

SUMMARY PAGE
of Receipts and Disbursements

FEC Form 3 (Revised 02/2003)

Page 2

Write or Type Committee Name

Coast to Coast 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)) ..	5,500.00	5,500.00
(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)) ..	5,500.00	5,500.00
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17) ..	194.24	194.24
(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)) ..	194.24	194.24
8. Cash on Hand at Close of Reporting Period (from Line 27) ..	5,305.76	
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

1148269178498679

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3 (Revised 12/2003)

Page 3

Write or Type Committee Name

Coast to Coast Victory Fund

Report Covering the Period: From:

M	M
01	

 /

D	D
01	

 /

Y	Y	Y	Y
2014			

 To:

M	M
03	

 /

D	D
31	

 /

Y	Y	Y	Y
2014			

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)...

5,500.00

5,500.00

(ii) Unitemized.....

0.00

0.00

(iii) TOTAL of contributions from individuals .

5,500.00

5,500.00

(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))..

5,500.00

5,500.00

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)...

5,500.00

5,500.00

02865790691

DETAILED SUMMARY PAGE
of Disbursements

II. DISBURSEMENTS

COLUMN A
Total This Period

COLUMN B
Election Cycle-to-Date

17. OPERATING EXPENDITURES ..	194.24	194.24
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES .	0.00	0.00
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) ►	194.24	194.24

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD ..	0.00
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3) ..	5,500.00
25. SUBTOTAL (add Line 23 and Line 24) ..	5,500.00
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22) ..	194.24
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25) ..	5,305.76

1140240178496791

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

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

FOR LINE NUMBER: PAGE 1 OF 3
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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)
Coast to Coast Victory Fund

A. Full Name (Last, First, Middle Initial)
Betsy Sheerr

Mailing Address
225 S 4th St Apt 205
City State Zip Code
Philadelphia, PA 19106

FEC ID number of contributing federal political committee.

Name of Employer: Sheerr Communications Occupation: Communications Consultant

Receipt For: Primary General Other (specify)

Election Cycle-to-Date:

Date of Receipt: MM/DD/YYYY
02/19/2014

Amount of Each Receipt this Period:

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

Mailing Address
1919 Brandywine St
City State Zip Code
Philadelphia, PA 19130

FEC ID number of contributing federal political committee.

Name of Employer: Not Employed Occupation: Retired

Receipt For: Primary General Other (specify)

Election Cycle-to-Date:

Date of Receipt: MM/DD/YYYY
02/19/2014

Amount of Each Receipt this Period:

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

Mailing Address
934 Black Rock Rd
City State Zip Code
Gladwyn, PA 19035

FEC ID number of contributing federal political committee.

Name of Employer: Phoenix IP Ventures Occupation: Managing Partner

Receipt For: Primary General Other (specify)

Election Cycle-to-Date:

Date of Receipt: MM/DD/YYYY
02/24/2014

Amount of Each Receipt this Period:

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

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

E. Marked through A to Blue

140201890370

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

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

FOR LINE NUMBER:		PAGE 2		OF 3	
(check only one)					
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
<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)
Coast to Coast Victory Fund

A. Full Name (Last, First, Middle Initial)
ActBlue (C00401224)

Mailing Address
P.O. Box 441146
City State Zip Code
Somerville, MA 02144

FEC ID number of contributing federal political committee. C

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date
2,000.00

Date of Receipt
MM / DD / YYYY
02 / 24 / 2014

Amount of Each Receipt this Period
MEMO 1,000.00

Con ribut on earmarked through ActBlue
not a con ribution

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

Mailing Address
4 O'Connell St
City State Zip Code
Pittston, PA 18640

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
Pittston Animal Hospital Owner

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date
1,000.00

Date of Receipt
MM / DD / YYYY
02 / 25 / 2014

Amount of Each Receipt this Period
1,000.00

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

Mailing Address
225 S 18th St PH 1802
City State Zip Code
Philadelphia, PA 19103

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
Salvation Army Art Therapist

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date
1,000.00

Date of Receipt
MM / DD / YYYY
02 / 25 / 2014

Amount of Each Receipt this Period
1,000.00

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

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

2,000.00

1402018003

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

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

FOR LINE NUMBER: PAGE 3 OF 3

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<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)
Coast to Coast Victory Fund

A.

Full Name (Last, First, Middle Initial)
Deborah Willig

Mailing Address
1845 Walnut St 24th Fl
City Philadelphia, PA 19103 State Zip Code

FEC ID number of contributing federal political committee.

Name of Employer Self Occupation Attorney

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
MM / DD / YYYY
03 / 04 / 2014

Amount of Each Receipt this Period

Marked through ActBlue

B.

Full Name (Last, First, Middle Initial)
ActBlue (C00401224)

Mailing Address
P.O. Box 441146
City Somerville, MA 02144 State Zip Code

FEC ID number of contributing federal political committee.

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
MM / DD / YYYY
03 / 04 / 2014

Amount of Each Receipt this Period
MEMO

Contribution marked through ActBlue

C.

Full Name (Last, First, Middle Initial)

Mailing Address
City State Zip Code

FEC ID number of contributing federal political committee.

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
MM / DD / YYYY

Amount of Each Receipt this Period

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

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

11400200178400724

NANCY ERICKSON
SECRETARY

DANA K. McCALLUM
SUPERINTENDENT
HART SENATE OFFICE BUILDING
SUITE 232
WASHINGTON, DC 20510-71
PHONE: (202) 224-0322

United States Senate

OFFICE OF THE SECRETARY
OFFICE OF PUBLIC RECORDS

THE PRECEDING DOCUMENT WAS:

HAND DELIVERED 4-8-14
Date of Receipt

USPS FIRST CLASS MAIL _____
Postmark

USPS REGISTERED/CERTIFIED _____
Postmark

USPS PRIORITY MAIL _____
Postmark

DELIVERY CONFIRMATION OR SIGNATURE CONFIRMATION LABEL

USPS EXPRESS MAIL _____
Postmark

OVERNIGHT DELIVERY SERVICE:

	SHIPPING DATE	NEXT BUSINESS DAY DELIVERY
FEDERAL EXPRESS	_____	<input type="checkbox"/>
UPS	_____	<input type="checkbox"/>
DHL	_____	<input type="checkbox"/>
AIRBORNE EXPRESS	_____	<input type="checkbox"/>

RECEIVED FROM FEDERAL ELECTION COMMISSION _____
Date of Receipt

POSTMARK ILLEGIBLE NO POSTMARK

FAX _____
Date of Receipt

OTHER _____
Date of Receipt or Postmark

PREPARER DH DATE PREPARED 4-8-14

14020180035

14020180036

