

# 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**  
Kelly Victory Fund

ADDRESS (number and street) 901 N. Washington St, Suite 700  
Check if different than previously reported. (ACC) Alexandria VA 22314

2. FEC IDENTIFICATION NUMBER ▼ CITY ▲ STATE ▲ ZIP CODE ▲  
**C** C00572834 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 MM/DD/YYYY in the State of  
(d) 30-Day POST-Election Report for the:  
 General (30G)  Runoff (30R)  Special (30S)  
Election on 11/08/2016 in the State of NH

5. Covering Period MM/DD/YYYY through MM/DD/YYYY  
10/20/2016 through 11/28/2016

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.  
Koch, Theodore V., , ,  
Type or Print Name of Treasurer

Signature of Treasurer Koch, Theodore V., , , [Electronically Filed] Date 12/08/2016

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 52 U.S.C. § 30109.

**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 05/2016)

Page 2

Write or Type Committee Name

**Kelly 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="2016"/>		22985.00
(b) Cash on Hand at Beginning of Reporting Period.....	11202.66	
(c) Total Receipts (from Line 19) .....	18500.00	259250.00
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	29702.66	282235.00
7. Total Disbursements (from Line 31).....	26992.66	279525.00
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	2710.00	2710.00
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	
10. Debts and Obligations Owed <b>BY</b> 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

Write or Type Committee Name

**Kelly 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).....	18500.00	252700.00
(ii) Unitemized .....	0.00	550.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	18500.00	253250.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	6000.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) .....	18500.00	259250.00
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received .....	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	0.00	0.00
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)).....▶	18500.00	259250.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	18500.00	259250.00

**DETAILED SUMMARY PAGE**

of Disbursements

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share .....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures .....	4249.50	53523.24
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	4249.50	53523.24
22. Transfers to Affiliated/Other Party Committees.....	19743.16	217601.76
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 (52 U.S.C. § 30116(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 .....	3000.00	8400.00
(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)).....	3000.00	8400.00
29. Other Disbursements (Including Non-Federal Donations).....	0.00	0.00
30. Federal Election Activity (52 U.S.C. § 30101(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)) ..	26992.66	279525.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	26992.66	279525.00

**DETAILED SUMMARY PAGE**  
of Disbursements

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Page 5

<b>III. Net Contributions/ Operating Expenditures</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Calendar Year-to-Date</b>
33. Total Contributions (other than loans) (from Line 11(d), page 3) .....	18500.00	259250.00
34. Total Contribution Refunds (from Line 28(d)) .....	3000.00	8400.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	15500.00	250850.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	4249.50	53523.24
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	4249.50	53523.24

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 6 OF 11
	(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)  
**Kelly Victory Fund**

**A. Collins, Genevieve, D., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 720 Wild Valley Dr  
 City Dallas State TX Zip Code 75231  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) IStation Occupation (for Individual) SVP, Managing Dir. of Sales  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 2700.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 25 / 2016  
**Transaction ID : SA11AI.4367**  
 Amount of Each Receipt this Period  
 2700.00  
 Memo Item

**B. Slusky, Alexander, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1 Market St, Steuart Tower, #2300  
 City San Francisco State CA Zip Code 94105  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Vector Capital Occupation (for Individual) Finance  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 2700.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 21 / 2016  
**Transaction ID : SA11AI.4363**  
 Amount of Each Receipt this Period  
 2700.00  
 Memo Item

**C. Slusky, Danna, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1 Market St, Steuart Tower, #2300  
 City San Francisco State CA Zip Code 94105  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Homemaker Occupation (for Individual) Homemaker  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 2700.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 21 / 2016  
**Transaction ID : SA11AI.4365**  
 Amount of Each Receipt this Period  
 2700.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	8100.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

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

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NAME OF COMMITTEE (In Full)  
**Kelly Victory Fund**

**A. White, Robert, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 23 Chadwick Rd  
 City Weston State MA Zip Code 02493  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Harvard Occupation (for Individual) Educator  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 7700.00

Date of Receipt 10 / 26 / 2016  
**Transaction ID : SA11AI.4371**  
 Amount of Each Receipt this Period 7700.00  
 Memo Item

**B. White, Tona, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 23 Chadwick Rd  
 City Weston State MA Zip Code 02493  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Homemaker Occupation (for Individual) Homemaker  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 2700.00

Date of Receipt 10 / 26 / 2016  
**Transaction ID : SA11AI.4373**  
 Amount of Each Receipt this Period 2700.00  
 Memo Item

**C.**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address  
 City State Zip Code  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Occupation (for Individual)  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼

Date of Receipt  
 Amount of Each Receipt this Period  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	10400.00
<b>TOTAL</b> This Period (last page this line number only).....	18500.00

**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"/>	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)  
**Kelly Victory Fund**

Full Name (Last, First, Middle Initial)

**A. Anedot**

Mailing Address 5555 Hilton Ave Ste 106

City Baton Rouge State LA Zip Code 70808

Purpose of Disbursement  
JFC Credit Card Processing

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
10 / 24 / 2016

FEC Identification Number

C

**Transaction ID : SB21B.4377**

Amount of Each Disbursement this Period

180.60

Memo Item

Full Name (Last, First, Middle Initial)

**B. Anedot**

Mailing Address 5555 Hilton Ave Ste 106

City Baton Rouge State LA Zip Code 70808

Purpose of Disbursement  
JFC Credit Card Processing

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify)

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
10 / 27 / 2016

FEC Identification Number

C

**Transaction ID : SB21B.4376**

Amount of Each Disbursement this Period

210.90

Memo Item

Full Name (Last, First, Middle Initial)

**C. Hueter & Associates**

Mailing Address PO Box 8533

City Emeryville State CA Zip Code 94662

Purpose of Disbursement  
JFC Fundraising Consulting

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
11 / 22 / 2016

FEC Identification Number

C

**Transaction ID : SB21B.4380**

Amount of Each Disbursement this Period

790.00

Memo Item

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

1181.50

**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"/> 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)  
**Kelly Victory Fund**

Full Name (Last, First, Middle Initial)

**A. Koch & Hoos, LLC**

Mailing Address 901 N. Washington St, Ste 700

City Alexandria State VA Zip Code 22314

Purpose of Disbursement  
JFC Accounting Consulting

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
11 / 04 / 2016

FEC Identification Number

C  
**Transaction ID : SB21B.4370**  
Amount of Each Disbursement this Period  
1500.00

Memo Item

Full Name (Last, First, Middle Initial)

**B. SCR & Associates LLC**

Mailing Address 100 TradeCenter Suite G-700

City Woburn State MA Zip Code 01801

Purpose of Disbursement  
JFC Fundraising Consulting

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
11 / 04 / 2016

FEC Identification Number

C  
**Transaction ID : SB21B.4369**  
Amount of Each Disbursement this Period  
1565.00

Memo Item

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

MM / DD / YYYY

FEC Identification Number

C  
Amount of Each Disbursement this Period

Memo Item

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

3065.00

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

4246.50

**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"/> 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)  
**Kelly Victory Fund**

**A. FRIENDS OF KELLY AYOTTE, INC.**

Full Name (Last, First, Middle Initial)  
Mailing Address PO BOX 937

City MANCHESTER State NH Zip Code 03105

Purpose of Disbursement  
Transfer of Net Proceeds

Candidate Name  
**AYOTTE, KELLY A, , ,**

Office Sought:  House  Senate  President  
State: NH District: 00

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement  
MM / DD / YYYY  
11 / 07 / 2016

FEC Identification Number  
**C** C00464297  
**Transaction ID : SB22.4378**

Amount of Each Disbursement this Period  
9601.29

Memo Item

**B. KELLY PAC**

Full Name (Last, First, Middle Initial)  
Mailing Address 901 N WASHINGTON STREET SUITE 700

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement  
Transfer of Net Proceeds

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement  
MM / DD / YYYY  
11 / 07 / 2016

FEC Identification Number  
**C** C00493411  
**Transaction ID : SB22.4379**

Amount of Each Disbursement this Period  
10141.87

Memo Item

**C.**

Full Name (Last, First, Middle Initial)  
Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement  
MM / DD / YYYY

FEC Identification Number  
**C**

Amount of Each Disbursement this Period

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 19743.16

**TOTAL** This Period (last page this line number only)..... ▶ 19743.16

**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 type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<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)  
**Kelly Victory Fund**

Full Name (Last, First, Middle Initial)  
**A. Holt, Massey, , ,**

Mailing Address **85 Merrimac St**

City **Boston** State **MA** Zip Code **02114**

Purpose of Disbursement  
**Contribution Refund**

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: **11 / 22 / 2016**

FEC Identification Number: **C**  
**Transaction ID : SB28A.4384**

Amount of Each Disbursement this Period: **400.00**

Memo Item

Full Name (Last, First, Middle Initial)  
**B. Maginn, Robert, A., ,**

Mailing Address **101 Huntington Ave, Ste 2205**

City **Boston** State **MA** Zip Code **02199**

Purpose of Disbursement  
**Contribution Refund**

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: **11 / 22 / 2016**

FEC Identification Number: **C**  
**Transaction ID : SB28A.4382**

Amount of Each Disbursement this Period: **2600.00**

Memo Item

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) ▼

Date of Disbursement: / /

FEC Identification Number: **C**

Amount of Each Disbursement this Period

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ **3000.00**

**TOTAL** This Period (last page this line number only)..... ▶ **3000.00**