



Form 16IE - Report of Independent Expenditures

SUMMARY PAGE

1. Filer Details			
Filer Type: <input type="checkbox"/> Individual <input checked="" type="checkbox"/> Organization		Amendment <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
Organization Name: LGBTQ Victory Fund Federal PAC <small>(If filer type is Organization, please enter contact person details below)</small>			
First Name	Middle Name	Last Name	Suffix
Andrea		Hernandez	
Filer Contact Details			
Address	City	State	Zip Code
1225 Eye St., NW	Washington	DC	20005
Phone No.	Email Address		
(202) 842-8679	jenlebin@gmail.com		
2. Report Name		3. Coverage Period (mm/dd/yyyy)	
2022 June Report		From	Through
		06/01/2022	06/30/2022
4. Summary		Column A (this period)	Column B (cumulative)
Expenditure Total		\$64,397.86	\$72,397.00
5. Certifications/Oaths and Affirmation of Filers of Reports of Receipts and Expenditures			
Oath or Affirmation of Filer			
I hereby swear or affirm, subject to penalties of perjury that I have used all reasonable due diligence to prepare this report, and to the best of my knowledge and belief, the report is true and complete; and I further swear or affirm that I used all reasonable due diligence to ensure that I am in compliance with the reporting requirements of the District of Columbia Campaign Finance Act of 2011.			
Type or print full name of Filer: Andrea Hernandez			
Signature of Filer:		ELECTRONICALLY CERTIFIED	
		Date: 06/15/2022	
Subscribed and sworn to before me this		Day	Of ,20
Notary Public			
NOTE: SUBMISSION OF LATE, FALSE, ERRONEOUS, OR INCOMPLETE INFORMATION MAY SUBJECT THE PERSON TO THE PENALTIES OF D.C. OFFICIAL CODE § 1-1163.35.			

ITEMIZED INDEPENDENT EXPENDITURE

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1. Independent Expenditure <input checked="" type="checkbox"/> Supporting / <input type="checkbox"/> Opposing Salah Czapary		Recipient Type (Select One) <input type="checkbox"/> Candidate <input type="checkbox"/> Initiative <input type="checkbox"/> Referendum <input type="checkbox"/> Recall <input checked="" type="checkbox"/> Fair Elections Candidate	
Committee Name (if Recipient is selected as Candidate) Committee to Elect Salah V Czapary			
Payee Name The Campaign Workshop		Payee Address 5614 Connecticut Avenue, NW #290, Washington, DC 20015	
Purpose of Expenditure Advertising	Date (mm/dd/yyyy) 06/13/2022	Amount \$53,066.46	

2. Independent Expenditure <input checked="" type="checkbox"/> Supporting / <input type="checkbox"/> Opposing Salah Czapary		Recipient Type (Select One) <input type="checkbox"/> Candidate <input type="checkbox"/> Initiative <input type="checkbox"/> Referendum <input type="checkbox"/> Recall <input checked="" type="checkbox"/> Fair Elections Candidate	
Committee Name (if Recipient is selected as Candidate) Committee to Elect Salah V Czapary			
Payee Name APISOURCE		Payee Address 7850 Walker Drive #400, Greenbelt, MD 20770	
Purpose of Expenditure Campaign Materials	Date (mm/dd/yyyy) 06/14/2022	Amount \$11,331.40	

Total Expenditures this Period	\$64,397.86
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