

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) LATINO VICTORY FUND	FEC IDENTIFICATION NUMBER ▼ C C00562777
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on M M / D D / Y Y Y Y Y Y	

Full Name of Payee Solidarity Strategies <input type="checkbox"/> Memo Item	Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 04 / 20 / 2016
Mailing Address P.O. Box 52092	Amount 24235.68
City Washington State DC Zip Code 20091	Transaction ID : SE.4777 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 04 / 20 / 2016
Purpose of Expenditure Direct Mail - Non-contribution Account	Category/Type
Name of Federal Candidate JOSELINE A. PENA-MELNYK <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House District: 04 <input type="checkbox"/> President <input type="checkbox"/> Senate State: MD
Calendar Year-To-Date Per Election for Office Sought 124971.66	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶

Full Name of Payee Solidarity Strategies <input type="checkbox"/> Memo Item	Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 04 / 23 / 2016
Mailing Address P.O. Box 52092	Amount 21250.00
City Washington State DC Zip Code 20091	Transaction ID : SE.4781 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 04 / 23 / 2016
Purpose of Expenditure Phone Bank - Non-contribution Account	Category/Type
Name of Federal Candidate JOSELINE A. PENA-MELNYK <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House District: 04 <input type="checkbox"/> President <input type="checkbox"/> Senate State: MD
Calendar Year-To-Date Per Election for Office Sought 146221.66	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	45485.68
(b) SUBTOTAL of Unitemized Independent Expenditures ▶	
(c) TOTAL Independent Expenditures..... ▶	146221.66

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 Sara Le Brusq [Electronically Filed] Date M M / D D / Y Y Y Y Y Y
05 / 10 / 2016