount of Each Disbursement this Period [REDACTED] 0.40
Purpose of Disbursement Credit Card Processing Fees, Non-Contribution Account		Category/ Type 001	<input type="checkbox"/> Memo Item
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:			

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	[REDACTED] 4.07
<b>TOTAL</b> 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 type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**LATINO VICTORY FUND**

Full Name (Last, First, Middle Initial)

### A. ActBlue Technical Services

Mailing Address 366 Summer Street

City  
Somerville

State  
MA

Zip Code  
02144

Purpose of Disbursement

Credit Card Processing Fees, Non-Contribution Account

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President

State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
12 / 24 / 2023

FEC Identification Number

Transaction ID : **SB29.9452**

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

### B. ActBlue Technical Services

Mailing Address 366 Summer Street

City  
Somerville

State  
MA

Zip Code  
02144

Purpose of Disbursement

Credit Card Processing Fees, Non-Contribution Account

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President

State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
12 / 31 / 2023

FEC Identification Number

Transaction ID : **SB29.9455**

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

### C. Latino Victory Project

Mailing Address PO Box 34104

City  
Washington

State  
DC

Zip Code  
20005

Purpose of Disbursement

Contribution

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President

State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
12 / 13 / 2023

FEC Identification Number

Transaction ID : **SB29.9488**

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**

**A. Latino Victory Project**

Full Name (Last, First, Middle Initial)  
Mailing Address PO Box 34104

City Washington State DC Zip Code 20005

Purpose of Disbursement  
Donation, Non-Contribution Account

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: 12 / 26 / 2023

FEC Identification Number: C  
Transaction ID : SB29.9462

Amount of Each Disbursement this Period: 40000.00

Memo Item

**B. Paragon Solutions**

Full Name (Last, First, Middle Initial)  
Mailing Address 2141 E Broadway Rd Ste 202

City Tempe State AZ Zip Code 85282

Purpose of Disbursement  
Credit Card Processing Fees, Non-Contribution Account

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: 12 / 04 / 2023

FEC Identification Number: C  
Transaction ID : SB29.9457

Amount of Each Disbursement this Period: 20.00

Memo Item

**C. The Money Wheel LLC**

Full Name (Last, First, Middle Initial)  
Mailing Address 1325 W Holly St

City Phoenix State AZ Zip Code 85007

Purpose of Disbursement  
Compliance Services, Non-Contribution Account

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: 12 / 11 / 2023

FEC Identification Number: C  
Transaction ID : SB29.9461

Amount of Each Disbursement this Period: 1500.00

Memo Item

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	41520.00
<b>TOTAL</b> This Period (last page this line number only).....▶	91576.60