

SUMMARY PAGE
of Receipts and Disbursements

FEC Form 3 (Revised 02/2003)

Page 2

Write or Type Committee Name

Alaska-Arkansas Victory Fund

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

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e)) ...	0.00	154,960.00
(b) Total Contribution Refunds (from Line 20(d)) ..	0.00	0.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)) ...	0.00	154,960.00
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17) ..	4,167.20	15,651.00
(b) Total Offsets to Operating Expenditures (from Line 14) ..	0.00	0.00
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)) ...	4,167.20	15,651.00
8. Cash on Hand at Close of Reporting Period (from Line 27) ..	358.00	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D) ..	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D) ..	0.00	

For further information contact:

Federal Election Commission
999 E Street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3 (Revised 12/2003)

Page 3

Write or Type Committee Name

Alaska-Arkansas Victory Fund

Report Covering the Period: From: MM / DD / YYYY 04 / 01 / 2014 To: MM / DD / YYYY 06 / 30 / 2014

I. RECEIPTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
11. CONTRIBUTIONS (other than loans) FROM:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A)...	0.00	149,460.00
(ii) Unitemized	0.00	0.00
(iii) TOTAL of contributions from individuals .	0.00	149,460.00
(b) Political Party Committees...	0.00	0.00
(c) Other Political Committees (such as PACs)...	0.00	5,500.00
(d) The Candidate	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	0.00	154,960.00
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES ..	500.00	500.00
13. LOANS:		
(a) Made or Guaranteed by the Candidate...	0.00	0.00
(b) All Other Loans...	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b))...	0.00	0.00
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.) ..	0.00	0.00
15. OTHER RECEIPTS (Dividends, Interest, etc.)	0.00	0.00
16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)...	500.00	155,460.00

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DETAILED SUMMARY PAGE
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES ..	4,167.20	15,651.00
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES ..	65.00	139,451.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate ..	0.00	0.00
(b) Of All Other Loans	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)) ..	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees ..	0.00	0.00
(b) Political Party Committees ..	0.00	0.00
(c) Other Political Committees (such as PACs) ..	0.00	0.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)) ..	0.00	0.00
21. OTHER DISBURSEMENTS	0.00	0.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ►	4,232.20	155,102.00

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD ...	4,090.20
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3) ..	500.00
25. SUBTOTAL (add Line 23 and Line 24) ..	4,590.20
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22) ...	4,232.20
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25) ..	358.00

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

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

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

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

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)
Alaska-Arkansas Victory Fund

Full Name (Last, First, Middle Initial)
Mark Pryor for US Senate

A. Mailing Address
PO BOX 2720
City State Zip Code
Little Rock, AR 72203

FEC ID number of contributing federal political committee. **C** C00366401

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
MM / DD / YYYY
04 / 25 / 2014

Amount of Each Receipt this Period
250.00

Transfer back to expenses

Full Name (Last, First, Middle Initial)
Alaskans for Begich 2014

B. Mailing Address
1231 W NORTHERN LTS #605
City State Zip Code
Anchorage, AK 99503

FEC ID number of contributing federal political committee. **C** C00458059

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
MM / DD / YYYY
05 / 19 / 2014

Amount of Each Receipt this Period
250.00

Transfer back to expenses

Full Name (Last, First, Middle Initial)

C. Mailing Address
City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
MM / DD / YYYY

Amount of Each Receipt this Period

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

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

500.00

500.00

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

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

FOR LINE NUMBER:
(check only one)

PAGE 1 OF 2

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Alaska-Arkansas Victory Fund

A. Full Name (Last, First, Middle Initial) Crystal Valet		Date of Disbursement MM / DD / YYYY 04 / 07 / 2014	
Mailing Address 616 W College St		Amount of Each Disbursement this Period 2,451.20	
City State Zip Code Los Angeles, CA 90012		Category/Type <input type="checkbox"/>	
Purpose of Disbursement Parking for Event		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Candidate Name	
B. Full Name (Last, First, Middle Initial) Schimanski & Associates		Date of Disbursement MM / DD / YYYY 05 / 22 / 2014	
Mailing Address 420 C St NE		Amount of Each Disbursement this Period 1,716.00	
City State Zip Code Washington, DC 20002		Category/Type <input type="checkbox"/>	
Purpose of Disbursement Reimburse Travel		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Candidate Name	
C. Full Name (Last, First, Middle Initial) Delta Airlines		Date of Disbursement MM / DD / YYYY 05 / 22 / 2014	
Mailing Address 1030 Delta Blvd		Amount of Each Disbursement this Period MEMO 1,045.00	
City State Zip Code Atlanta, GA 30320		Category/Type <input type="checkbox"/>	
Purpose of Disbursement Travel		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Candidate Name	
SUBTOTAL of Disbursements This Page (optional)		4,167.20	
TOTAL This Period (last page this line number only)		(Empty box)	

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

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

FOR LINE NUMBER:
(check only one)

PAGE 2 OF 2

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Alaska-Arkansas Victory Fund

A.

Full Name (Last, First, Middle Initial)
United Airlines

Mailing Address
PO Box 66100

City Chicago, IL State IL Zip Code 60666

Purpose of Disbursement
Travel

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement
MEMO / DD / YYYY
05 / 22 / 2014

Amount of Each Disbursement this Period
MEMO 670.00

Category/Type

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
MEMO / DD / YYYY

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
MEMO / DD / YYYY

Amount of Each Disbursement this Period

Category/Type

SUBTOTAL of Disbursements This Page (optional)..... 0.00

TOTAL This Period (last page this line number only)..... 4,167.20

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1 OF 1
	<input type="checkbox"/> 17 20a <input checked="" type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
Alaska-Arkansas Victory Fund

A. Full Name (Last, First, Middle Initial) Mark Pryor for US Senate		Date of Disbursement MM / DD / YYYY 05 / 22 / 2014	
Mailing Address PO BOX 2720		Amount of Each Disbursement this Period 65.00	
City Little Rock, AR 72203		Category/ Type	
Purpose of Disbursement Transfer		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Candidate Name Mark Pryor		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	
State: AR District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

B. Full Name (Last, First, Middle Initial)		Date of Disbursement MM / DD / YYYY	
Mailing Address		Amount of Each Disbursement this Period	
City State Zip Code		Category/ Type	
Purpose of Disbursement		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Candidate Name		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

C. Full Name (Last, First, Middle Initial)		Date of Disbursement MM / DD / YYYY	
Mailing Address		Amount of Each Disbursement this Period	
City State Zip Code		Category/ Type	
Purpose of Disbursement		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Candidate Name		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

SUBTOTAL of Disbursements This Page (optional).....	65.00
TOTAL This Period (last page this line number only).....	4,167.20

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JANECY ERICKSON
SECRETARY

DANA K. MCCALLUM
SUPERINTENDENT
HART SENATE OFFICE BUILDING
SUITE 232
WASHINGTON, DC 20510-7101
PHONE (202) 224-0322

United States Senate

OFFICE OF THE SECRETARY

OFFICE OF PUBLIC RECORDS

THE PRECEDING DOCUMENT WAS:

HAND DELIVERED _____

Date of Receipt

7-11-14

USPS FIRST CLASS MAIL _____

Postmark

USPS REGISTERED/CERTIFIED _____

Postmark

USPS PRIORITY MAIL _____

Postmark

DELIVERY CONFIRMATION OR SIGNATURE CONFIRMATION LABEL

USPS EXPRESS MAIL _____

Postmark

OVERNIGHT DELIVERY SERVICE:

SHIPPING DATE

NEXT BUSINESS DAY DELIVERY

FEDERAL EXPRESS _____

UPS _____

DEL _____

AIRBORNE EXPRESS _____

RECEIVED FROM FEDERAL ELECTION COMMISSION _____

Date of Receipt

POSTMARK ILLEGIBLE

NO POSTMARK

FAX _____

Date of Receipt

OTHER _____

Date of Receipt or Postmark

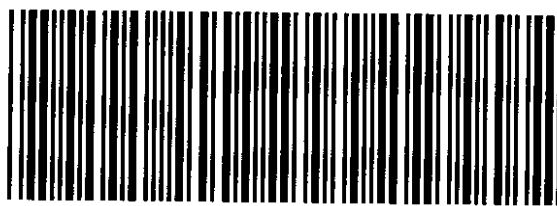
PREPARER

DH

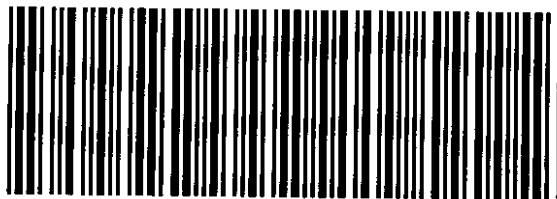
DATE PREPARED

7-11-14

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SEN PATCH



SEN PATCH

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