

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines. 12FE4M5

Swing State Victory Fund

ADDRESS (number and street) PO Box 8102

Check if different than previously reported. (ACC) Chicago IL 60680

2. FEC IDENTIFICATION NUMBER ▼ CITY ▲ STATE ▲ ZIP CODE ▲

C C00507830

3. IS THIS REPORT NEW (N) OR AMENDED (A)

4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

- April 15 Quarterly Report (Q1)
- July 15 Quarterly Report (Q2)
- October 15 Quarterly Report (Q3)
- January 31 Year-End Report (YE)
- July 31 Mid-Year Report (Non-election Year Only) (MY)
- Termination Report (TER)

- (b) Monthly Report Due On:
- Feb 20 (M2) May 20 (M5) Aug 20 (M8) Nov 20 (M11) (Non-Election Year Only)
 - Mar 20 (M3) Jun 20 (M6) Sep 20 (M9) Dec 20 (M12) (Non-Election Year Only)
 - Apr 20 (M4) Jul 20 (M7) Oct 20 (M10) Jan 31 (YE)

- (c) 12-Day PRE-Election Report for the:
- Primary (12P) General (12G) Runoff (12R)
 - Convention (12C) Special (12S)

Election on 11 / 06 / 2012 in the State of IL

- (d) 30-Day POST-Election Report for the:
- General (30G) Runoff (30R) Special (30S)

Election on / / in the State of

5. Covering Period 10 / 01 / 2012 through 10 / 17 / 2012

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Ann Marie Habershaw

Signature of Treasurer Ann Marie Habershaw [Electronically Filed] Date 10 / 25 / 2012

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

Office Use Only									
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**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

Swing State 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"/>		1301564.99
(b) Cash on Hand at Beginning of Reporting Period.....	711272.26	
(c) Total Receipts (from Line 19)	140986.50	3152593.75
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	852258.76	4454158.74
7. Total Disbursements (from Line 31).....	81327.08	3683227.06
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	770931.68	770931.68
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	

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

Swing State 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).....	137750.00	3146173.00
(ii) Unitemized	3236.50	6420.75
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	140986.50	3152593.75
(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)	140986.50	3152593.75
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))..... ▶	140986.50	3152593.75
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	140986.50	3152593.75

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

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	2139.27	73555.68
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	2139.27	73555.68
22. Transfers to Affiliated/Other Party Committees.....	59187.81	3452856.38
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	20000.00	156815.00
(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)).....	20000.00	156815.00
29. Other Disbursements	0.00	0.00
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	81327.08	3683227.06
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	81327.08	3683227.06

DETAILED SUMMARY PAGE
of Disbursements

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Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	140986.50	3152593.75
34. Total Contribution Refunds (from Line 28(d))	20000.00	156815.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	120986.50	2995778.75
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	2139.27	73555.68
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	2139.27	73555.68

**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 21
	<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)
Swing State Victory Fund

Full Name (Last, First, Middle Initial) A. Christopher Austin		Date of Receipt
Mailing Address 43 Rankin Ave		<input type="text" value="10"/> / <input type="text" value="04"/> / <input type="text" value="2012"/>
City	State	Zip Code
East Longmeadow	MA	01028
FEC ID number of contributing federal political committee.		Transaction ID : C23968878
<input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="250.00"/>
Name of Employer	Occupation	
Integralis	Software Architect	
Receipt For: 2012	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	<input type="text" value="250.00"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Matthew Danahy		Date of Receipt
Mailing Address 705 S Boulevard		<input type="text" value="10"/> / <input type="text" value="17"/> / <input type="text" value="2012"/>
City	State	Zip Code
Tampa	FL	33606-2902
FEC ID number of contributing federal political committee.		Transaction ID : C26458624
<input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="250.00"/>
Name of Employer	Occupation	
Danahy and Murray PA	Attorney	
Receipt For: 2012	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	<input type="text" value="250.00"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Marvella Ford		Date of Receipt
Mailing Address 150 Bee St Apt 403		<input type="text" value="10"/> / <input type="text" value="17"/> / <input type="text" value="2012"/>
City	State	Zip Code
Charleston	SC	29401
FEC ID number of contributing federal political committee.		Transaction ID : C26609285
<input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="500.00"/>
Name of Employer	Occupation	
Medical University of South Carolina	Associate Director/Associate Professor	
Receipt For: 2012	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	<input type="text" value="500.00"/>	
<input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="1000.00"/>
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 7 OF 21
(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)
Swing State Victory Fund

Full Name (Last, First, Middle Initial)
A. Ben Green

Mailing Address 2257 Ash St

City State Zip Code
Denver CO 80207

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

Name of Employer Occupation
Self-Employed Psychiatrist

Receipt For: 2012
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
10 / 09 / 2012

Transaction ID : C25062066

Amount of Each Receipt this Period
1000.00

Full Name (Last, First, Middle Initial)
B. Elane Hoffman

Mailing Address 2116 Country Hill Ln

City State Zip Code
Los Angeles CA 90049-6822

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

Name of Employer Occupation
Cherbo Publishing Group Publisher

Receipt For: 2012
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
10 / 01 / 2012

Transaction ID : C23770666

Amount of Each Receipt this Period
1000.00

Full Name (Last, First, Middle Initial)
c. Carolyn E. Kaupp

Mailing Address 104 Brook St

City State Zip Code
Willow Grove PA 19090-2102

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

Name of Employer Occupation
SymphonyIRI Group Consultant

Receipt For: 2012
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
10 / 17 / 2012

Transaction ID : C26475699

Amount of Each Receipt this Period
1000.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 3000.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 OF 21
	<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)
Swing State Victory Fund

Full Name (Last, First, Middle Initial) A. Lisa Kleissner		Date of Receipt 10 / 05 / 2012 Transaction ID : C24090186
Mailing Address 707 Grant St Ste 1140		Amount of Each Receipt this Period 25000.00
City Pittsburgh	State PA	
Zip Code 15219		Aggregate Year-to-Date ▼ 25000.00
FEC ID number of contributing federal political committee. C		
Name of Employer Self-Employed	Occupation Philanthropist	
Receipt For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. James B. Klutznick		Date of Receipt 10 / 04 / 2012 Transaction ID : C23997221
Mailing Address 1260 N Astor St		Amount of Each Receipt this Period 2500.00
City Chicago	State IL	
Zip Code 60610-2308		Aggregate Year-to-Date ▼ 2500.00
FEC ID number of contributing federal political committee. C		
Name of Employer Senoir Lifestyle Corporation	Occupation Real Estate	
Receipt For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Michael Lynn		Date of Receipt 10 / 17 / 2012 Transaction ID : C26358712
Mailing Address 4523 West Lawther		Amount of Each Receipt this Period 1500.00
City Dallas	State TX	
Zip Code 75214		Aggregate Year-to-Date ▼ 1500.00
FEC ID number of contributing federal political committee. C		
Name of Employer Lynn Tillotson Pinker Cox	Occupation Attorney	
Receipt For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional).....▶	29000.00
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 21
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Swing State Victory Fund

A. Rick Marcena
 Full Name (Last, First, Middle Initial)
 Mailing Address 4821 NE 16th Ave
 City State Zip Code
 Oakland Park FL 33334-5607
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Entertainment Partners Accountant
 Receipt For: 2012
 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
 10 / 02 / 2012
Transaction ID : C23812924
 Amount of Each Receipt this Period
 250.00

B. Barry Mintzer
 Full Name (Last, First, Middle Initial)
 Mailing Address 40 Coppermine Rd
 City State Zip Code
 Concord MA 01742-5213
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Posternak Attorney
 Receipt For: 2012
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 17 / 2012
Transaction ID : C26325886
 Amount of Each Receipt this Period
 1000.00

C. Muckleshoot Indian Tribe
 Full Name (Last, First, Middle Initial)
 Mailing Address 39015 172nd Ave SE
 City State Zip Code
 Auburn WA 98092-9763
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 NA NA
 Receipt For: 2012
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 54800.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 05 / 2012
Transaction ID : C24090188
 Amount of Each Receipt this Period
 54800.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 56050.00
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 10 OF 21
	<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)
Swing State Victory Fund

Full Name (Last, First, Middle Initial) A. Ho-Chunk Nation		Date of Receipt
Mailing Address PO Box 640		<input type="text" value="10"/> / <input type="text" value="12"/> / <input type="text" value="2012"/>
City State Zip Code Black River Falls WI 54615-0640		Transaction ID : C25779908
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period <input type="text" value="43300.00"/>
Name of Employer NA	Occupation NA	
Receipt For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="105000.00"/>	

Full Name (Last, First, Middle Initial) B. Andrew S. Paul		Date of Receipt
Mailing Address 1275 King Street		<input type="text" value="10"/> / <input type="text" value="09"/> / <input type="text" value="2012"/>
City State Zip Code Greenwich CT 06831-2936		Transaction ID : C25056143
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period <input type="text" value="1000.00"/>
Name of Employer Tudor Investment	Occupation Lawyer	
Receipt For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="1000.00"/>	

Full Name (Last, First, Middle Initial) C. Cynthia Fein Rabkin		Date of Receipt
Mailing Address 60 EDGEWATER DR APT 705		<input type="text" value="10"/> / <input type="text" value="12"/> / <input type="text" value="2012"/>
City State Zip Code CORAL GABLES FL 33133		Transaction ID : C25781123
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period <input type="text" value="500.00"/>
Name of Employer Not Employed	Occupation Retired	
Receipt For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="500.00"/>	

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="44800.00"/>
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: (check only one)	PAGE 11 OF 21
	<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)
Swing State Victory Fund

A. Steven Riggall
 Full Name (Last, First, Middle Initial)
 Mailing Address 4826 State Route 158
 City New Wilmington State PA Zip Code 16142-3408
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Sharon Regional Health System Occupation Physician
 Receipt For: 2012
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 16 / 2012
Transaction ID : C26213095
 Amount of Each Receipt this Period
 300.00

B. Steve Rothsching
 Full Name (Last, First, Middle Initial)
 Mailing Address 5202 E Windrose Dr
 City Scottsdale State AZ Zip Code 85254-4234
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Charles Schwab & Co., Inc. Occupation Product Manager
 Receipt For: 2012
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 1250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 04 / 2012
Transaction ID : C23952212
 Amount of Each Receipt this Period
 250.00

C. Steve Rothsching
 Full Name (Last, First, Middle Initial)
 Mailing Address 5202 E Windrose Dr
 City Scottsdale State AZ Zip Code 85254-4234
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Charles Schwab & Co., Inc. Occupation Product Manager
 Receipt For: 2012
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 1250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 10 / 2012
Transaction ID : C25074979
 Amount of Each Receipt this Period
 250.00

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 12 OF 21
<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)
Swing State Victory Fund

Full Name (Last, First, Middle Initial) A. Steve Rothsching		Date of Receipt M M / D D / Y Y Y Y Y 10 / 17 / 2012 Transaction ID : C26649694
Mailing Address 5202 E Windrose Dr		Amount of Each Receipt this Period 500.00
City Scottsdale	State AZ	Zip Code 85254-4234
FEC ID number of contributing federal political committee. C		
Name of Employer Charles Schwab & Co., Inc.	Occupation Product Manager	
Receipt For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1250.00	

Full Name (Last, First, Middle Initial) B. Hector Sosa		Date of Receipt M M / D D / Y Y Y Y Y 10 / 09 / 2012 Transaction ID : C24651690
Mailing Address 296 Broad Avenue		Amount of Each Receipt this Period 300.00
City Leonia	State NJ	Zip Code 07605
FEC ID number of contributing federal political committee. C		
Name of Employer Instrumentation Laboratory	Occupation Machinist/Mechanic	
Receipt For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

Full Name (Last, First, Middle Initial) c. James L. Svajgl		Date of Receipt M M / D D / Y Y Y Y Y 10 / 16 / 2012 Transaction ID : C26198866
Mailing Address 555 W Briar Pl Apt 302		Amount of Each Receipt this Period 250.00
City Chicago	State IL	Zip Code 60657-4626
FEC ID number of contributing federal political committee. C		
Name of Employer Segal McCambridge Singer and Mahoney	Occupation Attorney	
Receipt For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

SUBTOTAL of Receipts This Page (optional).....▶	1050.00
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 21
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Swing State Victory Fund

Full Name (Last, First, Middle Initial)
A. Karen Swartz

Mailing Address 102 NE 2nd Street
#122

City Boca Raton State FL Zip Code 33432-3908

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

Name of Employer Self Occupation Photographer

Receipt For: 2012
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 17 / 2012
Transaction ID : C26307496

Amount of Each Receipt this Period
1000.00

Full Name (Last, First, Middle Initial)
B. Marilyn Teitelbaum

Mailing Address 4909 Laclede Ave
Unit 1401

City Saint Louis State MO Zip Code 63108-1426

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

Name of Employer Schuchat Cook and Werner Occupation Attorney

Receipt For: 2012
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 17 / 2012
Transaction ID : C26355980

Amount of Each Receipt this Period
250.00

Full Name (Last, First, Middle Initial)
C. Kirk Tracey

Mailing Address 15304 Anita Catrina Ct

City Bakersfield State CA Zip Code 93314-8437

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

Name of Employer Kirk Tracey Occupation Lawyer

Receipt For: 2012
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 17 / 2012
Transaction ID : C26351336

Amount of Each Receipt this Period
250.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 1500.00

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 21
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Swing State Victory Fund

Full Name (Last, First, Middle Initial)
A. Melissa C. Tufts

Mailing Address 3224 Transco Rd.

City State Zip Code
Comer GA 30629

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

Name of Employer Occupation
University of Georgia Librarian/Landscape Designer

Receipt For: 2012
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 17 / 2012
Transaction ID : C26459174

Amount of Each Receipt this Period
250.00

Full Name (Last, First, Middle Initial)
B. Wilson Weaver II

Mailing Address 3630 Spaulding Dr

City State Zip Code
Winston Salem NC 27105-4831

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

Name of Employer Occupation
City of Winston-Salem, NC Police Lieutenant

Receipt For: 2012
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 17 / 2012
Transaction ID : C26406767

Amount of Each Receipt this Period
300.00

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) ▼

Aggregate Year-to-Date ▼

Date of Receipt
 M M / D D / Y Y Y Y

Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional).....▶	550.00
TOTAL This Period (last page this line number only).....▶	137750.00

**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)
Swing State Victory Fund

Full Name (Last, First, Middle Initial)

A. American Express

Mailing Address P.O Box 36001

City Fort Lauderdale State FL Zip Code 33337

Purpose of Disbursement
Revenue Processing Fees

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
10 / 02 / 2012

Transaction ID : SB21B-196

Amount of Each Disbursement this Period

267.80

Full Name (Last, First, Middle Initial)

B. Cybersource Accounts Receivable

Mailing Address PO Box 742842

City Los Angeles State CA Zip Code 90074

Purpose of Disbursement
Revenue Processing Fees

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
10 / 02 / 2012

Transaction ID : SB21B-178

Amount of Each Disbursement this Period

20.37

Full Name (Last, First, Middle Initial)

C. American Express

Mailing Address P.O Box 36001

City Fort Lauderdale State FL Zip Code 33337

Purpose of Disbursement
Revenue Processing Fees

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
10 / 04 / 2012

Transaction ID : SB21B-185

Amount of Each Disbursement this Period

15.60

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

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

303.77

**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)
Swing State Victory Fund

Full Name (Last, First, Middle Initial)

A. American Express

Mailing Address P.O Box 36001

City Fort Lauderdale State FL Zip Code 33337

Purpose of Disbursement
Revenue Processing Fees

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
10 / 05 / 2012

Transaction ID : SB21B-207

Amount of Each Disbursement this Period

-442.00

Full Name (Last, First, Middle Initial)

B. American Express

Mailing Address P.O Box 36001

City Fort Lauderdale State FL Zip Code 33337

Purpose of Disbursement
Revenue Processing Fees

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
10 / 08 / 2012

Transaction ID : SB21B-186

Amount of Each Disbursement this Period

9.75

Full Name (Last, First, Middle Initial)

C. American Express

Mailing Address P.O Box 36001

City Fort Lauderdale State FL Zip Code 33337

Purpose of Disbursement
Revenue Processing Fees

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
10 / 10 / 2012

Transaction ID : SB21B-197

Amount of Each Disbursement this Period

0.65

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

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

-431.60

**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)
Swing State Victory Fund

Full Name (Last, First, Middle Initial)

A. Cybersource Accounts Receivable

Mailing Address PO Box 742842

City Los Angeles State CA Zip Code 90074

Purpose of Disbursement
Credit Card Fees

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
10 / 12 / 2012

Transaction ID : SB21B-188

Amount of Each Disbursement this Period

500.05

Full Name (Last, First, Middle Initial)

B. Merkle Responsive Services, In

Mailing Address 100 Jamison Court

City Hagerstown State MD Zip Code 21740

Purpose of Disbursement
Credit Card Fees

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
10 / 12 / 2012

Transaction ID : SB21B-189

Amount of Each Disbursement this Period

1.49

Full Name (Last, First, Middle Initial)

C. Merkle Responsive Services, In

Mailing Address 100 Jamison Court

City Hagerstown State MD Zip Code 21740

Purpose of Disbursement
Revenue Processing Fees

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
10 / 12 / 2012

Transaction ID : SB21B-190

Amount of Each Disbursement this Period

17.62

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

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

519.16

**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)
Swing State Victory Fund

Full Name (Last, First, Middle Initial)

A. American Express

Mailing Address P.O Box 36001

City Fort Lauderdale State FL Zip Code 33337

Purpose of Disbursement
Revenue Processing Fees

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

M M / D D / Y Y Y Y Y
10 / 12 / 2012

Transaction ID : SB21B-192

Amount of Each Disbursement this Period

3.90

Full Name (Last, First, Middle Initial)

B. American Express

Mailing Address P.O Box 36001

City Fort Lauderdale State FL Zip Code 33337

Purpose of Disbursement
Revenue Processing Fees

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

M M / D D / Y Y Y Y Y
10 / 13 / 2012

Transaction ID : SB21B-198

Amount of Each Disbursement this Period

26.00

Full Name (Last, First, Middle Initial)

C. Bank of America

Mailing Address P.O. Box 27025

City Richmond State VA Zip Code 23261

Purpose of Disbursement
Bank Charges/Fees

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

M M / D D / Y Y Y Y Y
10 / 15 / 2012

Transaction ID : SB21B-191

Amount of Each Disbursement this Period

1707.80

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

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

1737.70

**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)
Swing State Victory Fund

Full Name (Last, First, Middle Initial)

A. American Express

Mailing Address P.O Box 36001

City Fort Lauderdale State FL Zip Code 33337

Purpose of Disbursement
Revenue Processing Fees

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y
10 / 16 / 2012

Transaction ID : SB21B-193

Amount of Each Disbursement this Period

6.50

Full Name (Last, First, Middle Initial)

B. American Express

Mailing Address P.O Box 36001

City Fort Lauderdale State FL Zip Code 33337

Purpose of Disbursement
Revenue Processing Fees

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y
10 / 17 / 2012

Transaction ID : SB21B-194

Amount of Each Disbursement this Period

3.74

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

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

Amount of Each Disbursement this Period

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

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

10.24

2139.27

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Swing State Victory Fund

Full Name (Last, First, Middle Initial)

A. New Hampshire Democratic Party

Mailing Address 2 1/2 Beacon St.

City Concord State NH Zip Code 03301

Purpose of Disbursement
Transfers to Affiliates

Candidate Name
New Hampshire Democratic Party

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

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			01			2012			

Transaction ID : SB22-177

Amount of Each Disbursement this Period

5	9	1	8	7	.	8	1
---	---	---	---	---	---	---	---

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

M	M	/	D	D	/	Y	Y	Y	Y

Amount of Each Disbursement this Period

--	--	--	--	--	--	--	--

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

M	M	/	D	D	/	Y	Y	Y	Y

Amount of Each Disbursement this Period

--	--	--	--	--	--	--	--

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

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

5	9	1	8	7	.	8	1
---	---	---	---	---	---	---	---

5	9	1	8	7	.	8	1
---	---	---	---	---	---	---	---

**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 type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input checked="" 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)
Swing State Victory Fund

Full Name (Last, First, Middle Initial)

A. Steven Berkson

Mailing Address 185 Heathcote Rd

City Scarsdale State NY Zip Code 10583

Purpose of Disbursement
Contribution Refund

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For: 2012
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y
10 / 02 / 2012

Transaction ID : D66050

Amount of Each Disbursement this Period

20000.00

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

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

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

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

Amount of Each Disbursement this Period

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

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

20000.00

20000.00