#### FORM MPAC MONTHLY FILING GENERAL-PURPOSE COMMITTEE CAMPAIGN FINANCE REPORT **COVER SHEET PG 1** Filer ID 2 Total pages filed: The MPAC Instruction Guide explains how to complete this form. (Ethics Commission Filers) 00088032 3 COMMITTEE NAME **OFFICE USE ONLY** AFC Victory Fund Date Received **ELECTRONICALLY FILED** 07/08/2024 COMMITTEE ADDRESS / PO BOX: APT / SUITE #: CITY: STATE: ZIP **ADDRESS** 228 S. Washington St. Ste. 115 Change of Address Alexandria, VA 22314 Date Hand-delivered or Date Postmarked MS / MRS / MR **CAMPAIGN FIRST** MI **TREASURER** Receipt # Amount Lisa NAME Date Processed **NICKNAME SUFFIX** LAST Date Imaged Lisker CAMPAIGN STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE **TREASURER** 228 S. Washington St. Ste. 115 STREET **ADDRESS** (Residence or Business) Alexandria, VA 22314 **CAMPAIGN** STREET ADDRESS OR PO BOX: APT / SUITE #; CITY: STATE: ZIP CODE **TREASURER** 228 S. Washington St. Ste. 115 MAILING **ADDRESS** Change of Address Alexandria, VA 22314 **CAMPAIGN** AREA CODE PHONE NUMBER **EXTENSION TREASURER PHONE** (703) 281-7540 REPORT TYPE 10th day after campaign X Monthly Dissolution (Attach PAC-DR) treasurer termination 10 MONTHLY January 5 April 5 X July 5 October 5 REPORT FILING **DEADLINE** February 5 May 5 August 5 November 5 March 5 September 5 December 5 June 5 11 PERIOD Month Day Year Month Day Year **THROUGH COVERED** 05/26/2024 06/25/2024

### MONTHLY FILING GPAC REPORT: PURPOSE AND TOTALS

### FORM MPAC COVER SHEET PG 2

2 COMMITTEE NAME			13 Filer I	
AFC Victory Fund			00088	8032
4 COMMITTEE	1. Candidates	A. Supported		
ACTIVITY	(Identify by name or, if applicable, classify by party.)			
(Attach lists on plain paper to complete this report if necessary.)		B. Opposed		
	2 Magauras	A. Supported		
	Measures     (Describe by date and location	A. Supported		
	of election and nature of issue.)			
		B. Opposed		
	3. Officeholders			
	Assisted (Identify by name or, if applicable, classify by party.)			
F CONTRIBUTION	1 TOTAL LINUTENIZE	POLITICAL CONTRIBUTIONS (OTUER TUAN	. 1	
5 CONTRIBUTION TOTALS	PLEDGES, LOANS, CONTRIBUTIONS N	D POLITICAL CONTRIBUTIONS (OTHER THAN OR GUARANTEES OF LOANS, OR IADE ELECTRONICALLY) qualifies for the higher itemization threshold		\$ 0.00
	2. TOTAL POLITICA			•
	(OTHER THAN PLEI	DGES, LOANS, OR GUARANTEES OF LOANS)		12,910.69
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED	POLITICAL EXPENDITURES		\$ 0.00
	4. TOTAL POLITICA	L EXPENDITURES	\$	\$ 872,252.54
CONTRIBUTION BALANCE	5. TOTAL POLITICAL ( OF THE REPORTIN	CONTRIBUTIONS MAINTAINED AS OF THE LA G PERIOD	AST DAY	\$ 3,074,272.76
OUTSTANDING LOAN TOTALS	-	AMOUNT OF ALL OUTSTANDING LOANS AS CREPORTING PERIOD		\$ 0.00
6 AFFIDAVIT				
		I swear, or affirm, under penalty o true and correct and includes all in under Title 15, Election Code.	of perjury, that nformation re	t the accompanying report is quired to be reported by me
		ı	isa Lisker	
			Campaign T	reasurer
		Signature of	Campaign	reasurer
AFFIX NOTAF	RY STAMP / SEAL ABOVE			
Sworn to and subscribe	ed before me, by the said		_, this the	day
of	, 20, to certify \	which, witness my hand and seal of office.		
				_
Signature of officer	administering oath	Printed name of officer administering oath	Title o	of officer administering oath

### **SUBTOTALS - MPAC**

### FORM MPAC COVER SHEET PG 3

3 of 11			
17 COMMITT AFC Victo		<b>18</b> Filer ID 00088032	(Ethics Commission Filers)
	E SUBTOTALS SCHEDULE		SUBTOTAL AMOUNT
1.	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		\$
2.	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$
3.	SCHEDULE B: PLEDGED CONTRIBUTIONS		\$
4.	SCHEDULE C1: MONETARY CONTRIBUTIONS FROM CORPORATION OR LABO ORGANIZATION	)R	\$
5.	SCHEDULE C2: NON-MONETARY (IN-KIND) CONTRIBUTIONS FROM CORPORAL LABOR ORGANIZATION	ATION OR	\$
6.	SCHEDULE C3: MONETARY SUPPORT FROM CORPORATION OR LABOR ORG	ANIZATION	\$
7. X	SCHEDULE C4: NON-MONETARY SUPPORT FROM CORPORATION OR LABOR ORGANIZATION	!	<b>\$</b> 12,910.69
8.	SCHEDULE D: PLEDGED CONTRIBUTIONS FROM CORPORATION OR LABOR (	ORGANIZATION	\$
9.	SCHEDULE E: LOANS		\$
10. X	SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION:	S	<b>\$</b> 872,252.54
11.	SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$
12.	SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTION	ONS	\$
13.	SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$
14.	SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	ONS	\$
15. X	SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS TO FILER	RETURNED	<b>\$</b> 6,837.29

# NON-MONETARY SUPPORT FROM CORPORATION SCHEDULE C4 **OR LABOR ORGANIZATION** 1 Total pages Schedule C4: The Instruction Guide explains how to complete this form. Sch: 1/1 Rpt: 4/11 2 FILER NAME 3 Filer ID (Ethics Commission Filers) AFC Victory Fund 00088032 4 Date 5 Corporation / Labor Organization name 6 Amount (\$) 06/25/2024 12,910.69 American Federation for Children Inc.

#### SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense

Event Expense Fees Food/Beverage Expense

**EXPENDITURE CATEGORIES FOR BOX 8(a)** 

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District

Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	y - Gift/Awards/Memorials Expense Printing Expense Travel Out of District al Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above)  The Instruction Guide explains how to complete this form.	
1 Total pages Cabadula E4:	· · · · · · · · · · · · · · · · · · ·	
1 Total pages Schedule F1:		
Sch: 1/6 Rpt: 5/11	AFC Victory Fund 00088032	
4 Date	5 Payee name	
06/13/2024	CP Strategies LLC	
6 Amount (\$)	7 Payee address; City; State; Zip Code	
\$3,000.00	1327 H ST	
	Ste 303	
Expenditure from corporate funds	Lincoln, NE 68508	
8 PURPOSE		
OF	(a) Category (See Categories listed at the top of this schedule)  Consulting Expense  (b) Description  Check if travel outside of Texas. Complete Schedule T.	
EXPENDITURE	Consulting Expense Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense	
	Strategic Consulting	
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	
expenditure to benefit C/OI	H	
Date	Payee name	
06/05/2024	Chase Bank	
Amount (\$)	Payee address; City; State; Zip Code	
\$787.50	8111 Preston Rd, 2nd Fl.	
Ψ101.50		
Expenditure from	Dollar TV 75225	
corporate funds	Dallas, TX 75225	
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)  (b) Description	
EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense	
	Bank Fee	
	Bankie	
Complete <u>ONLY</u> if direct	Candidate/Officeholder name Office sought Office held	
expenditure to benefit C/OI	· · · · · · · · · · · · · · · · · · ·	
	T _	
Date	Payee name	
06/20/2024	Cygnal	
Amount (\$)	Payee address; City; State; Zip Code	
\$5,150.00	90017th St NW	
	Ste 950	
Expenditure from corporate funds	Washington, DC 20006	
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
OF	Consulting Expense  Consulting Expense  Consulting Expense  Consulting Expense	
EXPENDITURE	Check if Austin, TX, officeholder living expense	
	Research	
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	
expenditure to benefit C/OI	H	

#### SCHEDULE F1

#### **EXPENDITURE CATEGORIES FOR BOX 8(a)**

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

Printing Expense

Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District

Candidate/Officeholder/Politica Credit Card Payment	I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above)  The Instruction Guide explains how to complete this form.
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
Sch: 2/6 Rpt: 6/11	AFC Victory Fund 00088032
4 Date	5 Payee name
06/12/2024	Florida Federation for Children PAC
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$300,000.00	10440 Little Patuxent Pkwy
	Ste. 300-343
Expenditure from corporate funds	Columbia, MD 21044
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Contributions/Donations Made By
	Candidate/Officeholder/Political Committee
	Contribution
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	1
Date	Payee name
06/25/2024	Iterable Inc.
Amount (\$)	Payee address; City; State; Zip Code
\$1,160.24	2261 Market St #5212
. ,	
Expenditure from corporate funds	San Francisco, CA 94114
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.
	Check if Austin, TX, officeholder living expense  Web Services
	Web ectivides
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	
Date	Payee name
06/07/2024	Objective Media
Amount (\$)	Payee address; City; State; Zip Code
\$1,220.80	5200 30th St SW
Expenditure from corporate funds	Davenport, IA 52802
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Advertising Expense
	Check if Austin, TX, officeholder living expense
	Digital Ads-Non TX Activity
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	

#### SCHEDULE F1

#### **EXPENDITURE CATEGORIES FOR BOX 8(a)**

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By Candidate/Officeholder/Political Committee

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District

Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment			
1 Total pages Schodule F1:	,		
1 Total pages Schedule F1:			
Sch: 3/6 Rpt: 7/11	AFC Victory Fund 00088032		
4 Date	5 Payee name		
06/25/2024	Objective Media		
6 Amount (\$)	7 Payee address; City; State; Zip Code		
\$1,133.60	5200 30th St SW		
Ψ1,133.00	3200 30th 3t 3w		
Expenditure from			
corporate funds	Davenport, IA 52802		
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description		
OF EVEN DITUE	Advertising Expense		
EXPENDITURE	Check if Austin, TX, officeholder living expense		
	Digital Ads-Non TX Activity		
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held		
expenditure to benefit C/OI			
5 .			
Date	Payee name		
06/25/2024	Objective Media		
Amount (\$)	Payee address; City; State; Zip Code		
\$19,337.49	5200 30th St SW		
Expenditure from	Dayonnort IA E2002		
corporate funds	Davenport, IA 52802		
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description		
EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T.		
	Check if Austin, TX, officeholder living expense		
	Digital Ads/Direct Mail-Non TX Activity		
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held		
expenditure to benefit C/OI	1		
Date	Payee name		
06/25/2024	Objective Media		
Amount (\$)	Payee address; City; State; Zip Code		
\$597.60	5200 30th St SW		
Expenditure from			
corporate funds	Davenport, IA 52802		
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description		
OF	Advertising Expense  Check if travel outside of Texas. Complete Schedule T.		
EXPENDITURE	Check if Austin, TX, officeholder living expense		
	Digital Ads-Non TX Activity		
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held		
expenditure to benefit C/OI			

#### SCHEDULE F1

**EXPENDITURE CATEGORIES FOR BOX 8(a)** 

Advertising Expense Accounting/Banking Consulting Expense

Event Expense Food/Beverage Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District Travel in District

Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)	
Sch: 4/6 Rpt: 8/11	AFC Victory Fund 00088032	
4 Date	5 Payee name	
06/13/2024	Oklahoma Federation for Children PAC	
6 Amount (\$)	7 Payee address; City; State; Zip Code	
\$20,000.00	201 Robert S Kerr Ave	
Expenditure from corporate funds	Oklahoma City, OK 73102	
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
OF	Contributions/Donations Made By  Check if travel outside of Texas. Complete Schedule T.	
EXPENDITURE	Candidate/Officeholder/Political Committee	
	Contribution	
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	_
expenditure to benefit C/OI	H	
Date	Payee name	
06/25/2024	Oklahoma Federation for Children PAC	
Amount (\$)	Payee address; City; State; Zip Code	
\$5,000.00	201 Robert S Kerr Ave	
Expenditure from corporate funds	Oklahoma City, OK 73102	
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
OF EXPENDITURE	Contributions/Donations Made By Check if travel outside of Texas. Complete Schedule T.	
LAFLINDITORL	Candidate/Officeholder/Political Committee	
	Contribution	
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	
expenditure to benefit C/OI	H	
Date	Payee name	_
06/11/2024	Tennessee Federation for Children PAC	
Amount (\$)	Payee address; City; State; Zip Code	
\$500,000.00	10440 Little Patuxent Pkwy	
φοσο,σσο.σσ		
Expenditure from	Ste. 300-343	
corporate funds	Columbia, MD 21044	
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
OF EXPENDITURE	Contributions/Donations Made By	
LAFLINDITORL	Candidate/Officeholder/Political Committee	
	Contribution	
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	
expenditure to benefit C/OI	H .	

#### SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense

Event Expense Fees Food/Beverage Expense

**EXPENDITURE CATEGORIES FOR BOX 8(a)** 

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District

Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	l Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above)
	The Instruction Guide explains how to complete this form.
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
Sch: 5/6 Rpt: 9/11	AFC Victory Fund 00088032
4 Date	5 Payee name
06/13/2024	Uptown Solutions LLC
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$1,000.00	2414 19th St NW #34
Expenditure from	Machineten DC 20000
corporate funds	Washington, DC 20009
8 PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
EXPENDITURE	Consulting Expense Check if travel outside of Texas. Complete Schedule T.
	Check if Austin, TX, officeholder living expense  Strategic Consulting
	Strategic Consulting
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
experiditure to benefit C/Oi	
Date	Payee name
06/13/2024	Vantage Legal
Amount (\$)	Payee address; City; State; Zip Code
\$4,147.00	PO Box 341016
Ţ ·,= · · · · ·	
Expenditure from	A . (f . TV 7070 4
corporate funds	Austin, TX 78734
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Legal Services Check if travel outside of Texas. Complete Schedule T.
	Check if Austin, TX, officeholder living expense
	Legal Fees
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
experialitate to belieff of of	<u>'</u>
Date	Payee name
06/13/2024	Vantage ROI
Amount (\$)	Payee address; City; State; Zip Code
\$4,250.00	PO Box 340836
Ψ-1,200.00	
Expenditure from	A () . TV 7070 4
corporate funds	Austin, TX 78734
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Consulting Expense Check if travel outside of Texas. Complete Schedule T.
	Check if Austin, TX, officeholder living expense
	Research
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	

#### SCHEDULE F1

#### **EXPENDITURE CATEGORIES FOR BOX 8(a)**

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By Candidate/Officeholder/Political Committee

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

Candidate/Officeholder/Politica Credit Card Payment	I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above)  The Instruction Guide explains how to complete this form.
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
Sch: 6/6 Rpt: 10/11	AFC Victory Fund 00088032
4 Date	5 Payee name
06/20/2024	Victory Enterprises
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$4,967.87	5200 30th St SW
Expenditure from corporate funds	Davenport, IA 52802
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Advertising Expense
	Check if Austin, TX, officeholder living expense
	Direct Mail-Non TX Activity
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
Date	Payee name
06/20/2024	Victory Enterprises
Amount (\$)	Payee address; City; State; Zip Code
\$500.44	5200 30th St SW
Expenditure from corporate funds	Davenport, IA 52802
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T.
	Check if Austin, TX, officeholder living expense
	Digital Ads-Non TX Activity
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/O	

## INTEREST, CREDITS, GAINS, REFUNDS, AND SCHEDULE K **CONTRIBUTIONS RETURNED TO FILER** 1 Total pages Schedule K: The Instruction Guide explains how to complete this form. Sch: 1/1 Rpt: 11/11 2 FILER NAME 3 Filer ID (Ethics Commission Filers) AFC Victory Fund 00088032 4 Date 8 Amount (\$) 5 Name of person from whom amount is received \$6,837.29 06/03/2024 Camelback Strategy Group 6 Address of person from whom amount is received; City; State; Zip Code Phoenix, AZ 85016 Purpose for which amount is received Check if political contribution returned to filer Vendor Refund-Mail