

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 UNIDOSUS ACTION PAC

ADDRESS (number and street) 1126 16TH STREET NW SUITE 600 WASHINGTON DC 20036 Check if different than previously reported. (ACC)

2. FEC IDENTIFICATION NUMBER C C00684258 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 Election on 11/06/2018 in the State of PA

5. Covering Period 10/18/2018 through 11/26/2018

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

Type or Print Name of Treasurer

Signature of Treasurer Jacquéz, Albert, , , [Electronically Filed] Date 12/07/2018

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

UNIDOSUS ACTION PAC

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

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2018"/>	<input type="text" value="0.00"/>	<input type="text" value="0.00"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="360544.81"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="641832.08"/>	<input type="text" value="1116956.02"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<input type="text" value="1002376.89"/>	<input type="text" value="1116956.02"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="767349.84"/>	<input type="text" value="881928.97"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="235027.05"/>	<input type="text" value="235027.05"/>
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="8581.32"/>	

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

For further information contact:

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

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

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3X (Rev. 05/2016)

Write or Type Committee Name

UNIDOSUS ACTION PAC

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).....	641689.00	1116689.00
(ii) Unitemized	0.00	100.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	641689.00	1116789.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	641689.00	1116789.00
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).....	143.08	167.02
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)).....▶	641832.08	1116956.02
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	641832.08	1116956.02

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	34098.26	60933.62
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	34098.26	60933.62
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditures (use Schedule E)	341526.74	414378.38
25. Coordinated Party Expenditures (52 U.S.C. § 30116(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements (Including Non-Federal Donations).....	391724.84	406616.97
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)) ..	767349.84	881928.97
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	767349.84	881928.97

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)	641689.00	1116789.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	641689.00	1116789.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	34098.26	60933.62
37. Offsets to Operating Expenditures (from Line 15, page 3).....	143.08	167.02
38. Net Operating Expenditures (subtract Line 37 from Line 36)	33955.18	60766.60

**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 73
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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)
UNIDOSUS ACTION PAC

A. America Votes

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1155 Connecticut Avenue NW
Suite 600

City Washington State DC Zip Code 20036

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 ▼
257000.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 10 / 18 / 2018

Transaction ID : SA11AI.4424

Amount of Each Receipt this Period
107000.00

Memo Item

B. America Votes

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1155 Connecticut Avenue NW
Suite 600

City Washington State DC Zip Code 20036

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 ▼
507000.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 10 / 25 / 2018

Transaction ID : SA11AI.4427

Amount of Each Receipt this Period
250000.00

Memo Item

C. For Our Future Action Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 888 16th Street NW
Suite 605

City Washington State DC Zip Code 20006

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 ▼
522289.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 10 / 30 / 2018

Transaction ID : SA11AI.4426

Amount of Each Receipt this Period
197289.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	554289.00
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 73
	<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)
UNIDOSUS ACTION PAC

A. Human Rights Campaign Equality Votes PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1640 Rhode Island Avenue NW

City Washington	State DC	Zip Code 20036
--------------------	-------------	-------------------

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 ▼
25000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		30		2018

Transaction ID : SA11AI.4515

Amount of Each Receipt this Period
25000.00

Memo Item

B. New American Majority Action Fund-State Victory Action

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO Box 34607

City Washington	State DC	Zip Code 20043
--------------------	-------------	-------------------

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 ▼
60000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		22		2018

Transaction ID : SA11AI.4517

Amount of Each Receipt this Period
60000.00

Memo Item

C. UnidosUS Action Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1126 16th Street NW
Suite 600

City Washington	State DC	Zip Code 20036
--------------------	-------------	-------------------

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 ▼
2400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		24		2018

Transaction ID : SA11AI.4519

Amount of Each Receipt this Period
2400.00

Memo Item
In-kind - Endorsement Event Expenses

SUBTOTAL of Receipts This Page (optional).....	87400.00
TOTAL This Period (last page this line number only).....	641689.00

**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)
UNIDOSUS ACTION PAC

Full Name (Last, First, Middle Initial)

A. Amalgamated Bank

Mailing Address 1850 K Street NW

City
Washington

State
DC

Zip Code
20006

Purpose of Disbursement
Bank Fee

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
11			16			2018			

FEC Identification Number

C []

Transaction ID : **SB21B.4464**

Amount of Each Disbursement this Period

[] 177.00

Memo Item

Full Name (Last, First, Middle Initial)

B. Professionals for Non-profits

Mailing Address 1629 K Street NW
Suite 501

City
Washington

State
DC

Zip Code
20006

Purpose of Disbursement
Canvassing Management Services

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
11			26			2018			

FEC Identification Number

C []

Transaction ID : **SB21B.4467**

Amount of Each Disbursement this Period

[] 5955.00

Memo Item

Full Name (Last, First, Middle Initial)

C. Sandler, Reiff, Lamb, et al

Mailing Address 1090 Vermont Avenue NW
Suite 750

City
Washington

State
DC

Zip Code
20005

Purpose of Disbursement
Legal Services

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
10			29			2018			

FEC Identification Number

C []

Transaction ID : **SB21B.4440**

Amount of Each Disbursement this Period

[] 1535.00

Memo Item

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

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

[] 7667.00

[]

**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)
UNIDOSUS ACTION PAC

Full Name (Last, First, Middle Initial) A. Sandler, Reiff, Lamb, et al		Date of Disbursement MM / DD / YYYY 11 / 13 / 2018
Mailing Address 1090 Vermont Avenue NW Suite 750		FEC Identification Number C [] Transaction ID : SB21B.4463 Amount of Each Disbursement this Period [] 1897.50
City Washington	State DC	Zip Code 20005
Purpose of Disbursement Legal Expenses		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. UnidosUS Action Fund		Date of Disbursement MM / DD / YYYY 10 / 23 / 2018
Mailing Address 1126 16th Street NW Suite 600		FEC Identification Number C [] Transaction ID : SB21B.4436 Amount of Each Disbursement this Period [] 20000.00
City Washington	State DC	Zip Code 20036
Purpose of Disbursement Administrative Program Expenses		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. UnidosUS Action Fund		Date of Disbursement MM / DD / YYYY 10 / 24 / 2018
Mailing Address 1126 16th Street NW Suite 600		FEC Identification Number C [] Transaction ID : SB21B.4520 Amount of Each Disbursement this Period [] 2400.00
City Washington	State DC	Zip Code 20036
Purpose of Disbursement In-kind - Endorsement Event Expenses		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).....▶	[] 24297.50
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)
UNIDOSUS ACTION PAC

A. UnidosUS Action Fund

Full Name (Last, First, Middle Initial)

Mailing Address 1126 16th Street NW
Suite 600

City Washington State DC Zip Code 20036

Purpose of Disbursement Administration Program Expenses

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: MM / DD / YYYY
11 / 05 / 2018

FEC Identification Number: C

Transaction ID : SB21B.4454

Amount of Each Disbursement this Period: 1927.58

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).....▶	1927.58
TOTAL This Period (last page this line number only).....▶	33892.08

**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)
UNIDOSUS ACTION PAC

Full Name (Last, First, Middle Initial) A. Amazon.com		Date of Disbursement MM / DD / YYYY 10 / 28 / 2018	
Mailing Address 410 Terry Avenue North		FEC Identification Number C [REDACTED] Transaction ID : SB29.4528 Amount of Each Disbursement this Period [REDACTED] 185.83	
City Seattle	State WA	Zip Code 98109	Category/ Type [REDACTED]
Purpose of Disbursement Canvassing Supplies, Nonfederal Activity		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) ▼		Memo Item <input type="checkbox"/>
State: District:			

Full Name (Last, First, Middle Initial) B. Amazon.com		Date of Disbursement MM / DD / YYYY 10 / 30 / 2018	
Mailing Address 410 Terry Avenue North		FEC Identification Number C [REDACTED] Transaction ID : SB29.4533 Amount of Each Disbursement this Period [REDACTED] 85.25	
City Seattle	State WA	Zip Code 98109	Category/ Type [REDACTED]
Purpose of Disbursement Canvassing Supplies, Nonfederal Activity		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) ▼		Memo Item <input type="checkbox"/>
State: District:			

Full Name (Last, First, Middle Initial) C. Enterprise		Date of Disbursement MM / DD / YYYY 11 / 05 / 2018	
Mailing Address 1201 E. Erie Avenue		FEC Identification Number C [REDACTED] Transaction ID : SB29.4444 Amount of Each Disbursement this Period [REDACTED] 1251.04	
City Philadelphia	State PA	Zip Code 19124	Category/ Type [REDACTED]
Purpose of Disbursement Vehicle Rental, Independent Expenditure Supporting Gov. Tom Wolf		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) ▼		Memo Item <input type="checkbox"/>
State: District:			

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

[REDACTED] 1522.12

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)
UNIDOSUS ACTION PAC

Full Name (Last, First, Middle Initial)
A. Enterprise

Mailing Address 1201 E. Erie Avenue

City Philadelphia State PA Zip Code 19124

Purpose of Disbursement Rental Vehicles, Nonfederal Activity

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 11 / 05 / 2018

FEC Identification Number: C

Transaction ID : **SB29.4521**

Amount of Each Disbursement this Period: 13845.62

Memo Item

Full Name (Last, First, Middle Initial)
B. Professionals for Non-profits

Mailing Address 1629 K Street NW Suite 501

City Washington State DC Zip Code 20006

Purpose of Disbursement Canvassing, Nonfederal Activity

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 10 / 21 / 2018

FEC Identification Number: C

Transaction ID : **SB29.4496**

Amount of Each Disbursement this Period: 37569.09

Memo Item

Full Name (Last, First, Middle Initial)
C. Professionals for Non-profits

Mailing Address 1629 K Street NW Suite 501

City Washington State DC Zip Code 20006

Purpose of Disbursement Canvassing, Nonfederal Activity

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 10 / 21 / 2018

FEC Identification Number: C

Transaction ID : **SB29.4498**

Amount of Each Disbursement this Period: 24400.25

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 75814.96

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)
UNIDOSUS ACTION PAC

Full Name (Last, First, Middle Initial) A. Professionals for Non-profits		Date of Disbursement MM / DD / YYYY 11 / 04 / 2018
Mailing Address 1629 K Street NW Suite 501		FEC Identification Number C [] Transaction ID : SB29.4493 Amount of Each Disbursement this Period [] 10080.68
City Washington	State DC	Zip Code 20006
Purpose of Disbursement Canvassing, Independent Expenditure Supporting Gov. Tom Wolf		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. Professionals for Non-profits		Date of Disbursement MM / DD / YYYY 11 / 04 / 2018
Mailing Address 1629 K Street NW Suite 501		FEC Identification Number C [] Transaction ID : SB29.4497 Amount of Each Disbursement this Period [] 45640.75
City Washington	State DC	Zip Code 20006
Purpose of Disbursement Canvassing, Nonfederal Activity		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. Professionals for Non-profits		Date of Disbursement MM / DD / YYYY 11 / 04 / 2018
Mailing Address 1629 K Street NW Suite 501		FEC Identification Number C [] Transaction ID : SB29.4499 Amount of Each Disbursement this Period [] 26314.90
City Washington	State DC	Zip Code 20006
Purpose of Disbursement Canvassing, Nonfederal Activity		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)..... ▶

82036.33

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)
UNIDOSUS ACTION PAC

A. Professionals for Non-profits

Full Name (Last, First, Middle Initial)

Mailing Address 1629 K Street NW
Suite 501

City Washington State DC Zip Code 20006

Purpose of Disbursement
Canvassing, Independent Expenditure Supporting Gov. Tom Wolf

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 11 / 06 / 2018

FEC Identification Number: C

Transaction ID : **SB29.4495**

Amount of Each Disbursement this Period: 1278.55

Memo Item

B. Professionals for Non-profits

Full Name (Last, First, Middle Initial)

Mailing Address 1629 K Street NW
Suite 501

City Washington State DC Zip Code 20006

Purpose of Disbursement
Canvassing, Nonfederal Activity

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 11 / 06 / 2018

FEC Identification Number: C

Transaction ID : **SB29.4504**

Amount of Each Disbursement this Period: 15347.14

Memo Item

C. Professionals for Non-profits

Full Name (Last, First, Middle Initial)

Mailing Address 1629 K Street NW
Suite 501

City Washington State DC Zip Code 20006

Purpose of Disbursement
Canvassing, Nonfederal Activity

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 11 / 06 / 2018

FEC Identification Number: C

Transaction ID : **SB29.4507**

Amount of Each Disbursement this Period: 10088.74

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 26714.43

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)
UNIDOSUS ACTION PAC

A. Publix

Full Name (Last, First, Middle Initial)

Mailing Address 13750 W Colonial Drive

City Winter Garden State FL Zip Code 34787

Purpose of Disbursement Gas Cards, Nonfederal Activity

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 10 / 21 / 2018

FEC Identification Number: C

Transaction ID : SB29.4525

Amount of Each Disbursement this Period: 517.81

Memo Item

B. RPG Card Services

Full Name (Last, First, Middle Initial)

Mailing Address 2100 Western Court Suite 80

City Lisle State FL Zip Code 60532

Purpose of Disbursement Gas Cards, Nonfederal Activity

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 10 / 19 / 2018

FEC Identification Number: C

Transaction ID : SB29.4522

Amount of Each Disbursement this Period: 134.25

Memo Item

C. Solidarity Strategies LLC

Full Name (Last, First, Middle Initial)

Mailing Address 1090 Vermont Avenue NW Suite 300

City Washington State DC Zip Code 20005

Purpose of Disbursement Advertising, Nonfederal Activity

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 10 / 22 / 2018

FEC Identification Number: C

Transaction ID : SB29.4526

Amount of Each Disbursement this Period: 52000.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 52652.06

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)
UNIDOSUS ACTION PAC

Full Name (Last, First, Middle Initial) A. Solidarity Strategies LLC		Date of Disbursement MM / DD / YYYY 10 / 26 / 2018
Mailing Address 1090 Vermont Avenue NW Suite 300		FEC Identification Number C Transaction ID : SB29.4441 Amount of Each Disbursement this Period 15266.67
City Washington	State DC	
Zip Code 20005		Memo Item <input type="checkbox"/>
Purpose of Disbursement Printing, Nonfederal Activity	Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Solidarity Strategies LLC		Date of Disbursement MM / DD / YYYY 10 / 29 / 2018
Mailing Address 1090 Vermont Avenue NW Suite 300		FEC Identification Number C Transaction ID : SB29.4491 Amount of Each Disbursement this Period 110426.00
City Washington	State DC	
Zip Code 20005		Memo Item <input type="checkbox"/>
Purpose of Disbursement Advertising Production and Placement, Nonfederal Activity	Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Solidarity Strategies LLC		Date of Disbursement MM / DD / YYYY 10 / 29 / 2018
Mailing Address 1090 Vermont Avenue NW Suite 300		FEC Identification Number C Transaction ID : SB29.4529 Amount of Each Disbursement this Period 22500.00
City Washington	State DC	
Zip Code 20005		Memo Item <input type="checkbox"/>
Purpose of Disbursement Advertising, Nonfederal Activity	Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

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

148192.67

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)
UNIDOSUS ACTION PAC

Full Name (Last, First, Middle Initial) A. Solidarity Strategies LLC		Date of Disbursement MM / DD / YYYY 11 / 04 / 2018
Mailing Address 1090 Vermont Avenue NW Suite 300		FEC Identification Number C [REDACTED] Transaction ID : SB29.4442 Amount of Each Disbursement this Period 2730.58
City Washington	State DC	Zip Code 20005
Purpose of Disbursement Printing, Nonfederal Activity		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. Sunpass		Date of Disbursement MM / DD / YYYY 10 / 20 / 2018
Mailing Address 7941 Glades Road		FEC Identification Number C [REDACTED] Transaction ID : SB29.4524 Amount of Each Disbursement this Period 200.00
City Boca Raton	State FL	Zip Code 33434
Purpose of Disbursement Tolls, Nonfederal Activity		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. Sunpass		Date of Disbursement MM / DD / YYYY 11 / 06 / 2018
Mailing Address 7941 Glades Road		FEC Identification Number C [REDACTED] Transaction ID : SB29.4470 Amount of Each Disbursement this Period 18.33
City Boca Raton	State FL	Zip Code 33434
Purpose of Disbursement Tolls, Nonfederal Activity		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).....▶	2948.91
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)

Grid for line numbers: 21b, 22, 23, 26, 27, 28a, 28b, 28c, 29, 30b. Line 29 is checked.

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NAME OF COMMITTEE (In Full)
UNIDOSUS ACTION PAC

Form A: SVM, LP. Includes fields for Mailing Address (3727 N. Ventura Drive), City (Arlington Heights, IL), Zip Code (60004), Purpose of Disbursement (Gas Cards, Nonfederal Activity), Candidate Name, Office Sought, and Disbursement For (Primary/General/Other). Transaction ID: SB29.4530, Amount: 530.72.

Form B: WaWa. Includes fields for Mailing Address (13501 W Colonial Drive), City (Winter Garden, FL), Zip Code (34787), Purpose of Disbursement (Gas Cards, Nonfederal Activity), Candidate Name, Office Sought, and Disbursement For (Primary/General/Other). Transaction ID: SB29.4523, Amount: 169.50.

Form C: WaWa. Includes fields for Mailing Address (13501 W Colonial Drive), City (Winter Garden, FL), Zip Code (34787), Purpose of Disbursement (Gas Cards, Nonfederal Activity), Candidate Name, Office Sought, and Disbursement For (Primary/General/Other). Transaction ID: SB29.4527, Amount: 336.17.

SUBTOTAL of Disbursements This Page (optional) 1036.39
TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

<input 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)
UNIDOSUS ACTION PAC

Full Name (Last, First, Middle Initial)

A. WB Mason

Mailing Address 59 Centre Street

City Brockton State MA Zip Code 02301

Purpose of Disbursement
Canvassing Supplies, Nonfederal Activity

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	Y	Y
1	1		0	5		2	0	1	8		

FEC Identification Number

C []

Transaction ID : SB29.4472

Amount of Each Disbursement this Period

[] 250.66

Memo Item

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City State Zip Code

Purpose of Disbursement

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	Y	Y

FEC Identification Number

C []

Amount of Each Disbursement this Period

[]

Memo Item

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City State Zip Code

Purpose of Disbursement

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	Y	Y

FEC Identification Number

C []

Amount of Each Disbursement this Period

[]

Memo Item

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

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

[] 250.66

[] 391168.53

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 20 OF 73
	FOR LINE NUMBER: (check only one)
<input type="checkbox"/> 9	<input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)
UNIDOSUS ACTION PAC

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Morel Ink			Nature of Debt (Purpose): T-shirts
Mailing Address 4824 NE 42nd Avenue			
City Portland	State OR	Zip Code 97218	

Outstanding Balance Beginning This Period 0.00	Transaction ID : SD10.4537	
Amount Incurred This Period 4726.20	Payment This Period 0.00	Outstanding Balance at Close of This Period 4726.20

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Professionals for Non-profits			Nature of Debt (Purpose): Canvassing
Mailing Address 1629 K Street NW Suite 501			
City Washington	State DC	Zip Code 20006	

Outstanding Balance Beginning This Period 0.00	Transaction ID : SD10.4539	
Amount Incurred This Period 3855.12	Payment This Period 0.00	Outstanding Balance at Close of This Period 3855.12

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor			Nature of Debt (Purpose):
Mailing Address			
City	State	Zip Code	

Outstanding Balance Beginning This Period		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period

1) SUBTOTALS This Period This Page (optional)..... ▶	8581.32
2) TOTALS This Period (last page this line number only)..... ▶	8581.32
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) ▶	0.00
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	8581.32

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) UNIDOSUS ACTION PAC
FEC IDENTIFICATION NUMBER C C00684258

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

Full Name of Payee 3 Brothers Pizza
Mailing Address 2621 E Ontario Street
City Philadelphia State PA Zip Code 19124
Purpose of Expenditure Food and Beverage
Name of Federal Candidate: CASEY, ROBERT P, , JR
Calendar Year-To-Date Per Election for Office Sought 18440.45

Full Name of Payee Amazon.com
Mailing Address 410 Terry Avenue North
City Seattle State WA Zip Code 98109
Purpose of Expenditure Canvassing Supplies
Name of Federal Candidate: NELSON, BILL, ,
Calendar Year-To-Date Per Election for Office Sought 58786.60

(a) SUBTOTAL of Itemized Independent Expenditures 201.49
(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.

Jacquez, Albert, ,

[Electronically Filed]

Date 12 / 07 / 2018

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) UNIDOSUS ACTION PAC
FEC IDENTIFICATION NUMBER C C00684258

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

Full Name of Payee Amazon.com
Mailing Address 410 Terry Avenue North
City Seattle State WA Zip Code 98109
Purpose of Expenditure Canvassing Supplies
Date of Public Distribution/Dissemination 10/28/2018
Amount 157.95
Transaction ID: SE.4294
Date of Disbursement or Obligation 10/28/2018

Name of Federal Candidate: SOTO, DARREN, ,
Support Oppose
Office Sought: House District: 09
President Senate State: FL
Calendar Year-To-Date Per Election for Office Sought 15396.08
Disbursement For: Primary General 2018 Other (specify)

Full Name of Payee Amazon.com
Mailing Address 410 Terry Avenue North
City Seattle State WA Zip Code 98109
Purpose of Expenditure Gas Cards
Date of Public Distribution/Dissemination 10/28/2018
Amount 27.87
Transaction ID: SE.4296
Date of Disbursement or Obligation 10/28/2018

Name of Federal Candidate: MURPHY, STEPHANIE, ,
Support Oppose
Office Sought: House District: 07
President Senate State: FL
Calendar Year-To-Date Per Election for Office Sought 4385.66
Disbursement For: Primary General 2018 Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 185.82
(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.

Jacquez, Albert, , [Electronically Filed] Date 12/07/2018
Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) UNIDOSUS ACTION PAC
FEC IDENTIFICATION NUMBER C C00684258

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

Full Name of Payee Amazon.com
Mailing Address 410 Terry Avenue North
City Seattle State WA Zip Code 98109
Purpose of Expenditure Canvassing Supplies
Name of Federal Candidate: NELSON, BILL, , Support
Office Sought: Senate State: FL
Calendar Year-To-Date Per Election for Office Sought 245731.87
Disbursement For: General 2018

Full Name of Payee Amazon.com
Mailing Address 410 Terry Avenue North
City Seattle State WA Zip Code 98109
Purpose of Expenditure Canvassing Supplies
Name of Federal Candidate: SOTO, DARREN, , Support
Office Sought: House District: 09 State: FL
Calendar Year-To-Date Per Election for Office Sought 34895.84
Disbursement For: General 2018

(a) SUBTOTAL of Itemized Independent Expenditures 157.71
(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.

Jacquez, Albert, , [Electronically Filed] Date 12 / 07 / 2018
Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) UNIDOSUS ACTION PAC
FEC IDENTIFICATION NUMBER C C00684258

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

Full Name of Payee Amazon.com
Mailing Address 410 Terry Avenue North
City Seattle State WA Zip Code 98109
Purpose of Expenditure Canvassing Supplies
Name of Federal Candidate: MURPHY, STEPHANIE, , ,
Calendar Year-To-Date Per Election for Office Sought 7367.29
Disbursement For: General 2018

Full Name of Payee Burger King
Mailing Address 100 W. Erie Avenue
City Philadelphia State PA Zip Code 19133
Purpose of Expenditure Food and Beverage
Name of Federal Candidate: CASEY, ROBERT P, , , JR
Calendar Year-To-Date Per Election for Office Sought 20519.32
Disbursement For: General 2018

(a) SUBTOTAL of Itemized Independent Expenditures 77.53
(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.

Jacquez, Albert, , ,

[Electronically Filed]

Date 12 / 07 / 2018

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) UNIDOSUS ACTION PAC
FEC IDENTIFICATION NUMBER C C00684258

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

Full Name of Payee Cafe de Columbia
Mailing Address 2512 S Semoran Blvd
City Orlando State FL Zip Code 32822
Purpose of Expenditure Food and Beverage
Name of Federal Candidate: NELSON, BILL, , Support
Office Sought: Senate State: FL
Calendar Year-To-Date Per Election for Office Sought 245999.14
Disbursement For: General 2018

Full Name of Payee Cafe de Columbia
Mailing Address 2512 S Semoran Blvd
City Orlando State FL Zip Code 32822
Purpose of Expenditure Food and Beverage
Name of Federal Candidate: SOTO, DARREN, , Support
Office Sought: House State: FL
Calendar Year-To-Date Per Election for Office Sought 35010.85
Disbursement For: General 2018

(a) SUBTOTAL of Itemized Independent Expenditures 73.89
(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.

Jacquez, Albert, , [Electronically Filed] Date 12 / 07 / 2018
Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) UNIDOSUS ACTION PAC
FEC IDENTIFICATION NUMBER C C00684258

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

Full Name of Payee Cafe de Columbia
Mailing Address 2512 S Semoran Blvd
City Orlando State FL Zip Code 32822
Purpose of Expenditure Food and Beverage
Name of Federal Candidate: MURPHY, STEPHANIE, , , Support
Office Sought: House District: 07 State: FL
Calendar Year-To-Date Per Election for Office Sought 7387.58
Disbursement For: General 2018

Full Name of Payee Chick-Fil-A
Mailing Address 6350 S. Semoran Blvd.
City Orlando State FL Zip Code 32822
Purpose of Expenditure Food and Beverage
Name of Federal Candidate: NELSON, BILL, , , Support
Office Sought: Senate State: FL
Calendar Year-To-Date Per Election for Office Sought 245780.63
Disbursement For: General 2018

(a) SUBTOTAL of Itemized Independent Expenditures 54.75
(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.

Jacquez, Albert, , ,

[Electronically Filed]

Date 12 / 07 / 2018

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) UNIDOSUS ACTION PAC
FEC IDENTIFICATION NUMBER C C00684258

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

Full Name of Payee Chick-Fil-A
Mailing Address 6350 S. Semoran Blvd.
City Orlando State FL Zip Code 32822
Purpose of Expenditure Food and Beverage
Name of Federal Candidate: SOTO, DARREN, , ,
Calendar Year-To-Date Per Election for Office Sought 34937.29

Full Name of Payee Chick-Fil-A
Mailing Address 6350 S. Semoran Blvd.
City Orlando State FL Zip Code 32822
Purpose of Expenditure Food and Beverage
Name of Federal Candidate: MURPHY, STEPHANIE, , ,
Calendar Year-To-Date Per Election for Office Sought 7374.60

(a) SUBTOTAL of Itemized Independent Expenditures 48.76
(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.

Jacquez, Albert, , ,

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Date 12 / 07 / 2018

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) UNIDOSUS ACTION PAC
FEC IDENTIFICATION NUMBER C C00684258

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

Full Name of Payee Chipolte
Mailing Address 6607 S Semoran Blvd #108
City Orlando State FL Zip Code 32822
Purpose of Expenditure Food and Beverage
Date of Public Distribution/Dissemination 11/04/2018
Amount 155.32
Transaction ID: SE.4393
Date of Disbursement or Obligation 11/04/2018

Name of Federal Candidate: NELSON, BILL, ,
Support Oppose
Office Sought: House Senate
District: 00 State: FL
Calendar Year-To-Date Per Election for Office Sought 250919.46
Disbursement For: Primary General 2018 Other (specify)

Full Name of Payee Chipolte
Mailing Address 6607 S Semoran Blvd #108
City Orlando State FL Zip Code 32822
Purpose of Expenditure Food and Beverage
Date of Public Distribution/Dissemination 11/04/2018
Amount 132.01
Transaction ID: SE.4396
Date of Disbursement or Obligation 11/04/2018

Name of Federal Candidate: SOTO, DARREN, ,
Support Oppose
Office Sought: House Senate
District: 09 State: FL
Calendar Year-To-Date Per Election for Office Sought 36161.19
Disbursement For: Primary General 2018 Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 287.33
(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.

Jacquez, Albert, ,
Signature

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Date 12/07/2018

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) UNIDOSUS ACTION PAC
FEC IDENTIFICATION NUMBER C C00684258

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

Full Name of Payee Chipolte
Mailing Address 6607 S Semoran Blvd #108
City Orlando State FL Zip Code 32822
Purpose of Expenditure Food and Beverage
Name of Federal Candidate: MURPHY, STEPHANIE, , , Support
Office Sought: House District: 07 State: FL
Calendar Year-To-Date Per Election for Office Sought 7675.88
Disbursement For: General 2018

Full Name of Payee Dunkin Donuts
Mailing Address 130 Royall Street
City Canton State MA Zip Code 02021
Purpose of Expenditure Food and Beverage
Name of Federal Candidate: NELSON, BILL, , , Support
Office Sought: Senate State: FL
Calendar Year-To-Date Per Election for Office Sought 245608.29
Disbursement For: General 2018

(a) SUBTOTAL of Itemized Independent Expenditures 73.30
(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.

Jacquez, Albert, , , [Electronically Filed] Date 12 / 07 / 2018
Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) UNIDOSUS ACTION PAC
FEC IDENTIFICATION NUMBER C C00684258

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

Full Name of Payee Dunkin Donuts
Mailing Address 130 Royall Street
City Canton State MA Zip Code 02021
Purpose of Expenditure Food and Beverage
Name of Federal Candidate: CASEY, ROBERT P, , JR
Calendar Year-To-Date Per Election for Office Sought 20559.39
Disbursement For: General 2018

Full Name of Payee El Meson
Mailing Address 6622 Eagle Watch Drive
City Orlando State FL Zip Code 32822
Purpose of Expenditure Food and Beverage
Name of Federal Candidate: NELSON, BILL, ,
Calendar Year-To-Date Per Election for Office Sought 245646.62
Disbursement For: General 2018

(a) SUBTOTAL of Itemized Independent Expenditures 78.40
(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.

Jacquez, Albert, ,

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Date 12 / 07 / 2018

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SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) UNIDOSUS ACTION PAC
FEC IDENTIFICATION NUMBER C C00684258

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

Full Name of Payee El Meson
Mailing Address 6622 Eagle Watch Drive
City Orlando State FL Zip Code 32822
Purpose of Expenditure Food and Beverage
Name of Federal Candidate: MURPHY, STEPHANIE, , , Support
Office Sought: House District: 07 State: FL
Calendar Year-To-Date Per Election for Office Sought 7354.50
Disbursement For: General 2018

Full Name of Payee El Meson
Mailing Address 6622 Eagle Watch Drive
City Orlando State FL Zip Code 32822
Purpose of Expenditure Food and Beverage
Name of Federal Candidate: SOTO, DARREN, , , Support
Office Sought: House District: 09 State: FL
Calendar Year-To-Date Per Election for Office Sought 34823.38
Disbursement For: General 2018

(a) SUBTOTAL of Itemized Independent Expenditures 38.33
(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.

Jacquez, Albert, , ,

[Electronically Filed]

Date 12 / 07 / 2018

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

NAME OF COMMITTEE (In Full) UNIDOSUS ACTION PAC	FEC IDENTIFICATION NUMBER ▼ C C00684258
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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 Enterprise		Date of Public Distribution/Dissemination <input type="text"/> / <input type="text"/> / <input type="text"/>	
Mailing Address 1201 E. Erie Avenue		Amount <input type="text"/>	
City Philadelphia	State PA	Zip Code 19124	Transaction ID : SE.4278
Purpose of Expenditure Rental Vehicles - Actual		Category/ Type <input type="text"/>	Date of Disbursement or Obligation <input type="text"/> / <input type="text"/> / <input type="text"/>
Name of Federal Candidate: NELSON, BILL, , ,		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: <u>00</u> <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <u>FL</u>
Calendar Year-To-Date Per Election for Office Sought <input type="text"/>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶ _____	

Full Name of Payee <input type="checkbox"/> Memo Item Enterprise		Date of Public Distribution/Dissemination <input type="text"/> / <input type="text"/> / <input type="text"/>	
Mailing Address 1201 E. Erie Avenue		Amount <input type="text"/>	
City Philadelphia	State PA	Zip Code 19124	Transaction ID : SE.4280
Purpose of Expenditure Rental Vehicles - Actual		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 type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <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.

Jacquez, Albert, , ,

[Electronically Filed]

Date

/ /

Signature

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

NAME OF COMMITTEE (In Full) UNIDOSUS ACTION PAC	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00684258 </div>
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Check if 24-hour report 48-hour report ➤ New report Amends report filed on MM / DD / YYYY

Full Name of Payee <input type="checkbox"/> Memo Item Enterprise	Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 29 / 2018			
Mailing Address 1201 E. Erie Avenue	Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">489.33</div> Transaction ID : SE.4282 Date of Disbursement or Obligation MM / DD / YYYY 10 / 29 / 2018			
<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:33%;">City Philadelphia</td> <td style="width:33%;">State PA</td> <td style="width:33%;">Zip Code 19124</td> </tr> </table>		City Philadelphia	State PA	Zip Code 19124
City Philadelphia		State PA	Zip Code 19124	
Purpose of Expenditure Rental Vehicles - Actual				
Name of Federal Candidate: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose MURPHY, STEPHANIE, , ,	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> President <input type="checkbox"/> Senate District: 07 State: FL			
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;">7348.75</div>	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶			

Full Name of Payee <input type="checkbox"/> Memo Item Enterprise	Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 29 / 2018			
Mailing Address 1201 E. Erie Avenue	Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">1427.48</div> Transaction ID : SE.4284 Date of Disbursement or Obligation MM / DD / YYYY 10 / 29 / 2018			
<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:33%;">City Philadelphia</td> <td style="width:33%;">State PA</td> <td style="width:33%;">Zip Code 19124</td> </tr> </table>		City Philadelphia	State PA	Zip Code 19124
City Philadelphia		State PA	Zip Code 19124	
Purpose of Expenditure Rental Vehicles - Actual				
Name of Federal Candidate: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose SHALALA, DONNA, , ,	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> President <input type="checkbox"/> Senate District: 27 State: FL			
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;">3444.15</div>	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶			

(a) SUBTOTAL of Itemized Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px; display: inline-block;">1916.81</div>
(b) SUBTOTAL of Unitemized Independent Expenditures..... ▶	<div style="border: 1px solid black; padding: 2px; display: inline-block;"> </div>
(c) TOTAL Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px; display: inline-block;"> </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.

Jacquez, Albert, , ,

[Electronically Filed]

Date MM / DD / YYYY
12 / 07 / 2018

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) UNIDOSUS ACTION PAC
FEC IDENTIFICATION NUMBER C C00684258

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

Full Name of Payee Enterprise
Mailing Address 1201 E. Erie Avenue
City Philadelphia State PA Zip Code 19124
Purpose of Expenditure Vehicle Rental (to adjust previously reported estimated to actual)
Name of Federal Candidate: CASEY, ROBERT P, , JR
Calendar Year-To-Date Per Election for Office Sought 20366.17
Date of Public Distribution/Dissemination 11/05/2018
Amount -3377.78
Transaction ID: SE.4443
Date of Disbursement or Obligation 11/05/2018
Office Sought: Senate State: PA
Disbursement For: General 2018

Full Name of Payee FedExOffice
Mailing Address 6651 S Semoran Blvd #107
City Orlando State FL Zip Code 32822
Purpose of Expenditure Printing
Name of Federal Candidate: NELSON, BILL, ,
Calendar Year-To-Date Per Election for Office Sought 245827.23
Date of Public Distribution/Dissemination 11/03/2018
Amount 46.60
Transaction ID: SE.4368
Date of Disbursement or Obligation 11/03/2018
Office Sought: Senate State: FL
Disbursement For: General 2018

(a) SUBTOTAL of Itemized Independent Expenditures -3331.18
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

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Jacquez, Albert, ,

[Electronically Filed]

Date 12/07/2018

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) UNIDOSUS ACTION PAC
FEC IDENTIFICATION NUMBER C C00684258

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

Full Name of Payee FedExOffice
Mailing Address 6651 S Semoran Blvd #107
City Orlando State FL Zip Code 32822
Purpose of Expenditure Printing
Date of Public Distribution/Dissemination 11/03/2018
Amount 39.61
Transaction ID: SE.4371
Date of Disbursement or Obligation 11/03/2018

Name of Federal Candidate: SOTO, DARREN, , ,
Support Oppose
Office Sought: House District: 09
President Senate State: FL
Calendar Year-To-Date Per Election for Office Sought 34976.90
Disbursement For: Primary General 2018 Other (specify)

Full Name of Payee FedExOffice
Mailing Address 6651 S Semoran Blvd #107
City Orlando State FL Zip Code 32822
Purpose of Expenditure Printing
Date of Public Distribution/Dissemination 11/03/2018
Amount 6.99
Transaction ID: SE.4373
Date of Disbursement or Obligation 11/03/2018

Name of Federal Candidate: MURPHY, STEPHANIE, , ,
Support Oppose
Office Sought: House District: 07
President Senate State: FL
Calendar Year-To-Date Per Election for Office Sought 7381.59
Disbursement For: Primary General 2018 Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 46.60
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

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Jacquez, Albert, , , [Electronically Filed] Date 12/07/2018
Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) UNIDOSUS ACTION PAC
FEC IDENTIFICATION NUMBER C C00684258

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

Full Name of Payee FedExOffice
Mailing Address 2417 Ponce de Leon Blvd
City Miami State FL Zip Code 33134
Purpose of Expenditure Printing
Name of Federal Candidate: NELSON, BILL, , Support
Office Sought: Senate State: FL
Calendar Year-To-Date Per Election for Office Sought 245891.79
Disbursement For: General 2018

Full Name of Payee FedExOffice
Mailing Address 2417 Ponce de Leon Blvd
City Miami State FL Zip Code 33134
Purpose of Expenditure Printing
Name of Federal Candidate: SHALALA, DONNA, , Support
Office Sought: House District: 27 State: FL
Calendar Year-To-Date Per Election for Office Sought 8508.71
Disbursement For: General 2018

(a) SUBTOTAL of Itemized Independent Expenditures 129.12
(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.

Jacquez, Albert, ,

[Electronically Filed]

Date 12 / 07 / 2018

Signature

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

NAME OF COMMITTEE (In Full) UNIDOSUS ACTION PAC	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px;"> C C00684258 </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 FedExOffice	Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 11 / 03 / 2018
Mailing Address 10005 NW 41st St	Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">67.41</div> Transaction ID : SE.4380 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 11 / 03 / 2018
City State Zip Code Miami FL 33178	
Purpose of Expenditure Printing Category/Type	
Name of Federal Candidate: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose NELSON, BILL, , ,	Office Sought: <input type="checkbox"/> House District: 00 <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: FL
Calendar Year-To-Date Per Election for Office Sought 245959.20	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶

Full Name of Payee <input type="checkbox"/> Memo Item Four Sons Pizza	Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 11 / 06 / 2018
Mailing Address 3145 Kensington Avenue	Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">16.61</div> Transaction ID : SE.4460 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 11 / 06 / 2018
City State Zip Code Philadelphia PA 19133	
Purpose of Expenditure Food and Beverage Category/Type	
Name of Federal Candidate: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose CASEY, ROBERT P, , , JR	Office Sought: <input type="checkbox"/> House District: 00 <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: PA
Calendar Year-To-Date Per Election for Office Sought 20597.06	Disbursement For: <input type="checkbox"/> Primary <input checked="" 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;">84.02</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>

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Signature Jacquez, Albert, , ,

 Date M M / D D / Y Y Y Y Y Y
 12 / 07 / 2018

 [Electronically Filed]

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) UNIDOSUS ACTION PAC
FEC IDENTIFICATION NUMBER C C00684258

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

Full Name of Payee La Fuente
Mailing Address 5833 S Goldenrod Road E
City Orlando State FL Zip Code 32822
Purpose of Expenditure Food and Beverage
Name of Federal Candidate: NELSON, BILL, , ,
Calendar Year-To-Date Per Election for Office Sought 251487.66
Disbursement For: General 2018

Full Name of Payee La Fuente
Mailing Address 5833 S Goldenrod Road E
City Orlando State FL Zip Code 32822
Purpose of Expenditure Food and Beverage
Name of Federal Candidate: SOTO, DARREN, , ,
Calendar Year-To-Date Per Election for Office Sought 36261.99
Disbursement For: General 2018

(a) SUBTOTAL of Itemized Independent Expenditures 219.39
(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.

Jacquez, Albert, , ,

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Date 12 / 07 / 2018

Signature

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

NAME OF COMMITTEE (In Full) UNIDOSUS ACTION PAC	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00684258 </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 La Fuente	Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 11 / 04 / 2018						
Mailing Address 5833 S Goldenrod Road E	Amount <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px;"> 17.79 </div>						
<table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:33%; padding: 2px;">City</td> <td style="width:33%; padding: 2px;">State</td> <td style="width:33%; padding: 2px;">Zip Code</td> </tr> <tr> <td style="padding: 2px;">Orlando</td> <td style="padding: 2px;">FL</td> <td style="padding: 2px;">32822</td> </tr> </table>		City	State	Zip Code	Orlando	FL	32822
City		State	Zip Code				
Orlando	FL	32822					
Purpose of Expenditure Food and Beverage	Category/Type 						
Name of Federal Candidate: MURPHY, STEPHANIE, , ,	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> President <input type="checkbox"/> Senate District: 07 State: FL						
Calendar Year-To-Date Per Election for Office Sought	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶						
<div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px;"> 7693.67 </div>							

Full Name of Payee <input type="checkbox"/> Memo Item Lukoil Gas Station	Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 10 / 19 / 2018						
Mailing Address 201 W Lehigh Avenue	Amount <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px;"> 15.00 </div>						
<table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:33%; padding: 2px;">City</td> <td style="width:33%; padding: 2px;">State</td> <td style="width:33%; padding: 2px;">Zip Code</td> </tr> <tr> <td style="padding: 2px;">Philadelphia</td> <td style="padding: 2px;">PA</td> <td style="padding: 2px;">19133</td> </tr> </table>		City	State	Zip Code	Philadelphia	PA	19133
City		State	Zip Code				
Philadelphia	PA	19133					
Purpose of Expenditure Gas	Category/Type 						
Name of Federal Candidate: CASEY, ROBERT P, , , JR	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President District: 00 State: PA						
Calendar Year-To-Date Per Election for Office Sought	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶						
<div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px;"> 18424.79 </div>							

(a) SUBTOTAL of Itemized Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px;"> 32.79 </div>
(b) SUBTOTAL of Unitemized Independent Expenditures..... ▶	<div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px;"> 0.00 </div>
(c) TOTAL Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px;"> 32.79 </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 Jacquez, Albert, , , *[Electronically Filed]* Date M M / D D / Y Y Y Y Y Y 12 / 07 / 2018

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) UNIDOSUS ACTION PAC
FEC IDENTIFICATION NUMBER C C00684258

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

Full Name of Payee McDonalds
Mailing Address 1801 Torresdale Avenue
City Philadelphia State PA Zip Code 19124
Purpose of Expenditure Food and Beverage
Name of Federal Candidate: CASEY, ROBERT P, , JR
Calendar Year-To-Date Per Election for Office Sought 18627.42
Date of Public Distribution/Dissemination 10/31/2018
Amount 17.67
Transaction ID : SE.4337
Date of Disbursement or Obligation 10/31/2018
Office Sought: Senate State: PA
Disbursement For: General 2018

Full Name of Payee McDonalds
Mailing Address 5823 Castor Avenue
City Philadelphia State PA Zip Code 19111
Purpose of Expenditure Food and Beverage
Name of Federal Candidate: CASEY, ROBERT P, , JR
Calendar Year-To-Date Per Election for Office Sought 23743.95
Date of Public Distribution/Dissemination 11/04/2018
Amount 26.54
Transaction ID : SE.4341
Date of Disbursement or Obligation 11/04/2018
Office Sought: Senate State: PA
Disbursement For: General 2018

(a) SUBTOTAL of Itemized Independent Expenditures 44.21
(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.

Jacquez, Albert, , [Electronically Filed] Date 12/07/2018
Signature

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

NAME OF COMMITTEE (In Full) UNIDOSUS ACTION PAC	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00684258 </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 Panera Bread			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 11 / 04 / 2018		
Mailing Address 10061 W Flagler Street			Amount <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 100%;"> 296.74 </div>		
City Miami	State FL	Zip Code 33174			
Purpose of Expenditure Food and Beverage		Category/Type 	Transaction ID : SE.4401 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 11 / 04 / 2018		
Name of Federal Candidate: NELSON, BILL, , ,			Office Sought: <input type="checkbox"/> House District: 00 <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: FL		
Calendar Year-To-Date Per Election for Office Sought 251216.20			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶		

Full Name of Payee <input type="checkbox"/> Memo Item Popeyes			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 11 / 06 / 2018		
Mailing Address 314 W. Lehigh AVenue			Amount <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 100%;"> 21.06 </div>		
City Philadelphia	State PA	Zip Code 19133			
Purpose of Expenditure Food and Beverage		Category/Type 	Transaction ID : SE.4457 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 11 / 06 / 2018		
Name of Federal Candidate: CASEY, ROBERT P, , , JR			Office Sought: <input type="checkbox"/> House District: 00 <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: PA		
Calendar Year-To-Date Per Election for Office Sought 20580.45			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶		

(a) SUBTOTAL of Itemized Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px; display: inline-block; width: 100%;"> 317.80 </div>
(b) SUBTOTAL of Unitemized Independent Expenditures..... ▶	<div style="border: 1px solid black; padding: 2px; display: inline-block; width: 100%;"> 0.00 </div>
(c) TOTAL Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px; display: inline-block; width: 100%;"> 317.80 </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 Jacquez, Albert, , , *[Electronically Filed]* Date M M / D D / Y Y Y Y Y Y 12 / 07 / 2018

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

NAME OF COMMITTEE (In Full) UNIDOSUS ACTION PAC	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px;"> C C00684258 </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 Professionals for Non-profits			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 10 / 29 / 2018		
Mailing Address 1629 K Street NW Suite 501			Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">37569.09</div>		
City Washington	State DC	Zip Code 20006	Transaction ID : SE.4270 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 10 / 29 / 2018		
Purpose of Expenditure Canvassing		Category/ Type 	Name of Federal Candidate: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose NELSON, BILL, , ,		
Calendar Year-To-Date Per Election for Office Sought		<div style="border: 1px solid black; padding: 2px; text-align: right;">206781.69</div>	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President <input type="checkbox"/> State: FL		
Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶					

Full Name of Payee <input type="checkbox"/> Memo Item Professionals for Non-profits			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 10 / 29 / 2018		
Mailing Address 1629 K Street NW Suite 501			Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">24400.25</div>		
City Washington	State DC	Zip Code 20006	Transaction ID : SE.4272 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 10 / 29 / 2018		
Purpose of Expenditure Canvassing		Category/ Type 	Name of Federal Candidate: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose NELSON, BILL, , ,		
Calendar Year-To-Date Per Election for Office Sought		<div style="border: 1px solid black; padding: 2px; text-align: right;">231181.94</div>	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President <input type="checkbox"/> State: FL		
Disbursement For: <input type="checkbox"/> Primary <input checked="" 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;">61969.34</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.

Jacquez, Albert, , ,

[Electronically Filed]

Date

M M / D D / Y Y Y Y Y Y
 12 / 07 / 2018

Signature

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

NAME OF COMMITTEE (In Full) UNIDOSUS ACTION PAC	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00684258 </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 Professionals for Non-profits			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y <div style="border: 1px solid black; padding: 2px; display: inline-block;">10 / 29 / 2018</div>		
Mailing Address 1629 K Street NW Suite 501			Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">16191.87</div>		
City Washington	State DC	Zip Code 20006			
Purpose of Expenditure Canvassing		Category/Type 	Transaction ID : SE.4274 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y <div style="border: 1px solid black; padding: 2px; display: inline-block;">10 / 29 / 2018</div>		
Name of Federal Candidate: SOTO, DARREN, , , <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose			Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> President <input type="checkbox"/> Senate District: <u>09</u> State: <u>FL</u>		
Calendar Year-To-Date Per Election for Office Sought 31587.95			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶ _____		

Full Name of Payee <input type="checkbox"/> Memo Item Professionals for Non-profits			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y <div style="border: 1px solid black; padding: 2px; display: inline-block;">10 / 29 / 2018</div>		
Mailing Address 1629 K Street NW Suite 501			Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">2473.76</div>		
City Washington	State DC	Zip Code 20006			
Purpose of Expenditure Canvassing		Category/Type 	Transaction ID : SE.4276 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y <div style="border: 1px solid black; padding: 2px; display: inline-block;">10 / 29 / 2018</div>		
Name of Federal Candidate: MURPHY, STEPHANIE, , , <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose			Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> President <input type="checkbox"/> Senate District: <u>07</u> State: <u>FL</u>		
Calendar Year-To-Date Per Election for Office Sought 6859.42			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶ _____		

(a) SUBTOTAL of Itemized Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px; display: inline-block;">18665.63</div>
(b) SUBTOTAL of Unitemized Independent Expenditures..... ▶	<div style="border: 1px solid black; padding: 2px; display: inline-block;"> </div>
(c) TOTAL Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px; display: inline-block;"> </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.

Jacquez, Albert, , ,

[Electronically Filed]

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

12 / 07 / 2018

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) UNIDOSUS ACTION PAC
FEC IDENTIFICATION NUMBER C C00684258

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

Full Name of Payee Professionals for Non-profits
Mailing Address 1629 K Street NW Suite 501
City Washington State DC Zip Code 20006
Purpose of Expenditure Canvassing - Estimate
Date of Public Distribution/Dissemination 10/29/2018
Amount 5000.00
Transaction ID: SE.4314
Date of Disbursement or Obligation 10/29/2018

Name of Federal Candidate: SHALALA, DONNA, ,
Support Oppose
Office Sought: House District: 27
President Senate State: FL
Calendar Year-To-Date Per Election for Office Sought 8444.15
Disbursement For: Primary General 2018 Other (specify)

Full Name of Payee Professionals for Non-profits
Mailing Address 1629 K Street NW Suite 501
City Washington State DC Zip Code 20006
Purpose of Expenditure Canvassers - Actual
Date of Public Distribution/Dissemination 11/04/2018
Amount 5080.68
Transaction ID: SE.4317
Date of Disbursement or Obligation 11/04/2018

Name of Federal Candidate: CASEY, ROBERT P, , JR
Support Oppose
Office Sought: House District: 00
President Senate State: PA
Calendar Year-To-Date Per Election for Office Sought 23717.41
Disbursement For: Primary General 2018 Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 10080.68
(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.

Jacquez, Albert, , [Electronically Filed] Date 12/07/2018
Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) UNIDOSUS ACTION PAC
FEC IDENTIFICATION NUMBER C C00684258

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

Full Name of Payee Professionals for Non-profits
Mailing Address 1629 K Street NW Suite 501
City Washington State DC Zip Code 20006
Purpose of Expenditure Canvassing - Actual
Category/Type

Date of Public Distribution/Dissemination 11/04/2018
Amount 38588.05
Transaction ID: SE.4500
Date of Disbursement or Obligation 11/04/2018

Name of Federal Candidate: NELSON, BILL, ,
Support Oppose
Calendar Year-To-Date Per Election for Office Sought 290075.71

Office Sought: House Senate
Disbursement For: Primary General 2018

Full Name of Payee Professionals for Non-profits
Mailing Address 1629 K Street NW Suite 501
City Washington State DC Zip Code 20006
Purpose of Expenditure Canvassing - Actual
Category/Type

Date of Public Distribution/Dissemination 11/04/2018
Amount 9215.98
Transaction ID: SE.4501
Date of Disbursement or Obligation 11/04/2018

Name of Federal Candidate: SOTO, DARREN, ,
Support Oppose
Calendar Year-To-Date Per Election for Office Sought 45477.97

Office Sought: House Senate
Disbursement For: Primary General 2018

(a) SUBTOTAL of Itemized Independent Expenditures 47804.03
(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.

Jacquez, Albert, ,
Signature

[Electronically Filed]

Date 12/07/2018

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) UNIDOSUS ACTION PAC
FEC IDENTIFICATION NUMBER C C00684258

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

Full Name of Payee Professionals for Non-profits
Mailing Address 1629 K Street NW Suite 501
City Washington State DC Zip Code 20006
Purpose of Expenditure Canvassing - Actual
Date of Public Distribution/Dissemination 11 / 04 / 2018
Amount 1048.36
Transaction ID : SE.4502
Date of Disbursement or Obligation 11 / 04 / 2018

Name of Federal Candidate: MURPHY, STEPHANIE, ,
Support Oppose
Office Sought: House District: 07
President Senate State: FL
Calendar Year-To-Date Per Election for Office Sought 8742.03
Disbursement For: Primary General 2018 Other (specify)

Full Name of Payee Professionals for Non-profits
Mailing Address 1629 K Street NW Suite 501
City Washington State DC Zip Code 20006
Purpose of Expenditure Canvassing - Actual
Date of Public Distribution/Dissemination 11 / 04 / 2018
Amount 2223.72
Transaction ID : SE.4503
Date of Disbursement or Obligation 11 / 04 / 2018

Name of Federal Candidate: SHALALA, DONNA, ,
Support Oppose
Office Sought: House District: 27
President Senate State: FL
Calendar Year-To-Date Per Election for Office Sought 10739.10
Disbursement For: Primary General 2018 Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 3272.08
(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.

Jacquez, Albert, ,

[Electronically Filed]

Date 12 / 07 / 2018

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) UNIDOSUS ACTION PAC
FEC IDENTIFICATION NUMBER C C00684258

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

Full Name of Payee Professionals for Non-profits
Mailing Address 1629 K Street NW Suite 501
City Washington State DC Zip Code 20006
Purpose of Expenditure Canvassing
Date of Public Distribution/Dissemination 11/06/2018
Amount 1278.55
Transaction ID: SE.4494
Date of Disbursement or Obligation 11/06/2018

Name of Federal Candidate: CASEY, ROBERT P, , JR
Support Oppose
Office Sought: House District: 00
President Senate State: PA
Calendar Year-To-Date Per Election for Office Sought 21875.61
Disbursement For: Primary General 2018 Other (specify)

Full Name of Payee Professionals for Non-profits
Mailing Address 1629 K Street NW Suite 501
City Washington State DC Zip Code 20006
Purpose of Expenditure Canvassing
Date of Public Distribution/Dissemination 11/06/2018
Amount 15347.14
Transaction ID: SE.4505
Date of Disbursement or Obligation 11/06/2018

Name of Federal Candidate: NELSON, BILL, ,
Support Oppose
Office Sought: House District: 00
President Senate State: FL
Calendar Year-To-Date Per Election for Office Sought 305723.06
Disbursement For: Primary General 2018 Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 16625.69
(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.

Jacquez, Albert, , [Electronically Filed] Date 12/07/2018
Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) UNIDOSUS ACTION PAC
FEC IDENTIFICATION NUMBER C C00684258

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

Full Name of Payee Professionals for Non-profits
Mailing Address 1629 K Street NW Suite 501
City Washington State DC Zip Code 20006
Purpose of Expenditure Canvassing
Date of Public Distribution/Dissemination 11/06/2018
Amount 2429.05
Transaction ID: SE.4506
Date of Disbursement or Obligation 11/06/2018

Name of Federal Candidate: SHALALA, DONNA, , ,
Support Oppose
Office Sought: House District: 27
President Senate State: FL
Calendar Year-To-Date Per Election for Office Sought 13168.15
Disbursement For: Primary General 2018 Other (specify)

Full Name of Payee Professionals for Non-profits
Mailing Address 1629 K Street NW Suite 501
City Washington State DC Zip Code 20006
Purpose of Expenditure Canvassing
Date of Public Distribution/Dissemination 11/06/2018
Amount 10088.74
Transaction ID: SE.4508
Date of Disbursement or Obligation 11/06/2018

Name of Federal Candidate: NELSON, BILL, , ,
Support Oppose
Office Sought: House District: 00
President Senate State: FL
Calendar Year-To-Date Per Election for Office Sought 315811.80
Disbursement For: Primary General 2018 Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 12517.79
(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.

Jacquez, Albert, , ,
Signature

[Electronically Filed]

Date 12/07/2018

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

NAME OF COMMITTEE (In Full) UNIDOSUS ACTION PAC	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00684258 </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 Professionals for Non-profits			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 11 / 06 / 2018		
Mailing Address 1629 K Street NW Suite 501			Amount <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 100%;"> 6694.83 </div>		
City Washington	State DC	Zip Code 20006			
Purpose of Expenditure Canvassing		Category/ Type 	Transaction ID : SE.4509 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 11 / 06 / 2018		
Name of Federal Candidate: SOTO, DARREN, , , <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose			Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> President <input type="checkbox"/> Senate District: <u>09</u> State: <u>FL</u>		
Calendar Year-To-Date Per Election for Office Sought 52301.84 			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶ _____		

Full Name of Payee <input type="checkbox"/> Memo Item Professionals for Non-profits			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 11 / 06 / 2018		
Mailing Address 1629 K Street NW Suite 501			Amount <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 100%;"> 2473.76 </div>		
City Washington	State DC	Zip Code 20006			
Purpose of Expenditure Canvassing		Category/ Type 	Transaction ID : SE.4510 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 11 / 06 / 2018		
Name of Federal Candidate: MURPHY, STEPHANIE, , , <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose			Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> President <input type="checkbox"/> Senate District: <u>07</u> State: <u>FL</u>		
Calendar Year-To-Date Per Election for Office Sought 11220.98 			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶ _____		

(a) SUBTOTAL of Itemized Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px; display: inline-block; width: 100%;"> 9168.59 </div>
(b) SUBTOTAL of Unitemized Independent Expenditures..... ▶	<div style="border: 1px solid black; padding: 2px; display: inline-block; width: 100%;"> 0.00 </div>
(c) TOTAL Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px; display: inline-block; width: 100%;"> 9168.59 </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.

Jacquez, Albert, , ,

[Electronically Filed]

Date

M M / D D / Y Y Y Y Y Y
 12 / 07 / 2018

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) UNIDOSUS ACTION PAC
FEC IDENTIFICATION NUMBER C C00684258

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

Full Name of Payee Professionals for Non-profits
Mailing Address 1629 K Street NW Suite 501
City Washington State DC Zip Code 20006
Purpose of Expenditure Canvassing (invoiced after close of reporting period)
Name of Federal Candidate: NELSON, BILL, , Support
Office Sought: Senate State: FL
Calendar Year-To-Date Per Election for Office Sought 315811.80
Disbursement For: General 2018

Full Name of Payee Professionals for Non-profits
Mailing Address 1629 K Street NW Suite 501
City Washington State DC Zip Code 20006
Purpose of Expenditure Canvassing (invoiced after close of reporting period)
Name of Federal Candidate: SOTO, DARREN, , Support
Office Sought: House State: FL
Calendar Year-To-Date Per Election for Office Sought 52301.84
Disbursement For: General 2018

(a) SUBTOTAL of Itemized Independent Expenditures 0.00
(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.

Jacquez, Albert, ,

[Electronically Filed]

Date 12 / 07 / 2018

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) UNIDOSUS ACTION PAC
FEC IDENTIFICATION NUMBER C C00684258

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

Full Name of Payee Professionals for Non-profits
Mailing Address 1629 K Street NW Suite 501
City Washington State DC Zip Code 20006
Purpose of Expenditure Canvassing (invoiced after close of reporting period)
Name of Federal Candidate: MURPHY, STEPHANIE, , , Support
Office Sought: House District: 07 State: FL
Calendar Year-To-Date Per Election for Office Sought 11220.98
Disbursement For: General 2018

Full Name of Payee Professionals for Non-profits
Mailing Address 1629 K Street NW Suite 501
City Washington State DC Zip Code 20006
Purpose of Expenditure Canvassing (invoiced after close of reporting period)
Name of Federal Candidate: SHALALA, DONNA, , , Support
Office Sought: House District: 27 State: FL
Calendar Year-To-Date Per Election for Office Sought 13168.15
Disbursement For: General 2018

(a) SUBTOTAL of Itemized Independent Expenditures 0.00
(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.

Jacquez, Albert, , ,

[Electronically Filed]

Date 12 / 07 / 2018

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) UNIDOSUS ACTION PAC
FEC IDENTIFICATION NUMBER C C00684258

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

Full Name of Payee Publix
Mailing Address 13750 W Colonial Drive
City Winter Garden State FL Zip Code 34787
Purpose of Expenditure Gas Cards
Name of Federal Candidate: NELSON, BILL, , Support
Office Sought: Senate State: FL
Calendar Year-To-Date Per Election for Office Sought 42997.93
Disbursement For: General 2018

Full Name of Payee Quality Pizza
Mailing Address 6438 Rising Sun Avenue
City Philadelphia State PA Zip Code 19111
Purpose of Expenditure Food and Beverage
Name of Federal Candidate: CASEY, ROBERT P, , JR Support
Office Sought: Senate State: PA
Calendar Year-To-Date Per Election for Office Sought 18636.73
Disbursement For: General 2018

(a) SUBTOTAL of Itemized Independent Expenditures 527.13
(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.

Jacquez, Albert, ,

[Electronically Filed]

Date 12 / 07 / 2018

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) UNIDOSUS ACTION PAC
FEC IDENTIFICATION NUMBER C C00684258

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

Full Name of Payee RPG Card Services
Mailing Address 2100 Western Court Suite 80
City Lisle State FL Zip Code 60532
Purpose of Expenditure Gas Cards
Name of Federal Candidate: NELSON, BILL, , Support
Date of Public Distribution/Dissemination 10/19/2018
Amount 134.00
Transaction ID : SE.4196
Date of Disbursement or Obligation 10/19/2018
Calendar Year-To-Date Per Election for Office Sought 42110.61
Disbursement For: General 2018

Full Name of Payee Solidarity Strategies LLC
Mailing Address 1090 Vermont Avenue NW Suite 300
City Washington State DC Zip Code 20005
Purpose of Expenditure Printing
Name of Federal Candidate: NELSON, BILL, , Support
Date of Public Distribution/Dissemination 10/26/2018
Amount 15266.67
Transaction ID : SE.4250
Date of Disbursement or Obligation 10/26/2018
Calendar Year-To-Date Per Election for Office Sought 58600.77
Disbursement For: General 2018

(a) SUBTOTAL of Itemized Independent Expenditures 15400.67
(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.

Jacquez, Albert, , [Electronically Filed] Date 12/07/2018
Signature

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

NAME OF COMMITTEE (In Full) UNIDOSUS ACTION PAC	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px;"> C C00684258 </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 LLC	Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 10 / 26 / 2018						
Mailing Address 1090 Vermont Avenue NW Suite 300	Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">4416.67</div> Transaction ID : SE.4252 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 10 / 26 / 2018						
<table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:30%;">City</td> <td style="width:20%;">State</td> <td style="width:50%;">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 Printing							
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	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶						

Full Name of Payee <input type="checkbox"/> Memo Item Solidarity Strategies LLC	Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 10 / 26 / 2018						
Mailing Address 1090 Vermont Avenue NW Suite 300	Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">2208.33</div> Transaction ID : SE.4254 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 10 / 26 / 2018						
<table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:30%;">City</td> <td style="width:20%;">State</td> <td style="width:50%;">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 Printing							
Name of Federal Candidate: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose MURPHY, STEPHANIE, , ,	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> President <input type="checkbox"/> Senate District: 07 State: FL						
Calendar Year-To-Date Per Election for Office Sought	Disbursement For: <input type="checkbox"/> Primary <input checked="" 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;">6625.00</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.

Jacquez, Albert, , ,

[Electronically Filed]

Date

M M / D D / Y Y Y Y Y Y
12 / 07 / 2018

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) UNIDOSUS ACTION PAC
FEC IDENTIFICATION NUMBER C C00684258

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

Full Name of Payee Solidarity Strategies LLC
Mailing Address 1090 Vermont Avenue NW Suite 300
City Washington State DC Zip Code 20005
Purpose of Expenditure Printing
Date of Public Distribution/Dissemination 10/26/2018
Amount 2016.67
Transaction ID: SE.4256
Date of Disbursement or Obligation 10/26/2018

Name of Federal Candidate: SHALALA, DONNA, , ,
Support Oppose
Office Sought: House District: 27
President Senate State: FL
Calendar Year-To-Date Per Election for Office Sought 2016.67
Disbursement For: Primary General 2018 Other (specify)

Full Name of Payee Solidarity Strategies LLC
Mailing Address 1090 Vermont Avenue NW Suite 300
City Washington State DC Zip Code 20005
Purpose of Expenditure Advertising Production and Placement
Date of Public Distribution/Dissemination 10/29/2018
Amount 110426.00
Transaction ID: SE.4267
Date of Disbursement or Obligation 10/29/2018

Name of Federal Candidate: NELSON, BILL, , ,
Support Oppose
Office Sought: House District: 00
President Senate State: FL
Calendar Year-To-Date Per Election for Office Sought 169212.60
Disbursement For: Primary General 2018 Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 112442.67
(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.

Jacquez, Albert, , , [Electronically Filed] Date 12/07/2018
Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) UNIDOSUS ACTION PAC
FEC IDENTIFICATION NUMBER C C00684258

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

Full Name of Payee Solidarity Strategies LLC
Mailing Address 1090 Vermont Avenue NW Suite 300
City Washington State DC Zip Code 20005
Purpose of Expenditure Printing
Date of Public Distribution/Dissemination 11/04/2018
Amount 4725.00
Transaction ID: SE.4350
Date of Disbursement or Obligation 11/04/2018

Name of Federal Candidate: NELSON, BILL, ,
Support Oppose
Office Sought: House Senate State: FL
Disbursement For: Primary General 2018 Other (specify)

Full Name of Payee Solidarity Strategies LLC
Mailing Address 1090 Vermont Avenue NW Suite 300
City Washington State DC Zip Code 20005
Purpose of Expenditure Printing
Date of Public Distribution/Dissemination 11/04/2018
Amount 990.00
Transaction ID: SE.4352
Date of Disbursement or Obligation 11/04/2018

Name of Federal Candidate: SOTO, DARREN, ,
Support Oppose
Office Sought: House Senate State: FL
Disbursement For: Primary General 2018 Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 5715.00
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

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Jacquez, Albert, ,

[Electronically Filed]

Date 12/07/2018

Signature

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

NAME OF COMMITTEE (In Full) UNIDOSUS ACTION PAC	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px;"> C C00684258 </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 LLC			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 11 / 04 / 2018		
Mailing Address 1090 Vermont Avenue NW Suite 300			Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">260.00</div>		
City Washington	State DC	Zip Code 20005			
Purpose of Expenditure Printing		Category/ Type 	Transaction ID : SE.4354 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 11 / 04 / 2018		
Name of Federal Candidate: MURPHY, STEPHANIE, , ,			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> President <input type="checkbox"/> Senate District: <u>07</u> State: <u>FL</u>		
Calendar Year-To-Date Per Election for Office Sought			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ _____		
<div style="border: 1px solid black; padding: 2px; text-align: right;">7647.58</div>					

Full Name of Payee <input type="checkbox"/> Memo Item Staples			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 10 / 28 / 2018		
Mailing Address 3501 Black Horse Pike			Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">45.85</div>		
City Turnersville	State NJ	Zip Code 08012			
Purpose of Expenditure Canvassing Supplies		Category/ Type 	Transaction ID : SE.4334 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 10 / 28 / 2018		
Name of Federal Candidate: CASEY, ROBERT P, , , JR			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/> Senate District: <u>00</u> State: <u>PA</u>		
Calendar Year-To-Date Per Election for Office Sought			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ _____		
<div style="border: 1px solid black; padding: 2px; text-align: right;">18609.75</div>					

(a) SUBTOTAL of Itemized Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px; text-align: right;">305.85</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.

Jacquez, Albert, , , **[Electronically Filed]** Date M M / D D / Y Y Y Y Y Y
 Signature 12 / 07 / 2018

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) UNIDOSUS ACTION PAC
FEC IDENTIFICATION NUMBER C C00684258

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

Full Name of Payee Sunpass
Mailing Address 7941 Glades Road
City Boca Raton State FL Zip Code 33434
Purpose of Expenditure Travel Expenses
Name of Federal Candidate: NELSON, BILL, , ,
Calendar Year-To-Date Per Election for Office Sought 42480.11
Disbursement For: General 2018

Full Name of Payee Sunpass
Mailing Address 7941 Glades Road
City Boca Raton State FL Zip Code 33434
Purpose of Expenditure Travel Expenses
Name of Federal Candidate: NELSON, BILL, , ,
Calendar Year-To-Date Per Election for Office Sought 250730.81
Disbursement For: General 2018

(a) SUBTOTAL of Itemized Independent Expenditures 206.67
(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.

Jacquez, Albert, , ,

[Electronically Filed]

Date 12 / 07 / 2018

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) UNIDOSUS ACTION PAC
FEC IDENTIFICATION NUMBER C C00684258

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

Full Name of Payee Sunpass
Mailing Address 7941 Glades Road
City Boca Raton State FL Zip Code 33434
Purpose of Expenditure Travel Expenses
Date of Public Distribution/Dissemination 11/04/2018
Amount 6.67
Transaction ID : SE.4385
Date of Disbursement or Obligation 11/04/2018

Name of Federal Candidate: SHALALA, DONNA, , ,
Support Oppose
Office Sought: House District: 27
President Senate State: FL
Calendar Year-To-Date Per Election for Office Sought 8515.38
Disbursement For: Primary General 2018 Other (specify)

Full Name of Payee Sunpass
Mailing Address 7941 Glades Road
City Boca Raton State FL Zip Code 33434
Purpose of Expenditure Travel Expenses
Date of Public Distribution/Dissemination 11/04/2018
Amount 33.33
Transaction ID : SE.4387
Date of Disbursement or Obligation 11/04/2018

Name of Federal Candidate: NELSON, BILL, , ,
Support Oppose
Office Sought: House District: 00
President Senate State: FL
Calendar Year-To-Date Per Election for Office Sought 250764.14
Disbursement For: Primary General 2018 Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 40.00
(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.

Jacquez, Albert, , , [Electronically Filed] Date 12/07/2018
Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) UNIDOSUS ACTION PAC
FEC IDENTIFICATION NUMBER C C00684258

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

Full Name of Payee Sunpass
Mailing Address 7941 Glades Road
City Boca Raton State FL Zip Code 33434
Purpose of Expenditure Travel Expenses
Name of Federal Candidate: SOTO, DARREN, , ,
Calendar Year-To-Date Per Election for Office Sought 36029.18
Disbursement For: General 2018

Full Name of Payee Sunpass
Mailing Address 7941 Glades Road
City Boca Raton State FL Zip Code 33434
Purpose of Expenditure Travel Expenses
Name of Federal Candidate: MURPHY, STEPHANIE, , ,
Calendar Year-To-Date Per Election for Office Sought 7652.58
Disbursement For: General 2018

(a) SUBTOTAL of Itemized Independent Expenditures 33.33
(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.

Jacquez, Albert, , , [Electronically Filed] Date 12 / 07 / 2018
Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) UNIDOSUS ACTION PAC
FEC IDENTIFICATION NUMBER C C00684258

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

Full Name of Payee Sunpass
Mailing Address 7941 Glades Road
City Boca Raton State FL Zip Code 33434
Purpose of Expenditure Tolls Category/Type
Name of Federal Candidate: NELSON, BILL, , Support
Office Sought: Senate State: FL
Calendar Year-To-Date Per Election for Office Sought 290091.82
Disbursement For: General 2018

Full Name of Payee Sunpass
Mailing Address 7941 Glades Road
City Boca Raton State FL Zip Code 33434
Purpose of Expenditure Tolls Category/Type
Name of Federal Candidate: SOTO, DARREN, , Support
Office Sought: House State: FL
Calendar Year-To-Date Per Election for Office Sought 45591.33
Disbursement For: General 2018

(a) SUBTOTAL of Itemized Independent Expenditures 6.16
(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.

Jacquez, Albert, ,

[Electronically Filed]

Date 12 / 07 / 2018

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) UNIDOSUS ACTION PAC
FEC IDENTIFICATION NUMBER C C00684258

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

Full Name of Payee Sunpass
Mailing Address 7941 Glades Road
City Boca Raton State FL Zip Code 33434
Purpose of Expenditure Tolls Category/Type
Date of Public Distribution/Dissemination 11/06/2018
Amount 0.50
Transaction ID: SE.4479
Date of Disbursement or Obligation 11/06/2018

Name of Federal Candidate: MURPHY, STEPHANIE, ,
Support Oppose
Office Sought: House District: 07
President Senate State: FL
Calendar Year-To-Date Per Election for Office Sought 8744.45
Disbursement For: Primary General 2018 Other (specify)

Full Name of Payee Sunpass
Mailing Address 7941 Glades Road
City Boca Raton State FL Zip Code 33434
Purpose of Expenditure Tolls Category/Type
Date of Public Distribution/Dissemination 11/06/2018
Amount 15.00
Transaction ID: SE.4480
Date of Disbursement or Obligation 11/06/2018

Name of Federal Candidate: NELSON, BILL, ,
Support Oppose
Office Sought: House District: 00
President Senate State: FL
Calendar Year-To-Date Per Election for Office Sought 290357.48
Disbursement For: Primary General 2018 Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 15.50
(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.

Jacquez, Albert, , [Electronically Filed] Date 12/07/2018
Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) UNIDOSUS ACTION PAC
FEC IDENTIFICATION NUMBER C C00684258

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

Full Name of Payee SVM, LP
Mailing Address 3727 N. Ventura Drive
City Arlington Heights State IL Zip Code 60004
Purpose of Expenditure Gas Cards
Name of Federal Candidate: NELSON, BILL, , ,
Calendar Year-To-Date Per Election for Office Sought 245558.29

Full Name of Payee Target
Mailing Address 10101 W Flagler St
City Miami State FL Zip Code 33174
Purpose of Expenditure Canvassing Supplies
Name of Federal Candidate: NELSON, BILL, , ,
Calendar Year-To-Date Per Election for Office Sought 251369.07

(a) SUBTOTAL of Itemized Independent Expenditures 683.60
(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.

Jacquez, Albert, , ,

[Electronically Filed]

Date 12 / 07 / 2018

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) UNIDOSUS ACTION PAC
FEC IDENTIFICATION NUMBER C C00684258

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

Full Name of Payee Target
Mailing Address 487 Berlin-Cross Keys Road
City Sicklerville State NJ Zip Code 08081
Purpose of Expenditure Canvassing Supplies
Name of Federal Candidate: CASEY, ROBERT P, , JR
Calendar Year-To-Date Per Election for Office Sought 20454.58

Full Name of Payee Target
Mailing Address 3343 Daniels Road
City Winter Garden State FL Zip Code 34787
Purpose of Expenditure Canvassing Supplies
Name of Federal Candidate: NELSON, BILL, ,
Calendar Year-To-Date Per Election for Office Sought 290088.49

(a) SUBTOTAL of Itemized Independent Expenditures 101.19
(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.

Jacquez, Albert, ,

[Electronically Filed]

Date

12 / 07 / 2018

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) UNIDOSUS ACTION PAC
FEC IDENTIFICATION NUMBER C C00684258

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

Full Name of Payee Target
Mailing Address 3343 Daniels Road
City Winter Garden State FL Zip Code 34787
Purpose of Expenditure Canvassing Supplies
Date of Public Distribution/Dissemination 11/05/2018
Amount 10.86
Transaction ID: SE.4475
Date of Disbursement or Obligation 11/05/2018

Name of Federal Candidate: SOTO, DARREN, , ,
Support Oppose
Office Sought: House District: 09
President Senate State: FL
Calendar Year-To-Date Per Election for Office Sought 45488.83
Disbursement For: Primary General 2018
Other (specify)

Full Name of Payee Target
Mailing Address 3343 Daniels Road
City Winter Garden State FL Zip Code 34787
Purpose of Expenditure Canvassing Supplies
Date of Public Distribution/Dissemination 11/05/2018
Amount 1.92
Transaction ID: SE.4476
Date of Disbursement or Obligation 11/05/2018

Name of Federal Candidate: MURPHY, STEPHANIE, , ,
Support Oppose
Office Sought: House District: 07
President Senate State: FL
Calendar Year-To-Date Per Election for Office Sought 8743.95
Disbursement For: Primary General 2018
Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 12.78
(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.

Jacquez, Albert, , , [Electronically Filed] Date 12/07/2018
Signature

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

NAME OF COMMITTEE (In Full) UNIDOSUS ACTION PAC	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00684258 </div>
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Check if 24-hour report 48-hour report ➤
 New report Amends report filed on MM / DD / YYYY

Full Name of Payee <input type="checkbox"/> Memo Item Target	Date of Public Distribution/Dissemination MM / DD / YYYY 11 / 06 / 2018
Mailing Address 3343 Daniels Road	Amount 18.44
City State Zip Code Winter Garden FL 34787	
Purpose of Expenditure Canvassing Supplies Category/Type 	
Name of Federal Candidate: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose NELSON, BILL, , ,	Office Sought: <input type="checkbox"/> House District: 00 <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: FL
Calendar Year-To-Date Per Election for Office Sought 290375.92	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶ _____

Full Name of Payee <input type="checkbox"/> Memo Item Target	Date of Public Distribution/Dissemination MM / DD / YYYY 11 / 06 / 2018
Mailing Address 3343 Daniels Road	Amount 15.68
City State Zip Code Winter Garden FL 34787	
Purpose of Expenditure Canvassing Supplies Category/Type 	
Name of Federal Candidate: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose 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 45607.01	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶ _____

(a) SUBTOTAL of Itemized Independent Expenditures ▶	34.12
(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.

Signature Jacquez, Albert, , , *[Electronically Filed]* Date MM / DD / YYYY
12 / 07 / 2018

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) UNIDOSUS ACTION PAC
FEC IDENTIFICATION NUMBER C C00684258

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

Full Name of Payee Target
Mailing Address 3343 Daniels Road
City Winter Garden State FL Zip Code 34787
Purpose of Expenditure Canvassing Supplies
Name of Federal Candidate: MURPHY, STEPHANIE, , ,
Calendar Year-To-Date Per Election for Office Sought 8747.22
Disbursement For: General 2018

Full Name of Payee Uncle Tomys Original
Mailing Address 1653 S 27th Street
City Philadelphia State PA Zip Code 19145
Purpose of Expenditure Food and Beverage
Name of Federal Candidate: CASEY, ROBERT P, , , JR
Calendar Year-To-Date Per Election for Office Sought 18454.28
Disbursement For: General 2018

(a) SUBTOTAL of Itemized Independent Expenditures 16.60
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

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Jacquez, Albert, , ,

[Electronically Filed]

Date 12 / 07 / 2018

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) UNIDOSUS ACTION PAC
FEC IDENTIFICATION NUMBER C C00684258

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

Full Name of Payee Walmart
Mailing Address 2200 Wheatsheaf Lane
City Philadelphia State PA Zip Code 19134
Purpose of Expenditure Canvassing Supplies
Name of Federal Candidate: CASEY, ROBERT P, , JR
Calendar Year-To-Date Per Election for Office Sought 18488.90

Full Name of Payee WaWa
Mailing Address 13501 W Colonial Drive
City Winter Garden State FL Zip Code 34787
Purpose of Expenditure Gas Cards
Name of Federal Candidate: NELSON, BILL, ,
Calendar Year-To-Date Per Election for Office Sought 42280.11

(a) SUBTOTAL of Itemized Independent Expenditures 204.12
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

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Jacquez, Albert, ,

[Electronically Filed]

Date 12 / 07 / 2018

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) UNIDOSUS ACTION PAC
FEC IDENTIFICATION NUMBER C C00684258

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

Full Name of Payee WaWa
Mailing Address 13501 W Colonial Drive
City Winter Garden State FL Zip Code 34787
Purpose of Expenditure Gas Cards
Date of Public Distribution/Dissemination 10/19/2018
Amount 144.08
Transaction ID: SE.4200
Date of Disbursement or Obligation 10/19/2018

Name of Federal Candidate: SOTO, DARREN, , ,
Support Oppose
Office Sought: House District: 09
President Senate State: FL
Calendar Year-To-Date Per Election for Office Sought 10535.72
Disbursement For: Primary General 2018 Other (specify)

Full Name of Payee WaWa
Mailing Address 13501 W Colonial Drive
City Winter Garden State FL Zip Code 34787
Purpose of Expenditure Gas Cards
Date of Public Distribution/Dissemination 10/19/2018
Amount 25.43
Transaction ID: SE.4202
Date of Disbursement or Obligation 10/19/2018

Name of Federal Candidate: MURPHY, STEPHANIE, , ,
Support Oppose
Office Sought: House District: 07
President Senate State: FL
Calendar Year-To-Date Per Election for Office Sought 2099.03
Disbursement For: Primary General 2018 Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 169.51
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

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Jacquez, Albert, , , [Electronically Filed] Date 12/07/2018
Signature

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

NAME OF COMMITTEE (In Full) UNIDOSUS ACTION PAC	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00684258 </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 Wawa	Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 10 / 22 / 2018
Mailing Address 3901 Aramingo Avenue	Amount <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px;"> 75.00 </div>
City Philadelphia State PA Zip Code 19137	
Purpose of Expenditure Gas Cards Category/Type 	
Name of Federal Candidate: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose CASEY, ROBERT P, , JR	Office Sought: <input type="checkbox"/> House District: <u>00</u> <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <u>PA</u>
Calendar Year-To-Date Per Election for Office Sought 18563.90	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶ _____

Full Name of Payee <input type="checkbox"/> Memo Item WaWa	Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 10 / 25 / 2018
Mailing Address 13501 W Colonial Drive	Amount <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px;"> 336.17 </div>
City Winter Garden State FL Zip Code 34787	
Purpose of Expenditure Gas Cards Category/Type 	
Name of Federal Candidate: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose NELSON, BILL, ,	Office Sought: <input type="checkbox"/> House District: <u>00</u> <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <u>FL</u>
Calendar Year-To-Date Per Election for Office Sought 43334.10	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶ _____

(a) SUBTOTAL of Itemized Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px;">411.17</div>
(b) SUBTOTAL of Unitemized Independent Expenditures..... ▶	<div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px;"> </div>
(c) TOTAL Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px;"> </div>

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Jacquez, Albert, ,

[Electronically Filed]

Date M M / D D / Y Y Y Y Y Y
12 / 07 / 2018

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) UNIDOSUS ACTION PAC
FEC IDENTIFICATION NUMBER C C00684258

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

Full Name of Payee WaWa
Mailing Address 13501 W Colonial Drive
City Winter Garden State FL Zip Code 34787
Purpose of Expenditure Gas Cards
Date of Public Distribution/Dissemination 10/25/2018
Amount 285.74
Transaction ID: SE.4288
Date of Disbursement or Obligation 10/25/2018

Name of Federal Candidate: SOTO, DARREN, , ,
Support Oppose
Office Sought: House District: 09
President Senate State: FL
Calendar Year-To-Date Per Election for Office Sought 10821.46
Disbursement For: Primary General 2018 Other (specify)

Full Name of Payee WaWa
Mailing Address 13501 W Colonial Drive
City Winter Garden State FL Zip Code 34787
Purpose of Expenditure Gas Cards
Date of Public Distribution/Dissemination 10/25/2018
Amount 50.43
Transaction ID: SE.4290
Date of Disbursement or Obligation 10/25/2018

Name of Federal Candidate: MURPHY, STEPHANIE, , ,
Support Oppose
Office Sought: House District: 07
President Senate State: FL
Calendar Year-To-Date Per Election for Office Sought 2149.46
Disbursement For: Primary General 2018 Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 336.17
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

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Jacquez, Albert, , , [Electronically Filed] Date 12/07/2018
Signature

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

NAME OF COMMITTEE (In Full) UNIDOSUS ACTION PAC	FEC IDENTIFICATION NUMBER ▼ C C00684258
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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 WB Mason		Date of Public Distribution/Dissemination <input type="text"/> / <input type="text"/> / <input type="text"/>	
Mailing Address 59 Centre Street		Amount <input type="text"/>	
City Brockton	State MA	Zip Code 02301	250.66
Purpose of Expenditure Canvassing Supplies		Category/Type <input type="text"/>	
Name of Federal Candidate: NELSON, BILL, , ,		Office Sought: <input type="checkbox"/> House District: 00 <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: FL	
Name of Federal Candidate: NELSON, BILL, , ,		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶	
Calendar Year-To-Date Per Election for Office Sought <input type="text"/>		290342.48	

Full Name of Payee <input type="checkbox"/> Memo Item WB Mason		Date of Public Distribution/Dissemination <input type="text"/> / <input type="text"/> / <input type="text"/>	
Mailing Address 59 Centre Street		Amount <input type="text"/>	
City Brockton	State MA	Zip Code 02301	84.72
Purpose of Expenditure Canvassing Supplies		Category/Type <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	
Name of Federal Candidate: SOTO, DARREN, , ,		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶	
Calendar Year-To-Date Per Election for Office Sought <input type="text"/>		45573.55	

(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.

Jacquez, Albert, , , **[Electronically Filed]** Date / /
Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) UNIDOSUS ACTION PAC
FEC IDENTIFICATION NUMBER C C00684258

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

Full Name of Payee WB Mason
Mailing Address 59 Centre Street
City Brockton State MA Zip Code 02301
Purpose of Expenditure Canvassing Supplies
Name of Federal Candidate: MURPHY, STEPHANIE, ,
Calendar Year-To-Date Per Election for Office Sought 45588.50
Disbursement For: General 2018

Full Name of Payee
Mailing Address
City
State
Zip Code
Purpose of Expenditure
Name of Federal Candidate:
Office Sought:
Disbursement For:
Calendar Year-To-Date Per Election for Office Sought

(a) SUBTOTAL of Itemized Independent Expenditures 14.95
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures 341526.74

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.

Jacquez, Albert, ,

[Electronically Filed]

Date 12 / 07 / 2018

Signature