

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

VETERANS VICTORY FUND

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="2012"/>		13428.91
(b) Cash on Hand at Beginning of Reporting Period.....	18132.92	
(c) Total Receipts (from Line 19)	126848.93	231555.04
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	144981.85	244983.95
7. Total Disbursements (from Line 31).....	138253.99	238256.09
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	6727.86	6727.86
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)	89266.98	

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

VETERANS VICTORY FUND

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

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).....	21223.00	39229.50
(ii) Unitemized	105625.93	192325.54
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	126848.93	231555.04
(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)	126848.93	231555.04
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))..... ▶	126848.93	231555.04
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	126848.93	231555.04

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	133253.99	219256.09
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	133253.99	219256.09
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	5000.00	18500.00
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	500.00
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)) ..	138253.99	238256.09
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	138253.99	238256.09

DETAILED SUMMARY PAGE
of Disbursements

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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)	126848.93	231555.04
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	126848.93	231555.04
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	133253.99	219256.09
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	133253.99	219256.09

**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 79
	<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)
VETERANS VICTORY FUND

Full Name (Last, First, Middle Initial) A. BETTY ANDERSON 458		Date of Receipt
Mailing Address 4470 US ROUTE 127		<input type="text" value="04"/> / <input type="text" value="25"/> / <input type="text" value="2012"/>
City	State	Zip Code
CELINA	OH	45822
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : SA11AI.32754
Name of Employer	Occupation	Amount of Each Receipt this Period
NONE	RETIRED	<input type="text" value="200.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="240.00"/>	

Full Name (Last, First, Middle Initial) B. BETTY ANDERSON 458		Date of Receipt
Mailing Address 4470 US ROUTE 127		<input type="text" value="06"/> / <input type="text" value="08"/> / <input type="text" value="2012"/>
City	State	Zip Code
CELINA	OH	45822
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : SA11AI.32753
Name of Employer	Occupation	Amount of Each Receipt this Period
NONE	RETIRED	<input type="text" value="35.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="275.00"/>	

Full Name (Last, First, Middle Initial) C. MRS JUANITA L ANDERSON 993		Date of Receipt
Mailing Address 2011 TRIPPE ST		<input type="text" value="05"/> / <input type="text" value="16"/> / <input type="text" value="2012"/>
City	State	Zip Code
RICHLAND	WA	99354
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : SA11AI.32768
Name of Employer	Occupation	Amount of Each Receipt this Period
NONE	RETIRED	<input type="text" value="45.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="245.00"/>	

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="280.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

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

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

FOR LINE NUMBER: PAGE 7 OF 79
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
VETERANS VICTORY FUND

A. MRS PEGGY BALDWIN 255
 Full Name (Last, First, Middle Initial)
 Mailing Address 262 BUFFALO CREEK RD
 City KENOVA State WV Zip Code 25530
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NONE Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 205.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 09 / 2012
Transaction ID : SA11AI.32864
 Amount of Each Receipt this Period
 30.00

B. MR RAY R BARRETT 797 JR
 Full Name (Last, First, Middle Initial)
 Mailing Address HC 34 BOX 3
 City MIDKIFF State TX Zip Code 79755
 FEC ID number of contributing federal political committee. **C**
 Name of Employer SELF EMPLOYED Occupation FARMER RANCHER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 19 / 2012
Transaction ID : SA11AI.32913
 Amount of Each Receipt this Period
 100.00

C. MR ROY BERNER 951
 Full Name (Last, First, Middle Initial)
 Mailing Address 4325 SHERBOURNE DR
 City SAN JOSE State CA Zip Code 95124
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NONE Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 12 / 2012
Transaction ID : SA11AI.33026
 Amount of Each Receipt this Period
 75.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 205.00
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: PAGE 8 OF 79
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
VETERANS VICTORY FUND

A. GUY BOWERS 794
 Full Name (Last, First, Middle Initial)
 Mailing Address PO BOX 98115
 City LUBBOCK State TX Zip Code 79499
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 05 / 2012
Transaction ID : SA11AI.33161
 Amount of Each Receipt this Period
 1000.00

B. MS INEZ BROWELEIT 991
 Full Name (Last, First, Middle Initial)
 Mailing Address 7103 ALMOTA RD
 City COLFAX State WA Zip Code 99111
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 NONE RETIRED
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 28 / 2012
Transaction ID : SA11AI.33249
 Amount of Each Receipt this Period
 150.00

C. MRS SUSAN BRUNOFF 175
 Full Name (Last, First, Middle Initial)
 Mailing Address 334 W CEDAR ST
 City NEW HOLLAND State PA Zip Code 17557
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 NONE RETIRED
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 664.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 10 / 2012
Transaction ID : SA11AI.33295
 Amount of Each Receipt this Period
 35.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 1185.00
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: PAGE 9 OF 79
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
VETERANS VICTORY FUND

A. MRS SUSAN BRUNOFF 175
 Full Name (Last, First, Middle Initial)
 Mailing Address 334 W CEDAR ST
 City NEW HOLLAND State PA Zip Code 17557
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NONE Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 699.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 30 / 2012
Transaction ID : SA11AI.33294
 Amount of Each Receipt this Period
 35.00

B. MRS SUSAN BRUNOFF 175
 Full Name (Last, First, Middle Initial)
 Mailing Address 334 W CEDAR ST
 City NEW HOLLAND State PA Zip Code 17557
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NONE Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 857.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 08 / 2012
Transaction ID : SA11AI.33296
 Amount of Each Receipt this Period
 158.00

C. MS ELIZABETH BRYDEN 100
 Full Name (Last, First, Middle Initial)
 Mailing Address 1 W 67TH ST APT 611
 City NEW YORK State NY Zip Code 10023
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NONE Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 215.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 25 / 2012
Transaction ID : SA11AI.33309
 Amount of Each Receipt this Period
 105.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 298.00
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: PAGE 10 OF 79
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
VETERANS VICTORY FUND

A. MS ELIZABETH BRYDEN 100
 Full Name (Last, First, Middle Initial)
 Mailing Address 1 W 67TH ST APT 611
 City NEW YORK State NY Zip Code 10023
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NONE Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 373.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 12 / 2012
Transaction ID : SA11AI.33308
 Amount of Each Receipt this Period
 158.00

B. MRS BILLIE M CAMPBELL 427
 Full Name (Last, First, Middle Initial)
 Mailing Address 108 DIECKS DR APT 320
 City ELIZABETHTOWN State KY Zip Code 42701
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NONE Occupation WIDOW
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 02 / 2012
Transaction ID : SA11AI.33451
 Amount of Each Receipt this Period
 100.00

C. MRS BILLIE M CAMPBELL 427
 Full Name (Last, First, Middle Initial)
 Mailing Address 108 DIECKS DR APT 320
 City ELIZABETHTOWN State KY Zip Code 42701
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NONE Occupation WIDOW
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 23 / 2012
Transaction ID : SA11AI.33450
 Amount of Each Receipt this Period
 50.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 308.00
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: PAGE 11 OF 79
(check only one)

<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)
VETERANS VICTORY FUND

A. MRS BILLIE M CAMPBELL 427
Full Name (Last, First, Middle Initial)
Mailing Address 108 DIECKS DR APT 320

City ELIZABETHTOWN	State KY	Zip Code 42701
-----------------------	-------------	-------------------

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

Name of Employer NONE	Occupation WIDOW
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Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
450.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	16	/	2012

Transaction ID : SA11AI.33452

Amount of Each Receipt this Period
50.00

B. MRS BILLIE M CAMPBELL 427
Full Name (Last, First, Middle Initial)
Mailing Address 108 DIECKS DR APT 320

City ELIZABETHTOWN	State KY	Zip Code 42701
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FEC ID number of contributing federal political committee. **C**

Name of Employer NONE	Occupation WIDOW
--------------------------	---------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
550.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	07	/	2012

Transaction ID : SA11AI.33449

Amount of Each Receipt this Period
100.00

C. MR ROBERT CATHCART 229
Full Name (Last, First, Middle Initial)
Mailing Address 1244 SWAN LAKE DR STE 403

City CHARLOTTESVILLE	State VA	Zip Code 22902
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FEC ID number of contributing federal political committee. **C**

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	31	/	2012

Transaction ID : SA11AI.33518

Amount of Each Receipt this Period
250.00

SUBTOTAL of Receipts This Page (optional).....▶	400.00
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: PAGE 12 OF 79
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
VETERANS VICTORY FUND

A. MR VICTOR I CHAPMAN 652
 Full Name (Last, First, Middle Initial)
 Mailing Address 4201 CLARK LN LOT 69
 City COLUMBIA State MO Zip Code 65202
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NONE Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 19 / 2012
Transaction ID : SA11AI.33535
 Amount of Each Receipt this Period
 250.00

B. MR STEPHEN S CLEVELAND 853
 Full Name (Last, First, Middle Initial)
 Mailing Address 13610 FAIRWAY LOOP N
 City GOODYEAR State AZ Zip Code 85395
 FEC ID number of contributing federal political committee. **C**
 Name of Employer GOODYEAR AZ Occupation CITY MANAGER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 29 / 2012
Transaction ID : SA11AI.33599
 Amount of Each Receipt this Period
 50.00

C. MRS ELEANOR COBB 900
 Full Name (Last, First, Middle Initial)
 Mailing Address 131 S VISTA ST
 City LOS ANGELES State CA Zip Code 90036
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NONE Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 08 / 2012
Transaction ID : SA11AI.33609
 Amount of Each Receipt this Period
 300.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 600.00
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: PAGE 13 OF 79
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
VETERANS VICTORY FUND

A. MS MARY K COLWELL 453
 Full Name (Last, First, Middle Initial)
 Mailing Address 140 MARICOPA CIR
 City ENON State OH Zip Code 45323
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NONE Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 11 / 2012
Transaction ID : SA11AI.33656
 Amount of Each Receipt this Period
 35.00

B. MS MARY K COLWELL 453
 Full Name (Last, First, Middle Initial)
 Mailing Address 140 MARICOPA CIR
 City ENON State OH Zip Code 45323
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NONE Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 255.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 08 / 2012
Transaction ID : SA11AI.33659
 Amount of Each Receipt this Period
 35.00

C. MR JOSEPH CORSO 080
 Full Name (Last, First, Middle Initial)
 Mailing Address 116 HOWARD ST
 City RIVERTON State NJ Zip Code 08077
 FEC ID number of contributing federal political committee. **C**
 Name of Employer SELF EMPLOYED Occupation ENGINEER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 30 / 2012
Transaction ID : SA11AI.33702
 Amount of Each Receipt this Period
 35.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 105.00
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: PAGE 14 OF 79
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
VETERANS VICTORY FUND

A. MRS BETTY R CRAWFORD 527
 Full Name (Last, First, Middle Initial)
 Mailing Address 601 ASPEN TRL
 City MUSCATINE State IA Zip Code 52761
 Date of Receipt 04 / 19 / 2012
 Transaction ID : SA11AI.33738
 Amount of Each Receipt this Period 200.00
 FEC ID number of contributing federal political committee. C
 Name of Employer NONE Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 750.00

B. MS MATTIE DALE 728
 Full Name (Last, First, Middle Initial)
 Mailing Address 3112 W 2ND CT APT 209
 City RUSSELLVILLE State AR Zip Code 72801
 Date of Receipt 04 / 19 / 2012
 Transaction ID : SA11AI.33793
 Amount of Each Receipt this Period 53.00
 FEC ID number of contributing federal political committee. C
 Name of Employer NONE Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 226.00

C. MS MATTIE DALE 728
 Full Name (Last, First, Middle Initial)
 Mailing Address 3112 W 2ND CT APT 209
 City RUSSELLVILLE State AR Zip Code 72801
 Date of Receipt 04 / 25 / 2012
 Transaction ID : SA11AI.33795
 Amount of Each Receipt this Period 35.00
 FEC ID number of contributing federal political committee. C
 Name of Employer NONE Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 261.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 288.00
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: PAGE 15 OF 79
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
VETERANS VICTORY FUND

A. MS MATTIE DALE 728
 Full Name (Last, First, Middle Initial)
 Mailing Address 3112 W 2ND CT APT 209
 City RUSSELLVILLE State AR Zip Code 72801
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NONE Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 314.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 20 / 2012
Transaction ID : SA11AI.33792
 Amount of Each Receipt this Period
 53.00

B. MRS HELEN Y DENSLOW 446
 Full Name (Last, First, Middle Initial)
 Mailing Address 264 MOHICAN ST NE APT 2B
 City BREWSTER State OH Zip Code 44613
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NONE Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 212.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 09 / 2012
Transaction ID : SA11AI.33897
 Amount of Each Receipt this Period
 106.00

C. MRS HELEN Y DENSLOW 446
 Full Name (Last, First, Middle Initial)
 Mailing Address 264 MOHICAN ST NE APT 2B
 City BREWSTER State OH Zip Code 44613
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NONE Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 312.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 11 / 2012
Transaction ID : SA11AI.33896
 Amount of Each Receipt this Period
 100.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 259.00
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: PAGE 16 OF 79
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
VETERANS VICTORY FUND

A. MRS HELEN Y DENSLOW 446
 Full Name (Last, First, Middle Initial)
 Mailing Address 264 MOHICAN ST NE APT 2B
 City State Zip Code
 BREWSTER OH 44613
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 NONE RETIRED
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 418.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 17 / 2012
Transaction ID : SA11AI.33895
 Amount of Each Receipt this Period
 106.00

B. MS EDITH DODD 637
 Full Name (Last, First, Middle Initial)
 Mailing Address 949 E MAIN ST
 City State Zip Code
 JACKSON MO 63755
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 NONE HOMEMAKER
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 24 / 2012
Transaction ID : SA11AI.33942
 Amount of Each Receipt this Period
 150.00

C. MRS SYLVIA DURYEE 981
 Full Name (Last, First, Middle Initial)
 Mailing Address 1115 41ST AVE E
 City State Zip Code
 SEATTLE WA 98112
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 NONE RETIRED
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 17 / 2012
Transaction ID : SA11AI.34037
 Amount of Each Receipt this Period
 500.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 756.00
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: PAGE 17 OF 79
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
VETERANS VICTORY FUND

A. MR WESLEY H EATON 019
 Full Name (Last, First, Middle Initial)
 Mailing Address 304 BROOKSBY VILLAGE DR UNIT 308
 City State Zip Code
 PEABODY MA 01960
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 NONE RETIRED
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 29 / 2012
Transaction ID : SA11AI.34055
 Amount of Each Receipt this Period
 300.00

B. MR WESLEY H EATON 019
 Full Name (Last, First, Middle Initial)
 Mailing Address 304 BROOKSBY VILLAGE DR UNIT 308
 City State Zip Code
 PEABODY MA 01960
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 NONE RETIRED
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 450.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 29 / 2012
Transaction ID : SA11AI.34056
 Amount of Each Receipt this Period
 50.00

C. MR GEORGE F EDWARDS 672
 Full Name (Last, First, Middle Initial)
 Mailing Address 1356 S SEVILLE ST
 City State Zip Code
 WICHITA KS 67209
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 NONE RETIRED
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 225.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 17 / 2012
Transaction ID : SA11AI.34084
 Amount of Each Receipt this Period
 150.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 500.00
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: PAGE 18 OF 79
(check only one)

<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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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)
VETERANS VICTORY FUND

A. MR GEORGE F EDWARDS 672
Full Name (Last, First, Middle Initial)
Mailing Address 1356 S SEVILLE ST
City WICHITA State KS Zip Code 67209
FEC ID number of contributing federal political committee. **C**
Name of Employer NONE Occupation RETIRED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 325.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
06 / 08 / 2012
Transaction ID : SA11AI.34083
Amount of Each Receipt this Period
100.00

B. MRS WILMA EDWARDS 920
Full Name (Last, First, Middle Initial)
Mailing Address PO BOX 2948
City DEL MAR State CA Zip Code 92014
FEC ID number of contributing federal political committee. **C**
Name of Employer NONE Occupation RETIRED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 450.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
04 / 02 / 2012
Transaction ID : SA11AI.34086
Amount of Each Receipt this Period
75.00

C. MRS WILMA EDWARDS 920
Full Name (Last, First, Middle Initial)
Mailing Address PO BOX 2948
City DEL MAR State CA Zip Code 92014
FEC ID number of contributing federal political committee. **C**
Name of Employer NONE Occupation RETIRED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 550.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
05 / 04 / 2012
Transaction ID : SA11AI.34085
Amount of Each Receipt this Period
100.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 275.00
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 19 OF 79
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
VETERANS VICTORY FUND

Full Name (Last, First, Middle Initial) A. MS BETTY FARWELL 803		Date of Receipt
Mailing Address 2813 KENYON CIR		M M M / D D D / Y Y Y Y Y Y 04 / 03 / 2012
City	State	Zip Code
BOULDER	CO	80305
FEC ID number of contributing federal political committee.	C	Transaction ID : SA11AI.34168
Name of Employer	Occupation	Amount of Each Receipt this Period
		75.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
	275.00	

Full Name (Last, First, Middle Initial) B. MS BETTY FARWELL 803		Date of Receipt
Mailing Address 2813 KENYON CIR		M M M / D D D / Y Y Y Y Y Y 05 / 09 / 2012
City	State	Zip Code
BOULDER	CO	80305
FEC ID number of contributing federal political committee.	C	Transaction ID : SA11AI.34170
Name of Employer	Occupation	Amount of Each Receipt this Period
		75.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
	350.00	

Full Name (Last, First, Middle Initial) C. MS BETTY FARWELL 803		Date of Receipt
Mailing Address 2813 KENYON CIR		M M M / D D D / Y Y Y Y Y Y 06 / 12 / 2012
City	State	Zip Code
BOULDER	CO	80305
FEC ID number of contributing federal political committee.	C	Transaction ID : SA11AI.34171
Name of Employer	Occupation	Amount of Each Receipt this Period
		100.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
	450.00	

SUBTOTAL of Receipts This Page (optional).....▶	250.00
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: PAGE 20 OF 79
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
VETERANS VICTORY FUND

A. MS BETTY FARWELL 803
 Full Name (Last, First, Middle Initial)
 Mailing Address 2813 KENYON CIR
 City BOULDER State CO Zip Code 80305
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 475.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 26 / 2012
Transaction ID : SA11AI.34169
 Amount of Each Receipt this Period
 25.00

B. MR ERNEST V FORTIN 342 TRUSTEE
 Full Name (Last, First, Middle Initial)
 Mailing Address 4574 HIGHLAND OAKS CIR
 City SARASOTA State FL Zip Code 34235
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 NONE RETIRED
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 238.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 16 / 2012
Transaction ID : SA11AI.34260
 Amount of Each Receipt this Period
 35.00

C. MR ERNEST V FORTIN 342 TRUSTEE
 Full Name (Last, First, Middle Initial)
 Mailing Address 4574 HIGHLAND OAKS CIR
 City SARASOTA State FL Zip Code 34235
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 NONE RETIRED
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 273.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 19 / 2012
Transaction ID : SA11AI.34258
 Amount of Each Receipt this Period
 35.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 95.00
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: PAGE 21 OF 79
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
VETERANS VICTORY FUND

Full Name (Last, First, Middle Initial)
A. MR ERNEST V FORTIN 342 TRUSTEE

Mailing Address 4574 HIGHLAND OAKS CIR

City State Zip Code
SARASOTA FL 34235

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

Name of Employer Occupation
NONE RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
308.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
04 / 24 / 2012
Transaction ID : SA11AI.34261

Amount of Each Receipt this Period
35.00

Full Name (Last, First, Middle Initial)
B. MR ERNEST V FORTIN 342 TRUSTEE

Mailing Address 4574 HIGHLAND OAKS CIR

City State Zip Code
SARASOTA FL 34235

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

Name of Employer Occupation
NONE RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
343.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
05 / 01 / 2012
Transaction ID : SA11AI.34259

Amount of Each Receipt this Period
35.00

Full Name (Last, First, Middle Initial)
C. MR EDWARD D FREDRICKSON 325 JR

Mailing Address 1217 WILLOWOOD LN

City State Zip Code
GULF BREEZE FL 32563

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

Name of Employer Occupation
NONE RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
215.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
04 / 19 / 2012
Transaction ID : SA11AI.34286

Amount of Each Receipt this Period
30.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 100.00

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 22 OF 79
	<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	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
VETERANS VICTORY FUND

Full Name (Last, First, Middle Initial)
A. MR EDWARD D FREDRICKSON 325 JR

Mailing Address 1217 WILLOWOOD LN

City State Zip Code
GULF BREEZE FL 32563

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

Name of Employer Occupation
NONE RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
240.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
05 / 17 / 2012
Transaction ID : SA11AI.34288

Amount of Each Receipt this Period
25.00

Full Name (Last, First, Middle Initial)
B. MR EDWARD D FREDRICKSON 325 JR

Mailing Address 1217 WILLOWOOD LN

City State Zip Code
GULF BREEZE FL 32563

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

Name of Employer Occupation
NONE RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
265.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
06 / 18 / 2012
Transaction ID : SA11AI.34287

Amount of Each Receipt this Period
25.00

Full Name (Last, First, Middle Initial)
C. MR EDMON L GARNER 765

Mailing Address 2497 E US HIGHWAY 79

City State Zip Code
ROCKDALE TX 76567

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
215.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
04 / 02 / 2012
Transaction ID : SA11AI.34365

Amount of Each Receipt this Period
110.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 160.00

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:	PAGE 23 OF 79
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<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)
VETERANS VICTORY FUND

Full Name (Last, First, Middle Initial) A. MR EDMON L GARNER 765		Date of Receipt
Mailing Address 2497 E US HIGHWAY 79		<input type="text" value="06"/> / <input type="text" value="29"/> / <input type="text" value="2012"/>
City	State	Zip Code
ROCKDALE	TX	76567
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	
Name of Employer	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
	<input type="text" value="545.00"/>	
		Transaction ID : SA11AI.34366
		Amount of Each Receipt this Period
		<input type="text" value="330.00"/>

Full Name (Last, First, Middle Initial) B. MS RUTH GEALY 693		Date of Receipt
Mailing Address 1978 690TH RD		<input type="text" value="06"/> / <input type="text" value="12"/> / <input type="text" value="2012"/>
City	State	Zip Code
GORDON	NE	69343
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	
Name of Employer	Occupation	
NONE	RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
	<input type="text" value="245.00"/>	
		Transaction ID : SA11AI.34382
		Amount of Each Receipt this Period
		<input type="text" value="85.00"/>

Full Name (Last, First, Middle Initial) C. MS MARGUERITE GERMAN 458		Date of Receipt
Mailing Address 418 TAYLOR ST		<input type="text" value="06"/> / <input type="text" value="12"/> / <input type="text" value="2012"/>
City	State	Zip Code
VAN WERT	OH	45891
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	
Name of Employer	Occupation	
NONE	RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
	<input type="text" value="250.00"/>	
		Transaction ID : SA11AI.34396
		Amount of Each Receipt this Period
		<input type="text" value="250.00"/>

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="665.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text" value=""/>

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

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

FOR LINE NUMBER: PAGE 24 OF 79
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
VETERANS VICTORY FUND

A. MR RICHARD S GRIFFITH 705
 Full Name (Last, First, Middle Initial)
 Mailing Address 3417 MILAM STREET
 City LAFAYETTE State LA Zip Code 70509
 FEC ID number of contributing federal political committee. **C**
 Name of Employer SELF EMPLOYED Occupation INVESTER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 17 / 2012
Transaction ID : SA11AI.34539
 Amount of Each Receipt this Period
 200.00

B. MS MARY GULINO 220
 Full Name (Last, First, Middle Initial)
 Mailing Address 4200 OLD COLUMBIA PIKE
 City ANNANDALE State VA Zip Code 22003
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NONE Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 601.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 23 / 2012
Transaction ID : SA11AI.34565
 Amount of Each Receipt this Period
 1.00

C. MR H R HAGER 505
 Full Name (Last, First, Middle Initial)
 Mailing Address 850 S 17TH ST
 City FORT DODGE State IA Zip Code 50501
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NONE Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 08 / 2012
Transaction ID : SA11AI.34589
 Amount of Each Receipt this Period
 75.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 276.00
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: PAGE 25 OF 79
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
VETERANS VICTORY FUND

Full Name (Last, First, Middle Initial)
A. MR H R HAGER 505

Mailing Address 850 S 17TH ST

City State Zip Code
FORT DODGE IA 50501

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

Name of Employer Occupation
NONE RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
350.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 28 / 2012
Transaction ID : SA11AI.34591

Amount of Each Receipt this Period
75.00

Full Name (Last, First, Middle Initial)
B. MR WILLIAM HAMMOND 164

Mailing Address 13514 ROUTE 6

City State Zip Code
CORY PA 16407

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

Name of Employer Occupation
W HAMMOND FAMILY LTD PRESIDENT

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 05 / 2012
Transaction ID : SA11AI.34639

Amount of Each Receipt this Period
250.00

Full Name (Last, First, Middle Initial)
C. MRS PAULINE B HAMMOND 871

Mailing Address 7201 PROSPECT PL NE APT 232

City State Zip Code
ALBUQUERQUE NM 87110

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

Name of Employer Occupation
NONE RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
424.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 25 / 2012
Transaction ID : SA11AI.34642

Amount of Each Receipt this Period
212.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 537.00

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: PAGE 26 OF 79
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
VETERANS VICTORY FUND

A. MRS MARTIN HARRIS 782
 Full Name (Last, First, Middle Initial)
 Mailing Address 41 GRANBURG CIR
 City SAN ANTONIO State TX Zip Code 78218
 FEC ID number of contributing federal political committee. **C**
 Name of Employer SELF EMPLOYED Occupation CPA
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 01 / 2012
Transaction ID : SA11AI.34695
 Amount of Each Receipt this Period
 250.00

B. MRS MARTHA V HARVEY 740
 Full Name (Last, First, Middle Initial)
 Mailing Address 1400 E MCELROY RD UNIT 409
 City STILLWATER State OK Zip Code 74075
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NONE Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 18 / 2012
Transaction ID : SA11AI.34710
 Amount of Each Receipt this Period
 200.00

C. MR RICHARD J HAYDINGER 080
 Full Name (Last, First, Middle Initial)
 Mailing Address 12 PARTRIDGE CT
 City CHERRY HILL State NJ Zip Code 08003
 FEC ID number of contributing federal political committee. **C**
 Name of Employer FIRST MONTGOMERY GROUP Occupation MANAGER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 23 / 2012
Transaction ID : SA11AI.34743
 Amount of Each Receipt this Period
 1000.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 1450.00
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 27 OF 79
	<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	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
VETERANS VICTORY FUND

A. MR RICHARD J HAYDINGER 080
 Full Name (Last, First, Middle Initial)
 Mailing Address 12 PARTRIDGE CT
 City CHERRY HILL State NJ Zip Code 08003
 FEC ID number of contributing federal political committee. **C**
 Name of Employer FIRST MONTGOMERY GROUP Occupation MANAGER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 17 / 2012
Transaction ID : SA11AI.34742
 Amount of Each Receipt this Period
 500.00

B. EDWARD HOLMES 156
 Full Name (Last, First, Middle Initial)
 Mailing Address 896 WEATHERWOOD LN APT 210
 City GREENSBURG State PA Zip Code 15601
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NONE Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 213.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 29 / 2012
Transaction ID : SA11AI.34909
 Amount of Each Receipt this Period
 80.00

C. MS MARY HUMMELER 190
 Full Name (Last, First, Middle Initial)
 Mailing Address 1745 MONTGOMERY AVE
 City VILLANOVA State PA Zip Code 19085
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NONE Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 31 / 2012
Transaction ID : SA11AI.34993
 Amount of Each Receipt this Period
 250.00

SUBTOTAL of Receipts This Page (optional).....▶	830.00
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 28 OF 79
	<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)
VETERANS VICTORY FUND

A. MR HORACE JACKSON 479
 Full Name (Last, First, Middle Initial)
 Mailing Address 1727 TRACE 17 # 2407
 City WEST LAFAYETTE State IN Zip Code 47906
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NONE Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 214.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 12 / 2012
Transaction ID : SA11AI.35056
 Amount of Each Receipt this Period
 30.00

B. MR BRUCE C JACOBSEN 483
 Full Name (Last, First, Middle Initial)
 Mailing Address 1019 WALLOON CT
 City LAKE ORION State MI Zip Code 48360
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NONE Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 18 / 2012
Transaction ID : SA11AI.35067
 Amount of Each Receipt this Period
 100.00

C. MS D PATRICIA JENNETT 605
 Full Name (Last, First, Middle Initial)
 Mailing Address 416 DEEPWOOD CT
 City NAPERVILLE State IL Zip Code 60540
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NONE Occupation HOMEMAKER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 02 / 2012
Transaction ID : SA11AI.35094
 Amount of Each Receipt this Period
 250.00

SUBTOTAL of Receipts This Page (optional).....	380.00
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 29 OF 79
	<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)
VETERANS VICTORY FUND

A. MRS JACQUELINE KEITH 207
 Full Name (Last, First, Middle Initial)
 Mailing Address 5602 LOCKWOOD RD
 City CHEVERLY State MD Zip Code 20785
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NONE Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 285.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 12 / 2012
Transaction ID : SA11AI.35223
 Amount of Each Receipt this Period
 85.00

B. MR LEONARD M KIRK 210
 Full Name (Last, First, Middle Initial)
 Mailing Address 6 HUNTER DR
 City BEL AIR State MD Zip Code 21014
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NONE Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 07 / 2012
Transaction ID : SA11AI.35283
 Amount of Each Receipt this Period
 100.00

C. MS MAXINE KNERR 923
 Full Name (Last, First, Middle Initial)
 Mailing Address 11904 KINGSTON ST
 City GRAND TERRACE State CA Zip Code 92313
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NONE Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 588.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 10 / 2012
Transaction ID : SA11AI.35314
 Amount of Each Receipt this Period
 500.00

SUBTOTAL of Receipts This Page (optional).....▶	685.00
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: PAGE 31 OF 79
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
VETERANS VICTORY FUND

A. DR WALTER LUNG 968 DDS
 Full Name (Last, First, Middle Initial)
 Mailing Address 4244 HUANUI ST
 City HONOLULU State HI Zip Code 96816
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NONE Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 212.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 08 / 2012
Transaction ID : SA11AI.35629
 Amount of Each Receipt this Period
 53.00

B. DR WALTER LUNG 968 DDS
 Full Name (Last, First, Middle Initial)
 Mailing Address 4244 HUANUI ST
 City HONOLULU State HI Zip Code 96816
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NONE Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 247.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 11 / 2012
Transaction ID : SA11AI.35627
 Amount of Each Receipt this Period
 35.00

C. DR WALTER LUNG 968 DDS
 Full Name (Last, First, Middle Initial)
 Mailing Address 4244 HUANUI ST
 City HONOLULU State HI Zip Code 96816
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NONE Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 22 / 2012
Transaction ID : SA11AI.35625
 Amount of Each Receipt this Period
 53.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 141.00
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: PAGE 32 OF 79
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
VETERANS VICTORY FUND

A. DR WALTER LUNG 968 DDS
 Full Name (Last, First, Middle Initial)
 Mailing Address 4244 HUANUI ST
 City HONOLULU State HI Zip Code 96816
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NONE Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 335.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 15 / 2012
Transaction ID : SA11AI.35628
 Amount of Each Receipt this Period
 35.00

B. MS LORNA MANSFIELD 945
 Full Name (Last, First, Middle Initial)
 Mailing Address 1954 MAGNOLIA WAY
 City WALNUT CREEK State CA Zip Code 94595
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NONE Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 09 / 2012
Transaction ID : SA11AI.35691
 Amount of Each Receipt this Period
 75.00

C. MS LORNA MANSFIELD 945
 Full Name (Last, First, Middle Initial)
 Mailing Address 1954 MAGNOLIA WAY
 City WALNUT CREEK State CA Zip Code 94595
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NONE Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 10 / 2012
Transaction ID : SA11AI.35692
 Amount of Each Receipt this Period
 50.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 160.00
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 33 OF 79
	<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	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
VETERANS VICTORY FUND

A. MS LORNA MANSFIELD 945
 Full Name (Last, First, Middle Initial)
 Mailing Address 1954 MAGNOLIA WAY
 City State Zip Code
 WALNUT CREEK CA 94595
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 NONE RETIRED
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 17 / 2012
Transaction ID : SA11AI.35693
 Amount of Each Receipt this Period
 75.00

B. MS LORNA MANSFIELD 945
 Full Name (Last, First, Middle Initial)
 Mailing Address 1954 MAGNOLIA WAY
 City State Zip Code
 WALNUT CREEK CA 94595
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 NONE RETIRED
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 13 / 2012
Transaction ID : SA11AI.35694
 Amount of Each Receipt this Period
 100.00

C. MISS BETTY MARCOM 802
 Full Name (Last, First, Middle Initial)
 Mailing Address 6940 E GIRARD AVE APT 107
 City State Zip Code
 DENVER CO 80224
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 NONE RETIRED
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 225.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 29 / 2012
Transaction ID : SA11AI.35696
 Amount of Each Receipt this Period
 225.00

SUBTOTAL of Receipts This Page (optional).....▶	400.00
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 34 OF 79
	<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)
VETERANS VICTORY FUND

A. MR WILLIAM L MARLIN 922
 Full Name (Last, First, Middle Initial)
 Mailing Address 41505 CARLOTTA DR APT 222

City PALM DESERT	State CA	Zip Code 92211
---------------------	-------------	-------------------

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

Name of Employer NONE	Occupation RETIRED
--------------------------	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
220.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 08 / 2012
Transaction ID : SA11AI.35708

Amount of Each Receipt this Period
 200.00

B. MR WILLIAM L MARLIN 922
 Full Name (Last, First, Middle Initial)
 Mailing Address 41505 CARLOTTA DR APT 222

City PALM DESERT	State CA	Zip Code 92211
---------------------	-------------	-------------------

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

Name of Employer NONE	Occupation RETIRED
--------------------------	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
270.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 28 / 2012
Transaction ID : SA11AI.35707

Amount of Each Receipt this Period
 50.00

C. REV CHARLES MARTIN 159
 Full Name (Last, First, Middle Initial)
 Mailing Address 220 COLUMBIA ST

City JOHNSTOWN	State PA	Zip Code 15905
-------------------	-------------	-------------------

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

Name of Employer NONE	Occupation RETIRED
--------------------------	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 19 / 2012
Transaction ID : SA11AI.35716

Amount of Each Receipt this Period
 150.00

SUBTOTAL of Receipts This Page (optional).....	220.00
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 35 OF 79
	<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)
VETERANS VICTORY FUND

A. MR WALTER MCDONALD 078
 Full Name (Last, First, Middle Initial)
 Mailing Address 2101 STILLWATER RD
 City NEWTON State NJ Zip Code 07860
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NORWALT DESIGN Occupation MACHINE DESIGNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 09 / 2012
Transaction ID : SA11AI.35863
 Amount of Each Receipt this Period
 300.00

B. MISS BARBARA MEEKER 915
 Full Name (Last, First, Middle Initial)
 Mailing Address 9430 VIA SALERNO
 City BURBANK State CA Zip Code 91504
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NONE Occupation TEACHER (RETIRED)
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 08 / 2012
Transaction ID : SA11AI.35933
 Amount of Each Receipt this Period
 50.00

C. MR HARRY A METZ 320
 Full Name (Last, First, Middle Initial)
 Mailing Address 205 FIDDLERS POINT DR
 City SAINT AUGUSTINE State FL Zip Code 32080
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NONE Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 14 / 2012
Transaction ID : SA11AI.35954
 Amount of Each Receipt this Period
 50.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 400.00
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: PAGE 36 OF 79
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
VETERANS VICTORY FUND

A. MS ANITA J MICHAELS 334
 Full Name (Last, First, Middle Initial)
 Mailing Address 425 WORTH AVE APT 5E
 City PALM BEACH State FL Zip Code 33480
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NONE Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 23 / 2012
Transaction ID : SA11AI.35963
 Amount of Each Receipt this Period
 250.00

B. MR CHARLES MITCHELL 170
 Full Name (Last, First, Middle Initial)
 Mailing Address 335 4TH ST
 City NEW CUMBERLAND State PA Zip Code 17070
 FEC ID number of contributing federal political committee. **C**
 Name of Employer COMMONWEALTH FOUNDATION Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 29 / 2012
Transaction ID : SA11AI.36028
 Amount of Each Receipt this Period
 150.00

C. MRS EVA W MOORE 208
 Full Name (Last, First, Middle Initial)
 Mailing Address 726 CARR AVE
 City ROCKVILLE State MD Zip Code 20850
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NONE Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 800.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 08 / 2012
Transaction ID : SA11AI.36061
 Amount of Each Receipt this Period
 400.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 800.00
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: PAGE 37 OF 79
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
VETERANS VICTORY FUND

A. HAROLD MORAVEK 498
 Full Name (Last, First, Middle Initial)
 Mailing Address 2895 TRIPLE CREEK 23RD RD
 City CORNELL State MI Zip Code 49818
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 05 / 2012
Transaction ID : SA11AI.36082
 Amount of Each Receipt this Period
 100.00

B. MR CLAIR J MURPHY 551
 Full Name (Last, First, Middle Initial)
 Mailing Address 1626 RUTH ST N
 City SAINT PAUL State MN Zip Code 55119
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 NONE RETIRED
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 205.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 12 / 2012
Transaction ID : SA11AI.36147
 Amount of Each Receipt this Period
 50.00

C. MR JOHN NEENAN 436
 Full Name (Last, First, Middle Initial)
 Mailing Address 2223 GREENLAWN DR
 City TOLEDO State OH Zip Code 43614
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 NONE RETIRED
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 08 / 2012
Transaction ID : SA11AI.36191
 Amount of Each Receipt this Period
 100.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 250.00
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 38 OF 79
	<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)
VETERANS VICTORY FUND

A. MR JAMES W NEWBERNE 452
 Full Name (Last, First, Middle Initial)
 Mailing Address 8580 CAVALIER DR
 City CINCINNATI State OH Zip Code 45231
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NONE Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 10 / 2012
Transaction ID : SA11AI.36214
 Amount of Each Receipt this Period
 250.00

B. ADELLE NEWLON 640
 Full Name (Last, First, Middle Initial)
 Mailing Address 23221 NE 179TH ST
 City KEARNEY State MO Zip Code 64060
 FEC ID number of contributing federal political committee. **C**
 Name of Employer SELF EMPLOYED Occupation FARMER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 245.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 15 / 2012
Transaction ID : SA11AI.36216
 Amount of Each Receipt this Period
 35.00

C. JANICE L OBER 156
 Full Name (Last, First, Middle Initial)
 Mailing Address 1097 PINWOOD RD
 City IRWIN State PA Zip Code 15642
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NONE Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 235.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 29 / 2012
Transaction ID : SA11AI.36290
 Amount of Each Receipt this Period
 80.00

SUBTOTAL of Receipts This Page (optional).....▶	365.00
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:	PAGE 39 OF 79
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<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)
VETERANS VICTORY FUND

A. MR ROBERT PAILLE 891
Full Name (Last, First, Middle Initial)
Mailing Address 1784 JUPITER CT APT C

City LAS VEGAS	State NV	Zip Code 89119
-------------------	-------------	-------------------

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

Name of Employer NONE	Occupation RETIRED
--------------------------	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
205.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	09	/	2012

Transaction ID : SA11AI.36355

Amount of Each Receipt this Period
25.00

B. MISS LILLIE PARSONS 452
Full Name (Last, First, Middle Initial)
Mailing Address 10572 LEMARIE DR

City CINCINNATI	State OH	Zip Code 45241
--------------------	-------------	-------------------

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

Name of Employer NONE	Occupation RETIRED
--------------------------	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
325.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	12	/	2012

Transaction ID : SA11AI.36387

Amount of Each Receipt this Period
125.00

C. MR GEORGE O PFAFF 288
Full Name (Last, First, Middle Initial)
Mailing Address 16 BEAVER CREEK LN

City ASHEVILLE	State NC	Zip Code 28804
-------------------	-------------	-------------------

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

Name of Employer NONE	Occupation RETIRED
--------------------------	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	09	/	2012

Transaction ID : SA11AI.36467

Amount of Each Receipt this Period
300.00

SUBTOTAL of Receipts This Page (optional).....▶	450.00
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: PAGE 40 OF 79
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
VETERANS VICTORY FUND

A. MR GEORGE O PFAFF 288
 Full Name (Last, First, Middle Initial)
 Mailing Address 16 BEAVER CREEK LN
 City ASHEVILLE State NC Zip Code 28804
 Date of Receipt 06 / 12 / 2012
 Transaction ID : SA11AI.36466
 Amount of Each Receipt this Period 100.00
 FEC ID number of contributing federal political committee. C
 Name of Employer NONE Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

B. ROSEMARY L PIERCE 598
 Full Name (Last, First, Middle Initial)
 Mailing Address PO BOX 1086
 City CONDON State MT Zip Code 59826
 Date of Receipt 04 / 19 / 2012
 Transaction ID : SA11AI.36496
 Amount of Each Receipt this Period 35.00
 FEC ID number of contributing federal political committee. C
 Name of Employer NONE Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

C. ROSEMARY L PIERCE 598
 Full Name (Last, First, Middle Initial)
 Mailing Address PO BOX 1086
 City CONDON State MT Zip Code 59826
 Date of Receipt 05 / 16 / 2012
 Transaction ID : SA11AI.36498
 Amount of Each Receipt this Period 35.00
 FEC ID number of contributing federal political committee. C
 Name of Employer NONE Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 245.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 170.00
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: PAGE 41 OF 79
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
VETERANS VICTORY FUND

Full Name (Last, First, Middle Initial)
A. MR DONALD PRITCHARD 853 RET

Mailing Address 12903 W SHADOW HILLS DR

City State Zip Code
SUN CITY WEST AZ 85375

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

Name of Employer Occupation
NONE RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 12 / 2012
Transaction ID : SA11AI.36604

Amount of Each Receipt this Period
150.00

Full Name (Last, First, Middle Initial)
B. MICHAEL PRUGLIESE 199

Mailing Address 33 HOLLAND CT

City State Zip Code
DOVER DE 19901

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
225.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 24 / 2012
Transaction ID : SA11AI.36610

Amount of Each Receipt this Period
40.00

Full Name (Last, First, Middle Initial)
C. MICHAEL PRUGLIESE 199

Mailing Address 33 HOLLAND CT

City State Zip Code
DOVER DE 19901

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
245.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 08 / 2012
Transaction ID : SA11AI.36612

Amount of Each Receipt this Period
20.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 210.00

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 42 OF 79
	<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)
VETERANS VICTORY FUND

Full Name (Last, First, Middle Initial) A. MS CLAIRE RAINS 941		Date of Receipt
Mailing Address 420 41ST AVE		<input type="text" value="06"/> / <input type="text" value="08"/> / <input type="text" value="2012"/>
City	State	Zip Code
SAN FRANCISCO	CA	94121
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : SA11AI.36645
Name of Employer	Occupation	Amount of Each Receipt this Period
NONE	RETIRED	<input type="text" value="50.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="215.00"/>	

Full Name (Last, First, Middle Initial) B. MS LORETTE RANCOURT 043		Date of Receipt
Mailing Address 41 MONROE ST		<input type="text" value="05"/> / <input type="text" value="16"/> / <input type="text" value="2012"/>
City	State	Zip Code
AUGUSTA	ME	04330
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : SA11AI.36653
Name of Employer	Occupation	Amount of Each Receipt this Period
		<input type="text" value="106.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="259.00"/>	

Full Name (Last, First, Middle Initial) C. MR JOHN REDER 486		Date of Receipt
Mailing Address 4304 CASTLE DR		<input type="text" value="05"/> / <input type="text" value="09"/> / <input type="text" value="2012"/>
City	State	Zip Code
MIDLAND	MI	48640
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : SA11AI.36690
Name of Employer	Occupation	Amount of Each Receipt this Period
RETIRED	SHERIFF	<input type="text" value="75.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="220.00"/>	

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="231.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text" value=""/>

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

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

FOR LINE NUMBER: PAGE 43 OF 79
(check only one)

<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)
VETERANS VICTORY FUND

A. MR JOHN REDER 486
Full Name (Last, First, Middle Initial)
Mailing Address 4304 CASTLE DR

City MIDLAND	State MI	Zip Code 48640
-----------------	-------------	-------------------

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

Name of Employer RETIRED	Occupation SHERIFF
-----------------------------	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
285.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	18	/	2012

Transaction ID : SA11AI.36693

Amount of Each Receipt this Period
65.00

B. MR JOHN REDER 486
Full Name (Last, First, Middle Initial)
Mailing Address 4304 CASTLE DR

City MIDLAND	State MI	Zip Code 48640
-----------------	-------------	-------------------

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

Name of Employer RETIRED	Occupation SHERIFF
-----------------------------	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
365.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	08	/	2012

Transaction ID : SA11AI.36691

Amount of Each Receipt this Period
80.00

C. MR JOHN REDER 486
Full Name (Last, First, Middle Initial)
Mailing Address 4304 CASTLE DR

City MIDLAND	State MI	Zip Code 48640
-----------------	-------------	-------------------

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

Name of Employer RETIRED	Occupation SHERIFF
-----------------------------	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
415.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	28	/	2012

Transaction ID : SA11AI.36692

Amount of Each Receipt this Period
50.00

SUBTOTAL of Receipts This Page (optional).....▶	195.00
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 44 OF 79
	<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)
VETERANS VICTORY FUND

Full Name (Last, First, Middle Initial) A. MR NORMAN E REES 945		Date of Receipt
Mailing Address 2406 HIGH POINTE CT		<input type="text" value="04"/> / <input type="text" value="26"/> / <input type="text" value="2012"/>
City	State	Zip Code
FAIRFIELD	CA	94534
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : SA11AI.36705
Name of Employer	Occupation	Amount of Each Receipt this Period
NONE	RETIRED	<input type="text" value="50.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="335.00"/>	

Full Name (Last, First, Middle Initial) B. MR NORMAN E REES 945		Date of Receipt
Mailing Address 2406 HIGH POINTE CT		<input type="text" value="05"/> / <input type="text" value="15"/> / <input type="text" value="2012"/>
City	State	Zip Code
FAIRFIELD	CA	94534
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : SA11AI.36703
Name of Employer	Occupation	Amount of Each Receipt this Period
NONE	RETIRED	<input type="text" value="50.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="385.00"/>	

Full Name (Last, First, Middle Initial) C. MR NORMAN E REES 945		Date of Receipt
Mailing Address 2406 HIGH POINTE CT		<input type="text" value="06"/> / <input type="text" value="25"/> / <input type="text" value="2012"/>
City	State	Zip Code
FAIRFIELD	CA	94534
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : SA11AI.36704
Name of Employer	Occupation	Amount of Each Receipt this Period
NONE	RETIRED	<input type="text" value="50.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="435.00"/>	

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="150.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

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

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

FOR LINE NUMBER: PAGE 45 OF 79
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
VETERANS VICTORY FUND

A. MR JACK C ROSENAU 323
 Full Name (Last, First, Middle Initial)
 Mailing Address 1177 OLD FORT DR
 City TALLAHASSEE State FL Zip Code 32301
 FEC ID number of contributing federal political committee. **C**
 Name of Employer US MARINE CORPS Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 17 / 2012
Transaction ID : SA11AI.36871
 Amount of Each Receipt this Period
 50.00

B. MR ROBERT W ROSENE 554
 Full Name (Last, First, Middle Initial)
 Mailing Address 2550 38TH AVE NE UNIT 211
 City MINNEAPOLIS State MN Zip Code 55421
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NONE Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 18 / 2012
Transaction ID : SA11AI.36873
 Amount of Each Receipt this Period
 50.00

C. MRS NANCY ROTH 939
 Full Name (Last, First, Middle Initial)
 Mailing Address 8545 CARMEL VALLEY RD
 City CARMEL State CA Zip Code 93923
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NONE Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 09 / 2012
Transaction ID : SA11AI.36890
 Amount of Each Receipt this Period
 100.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 200.00
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 46 OF 79
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
VETERANS VICTORY FUND

A. MRS NANCY ROTH 939
 Full Name (Last, First, Middle Initial)
 Mailing Address 8545 CARMEL VALLEY RD
 City CARMEL State CA Zip Code 93923
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NONE Occupation RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **500.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 19 / 2012
Transaction ID : SA11AI.36889
 Amount of Each Receipt this Period
200.00

B. MR ALLEN RUSHTON 352
 Full Name (Last, First, Middle Initial)
 Mailing Address 94 COUNTRY CLUB BLVD
 City BIRMINGHAM State AL Zip Code 35213
 FEC ID number of contributing federal political committee. **C**
 Name of Employer SELF EMPLOYED Occupation ATTORNEY
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **250.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 11 / 2012
Transaction ID : SA11AI.36919
 Amount of Each Receipt this Period
250.00

C. MR EDWIN C SANDHAM 349
 Full Name (Last, First, Middle Initial)
 Mailing Address 1964 SW SAINT ANDREWS DR
 City PALM CITY State FL Zip Code 34990
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NONE Occupation RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **325.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 19 / 2012
Transaction ID : SA11AI.36977
 Amount of Each Receipt this Period
225.00

SUBTOTAL of Receipts This Page (optional).....▶	675.00
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: PAGE 47 OF 79
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
VETERANS VICTORY FUND

A. MR EDWIN C SANDHAM 349
 Full Name (Last, First, Middle Initial)
 Mailing Address 1964 SW SAINT ANDREWS DR
 City PALM CITY State FL Zip Code 34990
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NONE Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 17 / 2012
Transaction ID : SA11AI.36976
 Amount of Each Receipt this Period
 25.00

B. MRS FRIEDA SCHMALZ 728
 Full Name (Last, First, Middle Initial)
 Mailing Address 4929 W HIGHWAY 22
 City PARIS State AR Zip Code 72855
 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 ▼ 210.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 17 / 2012
Transaction ID : SA11AI.37035
 Amount of Each Receipt this Period
 40.00

C. MRS FRIEDA SCHMALZ 728
 Full Name (Last, First, Middle Initial)
 Mailing Address 4929 W HIGHWAY 22
 City PARIS State AR Zip Code 72855
 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 ▼ 250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 20 / 2012
Transaction ID : SA11AI.37036
 Amount of Each Receipt this Period
 40.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 105.00
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 48 OF 79
	<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)
VETERANS VICTORY FUND

A. MARK W SCHUMACHER 740
 Full Name (Last, First, Middle Initial)
 Mailing Address 1105 N 177TH WEST AVE
 City SAND SPRINGS State OK Zip Code 74063
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NONE Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 11 / 2012
Transaction ID : SA11AI.37079
 Amount of Each Receipt this Period
 100.00

B. MARK W SCHUMACHER 740
 Full Name (Last, First, Middle Initial)
 Mailing Address 1105 N 177TH WEST AVE
 City SAND SPRINGS State OK Zip Code 74063
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NONE Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 29 / 2012
Transaction ID : SA11AI.37078
 Amount of Each Receipt this Period
 100.00

C. MR RICHARD SCHWARTZ 977
 Full Name (Last, First, Middle Initial)
 Mailing Address 960 SE ALGONQUIAN CT
 City PRINEVILLE State OR Zip Code 97754
 FEC ID number of contributing federal political committee. **C**
 Name of Employer GOD Occupation EVANGELIST
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 12 / 2012
Transaction ID : SA11AI.37087
 Amount of Each Receipt this Period
 75.00

SUBTOTAL of Receipts This Page (optional).....▶	275.00
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 49 OF 79
	<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)
VETERANS VICTORY FUND

A. MR JAMES J SHEA 922 JR
 Full Name (Last, First, Middle Initial)
 Mailing Address 70-168 SONOA ROAD
 City RANCHO MIRAGE State CA Zip Code 92270
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NONE Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 13 / 2012
Transaction ID : SA11AI.37140
 Amount of Each Receipt this Period
 250.00

B. CORA R SHIFFER 547
 Full Name (Last, First, Middle Initial)
 Mailing Address 3304 14TH ST APT 212
 City EAU CLAIRE State WI Zip Code 54703
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NONE Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 15 / 2012
Transaction ID : SA11AI.37167
 Amount of Each Receipt this Period
 35.00

C. MR JOHN J SIEFFERT 480 JR
 Full Name (Last, First, Middle Initial)
 Mailing Address 740 RANDALL DR
 City TROY State MI Zip Code 48085
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NONE Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 12 / 2012
Transaction ID : SA11AI.37205
 Amount of Each Receipt this Period
 200.00

SUBTOTAL of Receipts This Page (optional).....▶	485.00
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 50 OF 79
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 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)
VETERANS VICTORY FUND

A. MR WILLIAM SPENCER 955
 Full Name (Last, First, Middle Initial)
 Mailing Address 195 SURFSOUND DR
 City SMITH RIVER State CA Zip Code 95567
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NONE Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 28 / 2012
Transaction ID : SA11AI.37358
 Amount of Each Receipt this Period
 70.00

B. MRS CECELIA STEIDL 581
 Full Name (Last, First, Middle Initial)
 Mailing Address 1251 54TH AVE S APT 125
 City FARGO State ND Zip Code 58104
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NONE Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 08 / 2012
Transaction ID : SA11AI.37397
 Amount of Each Receipt this Period
 200.00

C. EILEEN STEVENSON 640
 Full Name (Last, First, Middle Initial)
 Mailing Address 700 HARR GROVE RD
 City PECULIAR State MO Zip Code 64078
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NONE Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 01 / 2012
Transaction ID : SA11AI.37411
 Amount of Each Receipt this Period
 35.00

SUBTOTAL of Receipts This Page (optional).....▶	305.00
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 51 OF 79
	<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)
VETERANS VICTORY FUND

A. MRS GRETCHEN E STRAUSS 260
Full Name (Last, First, Middle Initial)

Mailing Address 1269 NATIONAL RD APT 19

City WHEELING State WV Zip Code 26003

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

Name of Employer NONE Occupation HOUSEWIFE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 283.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 08 / 2012
Transaction ID : SA11AI.37454

Amount of Each Receipt this Period
 113.00

B. MR DONALD KEARN SURGEON 940
Full Name (Last, First, Middle Initial)

Mailing Address 268 MILAGRA DR

City PACIFICA State CA Zip Code 94044

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

Name of Employer NONE Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 20 / 2012
Transaction ID : SA11AI.37509

Amount of Each Receipt this Period
 50.00

C. RICHARD D TEAL 986
Full Name (Last, First, Middle Initial)

Mailing Address 29 TEAL DR

City GOLDENDALE State WA Zip Code 98620

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

Name of Employer NONE Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 238.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 16 / 2012
Transaction ID : SA11AI.37565

Amount of Each Receipt this Period
 40.00

SUBTOTAL of Receipts This Page (optional).....▶	203.00
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: PAGE 52 OF 79
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
VETERANS VICTORY FUND

A. MR RAYMOND G TOBIN 921
 Full Name (Last, First, Middle Initial)
 Mailing Address PO BOX 710218
 City SAN DIEGO State CA Zip Code 92171
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NONE Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 23 / 2012
Transaction ID : SA11AI.37641
 Amount of Each Receipt this Period
 200.00

B. MR CALVIN K UPP 671
 Full Name (Last, First, Middle Initial)
 Mailing Address 212 N ELM ST
 City WELLINGTON State KS Zip Code 67152
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NONE Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 25 / 2012
Transaction ID : SA11AI.37705
 Amount of Each Receipt this Period
 75.00

C. MR CALVIN K UPP 671
 Full Name (Last, First, Middle Initial)
 Mailing Address 212 N ELM ST
 City WELLINGTON State KS Zip Code 67152
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NONE Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 310.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 11 / 2012
Transaction ID : SA11AI.37704
 Amount of Each Receipt this Period
 35.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 310.00
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 53 OF 79
	<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)
VETERANS VICTORY FUND

A. MR CALVIN K UPP 671
 Full Name (Last, First, Middle Initial)
 Mailing Address 212 N ELM ST
 City Wellington State KS Zip Code 67152
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NONE Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 360.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 08 / 2012
Transaction ID : SA11AI.37706
 Amount of Each Receipt this Period
 50.00

B. MS GLORIA VAALER 585
 Full Name (Last, First, Middle Initial)
 Mailing Address 204 6TH AVE NW
 City ELGIN State ND Zip Code 58533
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NONE Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 209.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 19 / 2012
Transaction ID : SA11AI.37710
 Amount of Each Receipt this Period
 53.00

C. MS GLORIA VAALER 585
 Full Name (Last, First, Middle Initial)
 Mailing Address 204 6TH AVE NW
 City ELGIN State ND Zip Code 58533
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NONE Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 262.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 08 / 2012
Transaction ID : SA11AI.37709
 Amount of Each Receipt this Period
 53.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 156.00
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: PAGE 54 OF 79
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
VETERANS VICTORY FUND

A. MR JOHN VALERIUS 750
 Full Name (Last, First, Middle Initial)
 Mailing Address 1909 CANTERBURY ST
 City IRVING State TX Zip Code 75062
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NONE Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 930.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 11 / 2012
Transaction ID : SA11AI.37717
 Amount of Each Receipt this Period
 100.00

B. MR JOHN VALERIUS 750
 Full Name (Last, First, Middle Initial)
 Mailing Address 1909 CANTERBURY ST
 City IRVING State TX Zip Code 75062
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NONE Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 965.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 08 / 2012
Transaction ID : SA11AI.37718
 Amount of Each Receipt this Period
 35.00

C. MR HAROLD WARDENBURG 719
 Full Name (Last, First, Middle Initial)
 Mailing Address 401 WOODRIDGE ST
 City HOT SPRINGS State AR Zip Code 71901
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NONE Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 11 / 2012
Transaction ID : SA11AI.37853
 Amount of Each Receipt this Period
 300.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 435.00
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:	PAGE 55 OF 79
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<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)
VETERANS VICTORY FUND

A. DR WILLIAM WEIRICH 945 MD
Full Name (Last, First, Middle Initial)

Mailing Address 1095 STONEBRIDGE DR

City	State	Zip Code
NAPA	CA	94558

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

Name of Employer	Occupation
SELF EMPLOYED	SURGEON

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	19	/	2012

Transaction ID : SA11AI.37913

Amount of Each Receipt this Period
500.00

B. DR JOHN P WHITECAR 397 JR MD
Full Name (Last, First, Middle Initial)

Mailing Address 31 MEGAN LN

City	State	Zip Code
COLUMBUS	MS	39705

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

Name of Employer	Occupation
COLUMBUS HEMATOLOGY & ONC	PHYSICIAN

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	23	/	2012

Transaction ID : SA11AI.37968

Amount of Each Receipt this Period
200.00

C. DR JOHN P WHITECAR 397 JR MD
Full Name (Last, First, Middle Initial)

Mailing Address 31 MEGAN LN

City	State	Zip Code
COLUMBUS	MS	39705

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

Name of Employer	Occupation
COLUMBUS HEMATOLOGY & ONC	PHYSICIAN

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	18	/	2012

Transaction ID : SA11AI.37967

Amount of Each Receipt this Period
200.00

SUBTOTAL of Receipts This Page (optional).....▶	900.00
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 56 OF 79
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
VETERANS VICTORY FUND

A. MR ELLIZABETH MART WISKEMANN 949
 Full Name (Last, First, Middle Initial)
 Mailing Address 357 HIGHLAND AVE
 City SAN RAFAEL State CA Zip Code 94901
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NONE Occupation HOMEMAKER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 01 / 2012
Transaction ID : SA11AI.38052
 Amount of Each Receipt this Period
 500.00

B. MR ARNOLD WOLF 655
 Full Name (Last, First, Middle Initial)
 Mailing Address 17256 HIGHWAY 32
 City LICKING State MO Zip Code 65542
 FEC ID number of contributing federal political committee. **C**
 Name of Employer SELF EMPLOYED Occupation FARMER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 800.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 17 / 2012
Transaction ID : SA11AI.38065
 Amount of Each Receipt this Period
 100.00

C. MR ARNOLD WOLF 655
 Full Name (Last, First, Middle Initial)
 Mailing Address 17256 HIGHWAY 32
 City LICKING State MO Zip Code 65542
 FEC ID number of contributing federal political committee. **C**
 Name of Employer SELF EMPLOYED Occupation FARMER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 13 / 2012
Transaction ID : SA11AI.38066
 Amount of Each Receipt this Period
 200.00

SUBTOTAL of Receipts This Page (optional).....▶	800.00
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 57 OF 79
	<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)
VETERANS VICTORY FUND

A. RUTH YOUNG 309
Full Name (Last, First, Middle Initial)

Mailing Address 2985 SHELBY DR

City AUGUSTA State GA Zip Code 30906

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
230.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 08 / 2012

Transaction ID : SA11AI.38131

Amount of Each Receipt this Period
35.00

B. MR JOHN ZIEGLER 173
Full Name (Last, First, Middle Initial)

Mailing Address 515 GRACE TER

City NEW OXFORD State PA Zip Code 17350

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

Name of Employer Occupation
NONE RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 29 / 2012

Transaction ID : SA11AI.38161

Amount of Each Receipt this Period
150.00

C. MR RAY L ZOBEL 857
Full Name (Last, First, Middle Initial)

Mailing Address 36727 S OCOTILLO CANYON DR

City TUCSON State AZ Zip Code 85739

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

Name of Employer Occupation
NONE RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 16 / 2012

Transaction ID : SA11AI.38176

Amount of Each Receipt this Period
100.00

SUBTOTAL of Receipts This Page (optional).....	285.00
TOTAL This Period (last page this line number only).....	21223.00

**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)
VETERANS VICTORY FUND

Full Name (Last, First, Middle Initial)

A. BASE CONNECT INC

Mailing Address 1155 - 15TH STREET NW
SUITE 410

City WASHINGTON State DC Zip Code 20005

Purpose of Disbursement
DIRECT MAIL - CREATIVE

003

Candidate Name

VETERANS VICTORY FUND

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
04 / 05 / 2012

Transaction ID : **SB21B.32614**

Amount of Each Disbursement this Period

489.19

Full Name (Last, First, Middle Initial)

B. BASE CONNECT INC

Mailing Address 1155 - 15TH STREET NW
SUITE 410

City WASHINGTON State DC Zip Code 20005

Purpose of Disbursement
DIRECT MAIL - CREATIVE

003

Candidate Name

VETERANS VICTORY FUND

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
04 / 19 / 2012

Transaction ID : **SB21B.32615**

Amount of Each Disbursement this Period

6182.36

Full Name (Last, First, Middle Initial)

C. BASE CONNECT INC

Mailing Address 1155 - 15TH STREET NW
SUITE 410

City WASHINGTON State DC Zip Code 20005

Purpose of Disbursement
DIRECT MAIL - CREATIVE

003

Candidate Name

VETERANS VICTORY FUND

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
06 / 28 / 2012

Transaction ID : **SB21B.32616**

Amount of Each Disbursement this Period

4380.27

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

11051.82

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)
VETERANS VICTORY FUND

Full Name (Last, First, Middle Initial)

A. CENTURY DATA MAILING SERVICES INC

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
04		05		2012

Mailing Address 1155 - 15TH STREET NW
SUITE 410

City WASHINGTON State DC Zip Code 20005

Purpose of Disbursement
DIRECT MAIL - POSTAGE

003

Transaction ID : SB21B.32617

Amount of Each Disbursement this Period

8749.57

Candidate Name

VETERANS VICTORY FUND

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

B. CENTURY DATA MAILING SERVICES INC

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
05		03		2012

Mailing Address 1155 - 15TH STREET NW
SUITE 410

City WASHINGTON State DC Zip Code 20005

Purpose of Disbursement
DIRECT MAIL - POSTAGE

003

Transaction ID : SB21B.32618

Amount of Each Disbursement this Period

5867.16

Candidate Name

VETERANS VICTORY FUND

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

C. CENTURY DATA MAILING SERVICES INC

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
05		03		2012

Mailing Address 1155 - 15TH STREET NW
SUITE 410

City WASHINGTON State DC Zip Code 20005

Purpose of Disbursement
DIRECT MAIL - POSTAGE

003

Transaction ID : SB21B.32619

Amount of Each Disbursement this Period

4562.39

Candidate Name

VETERANS VICTORY FUND

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

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

19179.12

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)
VETERANS VICTORY FUND

Full Name (Last, First, Middle Initial)

A. CENTURY DATA MAILING SERVICES INC

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
05		17		2012

Mailing Address 1155 - 15TH STREET NW
SUITE 410

Transaction ID : SB21B.32620

City WASHINGTON State DC Zip Code 20005

Amount of Each Disbursement this Period

9630.13

Purpose of Disbursement
DIRECT MAIL - POSTAGE

003
Category/ Type

Candidate Name

VETERANS VICTORY FUND

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

B. CENTURY DATA MAILING SERVICES INC

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
05		23		2012

Mailing Address 1155 - 15TH STREET NW
SUITE 410

Transaction ID : SB21B.32621

City WASHINGTON State DC Zip Code 20005

Amount of Each Disbursement this Period

11479.08

Purpose of Disbursement
DIRECT MAIL - POSTAGE

003
Category/ Type

Candidate Name

VETERANS VICTORY FUND

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

C. CENTURY DATA MAILING SERVICES INC

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
06		15		2012

Mailing Address 1155 - 15TH STREET NW
SUITE 410

Transaction ID : SB21B.32622

City WASHINGTON State DC Zip Code 20005

Amount of Each Disbursement this Period

11279.70

Purpose of Disbursement
DIRECT MAIL - POSTAGE

003
Category/ Type

Candidate Name

VETERANS VICTORY FUND

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

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

32388.91

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

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**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)
VETERANS VICTORY FUND

Full Name (Last, First, Middle Initial)

A. CENTURY DATA SYSTEMS CORP

Mailing Address 1155 - 15TH STREET NW
SUITE 410

City WASHINGTON State DC Zip Code 20005

Purpose of Disbursement
DATA PROCESSING

001

Candidate Name

VETERANS VICTORY FUND

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
04 / 19 / 2012

Transaction ID : **SB21B.32623**

Amount of Each Disbursement this Period

3953.15

Full Name (Last, First, Middle Initial)

B. CENTURY DATA SYSTEMS CORP

Mailing Address 1155 - 15TH STREET NW
SUITE 410

City WASHINGTON State DC Zip Code 20005

Purpose of Disbursement
DATA PROCESSING

001

Candidate Name

VETERANS VICTORY FUND

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
06 / 28 / 2012

Transaction ID : **SB21B.32624**

Amount of Each Disbursement this Period

1133.10

Full Name (Last, First, Middle Initial)

C. COLORTREE

Mailing Address 2519 BRITTONS HILL RD

City RICHMOND State VA Zip Code 23230

Purpose of Disbursement
DIRECT MAIL - PRINTING & MAILSHOP

003

Candidate Name

VETERANS VICTORY FUND

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
06 / 07 / 2012

Transaction ID : **SB21B.32625**

Amount of Each Disbursement this Period

955.00

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

6041.25

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)
VETERANS VICTORY FUND

Full Name (Last, First, Middle Initial)

A. COLORTREE

Mailing Address 2519 BRITTONS HILL RD

City RICHMOND State VA Zip Code 23230

Purpose of Disbursement
DIRECT MAIL - PRINTING & MAILSHOP

003

Candidate Name
VETERANS VICTORY FUND

Category/
Type

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: District:

Date of Disbursement

MM / DD / YYYY
06 / 15 / 2012

Transaction ID : SB21B.32626

Amount of Each Disbursement this Period

9233.48

Full Name (Last, First, Middle Initial)

B. CONSOLIDATED MAILING SERVICES

Mailing Address 504 SHAW RD
SUITE 206

City STERLING State VA Zip Code 20166

Purpose of Disbursement
DIRECT MAIL - PRINTING & MAILSHOP

003

Candidate Name
VETERANS VICTORY FUND

Category/
Type

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: District:

Date of Disbursement

MM / DD / YYYY
04 / 19 / 2012

Transaction ID : SB21B.32627

Amount of Each Disbursement this Period

7415.78

Full Name (Last, First, Middle Initial)

C. CONSOLIDATED MAILING SERVICES

Mailing Address 504 SHAW RD
SUITE 206

City STERLING State VA Zip Code 20166

Purpose of Disbursement
DIRECT MAIL - PRINTING & MAILSHOP

003

Candidate Name
VETERANS VICTORY FUND

Category/
Type

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: District:

Date of Disbursement

MM / DD / YYYY
04 / 26 / 2012

Transaction ID : SB21B.32628

Amount of Each Disbursement this Period

7954.76

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

24604.02

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)
VETERANS VICTORY FUND

Full Name (Last, First, Middle Initial) A. DIRECT MAIL PROCESSORS INC		Date of Disbursement MM / DD / YYYY 05 / 03 / 2012
Mailing Address 1150 CONRAD CT		Transaction ID : SB21B.32629
City HAGERSTOWN	State MD	
Purpose of Disbursement CAGING SERVICES	Category/ Type 001	Amount of Each Disbursement this Period 411.38
Candidate Name VETERANS VICTORY FUND		
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. DIRECT MAIL PROCESSORS INC		Date of Disbursement MM / DD / YYYY 05 / 17 / 2012
Mailing Address 1150 CONRAD CT		Transaction ID : SB21B.32630
City HAGERSTOWN	State MD	
Purpose of Disbursement CAGING SERVICES	Category/ Type 001	Amount of Each Disbursement this Period 304.50
Candidate Name VETERANS VICTORY FUND		
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. DIRECT MAIL PROCESSORS INC		Date of Disbursement MM / DD / YYYY 06 / 07 / 2012
Mailing Address 1150 CONRAD CT		Transaction ID : SB21B.32631
City HAGERSTOWN	State MD	
Purpose of Disbursement CAGING SERVICES	Category/ Type 001	Amount of Each Disbursement this Period 1022.10
Candidate Name VETERANS VICTORY FUND		
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).....▶	1737.98
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)
VETERANS VICTORY FUND

Full Name (Last, First, Middle Initial)

A. ELECTRONIC REPORTING SYSTEMS INC

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
06		28		2012

Mailing Address 683 BERRYVILLE AVE

Transaction ID : SB21B.32650

City WINCHESTER State VA Zip Code 22601

Amount of Each Disbursement this Period

2328.40

Purpose of Disbursement
ELECTRONIC DISCLOSURE REPORTING

001
Category/ Type

Candidate Name

VETERANS VICTORY FUND

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. FIRST VIRGINIA COMMUNITY BANK

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
04		02		2012

Mailing Address 11325 RANDOM HILLS RD

Transaction ID : SB21B.32651

City FAIRFAX State VA Zip Code 22030

Amount of Each Disbursement this Period

103.29

Purpose of Disbursement
SERVICE CHARGE

001
Category/ Type

Candidate Name

VETERANS VICTORY FUND

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. FIRST VIRGINIA COMMUNITY BANK

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
04		03		2012

Mailing Address 11325 RANDOM HILLS RD

Transaction ID : SB21B.32659

City FAIRFAX State VA Zip Code 22030

Amount of Each Disbursement this Period

191.97

Purpose of Disbursement
MERCHANT SERVICE CHARGE

001
Category/ Type

Candidate Name

VETERANS VICTORY FUND

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)..... ▶

2623.66

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

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**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)
VETERANS VICTORY FUND

Full Name (Last, First, Middle Initial)

A. FIRST VIRGINIA COMMUNITY BANK

Date of Disbursement

Mailing Address 11325 RANDOM HILLS RD

M M M	/	D D D	/	Y Y Y Y Y
04		09		2012

City State Zip Code
FAIRFAX VA 22030

Transaction ID : SB21B.32656

Purpose of Disbursement
CUSTOM CREDIT BILLING

001
Category/ Type

Amount of Each Disbursement this Period

46.25

Candidate Name

VETERANS VICTORY FUND

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. FIRST VIRGINIA COMMUNITY BANK

Date of Disbursement

Mailing Address 11325 RANDOM HILLS RD

M M M	/	D D D	/	Y Y Y Y Y
04		30		2012

City State Zip Code
FAIRFAX VA 22030

Transaction ID : SB21B.32654

Purpose of Disbursement
AMEX DISCOUNT FEE

001
Category/ Type

Amount of Each Disbursement this Period

84.18

Candidate Name

VETERANS VICTORY FUND

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. FIRST VIRGINIA COMMUNITY BANK

Date of Disbursement

Mailing Address 11325 RANDOM HILLS RD

M M M	/	D D D	/	Y Y Y Y Y
05		01		2012

City State Zip Code
FAIRFAX VA 22030

Transaction ID : SB21B.32652

Purpose of Disbursement
SERVICE CHARGE

001
Category/ Type

Amount of Each Disbursement this Period

167.59

Candidate Name

VETERANS VICTORY FUND

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)..... ▶

298.02

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

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**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)
VETERANS VICTORY FUND

Full Name (Last, First, Middle Initial)

A. FIRST VIRGINIA COMMUNITY BANK

Mailing Address 11325 RANDOM HILLS RD

City State Zip Code
FAIRFAX VA 22030

Purpose of Disbursement
MERCHANT SERVICE CHARGE

Category/
Type

Candidate Name
VETERANS VICTORY FUND

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: District:

Date of Disbursement

/ /

Transaction ID : SB21B.32660

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

B. FIRST VIRGINIA COMMUNITY BANK

Mailing Address 11325 RANDOM HILLS RD

City State Zip Code
FAIRFAX VA 22030

Purpose of Disbursement
CUSTOM CREDIT BILLING

Category/
Type

Candidate Name
VETERANS VICTORY FUND

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: District:

Date of Disbursement

/ /

Transaction ID : SB21B.32657

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

C. FIRST VIRGINIA COMMUNITY BANK

Mailing Address 11325 RANDOM HILLS RD

City State Zip Code
FAIRFAX VA 22030

Purpose of Disbursement
AMEX DISCOUNT FEE

Category/
Type

Candidate Name
VETERANS VICTORY FUND

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: District:

Date of Disbursement

/ /

Transaction ID : SB21B.32655

Amount of Each Disbursement this Period

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

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)
VETERANS VICTORY FUND

Full Name (Last, First, Middle Initial)

A. FIRST VIRGINIA COMMUNITY BANK

Mailing Address 11325 RANDOM HILLS RD

City State Zip Code
FAIRFAX VA 22030

Purpose of Disbursement
SERVICE CHARGE

001
Category/
Type

Candidate Name
VETERANS VICTORY FUND

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: District:

Date of Disbursement

/ /

Transaction ID : SB21B.32653

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

B. FIRST VIRGINIA COMMUNITY BANK

Mailing Address 11325 RANDOM HILLS RD

City State Zip Code
FAIRFAX VA 22030

Purpose of Disbursement
MERCHANT SERVICE CHARGE

001
Category/
Type

Candidate Name
VETERANS VICTORY FUND

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: District:

Date of Disbursement

/ /

Transaction ID : SB21B.32661

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

C. FIRST VIRGINIA COMMUNITY BANK

Mailing Address 11325 RANDOM HILLS RD

City State Zip Code
FAIRFAX VA 22030

Purpose of Disbursement
CUSTOM CREDIT BILLING

001
Category/
Type

Candidate Name
VETERANS VICTORY FUND

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: District:

Date of Disbursement

/ /

Transaction ID : SB21B.32658

Amount of Each Disbursement this Period

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

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)
VETERANS VICTORY FUND

Full Name (Last, First, Middle Initial) A. GRAPHICS INNOVATIONS		Date of Disbursement MM / DD / YYYY 04 / 05 / 2012
Mailing Address 8000 VILLA PARK DR		Transaction ID : SB21B.32662
City RICHMOND	State VA	
Purpose of Disbursement DIRECT MAIL - PRINTING & MAILSHOP		Amount of Each Disbursement this Period 3807.16
Candidate Name VETERANS VICTORY FUND		Category/ Type 003
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. GRAPHICS INNOVATIONS		Date of Disbursement MM / DD / YYYY 05 / 03 / 2012
Mailing Address 8000 VILLA PARK DR		Transaction ID : SB21B.32663
City RICHMOND	State VA	
Purpose of Disbursement DIRECT MAIL - PRINTING & MAILSHOP		Amount of Each Disbursement this Period 1996.88
Candidate Name VETERANS VICTORY FUND		Category/ Type 003
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. INTEGRAM		Date of Disbursement MM / DD / YYYY 04 / 19 / 2012
Mailing Address 8421 HILLTOP RD		Transaction ID : SB21B.32664
City FAIRFAX	State VA	
Purpose of Disbursement DIRECT MAIL - PRINTING & MAILSHOP		Amount of Each Disbursement this Period 3952.89
Candidate Name VETERANS VICTORY FUND		Category/ Type 003
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).....▶	9756.93
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)
VETERANS VICTORY FUND

Full Name (Last, First, Middle Initial)

A. INTEGRAM

Mailing Address 8421 HILLTOP RD

City State Zip Code
FAIRFAX VA 22031

Purpose of Disbursement
DIRECT MAIL - PRINTING & MAILSHOP

003

Candidate Name

VETERANS VICTORY FUND

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
06 / 15 / 2012

Transaction ID : **SB21B.32665**

Amount of Each Disbursement this Period

3157.11

Full Name (Last, First, Middle Initial)

B. LEGACY LIST MARKETING INC

Mailing Address 1155 - 15TH STREET NW
SUITE 410

City State Zip Code
WASHINGTON DC 20005

Purpose of Disbursement
LIST RENTALS

003

Candidate Name

VETERANS VICTORY FUND

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
04 / 05 / 2012

Transaction ID : **SB21B.32638**

Amount of Each Disbursement this Period

1553.60

Full Name (Last, First, Middle Initial)

C. LEGACY LIST MARKETING INC

Mailing Address 1155 - 15TH STREET NW
SUITE 410

City State Zip Code
WASHINGTON DC 20005

Purpose of Disbursement
LIST RENTALS

003

Candidate Name

VETERANS VICTORY FUND

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
04 / 05 / 2012

Transaction ID : **SB21B.32641**

Amount of Each Disbursement this Period

1673.97

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

6384.68

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)
VETERANS VICTORY FUND

Full Name (Last, First, Middle Initial)

A. LEGACY LIST MARKETING INC

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	9		2	0	1	2

Mailing Address 1155 - 15TH STREET NW
SUITE 410

Transaction ID : SB21B.32639

City WASHINGTON State DC Zip Code 20005

Amount of Each Disbursement this Period

1	0	7	5	.	1	3
---	---	---	---	---	---	---

Purpose of Disbursement
LIST RENTALS

003
Category/ Type

Candidate Name

VETERANS VICTORY FUND

Office Sought: House
 Senate
 President

State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Full Name (Last, First, Middle Initial)

B. LEGACY LIST MARKETING INC

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		2	6		2	0	1	2

Mailing Address 1155 - 15TH STREET NW
SUITE 410

Transaction ID : SB21B.32640

City WASHINGTON State DC Zip Code 20005

Amount of Each Disbursement this Period

2	0	0	.	0	0
---	---	---	---	---	---

Purpose of Disbursement
LIST RENTALS

003
Category/ Type

Candidate Name

VETERANS VICTORY FUND

Office Sought: House
 Senate
 President

State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Full Name (Last, First, Middle Initial)

C. MACKENZIE & COMPANY

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		2	6		2	0	1	2

Mailing Address 2276 S ARLINGTON MILL DR
#806

Transaction ID : SB21B.32642

City ARLINGTON State VA Zip Code 22206

Amount of Each Disbursement this Period

5	0	0	.	0	0
---	---	---	---	---	---

Purpose of Disbursement
CONSULTING - COMPLIANCE

001
Category/ Type

Candidate Name

VETERANS VICTORY FUND

Office Sought: House
 Senate
 President

State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

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

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

6	2	7	.	5	1	3
---	---	---	---	---	---	---

6	2	7	.	5	1	3
---	---	---	---	---	---	---

**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)
VETERANS VICTORY FUND

Full Name (Last, First, Middle Initial)

A. MACKENZIE & COMPANY

Mailing Address 2276 S ARLINGTON MILL DR
#806

City ARLINGTON State VA Zip Code 22206

Purpose of Disbursement
CONSULTING - COMPLIANCE

001

Candidate Name

VETERANS VICTORY FUND

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
05 / 03 / 2012

Transaction ID : **SB21B.32643**

Amount of Each Disbursement this Period

2500.00

Full Name (Last, First, Middle Initial)

B. MACKENZIE & COMPANY

Mailing Address 2276 S ARLINGTON MILL DR
#806

City ARLINGTON State VA Zip Code 22206

Purpose of Disbursement
CONSULTING - COMPLIANCE

001

Candidate Name

VETERANS VICTORY FUND

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
06 / 07 / 2012

Transaction ID : **SB21B.32644**

Amount of Each Disbursement this Period

2500.00

Full Name (Last, First, Middle Initial)

C. MACKENZIE & COMPANY

Mailing Address 2276 S ARLINGTON MILL DR
#806

City ARLINGTON State VA Zip Code 22206

Purpose of Disbursement
CONSULTING - COMPLIANCE

001

Candidate Name

VETERANS VICTORY FUND

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
06 / 15 / 2012

Transaction ID : **SB21B.32645**

Amount of Each Disbursement this Period

2500.00

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

7500.00

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)
VETERANS VICTORY FUND

Full Name (Last, First, Middle Initial)

A. MACKENZIE & COMPANY

Mailing Address 2276 S ARLINGTON MILL DR
#806

City ARLINGTON State VA Zip Code 22206

Purpose of Disbursement
CONSULTING - COMPLIANCE

001

Candidate Name

VETERANS VICTORY FUND

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	8		2	0	1	2

Transaction ID : SB21B.32646

Amount of Each Disbursement this Period

2	5	0	0	.	0	0
---	---	---	---	---	---	---

Full Name (Last, First, Middle Initial)

B. SIMPKINS ESCROW LLC

Mailing Address ST JUST RD

City UNIONVILLE State VA Zip Code 22567

Purpose of Disbursement
ESCROW SERVICES

001

Candidate Name

VETERANS VICTORY FUND

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		0	3		2	0	1	2

Transaction ID : SB21B.32647

Amount of Each Disbursement this Period

2	1	6	.	3	1
---	---	---	---	---	---

Full Name (Last, First, Middle Initial)

C. SIMPKINS ESCROW LLC

Mailing Address ST JUST RD

City UNIONVILLE State VA Zip Code 22567

Purpose of Disbursement
ESCROW SERVICES

001

Candidate Name

VETERANS VICTORY FUND

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		2	3		2	0	1	2

Transaction ID : SB21B.32648

Amount of Each Disbursement this Period

2	1	0	.	2	8
---	---	---	---	---	---

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

2	9	2	6	.	5	9
---	---	---	---	---	---	---

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

2	9	2	6	.	5	9
---	---	---	---	---	---	---

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)
VETERANS VICTORY FUND

A. SIMPKINS ESCROW LLC

Full Name (Last, First, Middle Initial)

Mailing Address ST JUST RD

City UNIONVILLE State VA Zip Code 22567

Purpose of Disbursement ESCROW SERVICES

Candidate Name VETERANS VICTORY FUND

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 06 / 15 / 2012

Transaction ID : SB21B.32649

Amount of Each Disbursement this Period: 266.05

Category/Type: 001

B.

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement

Amount of Each Disbursement this Period

Category/Type

C.

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement

Amount of Each Disbursement this Period

Category/Type

SUBTOTAL of Disbursements This Page (optional).....▶	266.05
TOTAL This Period (last page this line number only).....▶	133250.99

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 type="checkbox"/> 22	<input checked="" 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)
VETERANS VICTORY FUND

Full Name (Last, First, Middle Initial)

A. KELLY FOR CONGRESS

Mailing Address PO BOX 89520

City TUCSON State AZ Zip Code 85752

Purpose of Disbursement
POLITICAL CONTRIBUTION

011

Candidate Name
JESSE KELLY

Category/
Type

Office Sought: House
 Senate
 President
State: AZ District: 08

Disbursement For: 2012
 Primary General
 Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	05	/	2012

Transaction ID : SB23.32668

Amount of Each Disbursement this Period

5000.00

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City State Zip Code

Purpose of Disbursement

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
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Amount of Each Disbursement this Period

--

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City State Zip Code

Purpose of Disbursement

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
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Amount of Each Disbursement this Period

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

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

5000.00

5000.00

SCHEDULE C (FEC Form 3X)

LOANS

NAME OF COMMITTEE (In Full) **VETERANS VICTORY FUND** Transaction ID : **SC/10.16702**

LOAN SOURCE Full Name (Last, First, Middle Initial) SCOTT B MACKENZIE	Election: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address 1155 - 15TH STREET NW SUITE 410	
City WASHINGTON State DC ZIP Code 20005	

Original Amount of Loan <input type="text" value="1000.00"/>	Cumulative Payment To Date <input type="text" value="500.00"/>	Balance Outstanding at Close of This Period <input type="text" value="500.00"/>
---	---	--

TERMS

Date Incurred: / / Date Due: Interest Rate: % (apr) Secured: Yes No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>

SUBTOTALS This Period This Page (optional)..... ▶	<input type="text" value="500.00"/>
TOTALS This Period (last page in this line only)..... ▶	<input type="text" value="500.00"/>

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 77 OF 79
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)
VETERANS VICTORY FUND

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor BASE CONNECT INC	Nature of Debt (Purpose): DIRECT MAIL - CREATIVE
Mailing Address 1155 - 15TH STREET NW SUITE 410	
City State Zip Code WASHINGTON DC 20005	

Outstanding Balance Beginning This Period <input type="text" value="16567.85"/>	Transaction ID : SD10.16813	
Amount Incurred This Period <input type="text" value="28719.47"/>	Payment This Period <input type="text" value="11051.82"/>	Outstanding Balance at Close of This Period <input type="text" value="34235.50"/>

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor CENTURY DATA SYSTEMS CORP	Nature of Debt (Purpose): DATA PROCESSING
Mailing Address 1155 - 15TH STREET NW SUITE 410	
City State Zip Code WASHINGTON DC 20005	

Outstanding Balance Beginning This Period <input type="text" value="3953.15"/>	Transaction ID : SD10.16814	
Amount Incurred This Period <input type="text" value="2536.20"/>	Payment This Period <input type="text" value="5086.25"/>	Outstanding Balance at Close of This Period <input type="text" value="1403.10"/>

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor CONSOLIDATED MAILING SERVICES	Nature of Debt (Purpose): DIRECT MAIL - PRINTING & MAILSHOP
Mailing Address 504 SHAW RD SUITE 206	
City State Zip Code STERLING VA 20166	

Outstanding Balance Beginning This Period <input type="text" value="15370.54"/>	Transaction ID : SD10.16815	
Amount Incurred This Period <input type="text" value="21647.66"/>	Payment This Period <input type="text" value="15370.54"/>	Outstanding Balance at Close of This Period <input type="text" value="21647.66"/>

1) SUBTOTALS This Period This Page (optional)..... ▶	<input type="text" value="57286.26"/>
2) TOTALS This Period (last page this line number only)..... ▶	<input type="text"/>
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) ▶	<input type="text"/>
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	<input type="text"/>

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 78 OF 79
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)
VETERANS VICTORY FUND

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor GRAPHICS INNOVATIONS	Nature of Debt (Purpose): DIRECT MAIL - PRINTING & ESCROW
Mailing Address 8000 VILLA PARK DR	
City State Zip Code RICHMOND VA 23228	

Outstanding Balance Beginning This Period <input type="text" value="5804.04"/>	Transaction ID : SD10.16950	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="5804.04"/>	Outstanding Balance at Close of This Period <input type="text" value="0.00"/>

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor INTEGRAM	Nature of Debt (Purpose): DIRECT MAIL - PRINTING & MAILSHOP
Mailing Address 8421 HILLTOP RD	
City State Zip Code FAIRFAX VA 22031	

Outstanding Balance Beginning This Period <input type="text" value="7110.00"/>	Transaction ID : SD10.16949	
Amount Incurred This Period <input type="text" value="15967.99"/>	Payment This Period <input type="text" value="7110.00"/>	Outstanding Balance at Close of This Period <input type="text" value="15967.99"/>

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor LEGACY LIST MARKETING INC	Nature of Debt (Purpose): LIST RENTALS
Mailing Address 1155 - 15TH STREET NW SUITE 410	
City State Zip Code WASHINGTON DC 20005	

Outstanding Balance Beginning This Period <input type="text" value="4502.70"/>	Transaction ID : SD10.16860	
Amount Incurred This Period <input type="text" value="5512.73"/>	Payment This Period <input type="text" value="4502.70"/>	Outstanding Balance at Close of This Period <input type="text" value="5512.73"/>

1) SUBTOTALS This Period This Page (optional)..... ▶	<input type="text" value="21480.72"/>
2) TOTALS This Period (last page this line number only)..... ▶	<input type="text"/>
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) ▶	<input type="text"/>
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	<input type="text"/>

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 79 OF 79
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)
VETERANS VICTORY FUND

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor MACKENZIE & COMPANY	Nature of Debt (Purpose): CONSULTING - COMPLIANCE
Mailing Address 2276 S ARLINGTON MILL DR #806	
City State Zip Code ARLINGTON VA 22206	

Outstanding Balance Beginning This Period <input type="text" value="7500.00"/>	Transaction ID : SD10.32584	
Amount Incurred This Period <input type="text" value="17500.00"/>	Payment This Period <input type="text" value="15000.00"/>	Outstanding Balance at Close of This Period <input type="text" value="10000.00"/>

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor	Nature of Debt (Purpose):
Mailing Address	
City State Zip Code	

Outstanding Balance Beginning This Period <input type="text"/>		
Amount Incurred This Period <input type="text"/>	Payment This Period <input type="text"/>	Outstanding Balance at Close of This Period <input type="text"/>

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor	Nature of Debt (Purpose):
Mailing Address	
City State Zip Code	

Outstanding Balance Beginning This Period <input type="text"/>		
Amount Incurred This Period <input type="text"/>	Payment This Period <input type="text"/>	Outstanding Balance at Close of This Period <input type="text"/>

1) SUBTOTALS This Period This Page (optional)..... ▶	<input type="text" value="10000.00"/>
2) TOTALS This Period (last page this line number only)..... ▶	<input type="text" value="88766.98"/>
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) ▶	<input type="text" value="500.00"/>
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	<input type="text" value="89266.98"/>