

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

NAME OF COMMITTEE (In Full) LATINO VICTORY FUND	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00562777 </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 The Hamilton Campaign Network LLC	Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 08 / 27 / 2018						
Mailing Address 5030 Broadway, Suite 810	Amount 424.20 Transaction ID : SE.6483 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 08 / 27 / 2018						
<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:33%;">City</td> <td style="width:33%;">State</td> <td style="width:33%;">Zip Code</td> </tr> <tr> <td>New York</td> <td>NY</td> <td>10034</td> </tr> </table>		City	State	Zip Code	New York	NY	10034
City		State	Zip Code				
New York	NY	10034					
Purpose of Expenditure Text Messaging, 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 380499.64	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 M M / D D / Y Y Y Y Y Y 08 / 28 / 2018						
Mailing Address 5030 Broadway, Suite 810	Amount 1684.00 Transaction ID : SE.6713 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 08 / 28 / 2018						
<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:33%;">City</td> <td style="width:33%;">State</td> <td style="width:33%;">Zip Code</td> </tr> <tr> <td>New York</td> <td>NY</td> <td>10034</td> </tr> </table>		City	State	Zip Code	New York	NY	10034
City		State	Zip Code				
New York	NY	10034					
Purpose of Expenditure Text Messaging							
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 382183.64	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶						

(a) SUBTOTAL of Itemized Independent Expenditures ▶	2108.20
(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 M M / D D / Y Y Y Y Y Y
09 / 24 / 2018

Signature