

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

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

ADDRESS (number and street) **700 14TH STREET NW, 2ND FLOOR**
Check if different than previously reported. (ACC) **WASHINGTON DC 20005**

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

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

5. Covering Period / / through / /

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

Signature of Treasurer **Saenz, Adrian, , ,** [Electronically Filed] Date / /

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

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 05/2016)

Page 2

Write or Type Committee Name

LATINO VICTORY FUND

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

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2018"/>	<input type="text" value="118362.65"/>	<input type="text" value="118362.65"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="535645.30"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="206983.00"/>	<input type="text" value="2087353.99"/>
(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="742628.30"/>	<input type="text" value="2205716.64"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="483955.39"/>	<input type="text" value="1947043.73"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="258672.91"/>	<input type="text" value="258672.91"/>
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="0.00"/>	

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

For further information contact:

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

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

DETAILED SUMMARY PAGE of Receipts

FEC Form 3X (Rev. 05/2016)

Write or Type Committee Name

LATINO VICTORY FUND

Report Covering the Period: From: M M / D D / Y Y Y Y Y Y
08 / 01 / 2018 To: M M / D D / Y Y Y Y Y Y
08 / 31 / 2018

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	17850.00	147970.00
(ii) Unitemized	7133.00	17674.94
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	24983.00	165644.94
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	7000.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	24983.00	172644.94
12. Transfers From Affiliated/Other Party Committees.....	0.00	125.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	7.05
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	5000.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	182000.00	1909577.00
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)).....▶	206983.00	2087353.99
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	206983.00	2087353.99

DETAILED SUMMARY PAGE
of Disbursements

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures	27858.14	104592.23
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	27858.14	104592.23
22. Transfers to Affiliated/Other Party Committees.....	0.00	1986.95
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	73322.11
24. Independent Expenditures (use Schedule E)	393001.24	1027855.37
25. Coordinated Party Expenditures (52 U.S.C. § 30116(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	400.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	400.00
29. Other Disbursements (Including Non-Federal Donations).....	63096.01	738887.07
30. Federal Election Activity (52 U.S.C. § 30101(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	483955.39	1947043.73
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	483955.39	1947043.73

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 5

III. Net Contributions/ Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	24983.00	172644.94
34. Total Contribution Refunds (from Line 28(d))	0.00	400.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	24983.00	172244.94
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	27858.14	104592.23
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	7.05
38. Net Operating Expenditures (subtract Line 37 from Line 36)	27858.14	104585.18

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: F3XA
Transaction ID :

This report is amended to disclose the value of an in-kind contribution for research data shared with the Committee in August 2018.

Form/Schedule:
Transaction ID:

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 7 OF 39
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
LATINO VICTORY FUND

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

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

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

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

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

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

SUBTOTAL of Receipts This Page (optional).....	2500.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 OF 39
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
LATINO VICTORY FUND

A. Chang-Diaz, Sonia, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3 Bremen Terrace
 City Boston State MA Zip Code 02130-3709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Commonwealth of MA Occupation (for Individual) State Senator
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 08 / 14 / 2018
Transaction ID : SA11AI.6578
 Amount of Each Receipt this Period 100.00
 Memo Item

B. Coffin, Robert, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1139 5th Place
 City Las Vegas State NV Zip Code 89104
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) City of Las Vegas Occupation (for Individual) Councilman
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 08 / 27 / 2018
Transaction ID : SA11AI.6739
 Amount of Each Receipt this Period 1000.00
 Memo Item

C. Ek, John, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1717 Linda Vista Ave Ste 2750
 City Pasadena State CA Zip Code 91103-1133
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Ek Sunkin Klink & Bai Occupation (for Individual) Government Affairs Consultant
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 08 / 29 / 2018
Transaction ID : SA11AI.6681
 Amount of Each Receipt this Period 5000.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	6100.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 OF 39
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
LATINO VICTORY FUND

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

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

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

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

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

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

SUBTOTAL of Receipts This Page (optional).....▶	2750.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 OF 39
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
LATINO VICTORY FUND

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

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

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

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

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

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

SUBTOTAL of Receipts This Page (optional).....	5000.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 11 OF 39
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
LATINO VICTORY FUND

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. Sanchez, Corinne, , ,			Date of Receipt MM / DD / YYYY 08 / 27 / 2018
Mailing Address 307 Lawson Pl			Transaction ID : SA11AI.6639
City Glendale	State CA	Zip Code 91202-1210	Amount of Each Receipt this Period 500.00
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item
Name of Employer (for Individual) El Proyecto del Barrio, Inc.		Occupation (for Individual) Administrator	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 500.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Tapia, Corinne, , ,			Date of Receipt MM / DD / YYYY 08 / 27 / 2018
Mailing Address 1849 N Ditman Ave			Transaction ID : SA11AI.6637
City Los Angeles	State CA	Zip Code 90032-3716	Amount of Each Receipt this Period 500.00
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item
Name of Employer (for Individual) COVA Partners LLC		Occupation (for Individual) Construction Management	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 500.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. Urteaga, Robert, , ,			Date of Receipt MM / DD / YYYY 08 / 29 / 2018
Mailing Address 750 Garland Ave Apt 206			Transaction ID : SA11AI.6696
City Los Angeles	State CA	Zip Code 90017-4489	Amount of Each Receipt this Period 500.00
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item
Name of Employer (for Individual) Santa Maria Group		Occupation (for Individual) Senior Consultant	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Aggregate Year-to-Date ▼ 500.00	

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

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 12 OF 39
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
LATINO VICTORY FUND

A. ACTBLUE

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

Mailing Address P.O. BOX 441146

City SOMERVILLE	State MA	Zip Code 02144
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FEC ID number of contributing federal political committee. **C** C00401224

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

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

Transaction ID : SA11C.6552

Amount of Each Receipt this Period

783.00

Memo Item
 Total Received Through Conduit This Reporting Period

B.

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

Mailing Address

City	State	Zip Code
------	-------	----------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

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

Amount of Each Receipt this Period

--

Memo Item

C.

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

Mailing Address

City	State	Zip Code
------	-------	----------

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

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

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt

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

Amount of Each Receipt this Period

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Memo Item

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

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 13 OF 39
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
LATINO VICTORY FUND

A. 5000 Broadway Productions

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

City New York	State NY	Zip Code 10034
------------------	-------------	-------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
100000.00

Date of Receipt

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

Transaction ID : SA17.6703

Amount of Each Receipt this Period
100000.00

Memo Item
Non-contribution Account

B. CHC BOLD PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address PO BOX 75357

City WASHINGTON	State DC	Zip Code 20013
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00365536

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
910300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		09		2018

Transaction ID : SA17.6752

Amount of Each Receipt this Period
27000.00

Memo Item
In-kind - Research Services

C. Ek, John, , ,

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

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

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

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

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
10000.00

Date of Receipt

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

Transaction ID : SA17.6751

Amount of Each Receipt this Period
5000.00

Memo Item
Non-contribution Account

SUBTOTAL of Receipts This Page (optional).....	132000.00
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 14 OF 39
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
LATINO VICTORY FUND

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
UNITED FOOD AND COMMERCIAL WORKERS INTERNATIONAL UNION ACTIVE BALLOT CLUB

Mailing Address 1775 K STREET, NW

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

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
50000.00

Date of Receipt

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

Transaction ID : SA17.6731

Amount of Each Receipt this Period
50000.00

Memo Item
Non-contribution Account

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

Mailing Address

City	State	Zip Code
------	-------	----------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

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

Amount of Each Receipt this Period

Memo Item

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

Mailing Address

City	State	Zip Code
------	-------	----------

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

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

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt

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

Amount of Each Receipt this Period

Memo Item

SUBTOTAL of Receipts This Page (optional).....	50000.00
TOTAL This Period (last page this line number only).....	182000.00

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
LATINO VICTORY FUND

A. ActBlue Technical Services

Full Name (Last, First, Middle Initial)

Mailing Address 366 Summer Street

City Somerville State MA Zip Code 02144

Purpose of Disbursement
Credit Card Processing Fees

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 08 / 05 / 2018

FEC Identification Number: C

Transaction ID : **SB21B.6744**

Amount of Each Disbursement this Period: 8.03

Memo Item

B. ActBlue Technical Services

Full Name (Last, First, Middle Initial)

Mailing Address 366 Summer Street

City Somerville State MA Zip Code 02144

Purpose of Disbursement
Credit Card Processing Fees

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 08 / 12 / 2018

FEC Identification Number: C

Transaction ID : **SB21B.6745**

Amount of Each Disbursement this Period: 5.37

Memo Item

C. ActBlue Technical Services

Full Name (Last, First, Middle Initial)

Mailing Address 366 Summer Street

City Somerville State MA Zip Code 02144

Purpose of Disbursement
Credit Card Processing Fees

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 08 / 19 / 2018

FEC Identification Number: C

Transaction ID : **SB21B.6746**

Amount of Each Disbursement this Period: 2.58

Memo Item

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

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
LATINO VICTORY FUND

Full Name (Last, First, Middle Initial)

A. ActBlue Technical Services

Mailing Address 366 Summer Street

City Somerville State MA Zip Code 02144

Purpose of Disbursement
Credit Card Processing Fees

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
08 / 26 / 2018

FEC Identification Number

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

Memo Item

Full Name (Last, First, Middle Initial)

B. ActBlue Technical Services

Mailing Address 366 Summer Street

City Somerville State MA Zip Code 02144

Purpose of Disbursement
Credit Card Processing Fees

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
08 / 31 / 2018

FEC Identification Number

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

Memo Item

Full Name (Last, First, Middle Initial)

C. CHC BOLD PAC

Mailing Address PO BOX 75357

City WASHINGTON State DC Zip Code 20013

Purpose of Disbursement
In-kind - Research Services

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
08 / 09 / 2018

FEC Identification Number

C C00365536
Transaction ID : SB21B.6753
Amount of Each Disbursement this Period
[] 27000.00

Memo Item

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

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

[] 27015.07

[]

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
LATINO VICTORY FUND

A. Lewis Roca Rothgerber Christie

Full Name (Last, First, Middle Initial)

Mailing Address 201 East Washington Street
Suite 1200

City Phoenix State AZ Zip Code 85004

Purpose of Disbursement Legal Services

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 08 / 15 / 2018

FEC Identification Number: C

Transaction ID : SB21B.6728

Amount of Each Disbursement this Period: 793.84

Memo Item

B. Sage Payment Solutions

Full Name (Last, First, Middle Initial)

Mailing Address 12120 Sunset Hills Road

City Reston State VA Zip Code 20190

Purpose of Disbursement Credit Card Processing Fees

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 08 / 02 / 2018

FEC Identification Number: C

Transaction ID : SB21B.6743

Amount of Each Disbursement this Period: 15.74

Memo Item

C.

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: / /

FEC Identification Number: C

Amount of Each Disbursement this Period

Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶	809.58
TOTAL This Period (last page this line number only).....▶	27840.63

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
LATINO VICTORY FUND

A. Capital One

Full Name (Last, First, Middle Initial)

Mailing Address 925 15th Street NW

City Washington State DC Zip Code 20005

Purpose of Disbursement Bank Fee, Non-contribution Account

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 08 / 21 / 2018

FEC Identification Number: C

Transaction ID : SB29.6705

Amount of Each Disbursement this Period: 25.00

Memo Item

B. Capital One

Full Name (Last, First, Middle Initial)

Mailing Address 925 15th Street NW

City Washington State DC Zip Code 20005

Purpose of Disbursement Bank Fee, Non-contribution Account

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 08 / 23 / 2018

FEC Identification Number: C

Transaction ID : SB29.6706

Amount of Each Disbursement this Period: 25.00

Memo Item

C. Capital One

Full Name (Last, First, Middle Initial)

Mailing Address 925 15th Street NW

City Washington State DC Zip Code 20005

Purpose of Disbursement Bank Fee, Non-contribution Account

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 08 / 24 / 2018

FEC Identification Number: C

Transaction ID : SB29.6707

Amount of Each Disbursement this Period: 25.00

Memo Item

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

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

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
LATINO VICTORY FUND

A. Capital One

Full Name (Last, First, Middle Initial)

Mailing Address 925 15th Street NW

City Washington State DC Zip Code 20005

Purpose of Disbursement Bank Fee, Non-contribution Account

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: MM / DD / YYYY
08 / 24 / 2018

FEC Identification Number: C

Transaction ID : **SB29.6708**

Amount of Each Disbursement this Period: 25.00

Memo Item

B. Capital One

Full Name (Last, First, Middle Initial)

Mailing Address 925 15th Street NW

City Washington State DC Zip Code 20005

Purpose of Disbursement Bank Fee, Non-contribution Account

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: MM / DD / YYYY
08 / 28 / 2018

FEC Identification Number: C

Transaction ID : **SB29.6709**

Amount of Each Disbursement this Period: 25.00

Memo Item

C. Capital One

Full Name (Last, First, Middle Initial)

Mailing Address 925 15th Street NW

City Washington State DC Zip Code 20005

Purpose of Disbursement Bank Fee, Non-contribution Account

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: MM / DD / YYYY
08 / 28 / 2018

FEC Identification Number: C

Transaction ID : **SB29.6710**

Amount of Each Disbursement this Period: 25.00

Memo Item

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

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

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
LATINO VICTORY FUND

Full Name (Last, First, Middle Initial)

A. Capital One

Mailing Address 925 15th Street NW

City Washington State DC Zip Code 20005

Purpose of Disbursement
Bank Fee, Non-contribution Account

Candidate Name

Office Sought: House Senate President

State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
08 / 28 / 2018

FEC Identification Number

C [REDACTED]

Transaction ID : SB29.6711

Amount of Each Disbursement this Period

[REDACTED] 25.00

Memo Item

Full Name (Last, First, Middle Initial)

B. Capital One

Mailing Address 925 15th Street NW

City Washington State DC Zip Code 20005

Purpose of Disbursement
Bank Fee, Non-contribution Account

Candidate Name

Office Sought: House Senate President

State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
08 / 30 / 2018

FEC Identification Number

C [REDACTED]

Transaction ID : SB29.6712

Amount of Each Disbursement this Period

[REDACTED] 25.00

Memo Item

Full Name (Last, First, Middle Initial)

C. Latino Victory Project

Mailing Address 700 14th Street NW Suite 200

City Washington State DC Zip Code 20005

Purpose of Disbursement
Payroll Expense, Non-contribution Account

Candidate Name

Office Sought: House Senate President

State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
08 / 13 / 2018

FEC Identification Number

C [REDACTED]

Transaction ID : SB29.6715

Amount of Each Disbursement this Period

[REDACTED] 38004.20

Memo Item

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

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

[REDACTED] 38054.20

[REDACTED]

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
LATINO VICTORY FUND

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

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

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

SUBTOTAL of Disbursements This Page (optional).....▶	[REDACTED] 0.00
TOTAL This Period (last page this line number only).....▶	[REDACTED]

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
LATINO VICTORY FUND

A. Garcia, Monica, , ,

Full Name (Last, First, Middle Initial)

Date of Disbursement: MM / DD / YYYY
08 / 13 / 2018

Mailing Address 700 14th Street NW 2nd Floor

City Washington State DC Zip Code 20005

Purpose of Disbursement Salary

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

FEC Identification Number: C

Transaction ID : SB29.6715.3

Amount of Each Disbursement this Period: 2889.66

Memo Item

B. Gonzalez, Maria, , ,

Full Name (Last, First, Middle Initial)

Date of Disbursement: MM / DD / YYYY
08 / 13 / 2018

Mailing Address 700 14th Street NW, 2nd Floor

City Washington State DC Zip Code 20005

Purpose of Disbursement Salary

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

FEC Identification Number: C

Transaction ID : SB29.6715.4

Amount of Each Disbursement this Period: 3081.04

Memo Item

C. Loisel, Abby, , ,

Full Name (Last, First, Middle Initial)

Date of Disbursement: MM / DD / YYYY
08 / 13 / 2018

Mailing Address 700 14th Street NW 2nd Floor

City Washington State DC Zip Code 20005

Purpose of Disbursement Salary

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

FEC Identification Number: C

Transaction ID : SB29.6715.5

Amount of Each Disbursement this Period: 2974.58

Memo Item

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

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
LATINO VICTORY FUND

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

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

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

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

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

0.00

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
LATINO VICTORY FUND

Full Name (Last, First, Middle Initial) A. Latino Victory Project		Date of Disbursement MM / DD / YYYY 08 / 13 / 2018
Mailing Address 700 14th Street NW Suite 200		FEC Identification Number C Transaction ID : SB29.6726 Amount of Each Disbursement this Period 5616.25
City Washington	State DC	
Zip Code 20005	Purpose of Disbursement Payroll Taxes and Employee Benefits, Non-contribution Account	Memo Item <input type="checkbox"/>
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. Latino Victory Project		Date of Disbursement MM / DD / YYYY 08 / 13 / 2018
Mailing Address 700 14th Street NW Suite 200		FEC Identification Number C Transaction ID : SB29.6727 Amount of Each Disbursement this Period 4603.50
City Washington	State DC	
Zip Code 20005	Purpose of Disbursement Office Rent and Overhead, Non-contribution Account	Memo Item <input type="checkbox"/>
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C. Lewis Roca Rothgerber Christie		Date of Disbursement MM / DD / YYYY 08 / 15 / 2018
Mailing Address 201 East Washington Street Suite 1200		FEC Identification Number C Transaction ID : SB29.6730 Amount of Each Disbursement this Period 7144.56
City Phoenix	State AZ	
Zip Code 85004	Purpose of Disbursement Legal Services, Non-contribution Account	Memo Item <input type="checkbox"/>
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....▶	17364.31
TOTAL This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER:
(check only one)

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

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

NAME OF COMMITTEE (In Full)
LATINO VICTORY FUND

A. Mosiac Media Strategy Group

Full Name (Last, First, Middle Initial)

Mailing Address 1250 I Street NW Suite 1003

City Washington State DC Zip Code 20005

Purpose of Disbursement Independent Exp., Phones & Texts, FL HD-30, Non-contribution Account

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement 08 / 27 / 2018

FEC Identification Number C

Transaction ID : SB29.6750

Amount of Each Disbursement this Period 5000.00

Memo Item

B. Raquel Teran for Arizona House of Representatives

Full Name (Last, First, Middle Initial)

Mailing Address PO Box 39917

City Phoenix State AZ Zip Code 85069

Purpose of Disbursement Contribution

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement 08 / 21 / 2018

FEC Identification Number C

Transaction ID : SB29.6741

Amount of Each Disbursement this Period 2500.00

Memo Item

C. Sage Payment Solutions

Full Name (Last, First, Middle Initial)

Mailing Address 12120 Sunset Hills Road

City Reston State VA Zip Code 20190

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

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement 08 / 02 / 2018

FEC Identification Number C

Transaction ID : SB29.6702

Amount of Each Disbursement this Period 2.50

Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶	7502.50
TOTAL This Period (last page this line number only).....▶	63071.01

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

NAME OF COMMITTEE (In Full) LATINO VICTORY FUND	FEC IDENTIFICATION NUMBER ▼ C C00562777
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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 Latino Victory Project		Date of Public Distribution/Dissemination <input type="text"/> / <input type="text"/> / <input type="text"/>	
Mailing Address 700 14th Street NW Suite 200		Amount <input type="text"/>	
City Washington	State DC	Zip Code 20005	Transaction ID : SE.6494
Purpose of Expenditure Voter Data, Non-contribution Account		Category/ Type <input type="text"/>	Date of Disbursement or Obligation <input type="text"/> / <input type="text"/> / <input type="text"/>
Name of Federal Candidate: MATIAS, JUANA, , ,		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House District: <u>03</u> <input type="checkbox"/> President <input type="checkbox"/> Senate State: <u>MA</u>
Calendar Year-To-Date Per Election for Office Sought <input type="text"/>		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ _____	

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

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

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

Saenz, Adrian, , ,

[Electronically Filed]

Date / /

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

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

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

Full Name of Payee: Mosiac Media Strategy Group
Mailing Address: 1250 I Street NW Suite 1003
City: Washington State: DC Zip Code: 20005
Purpose of Expenditure: Internet Advertising, Non-contribution Account
Name of Federal Candidate: MATIAS, JUANA, , ,
Office Sought: House District: 03 State: MA
Amount: 5000.00
Transaction ID: SE.6461
Date of Disbursement or Obligation: 08/22/2018

Full Name of Payee: Solidarity Strategies
Mailing Address: 1090 Vermont Avenue NW Suite 300
City: Washington State: DC Zip Code: 20005
Purpose of Expenditure: Direct Mail, Non-contribution Account
Name of Federal Candidate: SOTO, DARREN, , ,
Office Sought: House District: 09 State: FL
Amount: 32218.48
Transaction ID: SE.6392
Date of Disbursement or Obligation: 08/14/2018

(a) SUBTOTAL of Itemized Independent Expenditures 37218.48
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

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

Saenz, Adrian, , ,

[Electronically Filed]

Date 09/24/2018

Signature

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

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

Full Name of Payee <input type="checkbox"/> Memo Item Solidarity Strategies	Date of Public Distribution/Dissemination <input type="text"/> / <input type="text"/> / <input type="text"/>
Mailing Address 1090 Vermont Avenue NW Suite 300	Amount <input type="text"/>
City Washington State DC Zip Code 20005	Transaction ID : SE.6394 Date of Disbursement or Obligation <input type="text"/> / <input type="text"/> / <input type="text"/>
Purpose of Expenditure Data File, Non-contribution Account Category/Type <input type="text"/>	Name of Federal Candidate: <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: 09 State: FL
Calendar Year-To-Date Per Election for Office Sought <input type="text"/> 59218.48	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶

Full Name of Payee <input type="checkbox"/> Memo Item Solidarity Strategies	Date of Public Distribution/Dissemination <input type="text"/> / <input type="text"/> / <input type="text"/>
Mailing Address 1090 Vermont Avenue NW Suite 300	Amount <input type="text"/>
City Washington State DC Zip Code 20005	Transaction ID : SE.6400 Date of Disbursement or Obligation <input type="text"/> / <input type="text"/> / <input type="text"/>
Purpose of Expenditure Direct Mail, Non-contribution Account Category/Type <input type="text"/>	Name of Federal Candidate: <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: 09 State: FL
Calendar Year-To-Date Per Election for Office Sought <input type="text"/> 104436.96	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures	<input type="text"/> 35218.48
(b) SUBTOTAL of Unitemized Independent Expenditures.....	<input type="text"/>
(c) TOTAL Independent Expenditures	<input type="text"/>

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

Saenz, Adrian, , ,

[Electronically Filed]

Date / /

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

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

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

Full Name of Payee: Solidarity Strategies
Mailing Address: 1090 Vermont Avenue NW Suite 300
City: Washington State: DC Zip Code: 20005
Purpose of Expenditure: Direct Mail, Non-contribution Account
Name of Federal Candidate: SOTO, DARREN, , ,
Office Sought: House District: 09 State: FL
Amount: 32218.48
Transaction ID: SE.6447
Date of Disbursement or Obligation: 08/21/2018
Disbursement For: Primary

Full Name of Payee: Solidarity Strategies
Mailing Address: 1090 Vermont Avenue NW Suite 300
City: Washington State: DC Zip Code: 20005
Purpose of Expenditure: Printing, Non-contribution Account
Name of Federal Candidate: MATIAS, JUANA, , ,
Office Sought: House District: 03 State: MA
Amount: 850.00
Transaction ID: SE.6492
Date of Disbursement or Obligation: 08/31/2018
Disbursement For: Primary

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

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

Saenz, Adrian, , ,

[Electronically Filed]

Date 09/24/2018

Signature

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

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

Full Name of Payee <input type="checkbox"/> Memo Item The Hamilton Campaign Network LLC	Date of Public Distribution/Dissemination <input type="text"/> / <input type="text"/> / <input type="text"/>
Mailing Address 5030 Broadway, Suite 810	Amount <input type="text"/> 9000.00
City State Zip Code New York NY 10034	
Purpose of Expenditure Media Production, Non-contribution Account	Transaction ID : SE.6382 Date of Disbursement or Obligation <input type="text"/> / <input type="text"/> / <input type="text"/>
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"/> Senate District: <u>09</u> <input type="checkbox"/> President <input type="checkbox"/> State: <u>FL</u>
Calendar Year-To-Date Per Election for Office Sought <input type="text"/> 9000.00	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶

Full Name of Payee <input type="checkbox"/> Memo Item The Hamilton Campaign Network LLC	Date of Public Distribution/Dissemination <input type="text"/> / <input type="text"/> / <input type="text"/>
Mailing Address 5030 Broadway, Suite 810	Amount <input type="text"/> 1000.00
City State Zip Code New York NY 10034	
Purpose of Expenditure Media Production, Non-contribution Account	Transaction ID : SE.6486 Date of Disbursement or Obligation <input type="text"/> / <input type="text"/> / <input type="text"/>
Name of Federal Candidate: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose GRAYSON, ALAN MARK, , ,	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate District: <u>09</u> <input type="checkbox"/> President <input type="checkbox"/> State: <u>FL</u>
Calendar Year-To-Date Per Election for Office Sought <input type="text"/> 10000.00	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures	<input type="text"/> 10000.00
(b) SUBTOTAL of Unitemized Independent Expenditures.....	<input type="text"/>
(c) TOTAL Independent Expenditures	<input type="text"/>

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

Saenz, Adrian, , ,

[Electronically Filed]

Date / /

Signature

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

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

Full Name of Payee <input type="checkbox"/> Memo Item The Hamilton Campaign Network LLC	Date of Public Distribution/Dissemination <input type="text"/> / <input type="text"/> / <input type="text"/>
Mailing Address 5030 Broadway, Suite 810	Amount <input type="text"/> 6000.00 Transaction ID : SE.6386 Date of Disbursement or Obligation <input type="text"/> / <input type="text"/> / <input type="text"/>
City State Zip Code New York NY 10034	
Purpose of Expenditure Community Advertising, Non-contribution Account	
Name of Federal Candidate: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose SOTO, DARREN, , ,	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> President <input type="checkbox"/> Senate District: 09 State: FL
Calendar Year-To-Date Per Election for Office Sought <input type="text"/> 16000.00	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶

Full Name of Payee <input type="checkbox"/> Memo Item The Hamilton Campaign Network LLC	Date of Public Distribution/Dissemination <input type="text"/> / <input type="text"/> / <input type="text"/>
Mailing Address 5030 Broadway, Suite 810	Amount <input type="text"/> 8000.00 Transaction ID : SE.6389 Date of Disbursement or Obligation <input type="text"/> / <input type="text"/> / <input type="text"/>
City State Zip Code New York NY 10034	
Purpose of Expenditure Endorsement Communications, Non-contribution Account	
Name of Federal Candidate: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose SOTO, DARREN, , ,	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> President <input type="checkbox"/> Senate District: 09 State: FL
Calendar Year-To-Date Per Election for Office Sought <input type="text"/> 24000.00	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶

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

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

Saenz, Adrian, , ,

[Electronically Filed]

Date

/ /

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

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

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

Full Name of Payee: The Hamilton Campaign Network LLC
Mailing Address: 5030 Broadway, Suite 810
City: New York, State: NY, Zip Code: 10034
Purpose of Expenditure: Community Advertising (Signs, Posters, etc.), Non-contribution Account
Category/Type:
Name of Federal Candidate: SOTO, DARREN, , , Support
Office Sought: House, District: 09, State: FL
Calendar Year-To-Date Per Election for Office Sought: 72218.48
Disbursement For: Primary
Date of Public Distribution/Dissemination: 08/15/2018
Amount: 13000.00
Transaction ID: SE.6397
Date of Disbursement or Obligation: 08/15/2018

Full Name of Payee: The Hamilton Campaign Network LLC
Mailing Address: 5030 Broadway, Suite 810
City: New York, State: NY, Zip Code: 10034
Purpose of Expenditure: Text Messaging, Non-contribution Account
Category/Type:
Name of Federal Candidate: SOTO, DARREN, , , Support
Office Sought: House, District: 09, State: FL
Calendar Year-To-Date Per Election for Office Sought: 106120.96
Disbursement For: Primary
Date of Public Distribution/Dissemination: 08/16/2018
Amount: 1684.00
Transaction ID: SE.6403
Date of Disbursement or Obligation: 08/16/2018

(a) SUBTOTAL of Itemized Independent Expenditures 14684.00
(b) SUBTOTAL of Unitemized Independent Expenditures.....
(c) TOTAL Independent Expenditures

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

Saenz, Adrian, , ,

[Electronically Filed]

Date

09 / 24 / 2018

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

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

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

Full Name of Payee: The Hamilton Campaign Network LLC
Mailing Address: 5030 Broadway, Suite 810
City: New York, State: NY, Zip Code: 10034
Purpose of Expenditure: Community Advertising and Organizing, Non-contribution Account
Date of Public Distribution/Dissemination: 08/17/2018
Amount: 16000.00
Transaction ID: SE.6408
Date of Disbursement or Obligation: 08/17/2018
Name of Federal Candidate: SOTO, DARREN, , , Support
Office Sought: House, District: 09, State: FL
Calendar Year-To-Date Per Election for Office Sought: 124120.96
Disbursement For: Primary

Full Name of Payee: The Hamilton Campaign Network LLC
Mailing Address: 5030 Broadway, Suite 810
City: New York, State: NY, Zip Code: 10034
Purpose of Expenditure: Outdoor Advertising, Non-contribution Account
Date of Public Distribution/Dissemination: 08/17/2018
Amount: 5000.00
Transaction ID: SE.6410
Date of Disbursement or Obligation: 08/17/2018
Name of Federal Candidate: SOTO, DARREN, , , Support
Office Sought: House, District: 09, State: FL
Calendar Year-To-Date Per Election for Office Sought: 129120.96
Disbursement For: Primary

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

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

Saenz, Adrian, , , [Electronically Filed] Date 09/24/2018
Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

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

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

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

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

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

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

Saenz, Adrian, , ,

[Electronically Filed]

Date 09/24/2018

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

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

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

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

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

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

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

Saenz, Adrian, , ,

[Electronically Filed]

Date 09/24/2018

Signature

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

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

Full Name of Payee <input type="checkbox"/> Memo Item The Hamilton Campaign Network LLC		Date of Public Distribution/Dissemination <input type="text"/> / <input type="text"/> / <input type="text"/>
Mailing Address 5030 Broadway, Suite 810		Amount <input type="text"/> 1684.00 Transaction ID : SE.6464 Date of Disbursement or Obligation <input type="text"/> / <input type="text"/> / <input type="text"/>
City New York	State NY	
Zip Code 10034	Category/ Type <input type="text"/>	
Purpose of Expenditure Text Messaging		Name of Federal Candidate: SOTO, DARREN, , , <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
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: 09 State: FL
Calendar Year-To-Date Per Election for Office Sought <input type="text"/> 366391.44		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶

Full Name of Payee <input type="checkbox"/> Memo Item The Hamilton Campaign Network LLC		Date of Public Distribution/Dissemination <input type="text"/> / <input type="text"/> / <input type="text"/>
Mailing Address 5030 Broadway, Suite 810		Amount <input type="text"/> 6000.00 Transaction ID : SE.6475 Date of Disbursement or Obligation <input type="text"/> / <input type="text"/> / <input type="text"/>
City New York	State NY	
Zip Code 10034	Category/ Type <input type="text"/>	
Purpose of Expenditure Outdoor Advertising		Name of Federal Candidate: SOTO, DARREN, , , <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
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: 09 State: FL
Calendar Year-To-Date Per Election for Office Sought <input type="text"/> 372391.44		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures	<input type="text"/> 7684.00
(b) SUBTOTAL of Unitemized Independent Expenditures.....	<input type="text"/>
(c) TOTAL Independent Expenditures	<input type="text"/>

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

Saenz, Adrian, , ,

[Electronically Filed]

Date

/ /

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

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

Full Name of Payee <input type="checkbox"/> Memo Item The Hamilton Campaign Network LLC	Date of Public Distribution/Dissemination <input type="text"/> / <input type="text"/> / <input type="text"/>
Mailing Address 5030 Broadway, Suite 810	Amount <input type="text"/>
City New York State NY Zip Code 10034	Transaction ID : SE.6478 Date of Disbursement or Obligation <input type="text"/> / <input type="text"/> / <input type="text"/>
Purpose of Expenditure Community Advertising Category/Type <input type="text"/>	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 <input type="text"/> 378391.44	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶

Full Name of Payee <input type="checkbox"/> Memo Item The Hamilton Campaign Network LLC	Date of Public Distribution/Dissemination <input type="text"/> / <input type="text"/> / <input type="text"/>
Mailing Address 5030 Broadway, Suite 810	Amount <input type="text"/>
City New York State NY Zip Code 10034	Transaction ID : SE.6481 Date of Disbursement or Obligation <input type="text"/> / <input type="text"/> / <input type="text"/>
Purpose of Expenditure Text Messaging Category/Type <input type="text"/>	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 <input type="text"/> 380075.44	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures	<input type="text"/> 7684.00
(b) SUBTOTAL of Unitemized Independent Expenditures.....	<input type="text"/>
(c) TOTAL Independent Expenditures	<input type="text"/>

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Saenz, Adrian, , ,

[Electronically Filed]

Date / /

Signature

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

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

Full Name of Payee <input type="checkbox"/> Memo Item The Hamilton Campaign Network LLC		Date of Public Distribution/Dissemination <input type="text"/> / <input type="text"/> / <input type="text"/>	
Mailing Address 5030 Broadway, Suite 810		Amount <input type="text"/>	
City New York	State NY	Zip Code 10034	Transaction ID : SE.6483
Purpose of Expenditure Text Messaging, Non-contribution Account		Category/Type <input type="text"/>	Date of Disbursement or Obligation <input type="text"/> / <input type="text"/> / <input type="text"/>
Name of Federal Candidate: SOTO, DARREN, , ,		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House District: <u>09</u> <input type="checkbox"/> President <input type="checkbox"/> Senate State: <u>FL</u>
Calendar Year-To-Date Per Election for Office Sought <input type="text"/>		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ _____	

Full Name of Payee <input type="checkbox"/> Memo Item The Hamilton Campaign Network LLC		Date of Public Distribution/Dissemination <input type="text"/> / <input type="text"/> / <input type="text"/>	
Mailing Address 5030 Broadway, Suite 810		Amount <input type="text"/>	
City New York	State NY	Zip Code 10034	Transaction ID : SE.6713
Purpose of Expenditure Text Messaging		Category/Type <input type="text"/>	Date of Disbursement or Obligation <input type="text"/> / <input type="text"/> / <input type="text"/>
Name of Federal Candidate: SOTO, DARREN, , ,		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House District: <u>09</u> <input type="checkbox"/> President <input type="checkbox"/> Senate State: <u>FL</u>
Calendar Year-To-Date Per Election for Office Sought <input type="text"/>		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ _____	

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

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

Saenz, Adrian, , ,

[Electronically Filed]

Date / /

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

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

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

Full Name of Payee
The Hamilton Campaign Network LLC
Mailing Address
5030 Broadway, Suite 810
City
New York State
NY Zip Code
10034
Purpose of Expenditure
Text Messaging
Category/Type
Amount
4467.60
Transaction ID : SE.6714
Date of Disbursement or Obligation
08 / 28 / 2018

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

Full Name of Payee
Mailing Address
City
State
Zip Code
Purpose of Expenditure
Category/Type
Date of Public Distribution/Dissemination
Amount
Date of Disbursement or Obligation

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

Table with 2 columns: Description and Amount.
(a) SUBTOTAL of Itemized Independent Expenditures 4467.60
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures 393001.24

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

Saenz, Adrian, ,

[Electronically Filed]

Date 09 / 24 / 2018

Signature