

**FEC
FORM 3X**

**REPORT OF RECEIPTS
AND DISBURSEMENTS**
For Other Than An Authorized Committee

SECRETARY OF THE SENATE
11 JAN 31 PM 5:19
Office Use Only

1. NAME OF COMMITTEE (in full) **USE FEC MAILING LABEL OR TYPE OR PRINT** Example: If typing, type over the lines

LEGACY VICTORY FUND

ADDRESS (number and street) 228 S WASHINGTON ST STE 115

Check if different than previously reported. (ACC)

ALEXANDRIA VA 22314

2. FEC IDENTIFICATION NUMBER CITY STATE ZIP CODE

C00485763

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 Quarterly Report(YE)
- July 31 Mid-Year Report(Non-election Year Only) (MY)
- Termination Report (TER)

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

- (c) 12-Day PRE-Election Report for the:
- Primary (12P)
 - Convention (12C)
 - General (12G)
 - Special (12G)
 - Runoff (12R)
- Election on _____ in the State of _____

- (d) 30-Day Post-Election Report for the:
- General (30G)
 - Runoff (30R)
 - Special (30S)
- Election on _____ in the State of _____

5. Covering Period 11 23 2010 through 12 31 2010

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 Lisa Lisker

Signature of Treasurer *Lisa Lisker*

Electronically Filed by Lisa Lisker

Date 01 30 2011

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

FEC FORM 3X
(Rev. 12/2004)

11020040267

SUMMARY PAGE

OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

2 / 12

Write or Type Committee Name
LEGACY VICTORY FUND

Report Covering the Period: From:

M	M
1	1

D	D
2	3

Y	Y	Y	Y
2	0	1	0

 To:

M	M
1	2

D	D
3	1

Y	Y	Y	Y
2	0	1	0

	COLUMN A This Period	COLUMN B Calendar Year-to-Date										
6. (a) Cash on Hand January 1 <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>1</td><td>0</td></tr></table>	Y	Y	Y	Y	2	0	1	0	<table border="1" style="width: 100%;"><tr><td>0.00</td></tr></table>	0.00	<table border="1" style="width: 100%;"><tr><td>0.00</td></tr></table>	0.00
Y	Y	Y	Y									
2	0	1	0									
0.00												
0.00												
(b) Cash on Hand at Beginning of Reporting Period	<table border="1" style="width: 100%;"><tr><td>32565.00</td></tr></table>	32565.00										
32565.00												
(c) Total Receipts (from Line 19)	<table border="1" style="width: 100%;"><tr><td>0.00</td></tr></table>	0.00	<table border="1" style="width: 100%;"><tr><td>1265707.38</td></tr></table>	1265707.38								
0.00												
1265707.38												
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	<table border="1" style="width: 100%;"><tr><td>32565.00</td></tr></table>	32565.00	<table border="1" style="width: 100%;"><tr><td>1265707.38</td></tr></table>	1265707.38								
32565.00												
1265707.38												
7. Total Disbursements (from Line 31)	<table border="1" style="width: 100%;"><tr><td>32565.00</td></tr></table>	32565.00	<table border="1" style="width: 100%;"><tr><td>1265707.38</td></tr></table>	1265707.38								
32565.00												
1265707.38												
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	<table border="1" style="width: 100%;"><tr><td>0.00</td></tr></table>	0.00	<table border="1" style="width: 100%;"><tr><td>0.00</td></tr></table>	0.00								
0.00												
0.00												
9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D)	<table border="1" style="width: 100%;"><tr><td>0.00</td></tr></table>	0.00										
0.00												
10. Debts and Obligations owed BY the committee (Itemize all on Schedule C and/or Schedule D)	<table border="1" style="width: 100%;"><tr><td>0.00</td></tr></table>	0.00										
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)

3 / 12

Write or Type Committee Name
LEGACY VICTORY FUND

Report Covering the Period: From:

M	M
1	1

D	D
2	3

Y	Y	W	Y
2	0	1	0

 To:

M	M
1	2

D	D
3	1

Y	Y	Y	Y
2	0	1	0

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	0.00	1029628.45
(i) Itemized (use Schedule A)	0.00	1000.00
(ii) Unitemized	0.00	1030628.45
(iii) TOTAL (add Lines 11(a)(i) and (ii)	0.00	0.00
(b) Political Party Committees	0.00	235078.93
(c) Other Political Committees (such as PACs)	0.00	1265707.38
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5)	0.00	
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 Transfer (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))	0.00	1265707.38
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	0.00	1265707.38

11020040269

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

4 / 12

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)	0.00	0.00
(i) Federal Share.....		
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures.....	11200.00	234204.81
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶	11200.00	234204.81
22. Transfers to Affiliated/Other Party Committees.....	0.00	1007637.57
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditure (use Schedule E).....	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (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.....	16365.00	18865.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	5000.00	5000.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))..... ▶	21365.00	23865.00
29. Other Disbursements.....	0.00	0.00
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared 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))..	32565.00	1265707.38
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	32565.00	1265707.38

11020040270

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

5 / 12

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)	0.00	1265707.38
34. Total Contribution Refunds (from Line 28(d))	21365.00	23865.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	-21365.00	1241842.38
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	11200.00	234204.81
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	11200.00	234204.81

FE6AN026

11020040271

**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)						PAGE 6 / 12
	<input checked="" type="checkbox"/> 21b <input type="checkbox"/> 27	<input type="checkbox"/> 22 <input type="checkbox"/> 28a	<input type="checkbox"/> 23 <input type="checkbox"/> 28b	<input type="checkbox"/> 24 <input type="checkbox"/> 28c	<input type="checkbox"/> 25 <input type="checkbox"/> 29	<input type="checkbox"/> 26 <input type="checkbox"/> 30b	

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)
LEGACY VICTORY FUND

A.	Full Name (Last, First, Middle Initial) American Express-Merchant	Transaction ID: SB21B.4934 Date of Disbursement MM / DD / YYYY 11 / 23 / 2010
	Mailing Address PO Box 53852	Amount of Each Disbursement this Period 159.45
	City Phoenix State AZ Zip Code 85072	001 Category/ Type
	Purpose of Disbursement Merchant Fee 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) ▼	

B.	Full Name (Last, First, Middle Initial) BB&T	Transaction ID: SB21B.4932 Date of Disbursement MM / DD / YYYY 11 / 23 / 2010
	Mailing Address 1909 K St., NW	Amount of Each Disbursement this Period 503.40
	City Washington State DC Zip Code 20006	001 Category/ Type
	Purpose of Disbursement Merchant Fees 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) BB&T	Transaction ID: SB21B.4928 Date of Disbursement MM / DD / YYYY 12 / 15 / 2010
	Mailing Address 1909 K St., NW	Amount of Each Disbursement this Period 25.95
	City Washington State DC Zip Code 20006	001 Category/ Type
	Purpose of Disbursement Merchant Fees 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)	688.80
TOTAL This Period (last page this line number only)	

11020040272

**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)

PAGE 7 / 12

<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

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)
LEGACY VICTORY FUND

A.	Full Name (Last, First, Middle Initial) BB&T	Transaction ID: SB21B.4930 Date of Disbursement MM / DD / YYYY 12 / 31 / 2010
	Mailing Address 1909 K St., NW	Amount of Each Disbursement this Period 36.90
	City Washington State DC Zip Code 20006	
	Purpose of Disbursement Merchant Fee Candidate Name	001 Category/ Type
	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) ▼
B.	Full Name (Last, First, Middle Initial) Huckaby Davis Lisker Inc.	Transaction ID: SB21B.4936 Date of Disbursement MM / DD / YYYY 12 / 31 / 2010
	Mailing Address 228 S. Washington St., Ste. 115	Amount of Each Disbursement this Period 10474.30
	City Alexandria State VA Zip Code 22314	
	Purpose of Disbursement Accounting/Compliance/Shipping/Postage Candidate Name	001 Category/ Type
	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)

10511.20

TOTAL This Period (last page this line number only)

11200.00

11020040273

**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)						PAGE 8 / 12
	<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 checked="" type="checkbox"/> 27	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b	

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)
LEGACY VICTORY FUND

A. Full Name (Last, First, Middle Initial) Roy C. Coffee, Jr.	Transaction ID: SB28A.4918	
	Date of Disbursement MM / DD / YYYY 12 / 31 / 2010	
Mailing Address 4609 Cole Ave., #170	Amount of Each Disbursement this Period 1000.00	
City Dallas State TX Zip Code 75205	Purpose of Disbursement Refund	
Candidate Name	Category/Type 010	
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:		

B. Full Name (Last, First, Middle Initial) Michael M. Cone	Transaction ID: SB28A.4912	
	Date of Disbursement MM / DD / YYYY 12 / 31 / 2010	
Mailing Address 8715 Stable Crest Blvd.	Amount of Each Disbursement this Period 500.00	
City Houston State TX Zip Code 77024	Purpose of Disbursement Refund	
Candidate Name	Category/Type 010	
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:		

C. Full Name (Last, First, Middle Initial) John W. Elder	Transaction ID: SB28A.4910	
	Date of Disbursement MM / DD / YYYY 12 / 31 / 2010	
Mailing Address 1800 Augusta Dr., Ste. 125	Amount of Each Disbursement this Period 500.00	
City Houston State TX Zip Code 77057	Purpose of Disbursement Refund	
Candidate Name	Category/Type 010	
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)	2000.00
TOTAL This Period (last page this line number only)	

11020040274

**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)

PAGE 9 / 12

21b 22 23 24 25 26
 27 28a 28b 28c 29 30b

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)
LEGACY VICTORY FUND

A.

Full Name (Last, First, Middle Initial)
Maria Esperanza Gelman

Transaction ID: SB28A.4922
Date of Disbursement

Mailing Address 3900 Sundown Dr.

M M / D D / Y Y Y Y
12 / 31 / 2010

City State Zip Code
McAllen TX 78503

Amount of Each Disbursement this Period

Purpose of Disbursement
Refund

010
Category/
Type

2400.00

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For: Primary General
 Other (specify) ▼

B.

Full Name (Last, First, Middle Initial)
Helen K. Groves

Transaction ID: SB28A.4904
Date of Disbursement

Mailing Address 700 N. St. Mary's Ste. 1200

M M / D D / Y Y Y Y
12 / 31 / 2010

City State Zip Code
San Antonio TX 78205

Amount of Each Disbursement this Period

Purpose of Disbursement
Refund

010
Category/
Type

250.00

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For: Primary General
 Other (specify) ▼

C.

Full Name (Last, First, Middle Initial)
Al G. Hill, Jr.

Transaction ID: SB28A.4908
Date of Disbursement

Mailing Address 1601 Elm St., Ste. 4000

M M / D D / Y Y Y Y
12 / 31 / 2010

City State Zip Code
Dallas TX 75201

Amount of Each Disbursement this Period

Purpose of Disbursement
Refund

010
Category/
Type

500.00

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For: Primary General
 Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)

3150.00

TOTAL This Period (last page this line number only)

11020040275

**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)

PAGE 10 / 12

<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

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)
LEGACY VICTORY FUND

A.

Full Name (Last, First, Middle Initial)
George Hixon

Mailing Address 315 E. Commerce St., #300

City San Antonio State TX Zip Code 78205

Purpose of Disbursement Refund

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Transaction ID: SB28A.4914
Date of Disbursement 12 / 31 / 2010

Amount of Each Disbursement this Period 600.00

Category/Type 010

B.

Full Name (Last, First, Middle Initial)
Peter M. Holt

Mailing Address 2191 Little Blanco Rd.

City Blanco State TX Zip Code 78606

Purpose of Disbursement Refund

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Transaction ID: SB28A.4916
Date of Disbursement 12 / 31 / 2010

Amount of Each Disbursement this Period 600.00

Category/Type 010

C.

Full Name (Last, First, Middle Initial)
Brian P. Johnson

Mailing Address 5 Pine Grove Cir.

City Houston State TX Zip Code 77024

Purpose of Disbursement Refund

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Transaction ID: SB28A.4906
Date of Disbursement 12 / 31 / 2010

Amount of Each Disbursement this Period 300.00

Category/Type 010

SUBTOTAL of Disbursements This Page (optional) ▶ 1500.00

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

11020040276

**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)

PAGE 11 / 12

21b 22 23 24 25 26
 27 28a 28b 28c 29 30b

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)
LEGACY VICTORY FUND

A. Full Name (Last, First, Middle Initial) Kenny A. Troutt		Transaction ID: SB28A.4920 Date of Disbursement M M / D D / Y Y Y Y 12 / 31 / 2010	
Mailing Address 10595 Strait Lane		Amount of Each Disbursement this Period 1600.00	
City Dallas State TX Zip Code 75229	Purpose of Disbursement Refund Candidate Name Category/Type 010		
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) ▼		
B. Full Name (Last, First, Middle Initial) Bruce W. Wilkinson		Transaction ID: SB28A.4924 Date of Disbursement M M / D D / Y Y Y Y 12 / 31 / 2010	
Mailing Address 715 Hunters Grove Lane		Amount of Each Disbursement this Period 7800.00	
City Houston State TX Zip Code 77024	Purpose of Disbursement Refund Candidate Name Category/Type 010		
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)	9400.00
TOTAL This Period (last page this line number only)	16050.00

11020040277

**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)

PAGE 12 / 12

<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 type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input checked="" type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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)
LEGACY VICTORY FUND

A.	Full Name (Last, First, Middle Initial) BORDER HEALTH FEDERAL PAC		Transaction ID: SB28C.4926	
	Mailing Address 1210 W EXPRESSWAY 83 SUITE 10		Date of Disbursement M M / D D / Y Y Y Y 12 / 31 / 2010	
City PHARR		State TX	Zip Code 78577	
Purpose of Disbursement Refund			Amount of Each Disbursement this Period 5000.00	
Candidate Name			010 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:				

SUBTOTAL of Disbursements This Page (optional)

5000.00

TOTAL This Period (last page this line number only)

5000.00

11020040278

United States Senate

OFFICE OF THE SECRETARY

OFFICE OF PUBLIC RECORDS

THE PRECEDING DOCUMENT WAS:

HAND DELIVERED 01-31-11
Date of Receipt

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	_____	<input type="checkbox"/>
UPS	_____	<input type="checkbox"/>
DHL	_____	<input type="checkbox"/>
AIRBORNE EXPRESS	_____	<input type="checkbox"/>

RECEIVED FROM FEDERAL ELECTION COMMISSION _____
Date of Receipt

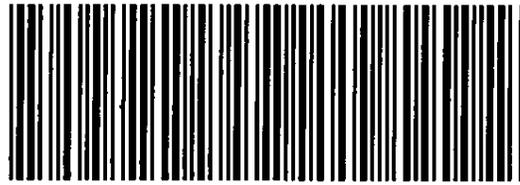
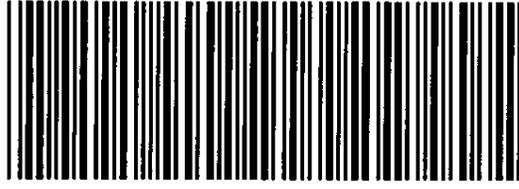
POSTMARK ILLEGIBLE NO POSTMARK

FAX _____
Date of Receipt

OTHER _____
Date of Receipt or Postmark

PREPARER RD DATE PREPARED 01-31-11

11020040279



11020040280