24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES
(Schedule E)

NAME OF COMMITTEE (In Full)
Latino Victory Fund

FEC IDENTIFICATION NUMBER ▼
C C00562777

Check if [X] 24-hour report [ ] 48-hour report [X] New report [ ] Amends report filed on MM / DD / YYYY

Full Name of Payee
The Hamilton Campaign Network, LLC

Date of Public Distribution/Dissemination
10 / 23 / 2024

Mailing Address 5030 Broadway
Ste 802

Amount
16014.23

City: New York | State: NY | Zip Code: 10034-1666

Transaction ID : 500119192

Purpose of Expenditure
Text Messaging, Non-Contribution Account

Category/Type: 004

Date of Disbursement or Obligation
10 / 23 / 2024

Name of Federal Candidate
VARGAS, ANTHONY, 'TONY', ,

[X] Support [ ] Oppose

Office Sought: [X] House District: 02
[ ] President [ ] Senate State: NE

Calendar Year-To-Date Per Election for Office Sought 2024
16014.23

Disbursement For: [ ] Primary [X] General
[ ] Other (specify) ▶

Full Name of Payee

Date of Public Distribution/Dissemination
MM / DD / YYYY

Mailing Address

Amount

City | State | Zip Code

Purpose of Expenditure

Category/Type

Date of Disbursement or Obligation
MM / DD / YYYY

Name of Federal Candidate

[ ] Support [ ] Oppose

Office Sought: [ ] House District:
[ ] President [ ] Senate State:

Calendar Year-To-Date Per Election for Office Sought

Disbursement For: [ ] Primary [ ] General
[ ] Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures ▶ 16014.23

(b) **SUBTOTAL** of Unitemized Independent Expenditures ▶

(c) **TOTAL** Independent Expenditures ▶ 16014.23

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.

GONZALEZ, Maria, R, ,
Signature

Date 10 / 24 / 2024