RECEIVED
2012 OCT 24 AM 11: 39
FEC MAIL CENTER

Committee Name:
Latino Values
if registered, FEC ID:
Foday's Date:
10/03/12

Federal Election Commission 999 E Street, N.W. Washington, D.C. 20463

Re: Form 1, Statement of Organization - Unlimited Contributions

To Whom It May Concern:

This committee intends to make independent expenditures, and consistent with the U.S. Court of Appeals for the District of Columbia Circuit decision in SpeechNow v. FEC, it therefore intends to raise funds in unlimited amounts. This committee will not use those funds to make contributions, whether direct, in-kind, or via coordinated communications, to federal candidates or committees.

Respectfully submitted,

Treasurer's Name:

Howard DeLaCruz-Bancroft

, Treasurer

## 12030930942

FEC FORM 1

## STATEMENT OF ORGANIZATION

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			OFFICE OSEPANNI CENTER				
NAME OF     COMMITTEE (in full)	(Check if name is changed)	Example: If typing, type over the lines.	12FE4M5				
LATINO VALUES							
		<u>                                     </u>					
ADDRESS (number and street)	ADDRESS (number and street) $R_1, O_1, S_2 \times 111985$						
(Check if address is changed)							
	ALBUQUE RO	UE	STATE A ZIP CODE A				
COMMITTEE'S E-MAIL ADDRI	ESS						
(Check if address is changed)	LATINOVAL	VESOGMAIL.	SOM				
	Optional Second E-Mail Address NMGらい、TYのGMAIL と、COM						
COMMITTEE'S WEB PAGE ADDRESS (URL)  (Check if address is changed)  (Check if address is changed)							
2. DATE 10 19 20 1 2							
3. FEC IDENTIFICATION NUMBER ▶    C   C   C   C   C   C   C   C   C							
4. IS THIS STATEMENT	NEW (N) OR	AMENDED (A)					
I certify that I have examined this Statement and to the best of my knowledge and belief it is true, correct and complete.							
Type or Print Name of Treasurer HOWARD Dela CRUZ-BANCROST							
Signature of Treasurer Date 10 19 2012							
NOTE: Submission of talse, erroneous, or incomplete information may subject the person signing this Statement to the penalties of 2 U.S.C. §437g.  ANY CHANGE IN INFORMATION SHOULD BE REPORTED WITHIN 10 DAYS.							
Office Use Only		For further information of Federal Election Commission Toll Free 800-424-9530 Local 202-694-1100					

5.

		COMMITTEE • Cammitae:
(a)	:	This committee is a principal campaign committee. (Complete the candidate information below.)
(b)		This committee is an authorized committee, and is NOT a principal campaign committee. (Complete the candidate information below.)
Name Cand		
Cand Party	lidate Affiliatio	Office State on Sought: House Senate President District
(c)	¥	This committee supports/opposes only one candidate, and is NOT an authorized committee.
Name Cand		
Part	y Con	nmittee:
(d)		(National, State (Democratic, This committee is a or subordinate) committee of the Republican, etc.) Party.
Poli	tical A	ction Committee (PAC):
(e)	:	This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected organization is a
		Corporation Corporation w/o Capital Stock Labor Organization
		Membership Organization Trade Association Cooperative  In addition, this committee is a Lobbyist/Registrant PAC.
(f)	X	This committee supports/opposes more than one Federal candidate, and is NOT a separate segregated fund or party committee. (i.e., nonconnected committee)
		In addition, this committee is a Lobbyist/Registrant PAC.
		In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)
Join	t Fund	Iraising Representative:
(g)	÷ .	This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or more political committees/organizations, at least one of which is an authorized committee of a federal candidate.
(h)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or more political committees/organizations, none of which is an authorized committee of a federal candidate.
	Com	mittees Participating in Joint Fundraiser
	1.	FEC ID number C
	2.	FEC (D number C
	3.	FEC ID number C
	4.	

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Write or Type Cor	•	
LATI	NO VALUES	
6. Name of Any	y Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PA	AC Sponsor
		***************************************
Mailing Address	ss	
		-  , , ,
·	CITY STATE ZIP C	ODE
Relationship:	Connected Organization Affiliated Committee Joint Fundraising Representative	ip PAC Sponsor
7. Custodian of F books and reco	Records: Identify by name, address (phone number optional) and position of the person in possession cords.	on of committee
Full Name	HOWARD DELACEUZ-BANCROFT	
Mailing Address	100 000	
J		
	ALBUQUEROLE NM 197197	<u>}-[</u>
Title or Position	on CITY STATE ZIP C	ODE
DIREC	Telephone number 595-489	- <u> 54 93</u>
	t the name and address (phone number optional) of the treasurer of the committee; and the name and agent (e.g., assistant treasurer).	d address of
Full Name of Treasurer	HOWARD DELACRUZ-BANCROFT	
Mailing Address	P.O. BOX 11985	
	ALBUQUERQUE	<b>-</b> LJ
Title or Position	CITY STATE ZIP CO	ODE
DIREG	7(0, R   1   1   1   1   1   1   1   1   1	-5403

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T. II bloom of	,		
Full Name of Designated Agent			
Mailing Address			
	CITY	STATE	ZIP CODE
Title or Position		ne number	
Banks or Other Disafety deposit box     Name of Bank, De	epositories: List all banks or other depositories in which the c is or maintains funds. pository, etc.	ommittee deposits	funds, holds accounts, rents
L	WELLS FARGO		
Mailing Address	4800 EUBANK BLVD	NE	
		<u> </u>	
	ALBUQUERQUE	_ NM	[37,112]-
•	CITY	STATE	ZIP CODE
Name of Bank, De	pository, etc.		
[	<u>. 1 . 1 . 1 . 1 . 1 . 1 . 1 . 1 . 1 . 1</u>	<u>                                     </u>	· _1_1_1_1_1_1_1
Mailing Address		<u> </u>	
	CITY	STATE	ZIP CODE

## **Federal Election Commission ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS** The FEC added this page to the end of this filing to indicate how it was received. **Date of Receipt Hand Delivered** Postmarked **USPS First Class Mail** Postmarked (R/C) 10/19/12 **USPS** Registered/Certified Postmarked **USPS Priority Mail** Delivery Confirmation™ or Signature Confirmation™ Label Postmarked **USPS Express Mail** Postmark Illegible No Postmark **Shipping Date** Overnight Delivery Service (Specify): **Next Business Day Delivery Date of Receipt** Received from House Records & Registration Office Date of Receipt Received from Senate Public Records Office **Date of Receipt** Received from Electronic Filing Office Date of Receipt or Postmarked Other (Specify):

(3/2005)