

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines.
ARKANSAS VICTORY FUND 2014

ADDRESS (number and street)
 Check if different than previously reported. (ACC)

2. FEC IDENTIFICATION NUMBER ▼ CITY ▲ STATE ▲ ZIP CODE ▲
 3. IS THIS REPORT NEW (N) OR AMENDED (A)

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)
 July 31 Mid-Year Report (Non-election Year Only) (MY)
 Termination Report (TER)
(b) Monthly Report Due On:
 Feb 20 (M2) May 20 (M5) Aug 20 (M8) Nov 20 (M11) (Non-Election Year Only)
 Mar 20 (M3) Jun 20 (M6) Sep 20 (M9) Dec 20 (M12) (Non-Election Year Only)
 Apr 20 (M4) Jul 20 (M7) Oct 20 (M10) Jan 31 (YE)
(c) 12-Day PRE-Election Report for the:
 Primary (12P) General (12G) Runoff (12R)
 Convention (12C) Special (12S)
Election on / / in the State of
(d) 30-Day POST-Election Report for the:
 General (30G) Runoff (30R) Special (30S)
Election on / / in the State of

5. Covering Period / / through / /

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 CALEB CROSBY

Signature of Treasurer CALEB CROSBY [Electronically Filed] Date / /

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name

ARKANSAS VICTORY FUND 2014

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

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2014"/>	<input type="text" value="0.00"/>	<input type="text" value="0.00"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="0.00"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="65000.00"/>	<input type="text" value="65000.00"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<input type="text" value="65000.00"/>	<input type="text" value="65000.00"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="53000.00"/>	<input type="text" value="53000.00"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="12000.00"/>	<input type="text" value="12000.00"/>
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	

This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

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 3X (Rev. 06/2004)

Write or Type Committee Name

ARKANSAS VICTORY FUND 2014

Report Covering the Period: From: M M / D D / Y Y Y Y 07 / 01 / 2014 To: M M / D D / Y Y Y Y 09 / 30 / 2014

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	65000.00	65000.00
(ii) Unitemized	0.00	0.00
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	65000.00	65000.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	65000.00	65000.00
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))..... ▶	65000.00	65000.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	65000.00	65000.00

DETAILED SUMMARY PAGE
of Disbursements

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures	2896.73	2896.73
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	2896.73	2896.73
22. Transfers to Affiliated/Other Party Committees.....	50103.27	50103.27
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. 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 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements	0.00	0.00
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	53000.00	53000.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	53000.00	53000.00

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	65000.00	65000.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	65000.00	65000.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	2896.73	2896.73
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	2896.73	2896.73

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 OF 11
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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)
ARKANSAS VICTORY FUND 2014

Full Name (Last, First, Middle Initial) A. Dan Davidson			Date of Receipt MM / DD / YYYY 08 / 21 / 2014 Transaction ID : SA11AI.4110
Mailing Address 7 Edgehill Rd			Amount of Each Receipt this Period 5000.00
City Searcy	State AR	Zip Code 72143	Contribution
FEC ID number of contributing federal political committee. C		Contribution	
Name of Employer WCMC	Occupation Physician	Contribution	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	Contribution	

Full Name (Last, First, Middle Initial) B. Holloway Frost			Date of Receipt MM / DD / YYYY 09 / 25 / 2014 Transaction ID : SA11AI.4120
Mailing Address PO Box 667			Amount of Each Receipt this Period 5000.00
City Houston	State TX	Zip Code 77001	Contribution
FEC ID number of contributing federal political committee. C		Contribution	
Name of Employer Retired	Occupation Retired	Contribution	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	Contribution	

Full Name (Last, First, Middle Initial) C. Robert M Murphy			Date of Receipt MM / DD / YYYY 09 / 15 / 2014 Transaction ID : SA11AI.4118
Mailing Address 200 N Jefferson Ave Ste 400			Amount of Each Receipt this Period 5000.00
City El Dorado	State AR	Zip Code 71730	Contribution
FEC ID number of contributing federal political committee. C		Contribution	
Name of Employer N/A	Occupation Investments	Contribution	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	Contribution	

SUBTOTAL of Receipts This Page (optional).....▶	15000.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 11
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
ARKANSAS VICTORY FUND 2014

A. Candice E Nolan
Full Name (Last, First, Middle Initial)
Mailing Address 3300 Calion Rd
City El Dorado State AR Zip Code 71730
FEC ID number of contributing federal political committee. **C**
Name of Employer Retired Occupation Retired
Receipt For: Primary General Other (specify) Aggregate Year-to-Date **10000.00**

Date of Receipt **09 / 08 / 2014**
Transaction ID : SA11AI.4116
Amount of Each Receipt this Period **10000.00**
Contribution

B. Robert C Nolan
Full Name (Last, First, Middle Initial)
Mailing Address 200 N Jefferson Ave Ste 308
City El Dorado State AR Zip Code 71730
FEC ID number of contributing federal political committee. **C**
Name of Employer Munoco Company Occupation Managing Director
Receipt For: Primary General Other (specify) Aggregate Year-to-Date **10000.00**

Date of Receipt **09 / 08 / 2014**
Transaction ID : SA11AI.4114
Amount of Each Receipt this Period **10000.00**
Contribution

C. Mark Peckham
Full Name (Last, First, Middle Initial)
Mailing Address 16526 W 78th St
City Eden Prairie State MN Zip Code 55346
FEC ID number of contributing federal political committee. **C**
Name of Employer Self Employed Occupation Investor
Receipt For: Primary General Other (specify) Aggregate Year-to-Date **10000.00**

Date of Receipt **08 / 13 / 2014**
Transaction ID : SA11AI.4106
Amount of Each Receipt this Period **10000.00**
Contribution

SUBTOTAL of Receipts This Page (optional)..... **30000.00**
TOTAL This Period (last page this line number only).....

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 8 OF 11
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
ARKANSAS VICTORY FUND 2014

A. Susan Peckham
Full Name (Last, First, Middle Initial)
Mailing Address 16526 W 78th St
City Eden Prairie State MN Zip Code 55346
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
Self Employed Investor
Receipt For:
 Primary General
 Other (specify) ▼
Aggregate Year-to-Date ▼
10000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
08 / 13 / 2014
Transaction ID : SA11AI.4108
Amount of Each Receipt this Period
10000.00
Contribution

B. Gary Sewell
Full Name (Last, First, Middle Initial)
Mailing Address 3400 Junction City Hwy
City El Dorado State AR Zip Code 71730
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
Sewell Drilling LLC President
Receipt For:
 Primary General
 Other (specify) ▼
Aggregate Year-to-Date ▼
5000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
09 / 08 / 2014
Transaction ID : SA11AI.4112
Amount of Each Receipt this Period
5000.00
Contribution

C. Kathaleen Wall
Full Name (Last, First, Middle Initial)
Mailing Address PO Box 667
City Houston State TX Zip Code 77001
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
Retired Retired
Receipt For:
 Primary General
 Other (specify) ▼
Aggregate Year-to-Date ▼
5000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
09 / 25 / 2014
Transaction ID : SA11AI.4122
Amount of Each Receipt this Period
5000.00
Contribution

SUBTOTAL of Receipts This Page (optional).....▶	20000.00
TOTAL This Period (last page this line number only).....▶	65000.00

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

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
ARKANSAS VICTORY FUND 2014

Full Name (Last, First, Middle Initial) A. Crosby Ottenhoff Group		Date of Disbursement MM / DD / YYYY 08 / 29 / 2014
Mailing Address PO Box 9891		Transaction ID : SB21B.4125
City Arlington	State VA	
Zip Code 22219	Purpose of Disbursement Compliance Consulting	Amount of Each Disbursement this Period 1275.00
Candidate Name	Category/Type	
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. Crosby Ottenhoff Group		Date of Disbursement MM / DD / YYYY 08 / 29 / 2014
Mailing Address PO Box 9891		Transaction ID : SB21B.4129
City Arlington	State VA	
Zip Code 22219	Purpose of Disbursement Shipping/Delivery Service	Amount of Each Disbursement this Period 56.98
Candidate Name	Category/Type	
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. Crosby Ottenhoff Group		Date of Disbursement MM / DD / YYYY 09 / 23 / 2014
Mailing Address PO Box 9891		Transaction ID : SB21B.4127
City Arlington	State VA	
Zip Code 22219	Purpose of Disbursement Compliance Consulting	Amount of Each Disbursement this Period 1500.00
Candidate Name	Category/Type	
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).....▶	2831.98
TOTAL This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
ARKANSAS VICTORY FUND 2014

Full Name (Last, First, Middle Initial)

A. Crosby Ottenhoff Group

Mailing Address PO Box 9891

City Arlington State VA Zip Code 22219

Purpose of Disbursement
Shipping/Delivery Service

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y
09 / 23 / 2014

Transaction ID : SB21B.4128

Amount of Each Disbursement this Period

44.76

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y

Amount of Each Disbursement this Period

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

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

44.76

2876.74

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

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input checked="" type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
ARKANSAS VICTORY FUND 2014

Full Name (Last, First, Middle Initial)

A. REPUBLICAN PARTY OF ARKANSAS

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
08		29		2014

Mailing Address 1201 W 6TH STREET

Transaction ID : SB22.4130

City State Zip Code
LITTLE ROCK AR 72201

Amount of Each Disbursement this Period

21648.03

Purpose of Disbursement
Transfer of Net JFC Proceeds

--

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

B. REPUBLICAN PARTY OF ARKANSAS

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09		22		2014

Mailing Address 1201 W 6TH STREET

Transaction ID : SB22.4131

City State Zip Code
LITTLE ROCK AR 72201

Amount of Each Disbursement this Period

28455.24

Purpose of Disbursement
Transfer of Net JFC Proceeds

--

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

C.

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y

Mailing Address

Amount of Each Disbursement this Period

--

City State Zip Code

Purpose of Disbursement

--

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

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

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

50103.27

50103.27
