

FEC FORM 3

REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee

Office Use Only

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

SWALLEGO VICTORY FUND

ADDRESS (number and street) PO BOX 65322

Check if different than previously reported. (ACC)

WASHINGTON DC 20035

CITY STATE ZIP CODE

2. **FEC IDENTIFICATION NUMBER** C C00826453

3. IS THIS REPORT NEW (N) **OR** AMENDED (A)

STATE DISTRICT

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)

Termination Report (TER)

(b) 12-Day **PRE**-Election Report for the:

Primary (12P) General (12G) Runoff (12R)

Convention (12C) Special (12S)

Election on / / in the State of

(c) 30-Day **POST**-Election Report for the:

General (30G) Runoff (30R) Special (30S)

Election on / / in the State of

5. Covering Period 01 / 01 / 2023 through 03 / 31 / 2023

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 Kyriacopoulos, Janica, , ,

Signature of Treasurer Kyriacopoulos, Janica, , , [Electronically Filed] Date 04 / 14 / 2023

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 3 (Revised 05/2016)

Write or Type Committee Name
SWALLEGO VICTORY FUND

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

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e))....	56505.00	56505.00
(b) Total Contribution Refunds (from Line 20(d))	0.00	0.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	56505.00	56505.00
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	40217.23	40217.23
(b) Total Offsets to Operating Expenditures (from Line 14).....	0.00	0.00
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	40217.23	40217.23
8. Cash on Hand at Close of Reporting Period (from Line 27).....	999.99	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	

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 3 (Revised 05/2016)

Write or Type Committee Name

SWALLEGO VICTORY FUND

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

I. RECEIPTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
11. CONTRIBUTIONS (other than loans) FROM:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	56500.00	56500.00
(ii) Unitemized	5.00	5.00
(iii) TOTAL of contributions from individuals ▶	56505.00	56505.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) The Candidate	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	56505.00	56505.00
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES	0.00	0.00
13. LOANS:		
(a) Made or Guaranteed by the Candidate.....	0.00	0.00
(b) All Other Loans.....	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	0.00	0.00
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.)	0.00	0.00
15. OTHER RECEIPTS (Dividends, Interest, etc.)	0.00	0.00
16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶	56505.00	56505.00

DETAILED SUMMARY PAGE
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	40217.23	40217.23
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES	15287.78	15287.78
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	0.00
(b) Of All Other Loans	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	0.00	0.00
21. OTHER DISBURSEMENTS	0.00	0.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ►	55505.01	55505.01

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	0.00
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	56505.00
25. SUBTOTAL (add Line 23 and Line 24).....	56505.00
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	55505.01
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	999.99

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: (check only one)		PAGE 5 OF 15		
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14	<input type="checkbox"/> 15

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)
SWALLEGO VICTORY FUND

A. Full Name (Last, First, Middle Initial)
Colom-Mena, Miguel, , ,

Mailing Address 480 Camino de la Vega

City Dorado	State PR	Zip Code 00646
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FEC ID number of contributing federal political committee. **C**

Name of Employer Nagnoi LLC	Occupation Engineer
--------------------------------	------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
5000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
02 / 06 / 2023

Transaction ID : SA11AI.4114

Amount of Each Receipt this Period
5000.00

Memo Item

B. Full Name (Last, First, Middle Initial)
ACTBLUE

Mailing Address PO 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	Occupation
------------------	------------

Receipt For:
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
25000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
02 / 02 / 2023

Transaction ID : SA11AI.4114.0

Amount of Each Receipt this Period
5000.00

Memo Item

C. Full Name (Last, First, Middle Initial)
Fuentes, Julio, , ,

Mailing Address 81 Hacienda San Jose

City Caguas	State PR	Zip Code 00727
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FEC ID number of contributing federal political committee. **C**

Name of Employer SSA LLC	Occupation Executive Director
-----------------------------	----------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
5000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
02 / 06 / 2023

Transaction ID : SA11AI.4116

Amount of Each Receipt this Period
5000.00

Memo Item

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

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

10000.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: (check only one)		PAGE 6 OF 15		
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14	<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
SWALLEGO VICTORY FUND

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

Mailing Address PO 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	Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
30000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
02 / 03 / 2023

Transaction ID : SA11AI.4116.0

Amount of Each Receipt this Period
5000.00

Memo Item

B. Full Name (Last, First, Middle Initial)
Fuller, Glen, , ,

Mailing Address 502 Miner Road

City Orinda	State CA	Zip Code 94563
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FEC ID number of contributing federal political committee. **C**

Name of Employer Mackenzie Capital	Occupation Money Manager
---------------------------------------	-----------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
10000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
02 / 06 / 2023

Transaction ID : SA11AI.4132

Amount of Each Receipt this Period
10000.00

Memo Item

C. Full Name (Last, First, Middle Initial)
ACTBLUE

Mailing Address PO 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	Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
40000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
02 / 06 / 2023

Transaction ID : SA11AI.4132.0

Amount of Each Receipt this Period
10000.00

Memo Item

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

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

10000.00

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

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

FOR LINE NUMBER: PAGE 7 OF 15
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
SWALLEGO VICTORY FUND

A. Full Name (Last, First, Middle Initial)
LaPol, Dina, , ,

Mailing Address 9000 W Sunset Blvd
Suite 800

City West Hollywood State CA Zip Code 90069

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

Name of Employer LaPol Law PC Occupation Attorney

Receipt For:
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
4000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 13 / 2023

Transaction ID : SA11AI.4140

Amount of Each Receipt this Period
4000.00

Memo Item

B. Full Name (Last, First, Middle Initial)
ACTBLUE

Mailing Address PO BOX 441146

City SOMERVILLE State MA Zip Code 02144

FEC ID number of contributing federal political committee. **C** C00401224

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
53000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 08 / 2023

Transaction ID : SA11AI.4140.0

Amount of Each Receipt this Period
4000.00

Memo Item

C. Full Name (Last, First, Middle Initial)
LaPol, Wendy, , ,

Mailing Address 9000 W Sunset Blvd
Suite 800

City West Hollywood State CA Zip Code 90069

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

Name of Employer Occupation
RCA VP of Promotion

Receipt For:
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
4000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 13 / 2023

Transaction ID : SA11AI.4135

Amount of Each Receipt this Period
4000.00

Memo Item

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

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

8000.00

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

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

FOR LINE NUMBER: PAGE 8 OF 15
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
SWALLEGO VICTORY FUND

A. Full Name (Last, First, Middle Initial)
ACTBLUE
Mailing Address PO BOX 441146

City SOMERVILLE State MA Zip Code 02144

FEC ID number of contributing federal political committee. **C** C00401224

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
44000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 06 / 2023

Transaction ID : SA11AI.4135.0

Amount of Each Receipt this Period
4000.00

Memo Item

B. Full Name (Last, First, Middle Initial)
Nelson, Daryl, , ,
Mailing Address 2 Bay State Place #2

City Boston State MA Zip Code 02127

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

Name of Employer Occupation
New England Patriots Sports Medicine

Receipt For:
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
3500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 13 / 2023

Transaction ID : SA11AI.4144

Amount of Each Receipt this Period
3500.00

Memo Item

C. Full Name (Last, First, Middle Initial)
ACTBLUE
Mailing Address PO BOX 441146

City SOMERVILLE State MA Zip Code 02144

FEC ID number of contributing federal political committee. **C** C00401224

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
56505.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 11 / 2023

Transaction ID : SA11AI.4144.0

Amount of Each Receipt this Period
3500.00

Memo Item

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

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

3500.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: (check only one)		PAGE 9 OF 15		
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14	<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
SWALLEGO VICTORY FUND

A. Full Name (Last, First, Middle Initial)
Obergh, Dian, , ,

Mailing Address 502 W Lynwood St

City Phoenix	State AZ	Zip Code 85003
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FEC ID number of contributing federal political committee. **C**

Name of Employer Ritoch Powell	Occupation COO
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Receipt For:
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt
M M / D D / Y Y Y Y Y Y
03 / 30 / 2023

Transaction ID : SA11AI.4175

Amount of Each Receipt this Period

Memo Item

B. Full Name (Last, First, Middle Initial)
Obergh, Karl, , ,

Mailing Address 502 W. Lynwood St.

City Phoenix	State AZ	Zip Code 85003
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FEC ID number of contributing federal political committee. **C**

Name of Employer Ardurra	Occupation Civil Engineer
-----------------------------	------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt
M M / D D / Y Y Y Y Y Y
02 / 06 / 2023

Transaction ID : SA11AI.4111

Amount of Each Receipt this Period

Memo Item

C. Full Name (Last, First, Middle Initial)
ACTBLUE

Mailing Address PO 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	Occupation
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Receipt For:
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt
M M / D D / Y Y Y Y Y Y
02 / 01 / 2023

Transaction ID : SA11AI.4111.0

Amount of Each Receipt this Period

Memo Item

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

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

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

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

FOR LINE NUMBER: PAGE 10 OF 15
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
SWALLEGO VICTORY FUND

A. Full Name (Last, First, Middle Initial)
Shimmon, David, , ,

Mailing Address 2443 Fillmore St
#386

City San Francisco State CA Zip Code 94115

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

Name of Employer Ichor Systems Occupation CEO

Receipt For:
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
5000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
02 / 13 / 2023

Transaction ID : SA11AI.4138

Amount of Each Receipt this Period
5000.00

Memo Item

B. Full Name (Last, First, Middle Initial)
ACTBLUE

Mailing Address PO BOX 441146

City SOMERVILLE State MA Zip Code 02144

FEC ID number of contributing federal political committee. **C** C00401224

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
49000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
02 / 07 / 2023

Transaction ID : SA11AI.4138.0

Amount of Each Receipt this Period
5000.00

Memo Item

C. Full Name (Last, First, Middle Initial)
Smith, Patrick, , ,

Mailing Address 4300 Higel Ave

City Sarasota State FL Zip Code 34242

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

Name of Employer Axon Occupation CEO

Receipt For:
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
10000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
02 / 07 / 2023

Transaction ID : SA11AI.4109

Amount of Each Receipt this Period
10000.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 15000.00

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: (check only one)		PAGE 11 OF 15		
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14	<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
SWALLEGO VICTORY FUND

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

Mailing Address PO 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	Occupation
------------------	------------

Receipt For:
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 10000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 01 / 31 / 2023

Transaction ID : SA11AI.4109.0

Amount of Each Receipt this Period
 10000.00

Memo Item

B. Full Name (Last, First, Middle Initial)

Mailing Address

City	State	Zip Code
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FEC ID number of contributing federal political committee. **C**

Name of Employer	Occupation
------------------	------------

Receipt For:
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt
 M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

Memo Item

C. Full Name (Last, First, Middle Initial)

Mailing Address

City	State	Zip Code
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FEC ID number of contributing federal political committee. **C**

Name of Employer	Occupation
------------------	------------

Receipt For:
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt
 M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	0.00
TOTAL This Period (last page this line number only).....▶	56500.00

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 12 OF 15	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
SWALLEGO VICTORY FUND

Full Name (Last, First, Middle Initial) A. ActBlue Technical Services			Date of Disbursement M M / D D / Y Y Y Y 01 / 31 / 2023	
Mailing Address 14 Arrow St			FEC Identification Number C	
City Cambridge	State MA	Zip Code 02138	Amount of Each Disbursement this Period 395.00	
Purpose of Disbursement Credit Card Processing Fee		Category/ Type	Transaction ID : SB17.4118	
Candidate Name		<input type="checkbox"/> Memo Item		
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. ActBlue Technical Services			Date of Disbursement M M / D D / Y Y Y Y 02 / 06 / 2023	
Mailing Address 14 Arrow St			FEC Identification Number C	
City Cambridge	State MA	Zip Code 02138	Amount of Each Disbursement this Period 790.00	
Purpose of Disbursement Credit Card Processing Fee		Category/ Type	Transaction ID : SB17.4119	
Candidate Name		<input type="checkbox"/> Memo Item		
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. ActBlue Technical Services			Date of Disbursement M M / D D / Y Y Y Y 02 / 12 / 2023	
Mailing Address 14 Arrow St			FEC Identification Number C	
City Cambridge	State MA	Zip Code 02138	Amount of Each Disbursement this Period 1046.95	
Purpose of Disbursement Credit Card Processing Fee		Category/ Type	Transaction ID : SB17.4146	
Candidate Name		<input type="checkbox"/> Memo Item		
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).....▶	2231.95
TOTAL This Period (last page this line number only).....▶	

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 13 OF 15	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
SWALLEGO VICTORY FUND

Full Name (Last, First, Middle Initial) A. Chase Card Services		Date of Disbursement M M / D D / Y Y Y Y 02 / 12 / 2023
Mailing Address PO Box 6294		FEC Identification Number C
City Carol Stream	State IL	Zip Code 60197
Purpose of Disbursement Credit Card Payment - see below if itemized:		Amount of Each Disbursement this Period 2715.28
Candidate Name		Transaction ID : SB17.4156
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) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) B. The Henry		Date of Disbursement M M / D D / Y Y Y Y 02 / 15 / 2023
Mailing Address 4455 E Camelback Rd #b100		FEC Identification Number C
City Phoenix	State AZ	Zip Code 85018
Purpose of Disbursement Fundraising Event Venue and Catering		Amount of Each Disbursement this Period 2715.28
Candidate Name		Transaction ID : SB17.4156.0
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) ▼	<input checked="" type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) c. Fox Corporation		Date of Disbursement M M / D D / Y Y Y Y 02 / 15 / 2023
Mailing Address 101 Constitution Avenue, NW Suite 200 West		FEC Identification Number C
City Washington, DC	State	Zip Code 20001
Purpose of Disbursement Event Tickets		Amount of Each Disbursement this Period 27700.00
Candidate Name		Transaction ID : SB17.4147
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) ▼	<input type="checkbox"/> Memo Item
State: District:		

SUBTOTAL of Disbursements This Page (optional).....▶	30415.28
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 14 OF 15	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
SWALLEGO VICTORY FUND

Full Name (Last, First, Middle Initial) A. PCMS, LLC		Date of Disbursement M M / D D / Y Y Y Y 03 / 30 / 2023
Mailing Address 910 17th St NW Ste. 925		FEC Identification Number C
City Washington, DC	State	Zip Code 20006
Purpose of Disbursement Accounting Services	Category/ Type	
Candidate Name	Amount of Each Disbursement this Period 500.00	
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) ▼	Transaction ID : SB17.4166
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) B. Swalwell for Congress		Date of Disbursement M M / D D / Y Y Y Y 03 / 30 / 2023
Mailing Address PO Box 2847		FEC Identification Number C C00502294
City Dublin	State CA	Zip Code 94568
Purpose of Disbursement Reimbursement - see below:	Category/ Type	
Candidate Name	Amount of Each Disbursement this Period 7000.00	
Office Sought: <input checked="" 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) ▼	Transaction ID : SB17.4162
State: CA District: 14	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) C. Comcast NBCUniversal		Date of Disbursement M M / D D / Y Y Y Y 02 / 05 / 2023
Mailing Address 300 New Jersey Ave. NW Ste 700		FEC Identification Number C
City Washington, DC	State	Zip Code 20001
Purpose of Disbursement Event Tickets	Category/ Type	
Candidate Name	Amount of Each Disbursement this Period 7000.00	
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) ▼	Transaction ID : SB17.4162.0
State: District:	<input checked="" type="checkbox"/> Memo Item	

SUBTOTAL of Disbursements This Page (optional).....▶	7500.00
TOTAL This Period (last page this line number only).....▶	40147.23

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 15 OF 15	
	<input type="checkbox"/> 17 20a	<input checked="" type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
SWALLEGO VICTORY FUND

Full Name (Last, First, Middle Initial) A. Gallego for Arizona			Date of Disbursement M M / D D / Y Y Y Y 03 / 30 / 2023	
Mailing Address PO Box 1710			FEC Identification Number C C00558627	
City Phoenix	State AZ	Zip Code 85001	Amount of Each Disbursement this Period 7643.89	
Purpose of Disbursement Transfer of proceeds to authorized committee			Transaction ID : SB18.4168	
Candidate Name Gallego, Ruben, , ,			Memo Item <input type="checkbox"/>	
Office Sought: <input checked="" 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: AZ	District:			

Full Name (Last, First, Middle Initial) B. Swalwell for Congress			Date of Disbursement M M / D D / Y Y Y Y 03 / 30 / 2023	
Mailing Address PO Box 2847			FEC Identification Number C C00502294	
City Dublin	State CA	Zip Code 94568	Amount of Each Disbursement this Period 7643.89	
Purpose of Disbursement Transfer of proceeds to authorized committee			Transaction ID : SB18.4167	
Candidate Name Swalwell, Eric, , ,			Memo Item <input type="checkbox"/>	
Office Sought: <input checked="" 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: CA	District: 14			

Full Name (Last, First, Middle Initial) C.			Date of Disbursement M M / D D / Y Y Y Y	
Mailing Address			FEC Identification Number C	
City	State	Zip Code	Amount of Each Disbursement this Period	
Purpose of Disbursement			Memo Item <input type="checkbox"/>	
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State:	District:			

SUBTOTAL of Disbursements This Page (optional).....▶	15287.78
TOTAL This Period (last page this line number only).....▶	15287.78