

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.
LCV Victory Fund

ADDRESS (number and street)
Check if different than previously reported. (ACC) Washington DC 20036

2. FEC IDENTIFICATION NUMBER ▼ CITY ▲ STATE ▲ ZIP CODE ▲
 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 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 10 / 16 / 2014 through 11 / 24 / 2014

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 Patrick Collins

Signature of Treasurer Patrick Collins [Electronically Filed] Date 12 / 04 / 2014

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

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name

LCV 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="2014"/>	<input type="text" value=""/>	<input type="text" value="418795.56"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="5423382.09"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="997352.63"/>	<input type="text" value="9310907.86"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<input type="text" value="6420734.72"/>	<input type="text" value="9729703.42"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="5782965.60"/>	<input type="text" value="9091934.30"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="637769.12"/>	<input type="text" value="637769.12"/>
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="920.00"/>	

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

LCV 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).....	807623.45	7077081.78
(ii) Unitemized	187461.55	359440.57
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	995085.00	7436522.35
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	2000.00	1873500.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	997085.00	9310022.35
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.).....	267.63	885.51
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))..... ▶	997352.63	9310907.86
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	997352.63	9310907.86

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	100206.53	180430.24
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	100206.53	180430.24
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	645000.00	1435000.00
24. Independent Expenditures (use Schedule E)	5036811.07	7475268.11
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	948.00	978.00
(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)).....	948.00	978.00
29. Other Disbursements	0.00	257.95
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)) ..	5782965.60	9091934.30
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	5782965.60	9091934.30

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

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)	997085.00	9310022.35
34. Total Contribution Refunds (from Line 28(d))	948.00	978.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	996137.00	9309044.35
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	100206.53	180430.24
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	100206.53	180430.24

**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 183
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
LCV Victory Fund

Full Name (Last, First, Middle Initial)
A. Rosalind Abernathy

Mailing Address 2701 Pickett Rd Apt 2044

City Durham	State NC	Zip Code 27705-5649
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FEC ID number of contributing federal political committee. **C**

Name of Employer Vams	Occupation M.D.
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Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 24 / 2014

Transaction ID : A708FC1A0CAF94FB3B66

Amount of Each Receipt this Period
200.00

Full Name (Last, First, Middle Initial)
B. Jerome Adler

Mailing Address 134 6th Ave

City Brooklyn	State NY	Zip Code 11217-3518
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FEC ID number of contributing federal political committee. **C**

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 02 / 2014

Transaction ID : AB4A6412682104655BBB

Amount of Each Receipt this Period
500.00

Full Name (Last, First, Middle Initial)
C. Christopher Ahrens

Mailing Address 3715 W 65th St

City Mission Hills	State KS	Zip Code 66208-1737
-----------------------	-------------	------------------------

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

Name of Employer Gilmore & Bell, P.C.	Occupation ATTORNEY
--	------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
225.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 26 / 2014

Transaction ID : A41A787F9C3E04378817

Amount of Each Receipt this Period
25.00

SUBTOTAL of Receipts This Page (optional).....▶	725.00
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 7 OF 183
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
LCV Victory Fund

Full Name (Last, First, Middle Initial)
A. Christopher Ahrens
 Mailing Address 3715 W 65th St
 City Mission Hills State KS Zip Code 66208-1737
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Gilmore & Bell, P.C. Occupation ATTORNEY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ **225.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 26 / 2014
Transaction ID : A6F83832294CA408BA00
 Amount of Each Receipt this Period
200.00

Full Name (Last, First, Middle Initial)
B. Juan Albers
 Mailing Address 3 Dorado Bch E
 City Dorado State PR Zip Code 00646-2046
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Desarrollos Insulares Inc. Occupation lawyer
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ **1000.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 21 / 2014
Transaction ID : AB21DD43EB4EF4543967
 Amount of Each Receipt this Period
1000.00

Full Name (Last, First, Middle Initial)
C. Donald Allen
 Mailing Address 61 Pilgrim Path
 City Carlisle State MA Zip Code 01741-1840
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Retired Occupation Retired
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ **250.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 26 / 2014
Transaction ID : A183AF6A87AAE42129BC
 Amount of Each Receipt this Period
250.00

SUBTOTAL of Receipts This Page (optional)..... ▶ **1450.00**
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 OF 183
	<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)
LCV Victory Fund

Full Name (Last, First, Middle Initial) A. Sarah Allen		Date of Receipt 10 / 26 / 2014 Transaction ID : AC92F6DD52D3A4079A75
Mailing Address 705 President St Apt 3		Amount of Each Receipt this Period 250.00
City Brooklyn	State NY	Zip Code 11215-1260
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer KC Arts	Occupation Sales	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

Full Name (Last, First, Middle Initial) B. Nancy Anderson		Date of Receipt 11 / 01 / 2014 Transaction ID : A6D4D2E6601B14151A81
Mailing Address 47 Sturdivant Rd		Amount of Each Receipt this Period 1000.00
City Cumberland Foreside	State ME	Zip Code 04110-1418
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer Retired	Occupation Facilitator	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

Full Name (Last, First, Middle Initial) C. Ronald Applegate		Date of Receipt 10 / 17 / 2014 Transaction ID : ACC54C121B25F493CAC6
Mailing Address 60 Genung Cir		Amount of Each Receipt this Period 250.00
City Ithaca	State NY	Zip Code 14850-8716
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer Cornell University	Occupation Educator	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 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: (check only one)	PAGE 9 OF 183
	<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)
LCV Victory Fund

A. Johnny Armstrong
 Full Name (Last, First, Middle Initial)
 Mailing Address 212 Griffin Rd
 City Ruston State LA Zip Code 71270-1237
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Self Occupation Pathologist
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 22 / 2014
Transaction ID : ADCCAB55B33804564A42
 Amount of Each Receipt this Period
 150.00

B. John Arnsperger
 Full Name (Last, First, Middle Initial)
 Mailing Address 2606 Coastal Oak Dr
 City Houston State TX Zip Code 77059-6448
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Retired Occupation Retired
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 385.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 06 / 2014
Transaction ID : A7995ADA216514312868
 Amount of Each Receipt this Period
 35.00

C. Donald Ayer
 Full Name (Last, First, Middle Initial)
 Mailing Address PO Box 736
 City Delton State MI Zip Code 49046-0736
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Retired Occupation Retired
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 21 / 2014
Transaction ID : AFDFF44C2C8DA4CA1AE3
 Amount of Each Receipt this Period
 500.00

SUBTOTAL of Receipts This Page (optional).....▶	685.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 OF 183
	<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)
LCV Victory Fund

A. Mary BARRETT
Full Name (Last, First, Middle Initial)

Mailing Address 10 Crestmont Rd Apt 4m

City Montclair State NJ Zip Code 07042-1933

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

Name of Employer Self Occupation Psychotherapist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 23 / 2014

Transaction ID : A2AD850BDDC8745B2930

Amount of Each Receipt this Period
 250.00

B. Mary BARRETT
Full Name (Last, First, Middle Initial)

Mailing Address 10 Crestmont Rd Apt 4m

City Montclair State NJ Zip Code 07042-1933

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

Name of Employer Self Occupation Psychotherapist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 275.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 23 / 2014

Transaction ID : AC72C13A5054747C9A4D

Amount of Each Receipt this Period
 25.00

C. Richard Barsanti
Full Name (Last, First, Middle Initial)

Mailing Address 5305 Woodland Ave

City Western Springs State IL Zip Code 60558-1855

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

Name of Employer Self Occupation Salesman

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 21 / 2014

Transaction ID : A3B1CF627F3D54E05B1A

Amount of Each Receipt this Period
 500.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 550.00

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 11 OF 183
<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)
LCV Victory Fund

Full Name (Last, First, Middle Initial) A. Adam Bartolomeo		Date of Receipt
Mailing Address 380 Three Bridges Rd		<input type="text" value="11"/> / <input type="text" value="01"/> / <input type="text" value="2014"/>
City Hillsborough State NJ Zip Code 08844-3238		Transaction ID : A0E4F6032B76449E5B4E
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period <input type="text" value="300.00"/>
Name of Employer Informatica	Occupation Software Developer	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="300.00"/>	

Full Name (Last, First, Middle Initial) B. Anna Beale		Date of Receipt
Mailing Address 323 W Moreland Ave		<input type="text" value="10"/> / <input type="text" value="16"/> / <input type="text" value="2014"/>
City Philadelphia State PA Zip Code 19118-4011		Transaction ID : A59E10327A17B422C880
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period <input type="text" value="400.00"/>
Name of Employer Anna's Acupuncture (self employed)	Occupation Acupuncturist	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="400.00"/>	

Full Name (Last, First, Middle Initial) C. David Becher		Date of Receipt
Mailing Address 1276 Bear Mountain Ct		<input type="text" value="10"/> / <input type="text" value="20"/> / <input type="text" value="2014"/>
City Boulder State CO Zip Code 80305-6204		Transaction ID : A60C5401874274E7D808
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period <input type="text" value="250.00"/>
Name of Employer RRC Associates	Occupation Market Research	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="250.00"/>	

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="950.00"/>
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 12 OF 183
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
LCV Victory Fund

A. Joshua Bekenstein
Full Name (Last, First, Middle Initial)
Mailing Address 52 High Rock Rd
City Wayland State MA Zip Code 01778-3608
FEC ID number of contributing federal political committee. **C**
Name of Employer Bain Capital Occupation Investor
Receipt For: Primary General Other (specify) Aggregate Year-to-Date **1000000.00**

Date of Receipt **11 / 10 / 2014**
Transaction ID : AF6539CA35B424C0796B
Amount of Each Receipt this Period **500000.00**

B. William Belknap
Full Name (Last, First, Middle Initial)
Mailing Address 629 DON VINCENTE DR
City Boulder City State NV Zip Code 89005-3018
FEC ID number of contributing federal political committee. **C**
Name of Employer Retired Occupation Retired
Receipt For: Primary General Other (specify) Aggregate Year-to-Date **250.00**

Date of Receipt **10 / 26 / 2014**
Transaction ID : A3EF801C196DA4CCE840
Amount of Each Receipt this Period **200.00**

c. Mr. George Bentley
Full Name (Last, First, Middle Initial)
Mailing Address 1198 Churchill St
City Saint Paul State MN Zip Code 55103-1011
FEC ID number of contributing federal political committee. **C**
Name of Employer Northern Ingredients Occupation office
Receipt For: Primary General Other (specify) Aggregate Year-to-Date **206.00**

Date of Receipt **10 / 31 / 2014**
Transaction ID : AC2D68BA587C04D6BB69
Amount of Each Receipt this Period **20.00**

SUBTOTAL of Receipts This Page (optional).....	500220.00
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 13 OF 183
	<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)
LCV Victory Fund

Full Name (Last, First, Middle Initial)
A. Gordon Berger

Mailing Address 554 Lincoln Blvd

City Santa Monica State CA Zip Code 90402-2812

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

Name of Employer Occupation
Self Self-employed therapist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
10 / 28 / 2014
Transaction ID : A2088FC75DCBA4594AC6

Amount of Each Receipt this Period
250.00

Full Name (Last, First, Middle Initial)
B. Jonathan Berger

Mailing Address 4101 Timber Ln

City Philadelphia State PA Zip Code 19129-5525

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

Name of Employer Occupation
Berger & Montague Information Technoogy

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
10 / 29 / 2014
Transaction ID : A2DA32ADCF3184B8ABDC

Amount of Each Receipt this Period
1000.00

Full Name (Last, First, Middle Initial)
C. David Birr

Mailing Address 329 Woodview Rd Apt D

City Lake Barrington State IL Zip Code 60010-1775

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

Name of Employer Occupation
Synchronous Energy Solutions Energy Engineer

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1050.00

Date of Receipt
10 / 27 / 2014
Transaction ID : A428C36910B3D49BABEE

Amount of Each Receipt this Period
650.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 1900.00

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 183
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
LCV Victory Fund

Full Name (Last, First, Middle Initial)
A. David Birr
 Mailing Address 329 Woodview Rd Apt D
 City State Zip Code
 Lake Barrington IL 60010-1775
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Synchronous Energy Solutions Energy Engineer
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 1450.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 28 / 2014
Transaction ID : A75FEA126F774D16AC5
 Amount of Each Receipt this Period
 400.00

Full Name (Last, First, Middle Initial)
B. Brent Blackwelder
 Mailing Address 3517 Rodman St NW
 City State Zip Code
 Washington DC 20008-3118
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Retired Retired
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 03 / 2014
Transaction ID : A7283EDC8F70D4065AC5
 Amount of Each Receipt this Period
 500.00

Full Name (Last, First, Middle Initial)
C. Heather Blair
 Mailing Address 1040 E Maxwell Ln
 City State Zip Code
 Bloomington IN 47401-5066
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Indiana University Assistant Professor
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 28 / 2014
Transaction ID : AED8AF856B58E4BCD84A
 Amount of Each Receipt this Period
 250.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 1150.00
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 15 OF 183
	<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)
LCV Victory Fund

A. Robert Blake
 Full Name (Last, First, Middle Initial)
 Mailing Address 2322 Meadow Lark Ln
 City Columbia State MO Zip Code 65201-6246
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Retired Occupation Retired
 Receipt For: Primary General Other (specify)

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 31 / 2014
Transaction ID : A353B5C8AD39A4EB295F
 Amount of Each Receipt this Period
 250.00
 Aggregate Year-to-Date ▼
 250.00

B. David Bonderman
 Full Name (Last, First, Middle Initial)
 Mailing Address 301 Commerce St Ste 3300 Ste 3300
 City Fort Worth State TX Zip Code 76102-4133
 FEC ID number of contributing federal political committee. **C**
 Name of Employer TPG Capital Occupation Founder
 Receipt For: Primary General Other (specify)

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 16 / 2014
Transaction ID : AA84E046D6CAF4C06B78
 Amount of Each Receipt this Period
 50000.00
 Aggregate Year-to-Date ▼
 200000.00

C. Gary Boothman
 Full Name (Last, First, Middle Initial)
 Mailing Address PO Box 255
 City Friday Harbor State WA Zip Code 98250-0255
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Retired Occupation Retired
 Receipt For: Primary General Other (specify)

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 24 / 2014
Transaction ID : AF1B7FACE64314E8B92E
 Amount of Each Receipt this Period
 100.00
 Aggregate Year-to-Date ▼
 250.00

SUBTOTAL of Receipts This Page (optional).....▶	50350.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 16 OF 183
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
LCV Victory Fund

Full Name (Last, First, Middle Initial)
A. Albert Borchers

Mailing Address 6030 Soquel Dr

City Aptos State CA Zip Code 95003-3115

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

Name of Employer Google Occupation Software Engineer

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 31 / 2014

Transaction ID : AB14FD152EF7C49EA96B

Amount of Each Receipt this Period
200.00

Full Name (Last, First, Middle Initial)
B. Edith Borie

Mailing Address Friedrich-Naumann Str. 109

City New Paltz State NY Zip Code 12561

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

Name of Employer Retired Occupation Physicist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 01 / 2014

Transaction ID : AEB22F8C6AB6B4A4AC/

Amount of Each Receipt this Period
150.00

Full Name (Last, First, Middle Initial)
C. Everett Bowman

Mailing Address 1212 Lexington Ave

City Charlotte State NC Zip Code 28203-4835

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

Name of Employer Robinson, Bradshaw & Hinson Occupation lawyer

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
25000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 21 / 2014

Transaction ID : A88C73B3866974FB5A46

Amount of Each Receipt this Period
25000.00

SUBTOTAL of Receipts This Page (optional).....▶	25350.00
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 17 OF 183
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
LCV Victory Fund

Full Name (Last, First, Middle Initial)
A. Ralph Bremigan

Mailing Address 916 W Warwick Rd

City Muncie State IN Zip Code 47304-3339

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

Name of Employer Ball State University Occupation Professor

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **800.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
10 / 27 / 2014

Transaction ID : A74F4947A3A874B5F80A

Amount of Each Receipt this Period
500.00

Full Name (Last, First, Middle Initial)
B. Amy Breneman

Mailing Address 16255 Ventura Blvd Ste 509

City Encino State CA Zip Code 91436-2310

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

Name of Employer Self Occupation ACTOR/PRODUCER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **250.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
10 / 28 / 2014

Transaction ID : A27BE0D15E14F4059ACC

Amount of Each Receipt this Period
250.00

Full Name (Last, First, Middle Initial)
C. Pamela Brocius

Mailing Address 340 E 93rd St Apt 14m

City New York State NY Zip Code 10128-5552

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

Name of Employer citistaffing llc Occupation personnel

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **650.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
10 / 29 / 2014

Transaction ID : ADB6DC722DB7F4BAE859

Amount of Each Receipt this Period
250.00

SUBTOTAL of Receipts This Page (optional).....▶	1000.00
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 18 OF 183
	<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)
LCV Victory Fund

Full Name (Last, First, Middle Initial)
A. Gregory Brock

Mailing Address 1913 Blairmore Rd

City Lexington State KY Zip Code 40502-2432

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

Name of Employer self employed Occupation Consultant

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **300.00**

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
10 / 27 / 2014

Transaction ID : A2D3D60D6FFF64315824

Amount of Each Receipt this Period
150.00

Full Name (Last, First, Middle Initial)
B. walter brock

Mailing Address 4049 74th St

City Elmhurst State NY Zip Code 11373-5603

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

Name of Employer BT AMERICA Occupation Computer Technician

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **250.00**

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
10 / 27 / 2014

Transaction ID : A105166F39A5D43B1937

Amount of Each Receipt this Period
250.00

Full Name (Last, First, Middle Initial)
C. Kelly Bronfman

Mailing Address 3888 E Lake Creek Rd

City Edwards State CO Zip Code 81632-8213

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

Name of Employer Self Occupation Homemaker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **2000.00**

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
10 / 31 / 2014

Transaction ID : AD8B12367AA314FCAAE2

Amount of Each Receipt this Period
2000.00

SUBTOTAL of Receipts This Page (optional).....▶	2400.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 19 OF 183
<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)
LCV Victory Fund

Full Name (Last, First, Middle Initial)
A. Samuel Bronfman

Mailing Address 3888 E Lake Creek Rd

City Edwards State CO Zip Code 81632-8213

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

Name of Employer Bacchus Capital Occupation Business

Receipt For:
 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 / 31 / 2014

Transaction ID : AA8F56CE3DE7C429C8F0

Amount of Each Receipt this Period
1000.00

Full Name (Last, First, Middle Initial)
B. Candace Brower

Mailing Address 2909 Palomas Dr NE

City Albuquerque State NM Zip Code 87110-3123

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

Name of Employer Self Occupation MUSIC TEACHER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
325.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 29 / 2014

Transaction ID : A1F6FC0C990E648B6860

Amount of Each Receipt this Period
125.00

Full Name (Last, First, Middle Initial)
C. Candace Brower

Mailing Address 2909 Palomas Dr NE

City Albuquerque State NM Zip Code 87110-3123

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

Name of Employer Self Occupation MUSIC TEACHER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
375.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 01 / 2014

Transaction ID : AFFF2778104B94F599C5

Amount of Each Receipt this Period
50.00

SUBTOTAL of Receipts This Page (optional).....▶	1175.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 20 OF 183
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
LCV Victory Fund

Full Name (Last, First, Middle Initial)
A. Candace Brower

Mailing Address 2909 Palomas Dr NE

City Albuquerque State NM Zip Code 87110-3123

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

Name of Employer Self Occupation MUSIC TEACHER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **425.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
11 / 03 / 2014

Transaction ID : A0F4EF74BF3DE49328AB

Amount of Each Receipt this Period
50.00

Full Name (Last, First, Middle Initial)
B. Andrew Butler

Mailing Address 248 S Squaw Canyon Pl # 10-117

City Pagosa Springs State CO Zip Code 81147-8467

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

Name of Employer Retired Occupation Biochemist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **250.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
10 / 29 / 2014

Transaction ID : A69A50E07E3304BD0853

Amount of Each Receipt this Period
100.00

Full Name (Last, First, Middle Initial)
c. David Campbell

Mailing Address 2126 Mayview Drive

City Los Angeles State CA Zip Code 90027-4636

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

Name of Employer Retired Occupation Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **325.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
10 / 29 / 2014

Transaction ID : A2D54BD7739FC408690A

Amount of Each Receipt this Period
125.00

SUBTOTAL of Receipts This Page (optional).....▶	275.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 21 OF 183
	<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)
LCV Victory Fund

A. David Campbell
Full Name (Last, First, Middle Initial)

Mailing Address 2126 Mayview Drive

City Los Angeles	State CA	Zip Code 90027-4636
---------------------	-------------	------------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
450.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	31	/	2014

Transaction ID : A49C06E9BF8A24A1694C

Amount of Each Receipt this Period
125.00

B. Warren Carlson
Full Name (Last, First, Middle Initial)

Mailing Address 827 Pear Ct NE

City Olympia	State WA	Zip Code 98506-1239
-----------------	-------------	------------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
215.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	23	/	2014

Transaction ID : AC469049D5BDC44F8ABD

Amount of Each Receipt this Period
20.00

C. Warren Carlson
Full Name (Last, First, Middle Initial)

Mailing Address 827 Pear Ct NE

City Olympia	State WA	Zip Code 98506-1239
-----------------	-------------	------------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
235.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	23	/	2014

Transaction ID : A769AB7FDA5734FDCBA4

Amount of Each Receipt this Period
20.00

SUBTOTAL of Receipts This Page (optional).....▶	165.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 22 OF 183
	<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)
LCV Victory Fund

Full Name (Last, First, Middle Initial) A. James Carroll		Date of Receipt
Mailing Address PO Box 815		<input type="text" value="10"/> / <input type="text" value="27"/> / <input type="text" value="2014"/>
City	State	Zip Code
Bakersville	NC	28705-0815
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : A4BB4BC135E64472DBFA
Name of Employer	Occupation	Amount of Each Receipt this Period
Bakersville Medical Clinic	Physician	<input type="text" value="150.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="350.00"/>	

Full Name (Last, First, Middle Initial) B. Andrew Castellano		Date of Receipt
Mailing Address 415 River Run Dr		<input type="text" value="10"/> / <input type="text" value="29"/> / <input type="text" value="2014"/>
City	State	Zip Code
Ketchum	ID	83340
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : AF7273A844D1344409F9
Name of Employer	Occupation	Amount of Each Receipt this Period
Retired	Retired	<input type="text" value="2500.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="5000.00"/>	

Full Name (Last, First, Middle Initial) C. Andrew Castellano		Date of Receipt
Mailing Address 415 River Run Dr		<input type="text" value="10"/> / <input type="text" value="29"/> / <input type="text" value="2014"/>
City	State	Zip Code
Ketchum	ID	83340
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : AD2BD0A93F87E4FB2A3A
Name of Employer	Occupation	Amount of Each Receipt this Period
Retired	Retired	<input type="text" value="2500.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="5000.00"/>	

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="5150.00"/>
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 23 OF 183
	<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)
LCV Victory Fund

A. John Cavuoto
Full Name (Last, First, Middle Initial)

Mailing Address 292 High Ave

City Nyack State NY Zip Code 10960-2455

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

Name of Employer Canon Solutions of America Occupation Field Engineer

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt 10 / 28 / 2014
Transaction ID : A838A29173B12435DA92

Amount of Each Receipt this Period 50.00

B. John Cavuoto
Full Name (Last, First, Middle Initial)

Mailing Address 292 High Ave

City Nyack State NY Zip Code 10960-2455

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

Name of Employer Canon Solutions of America Occupation Field Engineer

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 325.00

Date of Receipt 11 / 02 / 2014
Transaction ID : A452094E8F04440F6832

Amount of Each Receipt this Period 25.00

C. Jeesusung Chang
Full Name (Last, First, Middle Initial)

Mailing Address 1 Oakwood Ct

City Oakland State CA Zip Code 94611-1174

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

Name of Employer Adobe Systems Occupation Analytics

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt 10 / 27 / 2014
Transaction ID : AD660B73702F34BAC9C5

Amount of Each Receipt this Period 400.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 475.00

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 24 OF 183
	<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)
LCV Victory Fund

Full Name (Last, First, Middle Initial)
A. Jeesung Chang

Mailing Address 1 Oakwood Ct

City	State	Zip Code
Oakland	CA	94611-1174

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

Name of Employer	Occupation
Adobe Systems	Analytics

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
10			31			2014			

Transaction ID : A555D1A5B2E8145B2905

Amount of Each Receipt this Period
100.00

Full Name (Last, First, Middle Initial)
B. Sharon Chen

Mailing Address 1526 17th Ave E

City	State	Zip Code
Seattle	WA	98112-2809

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

Name of Employer	Occupation
None	Program Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
10			28			2014			

Transaction ID : AADD96CE939344C6806

Amount of Each Receipt this Period
150.00

Full Name (Last, First, Middle Initial)
C. Charles Chesney

Mailing Address PO Box 2454

City	State	Zip Code
Yakima	WA	98907-2454

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

Name of Employer	Occupation
Exper Mentor	river scientist, ecological monitor, v

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
261.34

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
10			27			2014			

Transaction ID : A36E76D19003E4DEE802

Amount of Each Receipt this Period
123.45

SUBTOTAL of Receipts This Page (optional).....▶	373.45
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 25 OF 183
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
LCV Victory Fund

A. James Christmann
Full Name (Last, First, Middle Initial)

Mailing Address 114 Mason St

City Santa Cruz State CA Zip Code 95060-4713

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

Name of Employer Self Occupation research vessel operator

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 27 / 2014

Transaction ID : A85E9BCB9AC864EFC8F

Amount of Each Receipt this Period
 250.00

B. Rose Christopherson
Full Name (Last, First, Middle Initial)

Mailing Address 14707 NW Cedar St

City Portland State OR Zip Code 97231-2621

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

Name of Employer Retired Occupation Physician

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 29 / 2014

Transaction ID : AD86AA25392104F6FB65

Amount of Each Receipt this Period
 100.00

C. Jean Clougherty
Full Name (Last, First, Middle Initial)

Mailing Address 3330 Columbine Dr Unit 1006

City Steamboat Springs State CO Zip Code 80487-2411

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

Name of Employer Vital Images Occupation Software Test Engineer

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 27 / 2014

Transaction ID : AAFD66209D5484DC98D1

Amount of Each Receipt this Period
 1000.00

SUBTOTAL of Receipts This Page (optional).....▶	1350.00
TOTAL This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 26 OF 183
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
LCV Victory Fund

Full Name (Last, First, Middle Initial)
A. Philip Cohen
 Mailing Address 955 W Saint Clair Ave Apt 1706
 City Cleveland State OH Zip Code 44113-1241
 FEC ID number of contributing federal political committee. **C**
 Name of Employer DFAS Occupation computer programmer
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 551.00

Date of Receipt 10 / 28 / 2014
Transaction ID : ADB87F693A9A043A8BC5
 Amount of Each Receipt this Period 111.00

Full Name (Last, First, Middle Initial)
B. David Collins
 Mailing Address 200 Gibson Rd
 City Louisville State KY Zip Code 40207-3914
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Retired Occupation None
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 10 / 26 / 2014
Transaction ID : A43D3CED69D134395BC3
 Amount of Each Receipt this Period 100.00

Full Name (Last, First, Middle Initial)
C. David Collins
 Mailing Address 200 Gibson Rd
 City Louisville State KY Zip Code 40207-3914
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Retired Occupation None
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt 10 / 31 / 2014
Transaction ID : A24B5C8D28A7248198CD
 Amount of Each Receipt this Period 75.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 286.00
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 27 OF 183
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
LCV Victory Fund

A. Elizabeth Colton
Full Name (Last, First, Middle Initial)
Mailing Address 1848 Pine Street

City San Francisco	State CA	Zip Code 94109-4422
-----------------------	-------------	------------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
900.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	29	/	2014

Transaction ID : A025127D74E5A4A9AA3A

Amount of Each Receipt this Period
450.00

B. Brian Conboy
Full Name (Last, First, Middle Initial)
Mailing Address 2330 Wyoming Ave NW

City Washington	State DC	Zip Code 20008-1641
--------------------	-------------	------------------------

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

Name of Employer Willkie Farr & Gallagher	Occupation ATTORNEY
--	------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	16	/	2014

Transaction ID : AD53E5ED8776B45888E3

Amount of Each Receipt this Period
500.00

C. Paul Courant
Full Name (Last, First, Middle Initial)
Mailing Address 1045 Cedar Bend Dr

City Ann Arbor	State MI	Zip Code 48105-2377
-------------------	-------------	------------------------

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

Name of Employer University Of Michigan	Occupation Professor
--	-------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	20	/	2014

Transaction ID : A577AE1A66234421C8B5

Amount of Each Receipt this Period
250.00

SUBTOTAL of Receipts This Page (optional).....▶	1200.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 28 OF 183
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
LCV Victory Fund

A. Paul Courant
Full Name (Last, First, Middle Initial)

Mailing Address 1045 Cedar Bend Dr

City Ann Arbor State MI Zip Code 48105-2377

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

Name of Employer University Of Michigan Occupation Professor

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 02 / 2014
Transaction ID : A666A1DF74300476AA85

Amount of Each Receipt this Period
 250.00

B. Rachel Cowan
Full Name (Last, First, Middle Initial)

Mailing Address 285 Riverside Dr

City New York State NY Zip Code 10025-5276

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

Name of Employer Retired Occupation Rabbi

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 31 / 2014
Transaction ID : A0396A64753CC4B7EA28

Amount of Each Receipt this Period
 250.00

C. Edward Craddock
Full Name (Last, First, Middle Initial)

Mailing Address 523 Crafts St

City West Newton State MA Zip Code 02465-1702

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

Name of Employer C&L Custom Solutions Occupation Computer Consultant

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 29 / 2014
Transaction ID : A6EF92D68AC1B4E2C9E4

Amount of Each Receipt this Period
 250.00

SUBTOTAL of Receipts This Page (optional).....▶	750.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 29 OF 183
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
LCV Victory Fund

Full Name (Last, First, Middle Initial)
A. Tiffany Cunningham

Mailing Address 89 Rattlesnake Ledge Rd

City Salem State CT Zip Code 06420-3626

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

Name of Employer Self Occupation Mother

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 31 / 2014

Transaction ID : AC79620AECD924EDD942

Amount of Each Receipt this Period
2500.00

Full Name (Last, First, Middle Initial)
B. Andrew Currie

Mailing Address PO Box 391

City Boulder State CO Zip Code 80306-0391

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

Name of Employer Conservation Havens, Llc Occupation Entrepreneur

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 20 / 2014

Transaction ID : ABDC3D1CACD4341B68A6

Amount of Each Receipt this Period
5000.00

Full Name (Last, First, Middle Initial)
C. Brock Cutting

Mailing Address 15 High St

City Shelburne Falls State MA Zip Code 01370-1205

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

Name of Employer University of Massachusetts, Amherst Occupation Landscape Architect

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
350.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 28 / 2014

Transaction ID : A84EBD98CB660454EB06

Amount of Each Receipt this Period
250.00

SUBTOTAL of Receipts This Page (optional).....▶	7750.00
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 30 OF 183
	<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)
LCV Victory Fund

Full Name (Last, First, Middle Initial)
A. Harry Dalton

Mailing Address 131 E Main St Ste 400

City State Zip Code
Rock Hill SC 29730-4694

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

Name of Employer Occupation
Retired Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
10 / 31 / 2014

Transaction ID : A988B8ED8F4E84CC6A70

Amount of Each Receipt this Period
250.00

Full Name (Last, First, Middle Initial)
B. Cheryl Dannenbring

Mailing Address 1850 Vermilion Rd

City State Zip Code
Duluth MN 55803-2509

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

Name of Employer Occupation
Retired Former Teacher

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
450.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
10 / 28 / 2014

Transaction ID : A00E79483FBB1466BB2D

Amount of Each Receipt this Period
50.00

Full Name (Last, First, Middle Initial)
C. Jane Darden-Young

Mailing Address PO Box 85

City State Zip Code
Aiken SC 29802-0085

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

Name of Employer Occupation
Self musician/manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
10 / 16 / 2014

Transaction ID : A936E52887E124B9480B

Amount of Each Receipt this Period
500.00

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 31 OF 183
	<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)
LCV Victory Fund

A. Jane Darden-Young
Full Name (Last, First, Middle Initial)

Mailing Address PO Box 85

City Aiken State SC Zip Code 29802-0085

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

Name of Employer Self Occupation musician/manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
10 / 20 / 2014

Transaction ID : A71F6E010A9704629970

Amount of Each Receipt this Period
250.00

B. Joan Davis
Full Name (Last, First, Middle Initial)

Mailing Address 26850 SE Currin Rd

City Estacada State OR Zip Code 97023-9702

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

Name of Employer Information Requested Occupation Information Requested

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
10 / 26 / 2014

Transaction ID : A74209172777B4F3FB78

Amount of Each Receipt this Period
100.00

C. Marcia de Garmo
Full Name (Last, First, Middle Initial)

Mailing Address 699 Joaquin Ln

City Santa Fe State NM Zip Code 87505-6610

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

Name of Employer Retired Occupation Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1600.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
10 / 29 / 2014

Transaction ID : AC9D2B30671474799910

Amount of Each Receipt this Period
1000.00

SUBTOTAL of Receipts This Page (optional).....▶	1350.00
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 32 OF 183
	<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)
LCV Victory Fund

Full Name (Last, First, Middle Initial)
A. Jeffrey Dennis

Mailing Address 1370 Shagbark Dr

City Des Plaines State IL Zip Code 60018-1656

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

Name of Employer Self-Employed Occupation ATTORNEY

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 27 / 2014

Transaction ID : **A1059F759990148FEB04**

Amount of Each Receipt this Period
400.00

Full Name (Last, First, Middle Initial)
B. Marshall Dinowitz

Mailing Address 2656 Belmont Canyon Rd

City Belmont State CA Zip Code 94002-1203

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

Name of Employer Self Occupation Consultant

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 26 / 2014

Transaction ID : **A4905C9031AD34913AC4**

Amount of Each Receipt this Period
150.00

Full Name (Last, First, Middle Initial)
C. George Donart

Mailing Address 917 W 20th Ave

City Anchorage State AK Zip Code 99503-1712

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

Name of Employer Self Occupation commercial fisherman

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 16 / 2014

Transaction ID : **AB680C6691CF341B7B92**

Amount of Each Receipt this Period
2000.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 2550.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 33 OF 183
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
LCV Victory Fund

A. Susan Dorward
Full Name (Last, First, Middle Initial)

Mailing Address 3 Waldron Dr

City Martinsville State NJ Zip Code 08836-2201

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

Name of Employer Raritan Valley Community College Occupation Sustainability Coordinator

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt 10 / 26 / 2014
Transaction ID : A982B9012BD426EAD7

Amount of Each Receipt this Period 500.00

B. Jon Edwards
Full Name (Last, First, Middle Initial)

Mailing Address 10 Middle St 4078

City South Freeport State ME Zip Code 04078

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

Name of Employer Self Occupation ATTORNEY

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

Date of Receipt 10 / 27 / 2014
Transaction ID : A5A891236CA8B4087AB5

Amount of Each Receipt this Period 250.00

C. Michael Ellison
Full Name (Last, First, Middle Initial)

Mailing Address PO Box 11084

City Richmond State VA Zip Code 23230-1084

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

Name of Employer self employed Occupation Computers

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 10 / 27 / 2014
Transaction ID : A0C856E9BD4B04BE6A3D

Amount of Each Receipt this Period 250.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 1000.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 34 OF 183
	<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)
LCV Victory Fund

Full Name (Last, First, Middle Initial)
A. Sally Ericsson

Mailing Address 1805 Monroe St NW

City Washington State DC Zip Code 20010-1014

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

Name of Employer Self-Employed Occupation Consultant

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 28 / 2014

Transaction ID : **A7B5E277DF8D6446BAEF**

Amount of Each Receipt this Period
250.00

Full Name (Last, First, Middle Initial)
B. Wes Ernsberger

Mailing Address 19 Lake St

City Owego State NY Zip Code 13827-1522

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

Name of Employer Retired Occupation Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
600.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 27 / 2014

Transaction ID : **A23772EEABE784CA3BD0**

Amount of Each Receipt this Period
200.00

Full Name (Last, First, Middle Initial)
C. Sarah Faulkner

Mailing Address 108 Sumach St

City Lookout Mountain State TN Zip Code 37350-1132

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

Name of Employer None Occupation Homemaker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 17 / 2014

Transaction ID : **A5253B1C2909B4F57817**

Amount of Each Receipt this Period
100.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 35 OF 183
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
LCV Victory Fund

A. Sarah Faulkner
Full Name (Last, First, Middle Initial)

Mailing Address 108 Sumach St

City Lookout Mountain State TN Zip Code 37350-1132

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

Name of Employer None Occupation Homemaker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1100.00

Date of Receipt
11 / 17 / 2014
Transaction ID : ACEBA256849864B5C9BE

Amount of Each Receipt this Period
100.00

B. Dr. Charles Feaux
Full Name (Last, First, Middle Initial)

Mailing Address 710 Forrest Heights Dr SE

City Huntsville State AL Zip Code 35802-3628

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

Name of Employer Retired Occupation Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
10 / 18 / 2014
Transaction ID : A8C40D96F4C094D818F8

Amount of Each Receipt this Period
1000.00

C. Rosemary Fei
Full Name (Last, First, Middle Initial)

Mailing Address 38 Alder Ave

City San Anselmo State CA Zip Code 94960-1707

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

Name of Employer Adler & Colvin Occupation ATTORNEY

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
10 / 30 / 2014
Transaction ID : AA927207954EE4D17837

Amount of Each Receipt this Period
500.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 1600.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 37 OF 183
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
LCV Victory Fund

Full Name (Last, First, Middle Initial)
A. Tessa Flores

Mailing Address 154 Compton Rd

City Ithaca	State NY	Zip Code 14850-9455
----------------	-------------	------------------------

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

Name of Employer Homemaker	Occupation Self
-------------------------------	--------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1750.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	30	/	2014

Transaction ID : A9814E972CE7A4A83954

Amount of Each Receipt this Period
1250.00

Full Name (Last, First, Middle Initial)
B. Tessa Flores

Mailing Address 154 Compton Rd

City Ithaca	State NY	Zip Code 14850-9455
----------------	-------------	------------------------

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

Name of Employer Homemaker	Occupation Self
-------------------------------	--------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1775.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	02	/	2014

Transaction ID : A768DBA4C238A4A0FBFC

Amount of Each Receipt this Period
25.00

Full Name (Last, First, Middle Initial)
C. Stacey Folsom

Mailing Address 1409 S Carolina Ave SE

City Washington	State DC	Zip Code 20003-2329
--------------------	-------------	------------------------

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

Name of Employer LCV	Occupation Fundraiser
-------------------------	--------------------------

Receipt For:
 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	/	28	/	2014

Transaction ID : A01BB5D714B7146C1BCF

Amount of Each Receipt this Period
1000.00

SUBTOTAL of Receipts This Page (optional).....▶	2275.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 38 OF 183
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
LCV Victory Fund

Full Name (Last, First, Middle Initial)
A. Elaine French

Mailing Address PO Box 9320

City Ketchum State ID Zip Code 83340-7144

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

Name of Employer Retired Occupation Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 28 / 2014

Transaction ID : **AC7B609995FBC4F3ABBD**

Amount of Each Receipt this Period
5000.00

Full Name (Last, First, Middle Initial)
B. Katrina Frey

Mailing Address 14000 Tomki Rd

City Redwood Valley State CA Zip Code 95470-6135

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

Name of Employer Frey Vineyards Occupation Sales

Receipt For:
 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
 11 / 04 / 2014

Transaction ID : **A59A0A56E701B4F6BA95**

Amount of Each Receipt this Period
1000.00

Full Name (Last, First, Middle Initial)
C. Charles Fry

Mailing Address 6530 Hillside Way

City Parker State CO Zip Code 80134-6323

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

Name of Employer Retired Occupation Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 28 / 2014

Transaction ID : **A5FD4429BA9384F7D9DA**

Amount of Each Receipt this Period
100.00

SUBTOTAL of Receipts This Page (optional).....▶	6100.00
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 39 OF 183
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
LCV Victory Fund

A. Theresa Galvin
Full Name (Last, First, Middle Initial)

Mailing Address 304 Carroll St

City Brooklyn State NY Zip Code 11231-4902

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

Name of Employer varies Occupation Freelance Writer

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
11 / 01 / 2014
Transaction ID : A9DA30F6359744943AB0

Amount of Each Receipt this Period
300.00

B. Jeff Gerecke
Full Name (Last, First, Middle Initial)

Mailing Address 241 W 259th St

City Bronx State NY Zip Code 10471-1922

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

Name of Employer self employed Occupation literary agent

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 220.00

Date of Receipt
10 / 31 / 2014
Transaction ID : A9F636582123B4085AB8

Amount of Each Receipt this Period
20.00

C. Kathleen Giancarlo
Full Name (Last, First, Middle Initial)

Mailing Address 760 Grand Marais St

City Grosse Pointe Park State MI Zip Code 48230-1849

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

Name of Employer OGP Occupation Property investment

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
10 / 31 / 2014
Transaction ID : A3BC0CE40B14442F9891

Amount of Each Receipt this Period
500.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 820.00

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 40 OF 183
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
LCV Victory Fund

Full Name (Last, First, Middle Initial)
A. Zachary Gilford

Mailing Address 200 Park Ave S Fl 8

City State Zip Code
New York NY 10003-1526

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

Name of Employer Occupation
Self Entertainer

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
10 / 31 / 2014

Transaction ID : A5085A0590468475599A

Amount of Each Receipt this Period
250.00

Full Name (Last, First, Middle Initial)
B. Dorothy Givens

Mailing Address 849 Cascade Dr

City State Zip Code
Sunnyvale CA 94087-3140

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

Name of Employer Occupation
Retired Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
10 / 29 / 2014

Transaction ID : A06D558D65D124DAE8C3

Amount of Each Receipt this Period
150.00

Full Name (Last, First, Middle Initial)
C. Neva Goodwin

Mailing Address 11 Lowell St

City State Zip Code
Cambridge MA 02138-4725

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

Name of Employer Occupation
Tufts University Economist

Receipt For:
 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 / 21 / 2014

Transaction ID : AAD609DFE082040E5A86

Amount of Each Receipt this Period
1000.00

SUBTOTAL of Receipts This Page (optional).....▶	1400.00
TOTAL This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 41 OF 183
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
LCV Victory Fund

Full Name (Last, First, Middle Initial)
A. Jessie Gordon

Mailing Address 75 E Juniper Ln

City Chagrin Falls State OH Zip Code 44022-1391

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

Name of Employer Self Occupation Psychotherapist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 27 / 2014

Transaction ID : AA0EC9CFC65E846B5AD5

Amount of Each Receipt this Period
 500.00

Full Name (Last, First, Middle Initial)
B. Carolyn Goren

Mailing Address 155 Strand Ave

City Missoula State MT Zip Code 59801-5718

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

Name of Employer Retired Occupation Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 29 / 2014

Transaction ID : A07C73D419DC2448CBD0

Amount of Each Receipt this Period
 250.00

Full Name (Last, First, Middle Initial)
C. Dale Gray

Mailing Address 434 S 3500 W

City Vernal State UT Zip Code 84078-8922

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

Name of Employer None Occupation Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 225.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 21 / 2014

Transaction ID : A6D0A66BB4A5141D9A6D

Amount of Each Receipt this Period
 225.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 975.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 42 OF 183
	<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)
LCV Victory Fund

Full Name (Last, First, Middle Initial)
A. David Gray

Mailing Address 1729 Arlington Blvd

City State Zip Code
El Cerrito CA 94530-2005

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

Name of Employer Occupation
Juniper Networks Software Engineer

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
260.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
10 / 31 / 2014

Transaction ID : A01A48C5E409241B5A64

Amount of Each Receipt this Period
60.00

Full Name (Last, First, Middle Initial)
B. Tom Grundy

Mailing Address 222 Sacramento St Apt B

City State Zip Code
Nevada City CA 95959-2650

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

Name of Employer Occupation
Self Engineer

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
325.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
10 / 28 / 2014

Transaction ID : A5FF386B3C36F4EE5981

Amount of Each Receipt this Period
100.00

Full Name (Last, First, Middle Initial)
C. Lois Gullerud

Mailing Address 1208 W Daniel St

City State Zip Code
Champaign IL 61821-4514

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

Name of Employer Occupation
Self Musician

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
275.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
10 / 30 / 2014

Transaction ID : AC981A3B4FEAD4F14B5B

Amount of Each Receipt this Period
75.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 235.00

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 43 OF 183
	<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)
LCV Victory Fund

Full Name (Last, First, Middle Initial)
A. Nancy Hamill Winter

Mailing Address 5229 S Massbach Rd

City Stockton State IL Zip Code 61085-9348

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

Name of Employer Big Sky Farm Occupation Farm Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
15000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 29 / 2014
Transaction ID : AEC3924A254FE448399C

Amount of Each Receipt this Period
5000.00

Full Name (Last, First, Middle Initial)
B. Benjamin Hammett

Mailing Address 301 Lowell Ave

City Palo Alto State CA Zip Code 94301-3812

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

Name of Employer Self Occupation Psychologist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 04 / 2014
Transaction ID : ABF45CCF3854C427A956

Amount of Each Receipt this Period
5000.00

Full Name (Last, First, Middle Initial)
C. Mike Hansen

Mailing Address 874 Swan Ln

City Deerfield State IL Zip Code 60015-3671

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

Name of Employer varies Occupation Freelance Consultant

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 31 / 2014
Transaction ID : A881F3948F4B447599D6

Amount of Each Receipt this Period
100.00

SUBTOTAL of Receipts This Page (optional).....▶	10100.00
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 44 OF 183
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
LCV Victory Fund

Full Name (Last, First, Middle Initial)
A. Daniel Harris

Mailing Address **2838 Meadowwood Dr**

City **Toledo** State **OH** Zip Code **43606-3067**

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

Name of Employer Occupation
Self **Musician**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
550.00

Date of Receipt
11 / 03 / 2014

Transaction ID : A93FE33EF0F5942FC82C

Amount of Each Receipt this Period
50.00

Full Name (Last, First, Middle Initial)
B. Larry Harris

Mailing Address **1773 Lancaster Rd**

City **Freeland** State **WA** Zip Code **98249-9581**

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

Name of Employer Occupation
Retired **Retired**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
10 / 28 / 2014

Transaction ID : A7765D7C8E65E4E35A59

Amount of Each Receipt this Period
500.00

Full Name (Last, First, Middle Initial)
C. Deborah Harry

Mailing Address **405 W 23rd St Apt 7B**

City **New York** State **NY** Zip Code **10011-1460**

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

Name of Employer Occupation
Self-Employed **Singer**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
10 / 23 / 2014

Transaction ID : AE294EC7DE7934A6CBD1

Amount of Each Receipt this Period
50.00

SUBTOTAL of Receipts This Page (optional)..... ▶ **600.00**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 45 OF 183
	<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)
LCV Victory Fund

A. Deborah Harry
Full Name (Last, First, Middle Initial)
Mailing Address 405 W 23rd St Apt 7B

City New York	State NY	Zip Code 10011-1460
------------------	-------------	------------------------

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

Name of Employer Self-Employed	Occupation Singer
-----------------------------------	----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
550.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
11		23		2014

Transaction ID : A26DFFF2C28E9446BBF8

Amount of Each Receipt this Period
50.00

B. Amanita Hart
Full Name (Last, First, Middle Initial)
Mailing Address 3135 Tarpon Dr

City Las Vegas	State NV	Zip Code 89120-1199
-------------------	-------------	------------------------

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

Name of Employer Professional Massage Inc.	Occupation Massage Therapist
---	---------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
220.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
11		01		2014

Transaction ID : A6A333F22589542E992E

Amount of Each Receipt this Period
20.00

C. Robert Hart
Full Name (Last, First, Middle Initial)
Mailing Address 2540 Paradise Dr

City Belvedere Tiburon	State CA	Zip Code 94920-1212
---------------------------	-------------	------------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
10		20		2014

Transaction ID : AC26D4EF0B3104D049CE

Amount of Each Receipt this Period
200.00

SUBTOTAL of Receipts This Page (optional).....▶	270.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 46 OF 183
	<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)
LCV Victory Fund

A. Jane Harvey
 Full Name (Last, First, Middle Initial)
 Mailing Address 1620 E Highland Dr
 City Seattle State WA Zip Code 98112-3324
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Self-Employed Occupation Volunteer
 Receipt For: 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 / 23 / 2014
Transaction ID : A400FDE58649D4FA0BDE
 Amount of Each Receipt this Period
1000.00

B. Jesse Haskins
 Full Name (Last, First, Middle Initial)
 Mailing Address 3909 Reserve Dr Apt 133
 City Tallahassee State FL Zip Code 32311
 FEC ID number of contributing federal political committee. **C**
 Name of Employer FLD FS Occupation ATTORNEY
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **250.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 28 / 2014
Transaction ID : A95506DA907DE4CA5AAD
 Amount of Each Receipt this Period
150.00

C. Eric Haxthausen
 Full Name (Last, First, Middle Initial)
 Mailing Address 1841 COLUMBIA RD NW APT 806 Apt 806
 City Washington State DC Zip Code 20009-2009
 FEC ID number of contributing federal political committee. **C**
 Name of Employer USAID Occupation Climate Change Specialist
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **275.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 27 / 2014
Transaction ID : A7C3F5AE9144E429D9DC
 Amount of Each Receipt this Period
275.00

SUBTOTAL of Receipts This Page (optional).....▶	1425.00
TOTAL This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 47 OF 183
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
LCV Victory Fund

Full Name (Last, First, Middle Initial)
A. Dr. John Heitner

Mailing Address 242 Pondview Dr

City Southington State CT Zip Code 06489-3938

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

Name of Employer Central CT State University Occupation Professor

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **695.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
11 / 14 / 2014

Transaction ID : AC7F4AEDEC8024E02870

Amount of Each Receipt this Period
200.00

Full Name (Last, First, Middle Initial)
B. Georgia Herbert

Mailing Address PO Box 21

City The Plains State VA Zip Code 20198-0021

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

Name of Employer Georgia H. Herbert, PC Occupation lawyer

Receipt For:
 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 / 28 / 2014

Transaction ID : A925E15A3809A4788B59

Amount of Each Receipt this Period
100.00

Full Name (Last, First, Middle Initial)
C. Arnold Hiatt

Mailing Address 400 Atlantic Ave

City Boston State MA Zip Code 02110-3331

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

Name of Employer The A.M. Fund Occupation President

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **25000.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
11 / 03 / 2014

Transaction ID : AEBF78BDE4A654486AF5

Amount of Each Receipt this Period
25000.00

SUBTOTAL of Receipts This Page (optional)..... ▶ **25300.00**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 48 OF 183
	<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)
LCV Victory Fund

Full Name (Last, First, Middle Initial)
A. Richard Hiers

Mailing Address 506 SW 40th Ter

City Gainesville	State FL	Zip Code 32607-2758
---------------------	-------------	------------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 21 / 2014

Transaction ID : **AB60ACA7B91A74E4ABF4**

Amount of Each Receipt this Period
250.00

Full Name (Last, First, Middle Initial)
B. Ben Hillman

Mailing Address 35 Salisbury Rd

City Sheffield	State MA	Zip Code 01257-9692
-------------------	-------------	------------------------

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

Name of Employer Self	Occupation media creative
--------------------------	------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 27 / 2014

Transaction ID : **AEA93838E2E3F4D59AE0**

Amount of Each Receipt this Period
500.00

Full Name (Last, First, Middle Initial)
C. Mr. John Hirschi

Mailing Address 3305 Buchanan St

City Wichita Falls	State TX	Zip Code 76308-1822
-----------------------	-------------	------------------------

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

Name of Employer Self	Occupation Real Estate
--------------------------	---------------------------

Receipt For:
 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 / 29 / 2014

Transaction ID : **A01FE77BD639F48049EB**

Amount of Each Receipt this Period
1000.00

SUBTOTAL of Receipts This Page (optional).....▶	1750.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 49 OF 183
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
LCV Victory Fund

A. Constance Hoguet Neel
 Full Name (Last, First, Middle Initial)
 Mailing Address 333 E 68th St Apt 12A
 City New York State NY Zip Code 10065-5604
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Retired Occupation Teacher
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **3500.00**

Date of Receipt **11 / 06 / 2014**
Transaction ID : AEE7630D2E3B54EC9A5C
 Amount of Each Receipt this Period **3500.00**

B. Julie Holley
 Full Name (Last, First, Middle Initial)
 Mailing Address 226 E Bodley Ave
 City Saint Louis State MO Zip Code 63122-4422
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Ozark Forest Mushrooms Occupation Local Food Sales
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **400.00**

Date of Receipt **10 / 20 / 2014**
Transaction ID : AB119A7F282DC4AB38F8
 Amount of Each Receipt this Period **400.00**

C. Elizabeth Holsten
 Full Name (Last, First, Middle Initial)
 Mailing Address 912 Coker Dr
 City Chapel Hill State NC Zip Code 27517-4406
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Retired Occupation Retired
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **265.00**

Date of Receipt **11 / 02 / 2014**
Transaction ID : A4B6373007C19474D88A
 Amount of Each Receipt this Period **25.00**

SUBTOTAL of Receipts This Page (optional).....	3925.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 50 OF 183
	<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)
LCV Victory Fund

Full Name (Last, First, Middle Initial)
A. Steve Holtzman

Mailing Address 20 Hillcrest Rd

City Berkeley State CA Zip Code 94705-2807

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

Name of Employer Boies, Schiller & Flexner LLP Occupation lawyer

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
15000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 19 / 2014

Transaction ID : A9F20AB584D454B179AD

Amount of Each Receipt this Period
10000.00

Full Name (Last, First, Middle Initial)
B. Roger Hoverman

Mailing Address 686 W Aspen Dr

City Kanab State UT Zip Code 84741-6198

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

Name of Employer Retired Occupation Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 23 / 2014

Transaction ID : A0C0AB07B9CB242F6A7A

Amount of Each Receipt this Period
50.00

Full Name (Last, First, Middle Initial)
C. Carole Johnson

Mailing Address Holly Hill Drive

City Lexington State KY Zip Code 40503

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

Name of Employer Learning Center Occupation tutor

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 29 / 2014

Transaction ID : AE0456700B7AD48989C5

Amount of Each Receipt this Period
200.00

SUBTOTAL of Receipts This Page (optional).....▶	10250.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 51 OF 183
	<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)
LCV Victory Fund

Full Name (Last, First, Middle Initial)
A. Peter Joseph

Mailing Address 53 Summit Rd

City San Anselmo State CA Zip Code 94960-2240

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

Name of Employer Climate Reality Project Occupation Presenter

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 26 / 2014
Transaction ID : A598BA43EC2B140A8B3F

Amount of Each Receipt this Period
250.00

Full Name (Last, First, Middle Initial)
B. Judy Judd

Mailing Address 1241 Island Dr Apt 101

City Ann Arbor State MI Zip Code 48105-2006

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

Name of Employer Retired Occupation Retired

Receipt For:
 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 / 21 / 2014
Transaction ID : A770CDC4BEABA4E259AF

Amount of Each Receipt this Period
500.00

Full Name (Last, First, Middle Initial)
c. Charlotte Kahn

Mailing Address 39 Spring St

City Ipswich State MA Zip Code 01938-1357

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

Name of Employer Retired Occupation Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
450.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 26 / 2014
Transaction ID : A7E98E3DDC5AE4658A1C

Amount of Each Receipt this Period
150.00

SUBTOTAL of Receipts This Page (optional).....▶	900.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 52 OF 183
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
LCV Victory Fund

Full Name (Last, First, Middle Initial)
A. Jo Ann Kaplan

Mailing Address 773 Latimer Rd

City State Zip Code
Santa Monica CA 90402-1015

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

Name of Employer Occupation
Retired Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
11 / 01 / 2014

Transaction ID : AB8589B60B0CE4FD3AAF

Amount of Each Receipt this Period
5000.00

Full Name (Last, First, Middle Initial)
B. Stan Kaplowitz

Mailing Address 629 Marshall St

City State Zip Code
East Lansing MI 48823-3278

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

Name of Employer Occupation
Michigan State U Professor

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
260.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
10 / 29 / 2014

Transaction ID : A40FFE4EFE7904C64A44

Amount of Each Receipt this Period
120.00

Full Name (Last, First, Middle Initial)
C. RONALD KAPPEL

Mailing Address 15413 Lyda Steen Dr

City State Zip Code
Biloxi MS 39532-7340

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

Name of Employer Occupation
Retired Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
220.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
10 / 27 / 2014

Transaction ID : A662B61332F35471DBBF

Amount of Each Receipt this Period
100.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 5220.00

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 53 OF 183
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
LCV Victory Fund

Full Name (Last, First, Middle Initial)
A. Joanne Keith

Mailing Address 14 Barrier Reef Dr

City Corona Del Mar State CA Zip Code 92625-1410

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

Name of Employer Retired Occupation Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 26 / 2014
Transaction ID : A88F85428F8A54A3F854

Amount of Each Receipt this Period
300.00

Full Name (Last, First, Middle Initial)
B. Mr. Steven Keleti

Mailing Address 18 Clarendon St

City Malden State MA Zip Code 02148-7614

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

Name of Employer Self-Employed Occupation Engineer

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 27 / 2014
Transaction ID : A6C6A0B2E673C43A3995

Amount of Each Receipt this Period
1000.00

Full Name (Last, First, Middle Initial)
C. Mr. Steven Keleti

Mailing Address 18 Clarendon St

City Malden State MA Zip Code 02148-7614

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

Name of Employer Self-Employed Occupation Engineer

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
3000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 01 / 2014
Transaction ID : AE2D2382BA82D4413A12

Amount of Each Receipt this Period
2000.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 3300.00

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 54 OF 183
	<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)
LCV Victory Fund

A. Kim Khoury
 Full Name (Last, First, Middle Initial)
 Mailing Address 8451 E Desert View Pl
 City Tucson State AZ Zip Code 85750-6619
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Retired Occupation Retired
 Receipt For: Primary General Other (specify)

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 29 / 2014
Transaction ID : A8C9981B99DA54BC3B45
 Amount of Each Receipt this Period
 250.00
 Aggregate Year-to-Date ▼
 250.00

B. Jerry Kickenson
 Full Name (Last, First, Middle Initial)
 Mailing Address 1701 Ladd St
 City Silver Spring State MD Zip Code 20902-3522
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Swift Occupation Software Engineer
 Receipt For: Primary General Other (specify)

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 17 / 2014
Transaction ID : AF93A79A77DEC43E99C9
 Amount of Each Receipt this Period
 500.00
 Aggregate Year-to-Date ▼
 1500.00

C. Max Lagally
 Full Name (Last, First, Middle Initial)
 Mailing Address 5110 Juneau Rd
 City Madison State WI Zip Code 53705-4744
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Univ Of Wisconsin Occupation Professor
 Receipt For: Primary General Other (specify)

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 26 / 2014
Transaction ID : A2FD33BE12CA34E66BB3
 Amount of Each Receipt this Period
 100.00
 Aggregate Year-to-Date ▼
 900.00

SUBTOTAL of Receipts This Page (optional).....▶	850.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 55 OF 183
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
LCV Victory Fund

Full Name (Last, First, Middle Initial)
A. Max Lagally

Mailing Address 5110 Juneau Rd

City Madison State WI Zip Code 53705-4744

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

Name of Employer Univ Of Wisconsin Occupation Professor

Receipt For:
 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
 11 / 02 / 2014

Transaction ID : **ACE7E55C4C11048E2825**

Amount of Each Receipt this Period
100.00

Full Name (Last, First, Middle Initial)
B. Luis Lainer

Mailing Address 10788 Bellagio Rd

City Los Angeles State CA Zip Code 90077-3730

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

Name of Employer Lainer Development Inc. Occupation real estate developer

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 21 / 2014

Transaction ID : **A00D2BE3F60894E70911**

Amount of Each Receipt this Period
500.00

Full Name (Last, First, Middle Initial)
C. John Landry

Mailing Address 331 E 71ST St Apt 3B

City New York State NY Zip Code 10021-4735

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

Name of Employer Electra Information Systems Occupation CEO

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 31 / 2014

Transaction ID : **A169AF203F1694DBCAD3**

Amount of Each Receipt this Period
250.00

SUBTOTAL of Receipts This Page (optional).....▶	850.00
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 56 OF 183
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
LCV Victory Fund

Full Name (Last, First, Middle Initial) A. Ulysses Lateiner		Date of Receipt
Mailing Address 419 Norfolk St Unit 2a		<input type="text" value="10"/> / <input type="text" value="27"/> / <input type="text" value="2014"/>
City	State	Zip Code
Somerville	MA	02143-4135
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : AE6199CCAFA464E7B83C
Name of Employer	Occupation	Amount of Each Receipt this Period
Elsevier/Cell Press	Operations Coordinator	<input type="text" value="100.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="350.00"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Catherine Latham		Date of Receipt
Mailing Address 714 5th St NW		<input type="text" value="10"/> / <input type="text" value="28"/> / <input type="text" value="2014"/>
City	State	Zip Code
Independence	IA	50644-1534
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : AB199EC04D392490F8F2
Name of Employer	Occupation	Amount of Each Receipt this Period
Retired	Retired	<input type="text" value="250.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="250.00"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Marc Lavine		Date of Receipt
Mailing Address 976 Belmont Ter Unit 9 Unit 9		<input type="text" value="10"/> / <input type="text" value="27"/> / <input type="text" value="2014"/>
City	State	Zip Code
Sunnyvale	CA	94086-4893
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : A694DF2620664070B32
Name of Employer	Occupation	Amount of Each Receipt this Period
Brocade Communications Systems, Inc.	Software Engineer	<input type="text" value="350.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="600.00"/>	
<input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="700.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 57 OF 183
	<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)
LCV Victory Fund

Full Name (Last, First, Middle Initial)
A. Marc Lavine

Mailing Address 976 Belmont Ter Unit 9
Unit 9

City Sunnyvale State CA Zip Code 94086-4893

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

Name of Employer Brocade Communications Systems, Inc. Occupation Software Engineer

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
850.00

Date of Receipt
10 / 29 / 2014
Transaction ID : A6726CB298F6B4E53913

Amount of Each Receipt this Period
250.00

Full Name (Last, First, Middle Initial)
B. Robert Lawrence

Mailing Address 107 9th Ave

City San Francisco State CA Zip Code 94118-1222

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

Name of Employer Self Occupation Trustee

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
11 / 02 / 2014
Transaction ID : A033EAD89E9D7468BBA6

Amount of Each Receipt this Period
300.00

Full Name (Last, First, Middle Initial)
C. Adam Leite

Mailing Address 1712 E Ruby Ln

City Bloomington State IN Zip Code 47401-6053

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

Name of Employer Indiana University Occupation Professor

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
10 / 16 / 2014
Transaction ID : AC5EEB4F6F0724D4DAED

Amount of Each Receipt this Period
300.00

SUBTOTAL of Receipts This Page (optional).....	850.00
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 58 OF 183
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
LCV Victory Fund

A. Richard Leliaert
Full Name (Last, First, Middle Initial)

Mailing Address 27101 W Chicago

City Redford State MI Zip Code 48239-2332

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

Name of Employer Self Occupation Priest

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 220.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 03 / 2014
Transaction ID : A78B0110EB924481F93C

Amount of Each Receipt this Period
 200.00

B. James Lemon
Full Name (Last, First, Middle Initial)

Mailing Address 714 Hunter Ct SW

City Vienna State VA Zip Code 22180-6278

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

Name of Employer United Technologies Corporation Occupation international trade

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 30 / 2014
Transaction ID : ABB08D220734843E3BED

Amount of Each Receipt this Period
 1000.00

C. Craig Lewis
Full Name (Last, First, Middle Initial)

Mailing Address 16 Palm Ct

City Menlo Park State CA Zip Code 94025-5755

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

Name of Employer GreenVolts Occupation Energy executive

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 24 / 2014
Transaction ID : A72F436B0AF3A4D158EF

Amount of Each Receipt this Period
 1000.00

SUBTOTAL of Receipts This Page (optional).....	2020.00
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 59 OF 183
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
LCV Victory Fund

A. H. McIlvaine Lewis
 Full Name (Last, First, Middle Initial)
 Mailing Address 19 Sonrisa Trl
 City Santa Fe State NM Zip Code 87506-1286
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Self-Employed Occupation Independent Contractor
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 17 / 2014
Transaction ID : AE9D4E03275FC45239E5
 Amount of Each Receipt this Period
 500.00

B. Dr. Jean Lynn
 Full Name (Last, First, Middle Initial)
 Mailing Address 1352 Gleneagles Way
 City Rockledge State FL Zip Code 32955-2523
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Brevard Eye Associates Occupation secretary
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 270.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 26 / 2014
Transaction ID : A3AF6AB3B4CB44752A49
 Amount of Each Receipt this Period
 195.00

C. Dr. Jean Lynn
 Full Name (Last, First, Middle Initial)
 Mailing Address 1352 Gleneagles Way
 City Rockledge State FL Zip Code 32955-2523
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Brevard Eye Associates Occupation secretary
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 455.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 28 / 2014
Transaction ID : AB12E3BEAD96647DFA7F
 Amount of Each Receipt this Period
 185.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 880.00
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 60 OF 183
	<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)
LCV Victory Fund

A. Dr. Jean Lynn
Full Name (Last, First, Middle Initial)

Mailing Address 1352 Gleneagles Way

City Rockledge State FL Zip Code 32955-2523

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

Name of Employer Brevard Eye Associates Occupation secretary

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **630.00**

Date of Receipt
10 / 31 / 2014

Transaction ID : AB54696FD4F904137812

Amount of Each Receipt this Period
175.00

B. Stewart Macaulay
Full Name (Last, First, Middle Initial)

Mailing Address 314 Shepard Ter

City Madison State WI Zip Code 53705-3618

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

Name of Employer University of Wisconsin Occupation Professor

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **300.00**

Date of Receipt
10 / 22 / 2014

Transaction ID : AD709D3C2A1A34CD79B2

Amount of Each Receipt this Period
300.00

C. Jane Mackie
Full Name (Last, First, Middle Initial)

Mailing Address 5 Wellesley Ct

City Lafayette State CA Zip Code 94549-2421

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

Name of Employer John Snow, Inc. Occupation International Health Advisor

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **250.00**

Date of Receipt
10 / 27 / 2014

Transaction ID : ABD233A087C9C4ADA90B

Amount of Each Receipt this Period
250.00

SUBTOTAL of Receipts This Page (optional)..... **725.00**

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 61 OF 183
	<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)
LCV Victory Fund

A. Wendie Malick
Full Name (Last, First, Middle Initial)
Mailing Address PO Box 329
City Topanga State CA Zip Code 90290-0329
FEC ID number of contributing federal political committee. **C**
Name of Employer Self Occupation Actress
Receipt For: Primary General Other (specify) Aggregate Year-to-Date **700.00**

Date of Receipt **11 / 03 / 2014**
Transaction ID : AA5F9D6CB4CE741798D3
Amount of Each Receipt this Period **500.00**

B. Lenore Martin
Full Name (Last, First, Middle Initial)
Mailing Address 460 South River Landing Rd
City Edgewater State MD Zip Code 21037-1551
FEC ID number of contributing federal political committee. **C**
Name of Employer None Occupation Homemaker
Receipt For: Primary General Other (specify) Aggregate Year-to-Date **400.00**

Date of Receipt **10 / 27 / 2014**
Transaction ID : A1C523A69C5764BDAAED
Amount of Each Receipt this Period **200.00**

C. Michael Martin
Full Name (Last, First, Middle Initial)
Mailing Address 620 S Edgewater Rd
City Wichita State KS Zip Code 67230-9502
FEC ID number of contributing federal political committee. **C**
Name of Employer Retired Occupation Retired
Receipt For: Primary General Other (specify) Aggregate Year-to-Date **300.00**

Date of Receipt **11 / 02 / 2014**
Transaction ID : AA9091E5CCE1944EE8F9
Amount of Each Receipt this Period **150.00**

SUBTOTAL of Receipts This Page (optional)..... **850.00**
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 62 OF 183
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
LCV Victory Fund

A. Larry Master
Full Name (Last, First, Middle Initial)
Mailing Address PO Box 310
City Lake Placid State NY Zip Code 12946-0310
FEC ID number of contributing federal political committee. **C**
Name of Employer Retired Occupation conservation biologist
Receipt For: Primary General Other (specify) Aggregate Year-to-Date **400.00**

Date of Receipt
10 / 26 / 2014
Transaction ID : A182644995B8141AF9DD
Amount of Each Receipt this Period
400.00

B. John Mathwin
Full Name (Last, First, Middle Initial)
Mailing Address 13515 Crispin Way
City Rockville State MD Zip Code 20853-2944
FEC ID number of contributing federal political committee. **C**
Name of Employer Retired Occupation Retired
Receipt For: Primary General Other (specify) Aggregate Year-to-Date **300.00**

Date of Receipt
10 / 20 / 2014
Transaction ID : A946CA1DF13DE40CCA26
Amount of Each Receipt this Period
300.00

C. Keith Mayo
Full Name (Last, First, Middle Initial)
Mailing Address RR 1 Lcd Main
City Orangeville, Ontario L9W 2Y8 State ZZ Zip Code 00000
FEC ID number of contributing federal political committee. **C**
Name of Employer Self-employed Occupation N/A
Receipt For: Primary General Other (specify) Aggregate Year-to-Date **250.00**

Date of Receipt
10 / 31 / 2014
Transaction ID : A449D2907866E4BDAA6C
Amount of Each Receipt this Period
250.00
REFUND PENDING

SUBTOTAL of Receipts This Page (optional)..... **950.00**
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 63 OF 183
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
LCV Victory Fund

A. Elizabeth McBride
 Full Name (Last, First, Middle Initial)
 Mailing Address 66 Fairmount Ave Apt 401
 City Oakland State CA Zip Code 94611-5908
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Kaiser Permanente Occupation Registered Nurse
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 31 / 2014
Transaction ID : A98A902531F8D41BD9D4
 Amount of Each Receipt this Period
 250.00

B. Jennifer Mcneil
 Full Name (Last, First, Middle Initial)
 Mailing Address 301 5 Points Rd
 City Coatesville State PA Zip Code 19320-4925
 FEC ID number of contributing federal political committee. **C**
 Name of Employer None Occupation Homemaker
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 26 / 2014
Transaction ID : A1480B6E7B8B34774BCB
 Amount of Each Receipt this Period
 250.00

C. Beth Meltzer
 Full Name (Last, First, Middle Initial)
 Mailing Address 727 N Camden Dr
 City Beverly Hills State CA Zip Code 90210-3204
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Retired Occupation Retired
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 16 / 2014
Transaction ID : ABA1480283FA6473896D
 Amount of Each Receipt this Period
 500.00

SUBTOTAL of Receipts This Page (optional).....▶	1000.00
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 64 OF 183
	<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)
LCV Victory Fund

A. Josephine Merck
Full Name (Last, First, Middle Initial)
Mailing Address 171 Cat Rock Rd
City Cos Cob State CT Zip Code 06807-1202
FEC ID number of contributing federal political committee. **C**
Name of Employer Self Occupation artist
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 5000.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
10 / 21 / 2014
Transaction ID : A1243680026284146AFD
Amount of Each Receipt this Period
5000.00

B. Scott Midkiff
Full Name (Last, First, Middle Initial)
Mailing Address 6109 Albemarle Ln
City Blacksburg State VA Zip Code 24060-8116
FEC ID number of contributing federal political committee. **C**
Name of Employer VIRGINIA POLYTECHNIC INST & ST UNIV Occupation Professor
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 400.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
10 / 27 / 2014
Transaction ID : A7E16378AC9764E4986A
Amount of Each Receipt this Period
250.00

C. Gary Milgrom
Full Name (Last, First, Middle Initial)
Mailing Address 3967 Sedgwick Ave Apt 8h
City Bronx State NY Zip Code 10463-3135
FEC ID number of contributing federal political committee. **C**
Name of Employer NYC Department of Education Occupation Retired teacher
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 275.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
10 / 26 / 2014
Transaction ID : A88CEA669933042C0980
Amount of Each Receipt this Period
100.00

SUBTOTAL of Receipts This Page (optional).....▶	5350.00
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 65 OF 183
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
LCV Victory Fund

Full Name (Last, First, Middle Initial)
A. Stephen Mitchell

Mailing Address **PO Box 20310**

City Santa Barbara	State CA	Zip Code 93120-0310
------------------------------	--------------------	-------------------------------

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

Name of Employer Self	Occupation writer
---------------------------------	-----------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1050.00

Date of Receipt
10 / 31 / 2014

Transaction ID : A4B1B7823DCF94F4BBDD

Amount of Each Receipt this Period
1050.00

Full Name (Last, First, Middle Initial)
B. Kristin Moore

Mailing Address **4333 Yuma St NW**

City Washington	State DC	Zip Code 20016-2027
---------------------------	--------------------	-------------------------------

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

Name of Employer Child Trends	Occupation Research
---	-------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
11 / 01 / 2014

Transaction ID : A1AF5C1ED5CC043B18E8

Amount of Each Receipt this Period
250.00

Full Name (Last, First, Middle Initial)
C. Katharine B Morgan

Mailing Address **4200 massachusetts Ave Nw #904**

City Washington	State DC	Zip Code 20016-4735
---------------------------	--------------------	-------------------------------

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

Name of Employer None	Occupation None
---------------------------------	---------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
10 / 31 / 2014

Transaction ID : A0879362ACFE74E97B36

Amount of Each Receipt this Period
100.00

SUBTOTAL of Receipts This Page (optional).....▶	1400.00
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 66 OF 183
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
LCV Victory Fund

A. Lewis Morrison
Full Name (Last, First, Middle Initial)
Mailing Address 7 Bear Brook Ct
City Clifton Park State NY Zip Code 12065-2738
FEC ID number of contributing federal political committee. **C**
Name of Employer Self Occupation Dentist
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date **1000.00**

Date of Receipt **11 / 02 / 2014**
Transaction ID : A1BC05E9255C6415F98D
Amount of Each Receipt this Period **1000.00**

B. Diane Mott
Full Name (Last, First, Middle Initial)
Mailing Address 8 Rice Ln
City Larkspur State CA Zip Code 94939-2036
FEC ID number of contributing federal political committee. **C**
Name of Employer Retired Occupation Retired
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date **1500.00**

Date of Receipt **10 / 28 / 2014**
Transaction ID : AD6BE6BE05B91410CB57
Amount of Each Receipt this Period **1500.00**

C. Kathryn Mueller
Full Name (Last, First, Middle Initial)
Mailing Address 317 Travis Ln
City Hewitt State TX Zip Code 76643-3102
FEC ID number of contributing federal political committee. **C**
Name of Employer Baylor University Occupation College Professor
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date **250.00**

Date of Receipt **10 / 28 / 2014**
Transaction ID : AFA90BE1F27B94A9A85A
Amount of Each Receipt this Period **25.00**

SUBTOTAL of Receipts This Page (optional)..... **2525.00**
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 67 OF 183
	<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)
LCV Victory Fund

Full Name (Last, First, Middle Initial)
A. Mark Mullbock

Mailing Address 1001 NW Lovejoy St Unit 1301

City Portland State OR Zip Code 97209-3572

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

Name of Employer Showa Women's Institute Occupation Associate Professor

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 28 / 2014

Transaction ID : AFAF793B4FE554D0C9E6

Amount of Each Receipt this Period
 250.00

Full Name (Last, First, Middle Initial)
B. Beth Nagusky

Mailing Address 1974 Hallowell Rd

City Litchfield State ME Zip Code 04350-3835

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

Name of Employer self employed Occupation ATTORNEY

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 325.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 28 / 2014

Transaction ID : ACE0CD9B28E2C44B4B0C

Amount of Each Receipt this Period
 200.00

Full Name (Last, First, Middle Initial)
C. Jeffrey Nelson

Mailing Address 8870 Jewel Ave S

City Cottage Grove State MN Zip Code 55016-4904

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

Name of Employer HealthEast Occupation family physician

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 01 / 2014

Transaction ID : AFDB5A6F6521F437581B

Amount of Each Receipt this Period
 250.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 700.00

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 68 OF 183
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
LCV Victory Fund

Full Name (Last, First, Middle Initial)
A. Eleanor Neumaier

Mailing Address 235 Main St Apt 318

City Venice	State CA	Zip Code 90291-5223
----------------	-------------	------------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
750.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	28	/	2014

Transaction ID : AB21594979093481583F

Amount of Each Receipt this Period
500.00

Full Name (Last, First, Middle Initial)
B. Arthur Newbold

Mailing Address 764 Hillview Rd

City Malvern	State PA	Zip Code 19355-3428
-----------------	-------------	------------------------

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

Name of Employer Decheet LLP	Occupation lawyer
---------------------------------	----------------------

Receipt For:
 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	/	27	/	2014

Transaction ID : AAAF35E66AB0448A88E1

Amount of Each Receipt this Period
1000.00

Full Name (Last, First, Middle Initial)
C. Ms. Linda Nicholes

Mailing Address 6261 E Fox Glen Dr

City Anaheim	State CA	Zip Code 92807-4070
-----------------	-------------	------------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	26	/	2014

Transaction ID : AF636A074BCAE4D03B43

Amount of Each Receipt this Period
1000.00

SUBTOTAL of Receipts This Page (optional).....▶	2500.00
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 69 OF 183
	<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)
LCV Victory Fund

A. Ms. Linda Nicholes
Full Name (Last, First, Middle Initial)
Mailing Address 6261 E Fox Glen Dr
City Anaheim State CA Zip Code 92807-4070
FEC ID number of contributing federal political committee. **C**
Name of Employer Retired Occupation Retired
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date **3000.00**

Date of Receipt **10 / 29 / 2014**
Transaction ID : A4D4B2A50923C4322A4D
Amount of Each Receipt this Period **1000.00**

B. Mr. John Noel
Full Name (Last, First, Middle Initial)
Mailing Address 3810 Bedford Ave Ste 300 Ste 300
City Nashville State TN Zip Code 37215-2515
FEC ID number of contributing federal political committee. **C**
Name of Employer Self Occupation Real Estate Investor
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date **1000.00**

Date of Receipt **10 / 29 / 2014**
Transaction ID : A9E120DA76AA44CE08E1
Amount of Each Receipt this Period **1000.00**

C. John Odell
Full Name (Last, First, Middle Initial)
Mailing Address 1370 Chamberlain Rd
City Pasadena State CA Zip Code 91103-2310
FEC ID number of contributing federal political committee. **C**
Name of Employer Retired Occupation Retired
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date **300.00**

Date of Receipt **10 / 27 / 2014**
Transaction ID : AC5E23D46C2C441D28D8
Amount of Each Receipt this Period **100.00**

SUBTOTAL of Receipts This Page (optional).....	2100.00
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 70 OF 183
	<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)
LCV Victory Fund

A. benjamin oko
Full Name (Last, First, Middle Initial)

Mailing Address 11 Barlow Mountain Rd

City Ridgefield State CT Zip Code 06877-2416

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

Name of Employer None Occupation Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 21 / 2014

Transaction ID : ACC063570C7604E51968

Amount of Each Receipt this Period
 50.00

B. benjamin oko
Full Name (Last, First, Middle Initial)

Mailing Address 11 Barlow Mountain Rd

City Ridgefield State CT Zip Code 06877-2416

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

Name of Employer None Occupation Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 550.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 21 / 2014

Transaction ID : AFE659592FDDDF4EC3962

Amount of Each Receipt this Period
 50.00

c. Daphne O'Regan
Full Name (Last, First, Middle Initial)

Mailing Address 810 Roxburgh Ave

City East Lansing State MI Zip Code 48823-3129

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

Name of Employer MSU College of Law Occupation clinical law prof

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 31 / 2014

Transaction ID : A589830A184A647708CB

Amount of Each Receipt this Period
 50.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 150.00

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 71 OF 183
(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	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
LCV Victory Fund

Full Name (Last, First, Middle Initial)
A. Richard Ostfeld

Mailing Address 23 Boyd Hill Ln

City	State	Zip Code
Tivoli	NY	12583-5742

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

Name of Employer	Occupation
Cary Institute	Biologist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 17 / 2014

Transaction ID : A23EA83CDBCB84F76B1E

Amount of Each Receipt this Period
250.00

Full Name (Last, First, Middle Initial)
B. David Paradise

Mailing Address 299 Sleeper Ave.

City	State	Zip Code
Mountain View	CA	94040-3818

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

Name of Employer	Occupation
Cisco	Engineer

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
369.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 28 / 2014

Transaction ID : ACD6BD954D867496FA26

Amount of Each Receipt this Period
199.00

Full Name (Last, First, Middle Initial)
C. Gary Passon

Mailing Address 1390 S Kihei Rd

City	State	Zip Code
Kihei	HI	96753-8138

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

Name of Employer	Occupation
Retired	Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 27 / 2014

Transaction ID : A79A97365E0B8436EA83

Amount of Each Receipt this Period
250.00

SUBTOTAL of Receipts This Page (optional).....▶	699.00
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 72 OF 183
	<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)
LCV Victory Fund

Full Name (Last, First, Middle Initial) A. Gary Passon		Date of Receipt M M / D D / Y Y Y Y Y Y 10 / 31 / 2014
Mailing Address 1390 S Kihei Rd		Transaction ID : A2D2830A2F4CD4FF69B6
City Kihei	State HI	Zip Code 96753-8138
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 100.00	
Name of Employer Retired	Occupation Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

Full Name (Last, First, Middle Initial) B. michael paterson		Date of Receipt M M / D D / Y Y Y Y Y Y 10 / 27 / 2014
Mailing Address 300 N Farm Rd		Transaction ID : AD3C0C6976F7240D0906
City Monte Vista	State CO	Zip Code 81144-9775
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 250.00	
Name of Employer Self	Occupation Physician	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

Full Name (Last, First, Middle Initial) C. Dolly Peach		Date of Receipt M M / D D / Y Y Y Y Y Y 10 / 28 / 2014
Mailing Address 710 E 17th Ave		Transaction ID : A9FC3DC4D85DA47459B0
City Salt Lake City	State UT	Zip Code 84103-3711
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 100.00	
Name of Employer IHC	Occupation Physician	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

SUBTOTAL of Receipts This Page (optional).....▶	450.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 73 OF 183
	<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)
LCV Victory Fund

A. Christopher Pederson
 Full Name (Last, First, Middle Initial)
 Mailing Address 18 Dorado Ter Apt 28
 Apt 9
 City San Francisco State CA Zip Code 94112-1767
 FEC ID number of contributing federal political committee. **C**
 Name of Employer State Of California Occupation ATTORNEY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 28 / 2014
Transaction ID : A49EEFBED688A4E7E9CE
 Amount of Each Receipt this Period
 250.00

B. Grace Phillips
 Full Name (Last, First, Middle Initial)
 Mailing Address 1131 Hill St
 City Santa Monica State CA Zip Code 90405-4705
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Self Occupation designer
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 02 / 2014
Transaction ID : A140A2285830844C2912
 Amount of Each Receipt this Period
 125.00

C. Heather Phillips
 Full Name (Last, First, Middle Initial)
 Mailing Address 1465 N Davis Rd
 City Bolton State MS Zip Code 39041-9591
 FEC ID number of contributing federal political committee. **C**
 Name of Employer American School of Kuwait Occupation Teacher
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 228.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 21 / 2014
Transaction ID : A235436FB577D41AE832
 Amount of Each Receipt this Period
 12.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 387.00
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 74 OF 183
	<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)
LCV Victory Fund

A. Heather Phillips
Full Name (Last, First, Middle Initial)
Mailing Address 1465 N Davis Rd

City Bolton	State MS	Zip Code 39041-9591
----------------	-------------	------------------------

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

Name of Employer American School of Kuwait	Occupation Teacher
---	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
240.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	24	/	2014

Transaction ID : AF89AB198AFB84A39B5E

Amount of Each Receipt this Period
12.00

B. Heather Phillips
Full Name (Last, First, Middle Initial)
Mailing Address 1465 N Davis Rd

City Bolton	State MS	Zip Code 39041-9591
----------------	-------------	------------------------

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

Name of Employer American School of Kuwait	Occupation Teacher
---	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
252.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	21	/	2014

Transaction ID : AC22F07D800FE4F9DA10

Amount of Each Receipt this Period
12.00

C. Heather Phillips
Full Name (Last, First, Middle Initial)
Mailing Address 1465 N Davis Rd

City Bolton	State MS	Zip Code 39041-9591
----------------	-------------	------------------------

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

Name of Employer American School of Kuwait	Occupation Teacher
---	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
264.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	24	/	2014

Transaction ID : AEEA41F8BC84843FFB73

Amount of Each Receipt this Period
12.00

SUBTOTAL of Receipts This Page (optional).....▶	36.00
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 75 OF 183
	<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)
LCV Victory Fund

Full Name (Last, First, Middle Initial)
A. Nuri Pierce

Mailing Address 10746 Melva Rd

City La Mesa State CA Zip Code 91941-5752

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

Name of Employer Retired Occupation Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **525.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
10 / 27 / 2014

Transaction ID : **A6B4537B76F024695911**

Amount of Each Receipt this Period
325.00

Full Name (Last, First, Middle Initial)
B. Lin Polito

Mailing Address 56 Garden PI Apt 2 Apt 2

City Brooklyn State NY Zip Code 11201-4547

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

Name of Employer Self Occupation film editor

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **300.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
10 / 31 / 2014

Transaction ID : **A5A5A98EFA491411BAE0**

Amount of Each Receipt this Period
300.00

Full Name (Last, First, Middle Initial)
C. Elizabeth Postell

Mailing Address 425 Davis St Unit 909

City Evanston State IL Zip Code 60201-4825

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

Name of Employer Retired Occupation Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **600.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
10 / 31 / 2014

Transaction ID : **A6218EE38FC5E43AA820**

Amount of Each Receipt this Period
50.00

SUBTOTAL of Receipts This Page (optional)..... ▶ **675.00**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 76 OF 183
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14
	<input type="checkbox"/> 12 <input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
LCV Victory Fund

A. Helen Price
 Full Name (Last, First, Middle Initial)
 Mailing Address 4419 Ridge St
 City Chevy Chase State MD Zip Code 20815-5225
 FEC ID number of contributing federal political committee. **C**
 Name of Employer National Park Service Occupation Supervisory IT Specialist
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **250.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 23 / 2014
Transaction ID : AC74FB85B134141639CC
 Amount of Each Receipt this Period
250.00

B. Nigel Purvis
 Full Name (Last, First, Middle Initial)
 Mailing Address 3626 RAYMOND ST
 City Chevy Chase State MD Zip Code 20815-4104
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Climate Advisers Occupation Consultant
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **500.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 28 / 2014
Transaction ID : A365C45E07FB94FAC93D
 Amount of Each Receipt this Period
500.00

C. Barbara Pyle
 Full Name (Last, First, Middle Initial)
 Mailing Address 4221 Brookview Dr SE
 City Atlanta State GA Zip Code 30339-4606
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Retired Occupation film maker
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **625.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 02 / 2014
Transaction ID : A349F9C3DF9804B12B35
 Amount of Each Receipt this Period
500.00

SUBTOTAL of Receipts This Page (optional).....▶	1250.00
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 77 OF 183
	<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)
LCV Victory Fund

Full Name (Last, First, Middle Initial)
A. Frances Qualls

Mailing Address 200 W Packard St Apt 329

City Appleton State WI Zip Code 54911-6704

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

Name of Employer Retired Occupation Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
10 / 28 / 2014
Transaction ID : AE36A5C10244431AB40

Amount of Each Receipt this Period
100.00

Full Name (Last, First, Middle Initial)
B. Frances Qualls

Mailing Address 200 W Packard St Apt 329

City Appleton State WI Zip Code 54911-6704

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

Name of Employer Retired Occupation Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
10 / 29 / 2014
Transaction ID : ADD366E96CA374362A5C

Amount of Each Receipt this Period
250.00

Full Name (Last, First, Middle Initial)
C. Frances Qualls

Mailing Address 200 W Packard St Apt 329

City Appleton State WI Zip Code 54911-6704

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

Name of Employer Retired Occupation Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
700.00

Date of Receipt
10 / 31 / 2014
Transaction ID : A3F49EE19937744AE9AC

Amount of Each Receipt this Period
200.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 550.00

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 78 OF 183
	<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)
LCV Victory Fund

Full Name (Last, First, Middle Initial)
A. Frances Qualls

Mailing Address 200 W Packard St Apt 329

City Appleton	State WI	Zip Code 54911-6704
------------------	-------------	------------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
800.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 02 / 2014
Transaction ID : A86EAC850C83E49C38BA

Amount of Each Receipt this Period
100.00

Full Name (Last, First, Middle Initial)
B. George Rakis

Mailing Address 3916 Washington St

City Kensington	State MD	Zip Code 20895-3933
--------------------	-------------	------------------------

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

Name of Employer Self	Occupation Consultant
--------------------------	--------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 30 / 2014
Transaction ID : AC54B65164E8E439FB2C

Amount of Each Receipt this Period
500.00

Full Name (Last, First, Middle Initial)
C. Janet Randall

Mailing Address 862 Jonive Rd

City Sebastopol	State CA	Zip Code 95472-9567
--------------------	-------------	------------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 28 / 2014
Transaction ID : A580B4056EBA34DBE952

Amount of Each Receipt this Period
200.00

SUBTOTAL of Receipts This Page (optional).....▶	800.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 79 OF 183
	<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)
LCV Victory Fund

Full Name (Last, First, Middle Initial)
A. Lynn Rehfeld-Kenney

Mailing Address 21 Hillside Ave

City Buffalo State NY Zip Code 14210-2505

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

Name of Employer Veterans Hospital Occupation Occupational Therapist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
225.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 23 / 2014

Transaction ID : A6C26E04C70A448D38E2

Amount of Each Receipt this Period
225.00

Full Name (Last, First, Middle Initial)
B. Johanna Renouf

Mailing Address 417 Lincoln Circle

City Louisville State CO Zip Code 80027-2149

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

Name of Employer Retired Occupation Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 26 / 2014

Transaction ID : A5F87466F859B4275805

Amount of Each Receipt this Period
100.00

Full Name (Last, First, Middle Initial)
C. Johanna Renouf

Mailing Address 417 Lincoln Circle

City Louisville State CO Zip Code 80027-2149

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

Name of Employer Retired Occupation Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
350.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 28 / 2014

Transaction ID : A83CA9C35DEA34384846

Amount of Each Receipt this Period
100.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 425.00

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 80 OF 183
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
LCV Victory Fund

Full Name (Last, First, Middle Initial)
A. John Repass

Mailing Address 414 Mission Rd

City Kodiak State AK Zip Code 99615-6329

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

Name of Employer Orthodox Church Occupation Clergy

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
800.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 20 / 2014

Transaction ID : AF79710A74B5844488FF

Amount of Each Receipt this Period
800.00

Full Name (Last, First, Middle Initial)
B. John Repass

Mailing Address 414 Mission Rd

City Kodiak State AK Zip Code 99615-6329

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

Name of Employer Orthodox Church Occupation Clergy

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 20 / 2014

Transaction ID : AAA28118065A54C9FA41

Amount of Each Receipt this Period
800.00

Full Name (Last, First, Middle Initial)
C. Craig Rodby

Mailing Address 31 Colonel Winstead Dr

City Brentwood State TN Zip Code 37027-8937

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

Name of Employer Retired Occupation Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 02 / 2014

Transaction ID : A1EEEECE9DE0A45338DE

Amount of Each Receipt this Period
250.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 1850.00

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 81 OF 183
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
LCV Victory Fund

A. Dr. Gordon Rodda
 Full Name (Last, First, Middle Initial)
 Mailing Address 404 Adobe Dr
 City Hesperus State CO Zip Code 81326-7811
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Usgs Occupation Biologist
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 27 / 2014
Transaction ID : A13011C6D12F041EA803
 Amount of Each Receipt this Period
 500.00

B. Johanna Ross
 Full Name (Last, First, Middle Initial)
 Mailing Address 9 Albion Pl
 City Newton Center State MA Zip Code 02459-2121
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Retired Occupation Retired
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1050.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 29 / 2014
Transaction ID : AEB063D3429CF453C827
 Amount of Each Receipt this Period
 1050.00

C. Johanna Ross
 Full Name (Last, First, Middle Initial)
 Mailing Address 9 Albion Pl
 City Newton Center State MA Zip Code 02459-2121
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Retired Occupation Retired
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 3700.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 03 / 2014
Transaction ID : A1EECF5D73A3D49CF92B
 Amount of Each Receipt this Period
 2650.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 4200.00
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 82 OF 183
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
LCV Victory Fund

Full Name (Last, First, Middle Initial)
A. Tom Roush

Mailing Address **PO Box 509**

City **Shelter Island** State **NY** Zip Code **11964-0509**

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

Name of Employer **Retired** Occupation **Retired**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **500.00**

Date of Receipt
10 / 29 / 2014
Transaction ID : A132B8FB7A080400F800

Amount of Each Receipt this Period
500.00

Full Name (Last, First, Middle Initial)
B. James Runkle

Mailing Address **3640 Colonel Glenn Highway**

City **Dayton** State **OH** Zip Code **45435-0001**

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

Name of Employer **Wright State University** Occupation **professor**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **300.00**

Date of Receipt
11 / 03 / 2014
Transaction ID : AAACD1202D1254E80B63

Amount of Each Receipt this Period
100.00

Full Name (Last, First, Middle Initial)
C. Mr. Gordon Russell

Mailing Address **134 Colburn Rd**

City **New Boston** State **NH** Zip Code **03070-4803**

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

Name of Employer **Retired** Occupation **Retired**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **300.00**

Date of Receipt
10 / 17 / 2014
Transaction ID : A0D5A173C1C264317B34

Amount of Each Receipt this Period
300.00

SUBTOTAL of Receipts This Page (optional)..... ▶ **900.00**

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

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

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

FOR LINE NUMBER: PAGE 83 OF 183
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
LCV Victory Fund

Full Name (Last, First, Middle Initial)
A. Richard Russman

Mailing Address 18 Beach Dr

City Kingston State NH Zip Code 03848-3644

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

Name of Employer Retired Occupation Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 26 / 2014
Transaction ID : A782F8280CDBA47669F4

Amount of Each Receipt this Period
500.00

Full Name (Last, First, Middle Initial)
B. Richard Russman

Mailing Address 18 Beach Dr

City Kingston State NH Zip Code 03848-3644

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

Name of Employer Retired Occupation Retired

Receipt For:
 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 / 29 / 2014
Transaction ID : A10C4396CC65140D7984

Amount of Each Receipt this Period
500.00

Full Name (Last, First, Middle Initial)
C. Linda Ruth

Mailing Address 800 Grant Hill Rd

City Coventry State CT Zip Code 06238-1142

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

Name of Employer None Occupation Homemaker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
275.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 27 / 2014
Transaction ID : AFD9CAB35DFED4E19BE7

Amount of Each Receipt this Period
100.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 1100.00

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 84 OF 183
	<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)
LCV Victory Fund

Full Name (Last, First, Middle Initial)
A. Alfred Sattler

Mailing Address 1904 Avenida Aprenda # 123

City Rancho Palos Verdes	State CA	Zip Code 90275-1216
-----------------------------	-------------	------------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 26 / 2014
Transaction ID : AB5D6959948EF4B38859

Amount of Each Receipt this Period
250.00

Full Name (Last, First, Middle Initial)
B. Dovas Saulys

Mailing Address 2170 Gaborone PI

City Dulles	State VA	Zip Code 20189-2169
----------------	-------------	------------------------

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

Name of Employer US Dept of State	Occupation foreign service officer
--------------------------------------	---------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 28 / 2014
Transaction ID : A97037F63C3C24C0D8BD

Amount of Each Receipt this Period
300.00

Full Name (Last, First, Middle Initial)
C. Brenda Savard

Mailing Address 250 Laurel St Apt 202

City San Francisco	State CA	Zip Code 94118-2045
-----------------------	-------------	------------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 26 / 2014
Transaction ID : A9D2214044041436DBB4

Amount of Each Receipt this Period
100.00

SUBTOTAL of Receipts This Page (optional).....▶	650.00
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 85 OF 183
	<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)
LCV Victory Fund

Full Name (Last, First, Middle Initial)
A. Auden Schendler

Mailing Address **PO Box 1248**

City **Aspen** State **CO** Zip Code **81612-1248**

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

Name of Employer **Aspen Skiing Company** Occupation **Vice President**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1100.00**

Date of Receipt
11 / 10 / 2014
Transaction ID : A388424F7E5BA4B819B5

Amount of Each Receipt this Period
1000.00

Full Name (Last, First, Middle Initial)
B. Nancy Schimmel

Mailing Address **1639 Channing Way**

City **Berkeley** State **CA** Zip Code **94703-1651**

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

Name of Employer **Self** Occupation **songwriter**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **400.00**

Date of Receipt
10 / 20 / 2014
Transaction ID : A07297D2E26564938959

Amount of Each Receipt this Period
200.00

Full Name (Last, First, Middle Initial)
C. Stephen Scholle

Mailing Address **5 Homewood Rd**

City **Hartsdale** State **NY** Zip Code **10530-1605**

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

Name of Employer **Retired** Occupation **Retired**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **650.00**

Date of Receipt
11 / 02 / 2014
Transaction ID : A31214B71D292403F9AE

Amount of Each Receipt this Period
250.00

SUBTOTAL of Receipts This Page (optional)..... ▶ **1450.00**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 86 OF 183
	<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)
LCV Victory Fund

Full Name (Last, First, Middle Initial)
A. Katherine Schoonover

Mailing Address 749 Washington St

City New York State NY Zip Code 10014-2042

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

Name of Employer None Occupation Homemaker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 28 / 2014

Transaction ID : **A3D993CE3B84543E9A89**

Amount of Each Receipt this Period
250.00

Full Name (Last, First, Middle Initial)
B. David Scott

Mailing Address 1364 Powderhouse Rd SE

City Aiken State SC Zip Code 29803-6243

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

Name of Employer UGA Occupation research ecologist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 21 / 2014

Transaction ID : **A45CF1DB58B5C4B3599B**

Amount of Each Receipt this Period
100.00

Full Name (Last, First, Middle Initial)
C. David Scott

Mailing Address 1364 Powderhouse Rd SE

City Aiken State SC Zip Code 29803-6243

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

Name of Employer UGA Occupation research ecologist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 29 / 2014

Transaction ID : **A19B6E1267B9F4725A50**

Amount of Each Receipt this Period
50.00

SUBTOTAL of Receipts This Page (optional).....▶	400.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 87 OF 183
	<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)
LCV Victory Fund

Full Name (Last, First, Middle Initial) A. Hahnah Seminara		Date of Receipt M M / D D / Y Y Y Y 10 / 26 / 2014
Mailing Address 200 W 60th St		Transaction ID : ADD22EC22A032432EA31
City New York	State NY	Zip Code 10023-8502
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1250.00
Name of Employer None	Occupation Homemaker	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1250.00	

Full Name (Last, First, Middle Initial) B. Deirdre Sheerr-Gross		Date of Receipt M M / D D / Y Y Y Y 10 / 27 / 2014
Mailing Address 1452 Little Sunapee Rd		Transaction ID : A360683C451BC4D6ABD8
City New London	State NH	Zip Code 03257-5319
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 25.00
Name of Employer Sheerr & White Res. Architecture	Occupation Architect	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 225.00	

Full Name (Last, First, Middle Initial) C. Deirdre Sheerr-Gross		Date of Receipt M M / D D / Y Y Y Y 11 / 03 / 2014
Mailing Address 1452 Little Sunapee Rd		Transaction ID : A92180B1F1B2340C5BB8
City New London	State NH	Zip Code 03257-5319
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer Sheerr & White Res. Architecture	Occupation Architect	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1225.00	

SUBTOTAL of Receipts This Page (optional).....▶	2275.00
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 88 OF 183
	<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)
LCV Victory Fund

A. Dunham Sherer
 Full Name (Last, First, Middle Initial)
 Mailing Address 4200 Joy Rd
 City Occidental State CA Zip Code 95465-9250
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Self-Employed Occupation ATTORNEY
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date **5000.00**

Date of Receipt **10 / 24 / 2014**
Transaction ID : A13EAE0C486E84682BC2
 Amount of Each Receipt this Period **5000.00**

B. David Siegal
 Full Name (Last, First, Middle Initial)
 Mailing Address 4143 Via Marina Apt 1216
 City Marina Del Rey State CA Zip Code 90292-5314
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Beachbody Occupation Software Engineer
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date **250.00**

Date of Receipt **11 / 02 / 2014**
Transaction ID : AA7CB9BC821E440A1932
 Amount of Each Receipt this Period **250.00**

C. Ellen Sieger
 Full Name (Last, First, Middle Initial)
 Mailing Address 5524 Nebraska Ave NW
 City Washington State DC Zip Code 20015-1260
 FEC ID number of contributing federal political committee. **C**
 Name of Employer None Occupation Retired
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date **250.00**

Date of Receipt **10 / 28 / 2014**
Transaction ID : AAD6C13C5CA7B4F739E4
 Amount of Each Receipt this Period **125.00**

SUBTOTAL of Receipts This Page (optional).....	5375.00
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 89 OF 183
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)
LCV Victory Fund

Full Name (Last, First, Middle Initial) A. Erika Sitz		Date of Receipt 10 / 29 / 2014 Transaction ID : AF9AFE2645ED34070A72
Mailing Address 6521 154th Ln NW		Amount of Each Receipt this Period 500.00
City Anoka	State MN	Zip Code 55303-4031
FEC ID number of contributing federal political committee. C	Name of Employer Not Employed	Occupation Homemaker
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

Full Name (Last, First, Middle Initial) B. Charles Smith		Date of Receipt 10 / 23 / 2014 Transaction ID : A043B745A01AB419AA2D
Mailing Address 5210 Centennial Trl		Amount of Each Receipt this Period 1000.00
City Boulder	State CO	Zip Code 80303-1262
FEC ID number of contributing federal political committee. C	Name of Employer Knowledge Factor Inc.	Occupation Chief Research Officer
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

Full Name (Last, First, Middle Initial) C. Elizabeth Smith		Date of Receipt 10 / 26 / 2014 Transaction ID : ABF9A45452D4F4529A31
Mailing Address 2225 Lewis St		Amount of Each Receipt this Period 100.00
City Lakewood	State CO	Zip Code 80215-1336
FEC ID number of contributing federal political committee. C	Name of Employer Pinnacol Assurance	Occupation ATTORNEY
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 575.00	

SUBTOTAL of Receipts This Page (optional).....▶	1600.00
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 90 OF 183
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
LCV Victory Fund

Full Name (Last, First, Middle Initial)
A. Timothy Sowder

Mailing Address **6625 Cow Hollow Dr Apt 2223**
Apt 2223

City **Charlotte** State **NC** Zip Code **28226-8583**

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

Name of Employer **Retired** Occupation **Insurance**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **500.00**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
10			17			2014			

Transaction ID : A045F3DEA35944AE1B6A

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)
B. Jayne Spence

Mailing Address **244 Lake Shore Dr S**

City **Maryland** State **NY** Zip Code **12116-1905**

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

Name of Employer **Retired** Occupation **Retired**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1000.00**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
10			27			2014			

Transaction ID : AEC1B12DF788E46C9BCD

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)
C. Jeff Stant

Mailing Address **5819 Lowell Ave**

City **Indianapolis** State **IN** Zip Code **46219-5917**

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

Name of Employer **Indiana Forest Alliance** Occupation **Environmental advocate**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **250.00**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
10			27			2014			

Transaction ID : AB05195D4D74348DB93C

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional).....▶	1750.00
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 91 OF 183
	<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)
LCV Victory Fund

Full Name (Last, First, Middle Initial)
A. Nancy Stephens

Mailing Address 255 N Saltair Ave

City Los Angeles State CA Zip Code 90049-2912

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

Name of Employer Self Occupation Actor

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 28 / 2014

Transaction ID : A06A85023C47145E680B

Amount of Each Receipt this Period
5000.00

Full Name (Last, First, Middle Initial)
B. William Stetson

Mailing Address 139 Elm St

City Norwich State VT Zip Code 05055-9445

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

Name of Employer Boatwright Foundation Inc. Occupation Film Producer

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
3000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 02 / 2014

Transaction ID : AE61B2BC4DC864DB8894

Amount of Each Receipt this Period
2500.00

Full Name (Last, First, Middle Initial)
C. Sarah B Stewart

Mailing Address 207 Appleton St

City Cambridge State MA Zip Code 02138-1345

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

Name of Employer Self Occupation Clinical Psychologist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
275.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 27 / 2014

Transaction ID : A10A809639DBC45F5BE0

Amount of Each Receipt this Period
75.00

SUBTOTAL of Receipts This Page (optional).....▶	7575.00
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 92 OF 183
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
LCV Victory Fund

Full Name (Last, First, Middle Initial)
A. Sarah B Stewart

Mailing Address 207 Appleton St

City Cambridge State MA Zip Code 02138-1345

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

Name of Employer Self Occupation Clinical Psychologist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **350.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
11 / 01 / 2014

Transaction ID : **AF735E55FC44D47DB8C4**

Amount of Each Receipt this Period
75.00

Full Name (Last, First, Middle Initial)
B. Catherine Stiefel

Mailing Address 809 San Antonio Pl

City San Diego State CA Zip Code 92106-3020

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

Name of Employer None Occupation Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **500.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
10 / 26 / 2014

Transaction ID : **AD9A81DD3F7C74AF2A96**

Amount of Each Receipt this Period
500.00

Full Name (Last, First, Middle Initial)
C. Anna Stone

Mailing Address 36 Kensington Ct

City Kensington State CA Zip Code 94707-1010

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

Name of Employer Retired Occupation Public Health

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **300.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
10 / 27 / 2014

Transaction ID : **A50A6A4BB492E481D987**

Amount of Each Receipt this Period
100.00

SUBTOTAL of Receipts This Page (optional)..... ▶ **675.00**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 93 OF 183
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
LCV Victory Fund

Full Name (Last, First, Middle Initial)
A. Randall Stratton

Mailing Address 2427 Massachusetts Ave Apt 3

City Cambridge	State MA	Zip Code 02140
-------------------	-------------	-------------------

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

Name of Employer None	Occupation Retired
--------------------------	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	27	/	2014

Transaction ID : AC2C4091BCCF44B75AB4

Amount of Each Receipt this Period
200.00

Full Name (Last, First, Middle Initial)
B. terry Stuart

Mailing Address 3743 Nelson Rd

City Longmont	State CO	Zip Code 80503-9092
------------------	-------------	------------------------

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

Name of Employer None	Occupation Retired
--------------------------	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	26	/	2014

Transaction ID : AB6CD5CB0F64E426AA08

Amount of Each Receipt this Period
250.00

Full Name (Last, First, Middle Initial)
C. Erika Tachet

Mailing Address 11120 Acama St

City North Hollywood	State CA	Zip Code 91602-3025
-------------------------	-------------	------------------------

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

Name of Employer None	Occupation Student
--------------------------	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
333.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	29	/	2014

Transaction ID : A5786EA9A89094446803

Amount of Each Receipt this Period
333.00

SUBTOTAL of Receipts This Page (optional).....▶	783.00
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 94 OF 183
	<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)
LCV Victory Fund

A. David Tapscott
 Full Name (Last, First, Middle Initial)
 Mailing Address 608 Elmwood Ave
 City Uxbridge State MA Zip Code 01569-2201
 FEC ID number of contributing federal political committee. **C**
 Name of Employer UMMHC Occupation Physician
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 23 / 2014
Transaction ID : AED1942DD1AEB429BB5E
 Amount of Each Receipt this Period
 200.00

B. Edith Taylor
 Full Name (Last, First, Middle Initial)
 Mailing Address 8089 Capitola Ave
 City Fair Oaks State CA Zip Code 95628-7539
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Retired Occupation Retired
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 27 / 2014
Transaction ID : AA91CF CF1671F4C12B4B
 Amount of Each Receipt this Period
 75.00

C. J. Holley Taylor
 Full Name (Last, First, Middle Initial)
 Mailing Address PO Box 1987
 City Penn Valley State CA Zip Code 95946-1987
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Retired Occupation Retired
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 25000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 22 / 2014
Transaction ID : AF8D01EB289534B5AB55
 Amount of Each Receipt this Period
 25000.00

SUBTOTAL of Receipts This Page (optional).....▶	25275.00
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 95 OF 183
	<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)
LCV Victory Fund

A. Robert Thomas
Full Name (Last, First, Middle Initial)

Mailing Address 230 Lynx Ct

City Fremont State CA Zip Code 94539-6051

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

Name of Employer None Occupation Engineer

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1250.00

Date of Receipt
10 / 27 / 2014
Transaction ID : A326CBA54524D4A8FB0E

Amount of Each Receipt this Period
200.00

B. Robert Thomas
Full Name (Last, First, Middle Initial)

Mailing Address 230 Lynx Ct

City Fremont State CA Zip Code 94539-6051

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

Name of Employer None Occupation Engineer

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1250.00

Date of Receipt
10 / 27 / 2014
Transaction ID : AC845A68D610F41B68D5

Amount of Each Receipt this Period
50.00

C. Katharine Thompson
Full Name (Last, First, Middle Initial)

Mailing Address PO Box 48

City South Tamworth State NH Zip Code 03883-0048

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

Name of Employer Self-Employed Occupation small busines owner

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
10 / 16 / 2014
Transaction ID : AE8F7464A835C4F9E9C5

Amount of Each Receipt this Period
1000.00

SUBTOTAL of Receipts This Page (optional).....	1250.00
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 96 OF 183
	<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)
LCV Victory Fund

Full Name (Last, First, Middle Initial)
A. Roland Tozer

Mailing Address 5912 State Route 32

City Westerlo State NY Zip Code 12193-3712

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

Name of Employer Retired Occupation Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **250.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
10 / 21 / 2014

Transaction ID : A6DC1FAAD81B44D35AD

Amount of Each Receipt this Period
100.00

Full Name (Last, First, Middle Initial)
B. Charles Turk

Mailing Address 100 Broadway Ave

City Wilmette State IL Zip Code 60091-3463

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

Name of Employer Self Occupation Psychiatrist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **500.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
10 / 22 / 2014

Transaction ID : AE6CBA1858E0E42138C1

Amount of Each Receipt this Period
50.00

Full Name (Last, First, Middle Initial)
c. Charles Turk

Mailing Address 100 Broadway Ave

City Wilmette State IL Zip Code 60091-3463

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

Name of Employer Self Occupation Psychiatrist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **550.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
11 / 22 / 2014

Transaction ID : A5FCF173028C946BDBBA

Amount of Each Receipt this Period
50.00

SUBTOTAL of Receipts This Page (optional).....▶	200.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 97 OF 183
	<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)
LCV Victory Fund

A. Louis Ugliuzza
Full Name (Last, First, Middle Initial)

Mailing Address 5321 C C Allis Rd

City Wyalusing State PA Zip Code 18853-8650

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

Name of Employer Retired Occupation Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
10 / 31 / 2014
Transaction ID : A1174F95FB6A349B987A

Amount of Each Receipt this Period
150.00

B. Menno van Wyk
Full Name (Last, First, Middle Initial)

Mailing Address 6925 SE 34TH ST

City Mercer Island State WA Zip Code 98040-3326

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

Name of Employer self employed Occupation film maker & investor

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1250.00

Date of Receipt
10 / 29 / 2014
Transaction ID : A17B9DF15B06844909D2

Amount of Each Receipt this Period
250.00

C. Katy VanDusen
Full Name (Last, First, Middle Initial)

Mailing Address 320 Lakeside Dr

City Birmingham State MI Zip Code 48009-1369

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

Name of Employer Self Occupation facilitator of positive change

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
10 / 26 / 2014
Transaction ID : A1BD8CF90CF034E0DA3A

Amount of Each Receipt this Period
250.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 650.00

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 98 OF 183
	<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)
LCV Victory Fund

A. Katy VanDusen
Full Name (Last, First, Middle Initial)
Mailing Address 320 Lakeside Dr
City Birmingham State MI Zip Code 48009-1369
FEC ID number of contributing federal political committee. **C**
Name of Employer Self Occupation facilitator of positive change
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date **750.00**

Date of Receipt **11 / 02 / 2014**
Transaction ID : AA2BE311F77F04F18A58
Amount of Each Receipt this Period **250.00**

B. James Wagner
Full Name (Last, First, Middle Initial)
Mailing Address 168 Pine Grove Ave
City Newton Lower Falls State MA Zip Code 02462-1015
FEC ID number of contributing federal political committee. **C**
Name of Employer Retired Occupation writer/editor
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date **300.00**

Date of Receipt **10 / 26 / 2014**
Transaction ID : ACAC9D62BC5984D2EAFF
Amount of Each Receipt this Period **100.00**

C. Ms. Diane Walker
Full Name (Last, First, Middle Initial)
Mailing Address 748 Oceanville Rd
City Stonington State ME Zip Code 04681-3028
FEC ID number of contributing federal political committee. **C**
Name of Employer None Occupation Retired
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date **250.00**

Date of Receipt **10 / 28 / 2014**
Transaction ID : AF3B6C3590C4D4FEE917
Amount of Each Receipt this Period **250.00**

SUBTOTAL of Receipts This Page (optional)..... **600.00**
TOTAL This Period (last page this line number only).....

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 99 OF 183
	<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)
LCV Victory Fund

A. Elizabeth Warriner
Full Name (Last, First, Middle Initial)

Mailing Address 119 NW Drake Rd

City Bend State OR Zip Code 97701-2311

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

Name of Employer Occupation Retired Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt 10 / 22 / 2014
Transaction ID : AD5B8E6270DF647B8B15

Amount of Each Receipt this Period 300.00

B. Andrea Watson
Full Name (Last, First, Middle Initial)

Mailing Address 90 Windward Ln

City Bristol State RI Zip Code 02809-1551

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

Name of Employer Occupation none Finance

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 10 / 29 / 2014
Transaction ID : A5EBC731CE6F6434C91C

Amount of Each Receipt this Period 50.00

C. Andrea Watson
Full Name (Last, First, Middle Initial)

Mailing Address 90 Windward Ln

City Bristol State RI Zip Code 02809-1551

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

Name of Employer Occupation none Finance

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 290.00

Date of Receipt 10 / 31 / 2014
Transaction ID : A02AC446F68BA4956995

Amount of Each Receipt this Period 40.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 390.00

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 100 OF 183
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
LCV Victory Fund

Full Name (Last, First, Middle Initial)
A. Andrea Watson

Mailing Address 90 Windward Ln

City Bristol State RI Zip Code 02809-1551

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

Name of Employer none Occupation Finance

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **330.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
11 / 02 / 2014

Transaction ID : A409D89B0AE3E41E392F

Amount of Each Receipt this Period
40.00

Full Name (Last, First, Middle Initial)
B. Linda Webster

Mailing Address 6355 green valley circle, #111

City Culver City State CA Zip Code 90230-8048

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

Name of Employer Retired Occupation Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **225.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
10 / 28 / 2014

Transaction ID : A1F1AE9567B444FBC8FC

Amount of Each Receipt this Period
25.00

Full Name (Last, First, Middle Initial)
C. Linda Webster

Mailing Address 6355 green valley circle, #111

City Culver City State CA Zip Code 90230-8048

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

Name of Employer Retired Occupation Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **250.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
10 / 31 / 2014

Transaction ID : A3F8FEAF73FDD486782D

Amount of Each Receipt this Period
25.00

SUBTOTAL of Receipts This Page (optional)..... ▶ **90.00**

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 101 OF 183
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
LCV Victory Fund

Full Name (Last, First, Middle Initial)
A. John Weeden

Mailing Address 76 Calhoun Ter

City State Zip Code
 San Francisco CA 94133-3506

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

Name of Employer Occupation
 Retired Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 30000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 10 / 2014
Transaction ID : A354970E25076474A982

Amount of Each Receipt this Period
 10000.00

Full Name (Last, First, Middle Initial)
B. Diana Wege

Mailing Address 36 Dans Hwy

City State Zip Code
 New Canaan CT 06840-2501

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

Name of Employer Occupation
 Self-Employed artist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 2500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 21 / 2014
Transaction ID : A096AFFC330A24DE5A87

Amount of Each Receipt this Period
 2500.00

Full Name (Last, First, Middle Initial)
C. Stephen Westfold

Mailing Address 505 Summit Springs Rd

City State Zip Code
 Woodside CA 94062-4244

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

Name of Employer Occupation
 Kestrel Institute Computer Scientist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 375.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 31 / 2014
Transaction ID : A0BA3D1A468F34FAD9B3

Amount of Each Receipt this Period
 125.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 12625.00

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 102 OF 183
	<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)
LCV Victory Fund

A. Jane Whitcomb
Full Name (Last, First, Middle Initial)

Mailing Address 1121 Bell St
Apt 211A

City Pasadena State CA Zip Code 91104-3847

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

Name of Employer University of Southern California Occupation Student

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
650.00

Date of Receipt
10 / 26 / 2014
Transaction ID : **AAEAF6B0FB9E34EAE883**

Amount of Each Receipt this Period
150.00

B. Jane Whitcomb
Full Name (Last, First, Middle Initial)

Mailing Address 1121 Bell St
Apt 211A

City Pasadena State CA Zip Code 91104-3847

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

Name of Employer University of Southern California Occupation Student

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
750.00

Date of Receipt
10 / 27 / 2014
Transaction ID : **AE0DA1B0C12AA4CC7831**

Amount of Each Receipt this Period
100.00

C. David Whitney
Full Name (Last, First, Middle Initial)

Mailing Address 8 Ellen Dr

City Wyoming State PA Zip Code 18644-9390

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

Name of Employer None (retired) Occupation Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
548.00

Date of Receipt
10 / 28 / 2014
Transaction ID : **A30F64E9695124E93922**

Amount of Each Receipt this Period
267.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 517.00

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 103 OF 183
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
LCV Victory Fund

Full Name (Last, First, Middle Initial)
A. David Whitney

Mailing Address 8 Ellen Dr

City Wyoming State PA Zip Code 18644-9390

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

Name of Employer Occupation
None (retired) Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
548.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
10 / 28 / 2014
Transaction ID : A982A72CC33654E3291A

Amount of Each Receipt this Period
267.00

Full Name (Last, First, Middle Initial)
B. Leslie Williams

Mailing Address 376 Harris Rd

City Bedford Hills State NY Zip Code 10507-2411

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

Name of Employer Occupation
Self-Employed lawyer

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
10000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
11 / 03 / 2014
Transaction ID : AFE012BB81F454C1D88E

Amount of Each Receipt this Period
10000.00

Full Name (Last, First, Middle Initial)
C. Kate Wilson

Mailing Address 3 Mount Burney Ct

City San Rafael State CA Zip Code 94903-1014

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

Name of Employer Occupation
Retired Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
10 / 26 / 2014
Transaction ID : A0A9165B3EA6B4471AAD

Amount of Each Receipt this Period
1000.00

SUBTOTAL of Receipts This Page (optional).....▶	11267.00
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 104 OF 183
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
LCV Victory Fund

Full Name (Last, First, Middle Initial)
A. Sandra Wilson

Mailing Address 297 Hickerson Hollow Rd

City Front Royal State VA Zip Code 22630-5231

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

Name of Employer Retired Occupation Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
225.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 16 / 2014

Transaction ID : ABA678B3318B04FD0844

Amount of Each Receipt this Period
225.00

Full Name (Last, First, Middle Initial)
B. Leni Windle

Mailing Address 210 W Hortter St

City Philadelphia State PA Zip Code 19119-3101

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

Name of Employer School District Cheltenham Township Occupation High School Guidance Counselor

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
205.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 23 / 2014

Transaction ID : A35F72E74B83147B1837

Amount of Each Receipt this Period
5.00

Full Name (Last, First, Middle Initial)
C. Leni Windle

Mailing Address 210 W Hortter St

City Philadelphia State PA Zip Code 19119-3101

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

Name of Employer School District Cheltenham Township Occupation High School Guidance Counselor

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
220.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 24 / 2014

Transaction ID : AB1EE64B6C152444BA5E

Amount of Each Receipt this Period
15.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 245.00

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 105 OF 183
	<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)
LCV Victory Fund

A. Jon Wittwer
Full Name (Last, First, Middle Initial)

Mailing Address 1927 Smith Grade

City Santa Cruz State CA Zip Code 95060-9758

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

Name of Employer Wittwer Parkin LLP Occupation ATTORNEY

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **420.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
10 / 27 / 2014

Transaction ID : A920AD437162942A9917

Amount of Each Receipt this Period
210.00

B. Elsa Wood
Full Name (Last, First, Middle Initial)

Mailing Address 309 Bridgeboro Rd Apt 1110

City Moorestown State NJ Zip Code 08057-1420

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

Name of Employer Retired Occupation Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **2000.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
10 / 17 / 2014

Transaction ID : AE61F5362100A4BE2844

Amount of Each Receipt this Period
2000.00

C. John Yates
Full Name (Last, First, Middle Initial)

Mailing Address 47 Jewett Pkwy

City Buffalo State NY Zip Code 14214-2319

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

Name of Employer Roswell Park Cancer Institute Occupation Research Scientist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **500.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
10 / 28 / 2014

Transaction ID : A709362D374384833B14

Amount of Each Receipt this Period
500.00

SUBTOTAL of Receipts This Page (optional).....▶	2710.00
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 106 OF 183
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
LCV Victory Fund

Full Name (Last, First, Middle Initial)
A. Bonnie Yelverton

Mailing Address 7234 Annapolis Way

City Fontana State CA Zip Code 92336-0856

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

Name of Employer Occupation
None science and math teacher

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
275.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 02 / 2014
Transaction ID : A4B37A9877D004F6C807

Amount of Each Receipt this Period
25.00

Full Name (Last, First, Middle Initial)
B. Jerrold Yos

Mailing Address 1001 Main St Unit 34
Unit 34

City Woburn State MA Zip Code 01801-1253

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

Name of Employer Occupation
Retired Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 21 / 2014
Transaction ID : A4631D44345FF401E814

Amount of Each Receipt this Period
500.00

Full Name (Last, First, Middle Initial)
C. Judy Young

Mailing Address 500 Otter Conservation Rd

City Statesboro State GA Zip Code 30458-3981

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

Name of Employer Occupation
Otter Conservation Center CEO

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 26 / 2014
Transaction ID : ACE731A1512C342899BE

Amount of Each Receipt this Period
250.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 775.00

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 107 OF 183
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
LCV Victory Fund

A. Full Name (Last, First, Middle Initial)
Dr. Ken Zafren

Mailing Address 10181 Curvi St

City Anchorage State AK Zip Code 99507-7039

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

Name of Employer Self Occupation Physician

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 350.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 31 / 2014

Transaction ID : A67C1162AA750444AAC4

Amount of Each Receipt this Period
 150.00

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

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 Y Y

Amount of Each Receipt this Period

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

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 Y Y

Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional).....▶	150.00
TOTAL This Period (last page this line number only).....▶	807623.45

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

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

FOR LINE NUMBER: PAGE 108 OF 183
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
LCV Victory Fund

Full Name (Last, First, Middle Initial)
A. Friends Of The Earth Action PAC

Mailing Address 1100 15TH STREET, NW11TH FLOOR

City Washington State DC Zip Code 20005-1707

FEC ID number of contributing federal political committee. **C** C00141044

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 03 / 2014
Transaction ID : A4B39315470AB4B4CA54

Amount of Each Receipt this Period
1000.00

Full Name (Last, First, Middle Initial)
B. POPULATION CONNECTION ACTION FUND PAC

Mailing Address 2120 L ST NW SUITE 500

City WASHINGTON State DC Zip Code 20037

FEC ID number of contributing federal political committee. **C** C00564799

Name of Employer Occupation

Receipt For:
 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 / 23 / 2014
Transaction ID : A28EC3268216C4AAD9F5

Amount of Each Receipt this Period
1000.00

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

Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional).....▶	2000.00
TOTAL This Period (last page this line number only).....▶	2000.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 109 OF 183
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
LCV Victory Fund

Full Name (Last, First, Middle Initial)
A. Suntrust Bank
Mailing Address **PO Box 622227**
City **Orlando** State **FL** Zip Code **32862-2227**
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
Receipt For:
 Primary General
 Other (specify) ▼
Aggregate Year-to-Date ▼
885.51

Date of Receipt
10 / 31 / 2014
Transaction ID : AB38C84351C7B406EA99
Amount of Each Receipt this Period
267.63
Interest

Full Name (Last, First, Middle Initial)
B.
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
Amount of Each Receipt this Period

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
Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional)..... ▶ **267.63**
TOTAL This Period (last page this line number only)..... ▶ **267.63**

**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)
LCV Victory Fund

Full Name (Last, First, Middle Initial)

A. League of Conservation Voters, Inc.

Mailing Address 1920 L St NW
Ste 800

City Washington State DC Zip Code 20036-5045

Purpose of Disbursement
Staff Time for Fundraising Email

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
10 / 16 / 2014

Transaction ID : **BF8157068A82C4140B5D**

Amount of Each Disbursement this Period

412.59

Full Name (Last, First, Middle Initial)

B. League of Conservation Voters, Inc.

Mailing Address 1920 L St NW
Ste 800

City Washington State DC Zip Code 20036-5045

Purpose of Disbursement
Staff and Email for Fundraising Appeal

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
10 / 29 / 2014

Transaction ID : **B0B309FC6631F4A80901**

Amount of Each Disbursement this Period

575.26

Full Name (Last, First, Middle Initial)

C. League of Conservation Voters, Inc.

Mailing Address 1920 L St NW
Ste 800

City Washington State DC Zip Code 20036-5045

Purpose of Disbursement
Staff time for fundraising emails

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
10 / 31 / 2014

Transaction ID : **BEF724C03931741E7A89**

Amount of Each Disbursement this Period

30.33

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

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

1018.18

**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)
LCV Victory Fund

Full Name (Last, First, Middle Initial)

A. League of Conservation Voters, Inc.

Mailing Address 1920 L St NW
Ste 800

City Washington State DC Zip Code 20036-5045

Purpose of Disbursement
Staff time for fundraising emails

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
10 / 31 / 2014

Transaction ID : BC15BC815994F4C3AACC

Amount of Each Disbursement this Period

561.66

Full Name (Last, First, Middle Initial)

B. League of Conservation Voters, Inc.

Mailing Address 1920 L St NW
Ste 800

City Washington State DC Zip Code 20036-5045

Purpose of Disbursement
Staff time for fundraising emails

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
10 / 31 / 2014

Transaction ID : B172274E8199F4829B9E

Amount of Each Disbursement this Period

592.30

Full Name (Last, First, Middle Initial)

C. League of Conservation Voters, Inc.

Mailing Address 1920 L St NW
Ste 800

City Washington State DC Zip Code 20036-5045

Purpose of Disbursement
Staff and Email for Fundraising Appeal

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
11 / 06 / 2014

Transaction ID : B98619CEB5E85459BAD7

Amount of Each Disbursement this Period

778.23

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

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

1932.19

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)
LCV Victory Fund

Full Name (Last, First, Middle Initial)

A. League of Conservation Voters, Inc.

Mailing Address 1920 L St NW
Ste 800

City Washington State DC Zip Code 20036-5045

Purpose of Disbursement
Staff and Email for Fundraising Appeal

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
11			06			2014			

Transaction ID : **BB7F20A044F5F4ED99A4**

Amount of Each Disbursement this Period

35.75

Full Name (Last, First, Middle Initial)

B. League of Conservation Voters, Inc.

Mailing Address 1920 L St NW
Ste 800

City Washington State DC Zip Code 20036-5045

Purpose of Disbursement
Admin and Compliance Support

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
11			12			2014			

Transaction ID : **BE131FD41EB9447BC899**

Amount of Each Disbursement this Period

1444.92

Full Name (Last, First, Middle Initial)

C. Allied Printing Resources

Mailing Address 33 Commerce Road

City Carlstadt State NJ Zip Code 07072-2504

Purpose of Disbursement
Printing

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
11			12			2014			

Transaction ID : **B5EBB75078EBE4F04B7D**

Amount of Each Disbursement this Period

3577.64

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

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

5058.31

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
LCV Victory Fund

Full Name (Last, First, Middle Initial)

A. Analyst Institute

Mailing Address 815 16th St NW
7th Floor

City Washington State DC Zip Code 20006-4101

Purpose of Disbursement
Post-Election Analysis

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
11 / 14 / 2014

Transaction ID : B36A1D6AF3C3A4154BBE

Amount of Each Disbursement this Period

64059.05

Full Name (Last, First, Middle Initial)

B. Bulletproof

Mailing Address 1840 41st Ave
102-33

City Capitola State CA Zip Code 95010-2513

Purpose of Disbursement
Proofreading

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
10 / 31 / 2014

Transaction ID : BA5810E5BE5764A84BDD

Amount of Each Disbursement this Period

37.50

Full Name (Last, First, Middle Initial)

C. Chapman Cubine Adams + Hussey

Mailing Address 1600 Wilson Blvd
Ste 300

City Arlington State VA Zip Code 22209-2505

Purpose of Disbursement
Art, Copy and Production fees for fundraising

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
10 / 23 / 2014

Transaction ID : BBAB0C506E7FF48169F9

Amount of Each Disbursement this Period

2754.60

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

66851.15

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
LCV Victory Fund

Full Name (Last, First, Middle Initial)
A. Chapman Cubine Adams + Hussey

Date of Disbursement: / /

Mailing Address: 1600 Wilson Blvd
Ste 300

City: Arlington State: VA Zip Code: 22209-2505

Purpose of Disbursement: Art Fees

Candidate Name:

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Transaction ID : **B7634FB16B59D4126928**

Amount of Each Disbursement this Period:

Full Name (Last, First, Middle Initial)
B. Linemark Printing, Inc.

Date of Disbursement: / /

Mailing Address: 501 Prince Georges Blvd

City: Upper Marlboro State: MD Zip Code: 20774-7415

Purpose of Disbursement: Printing

Candidate Name:

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Transaction ID : **B9E7E1CEF22B9441DAA4**

Amount of Each Disbursement this Period:

Full Name (Last, First, Middle Initial)
C. Linemark Printing, Inc.

Date of Disbursement: / /

Mailing Address: 501 Prince Georges Blvd

City: Upper Marlboro State: MD Zip Code: 20774-7415

Purpose of Disbursement: Envelopes

Candidate Name:

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Transaction ID : **BCC3CF020CEA4434F994**

Amount of Each Disbursement this Period:

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

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

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

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

FOR LINE NUMBER:
(check only one)

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

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)
LCV Victory Fund

Full Name (Last, First, Middle Initial)

A. Mack-Sumner Communications, LLC

Mailing Address 2001 N Beaugard St
Ste 420

City Alexandria State VA Zip Code 22311-1750

Purpose of Disbursement
Hats

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
10			28			2014			

Transaction ID : **B8C6ECC11E2D54ECCBFE**

Amount of Each Disbursement this Period

4609.50

Full Name (Last, First, Middle Initial)

B. Mosaic

Mailing Address 4801 Viewpoint PI

City Hyattsville State MD Zip Code 20781-1100

Purpose of Disbursement
Printing

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
10			31			2014			

Transaction ID : **B3B57384C676D4AF9B78**

Amount of Each Disbursement this Period

1325.01

Full Name (Last, First, Middle Initial)

C. Public Policy Polling

Mailing Address 2912 Highwoods Blvd

City Raleigh State NC Zip Code 27604-1064

Purpose of Disbursement
Polling

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
10			28			2014			

Transaction ID : **BB142109BC0A6483F99A**

Amount of Each Disbursement this Period

1500.00

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

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

7434.51

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
LCV Victory Fund

Full Name (Last, First, Middle Initial)

A. Suntrust Bank

Mailing Address PO Box 622227

City Orlando State FL Zip Code 32862-2227

Purpose of Disbursement
Bank 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 / 21 / 2014

Transaction ID : **BC1E9736066C946CCA44**

Amount of Each Disbursement this Period

43.81

Full Name (Last, First, Middle Initial)

B. Suntrust Bank

Mailing Address PO Box 622227

City Orlando State FL Zip Code 32862-2227

Purpose of Disbursement
Bank 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
11 / 10 / 2014

Transaction ID : **BE742BF67A228445791B**

Amount of Each Disbursement this Period

1420.06

Full Name (Last, First, Middle Initial)

C. Suntrust Bank

Mailing Address PO Box 622227

City Orlando State FL Zip Code 32862-2227

Purpose of Disbursement
Bank 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
11 / 20 / 2014

Transaction ID : **BFA76354649084D25819**

Amount of Each Disbursement this Period

14647.19

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

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

16111.06

**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)
LCV Victory Fund

Full Name (Last, First, Middle Initial)

A. Woodsboro Bank

Mailing Address 5 N Main St

City Woodsboro State MD Zip Code 21798-8816

Purpose of Disbursement
Bank 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 / 31 / 2014

Transaction ID : BC05E4D00355249D5B11

Amount of Each Disbursement this Period

91.70

B.

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) ▼

Category/
Type

Date of Disbursement

M M / D D / Y Y 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
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)..... ▶

91.70

100027.11

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
LCV Victory Fund

Full Name (Last, First, Middle Initial)

A. COMMITTEE TO ELECT AN INDEPENDENT SENATE

Date of Disbursement

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

Mailing Address PO BOX 25554

Transaction ID : B996685AE97EE47DBAF8

City State Zip Code
ALEXANDRIA VA 22313

Amount of Each Disbursement this Period

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

Purpose of Disbursement
Contribution to Committee

--

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: District: Other2014

Full Name (Last, First, Middle Initial)

B. COMMITTEE TO ELECT AN INDEPENDENT SENATE

Date of Disbursement

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

Mailing Address PO BOX 25554

Transaction ID : B5EF135206FE24990AC6

City State Zip Code
ALEXANDRIA VA 22313

Amount of Each Disbursement this Period

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

Purpose of Disbursement
Contribution to Committee

--

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: District: Other2014

Full Name (Last, First, Middle Initial)

C. ENVIRONMENTAL DEFENSE ACTION FUND

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	1		0	3		2	0	1	4

Mailing Address 1875 CONNECTICUT AVE NW
600

Transaction ID : B4CE9C602D43845058F2

City State Zip Code
WASHINGTON DC 20009

Amount of Each Disbursement this Period

1	5	0	0	0	0	.	0	0
---	---	---	---	---	---	---	---	---

Purpose of Disbursement
Contribution to Committee

--

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: District: Other2014

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

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

6	0	0	0	0	0	.	0	0
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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
LCV Victory Fund

Full Name (Last, First, Middle Initial)

A. EVERY VOICE ACTION

Mailing Address 1133 19TH ST NW NINTH FLOOR

City WASHINGTON State DC Zip Code 20036

Purpose of Disbursement
Contribution to Committee

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼
Other2014

State:

District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	27	/	2014

Transaction ID : BE6877320FFDE429B9CC

Amount of Each Disbursement this Period

25000.00

Full Name (Last, First, Middle Initial)

B. FAIR SHARE ACTION

Mailing Address 3845 TENNYSON ST #150

City DENVER State CO Zip Code 80212

Purpose of Disbursement
Contribution to Committee

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼
Other2014

State:

District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	03	/	2014

Transaction ID : B79C036568806413EBFE

Amount of Each Disbursement this Period

20000.00

Full Name (Last, First, Middle Initial)

C.

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

Amount of Each Disbursement this Period

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

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

45000.00

645000.00

**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 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)
LCV Victory Fund

Full Name (Last, First, Middle Initial)

A. John Repass

Mailing Address 414 Mission Rd

City Kodiak State AK Zip Code 99615-6329

Purpose of Disbursement
Refund of Contribution Made

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
11 / 24 / 2014

Transaction ID : B157BCCF9AB414AA19B0

Amount of Each Disbursement this Period

800.00

B.

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) ▼

Category/
Type

Date of Disbursement

M M / D D / Y Y 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
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)..... ▶

800.00

800.00

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 121 OF 183
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)
LCV Victory Fund

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor League of Conservation Voters, Inc.	Nature of Debt (Purpose): Postage
Mailing Address 1920 L St NW Ste 800	
City State Zip Code Washington DC 20036-5045	

Outstanding Balance Beginning This Period 146.60	Transaction ID : DB250EAC7FE684E7EA37	
Amount Incurred This Period 0.00	Payment This Period 146.60	Outstanding Balance at Close of This Period 0.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor League of Conservation Voters, Inc.	Nature of Debt (Purpose): Postage
Mailing Address 1920 L St NW Ste 800	
City State Zip Code Washington DC 20036-5045	

Outstanding Balance Beginning This Period 146.60	Transaction ID : D21BA887007E74A73851	
Amount Incurred This Period 0.00	Payment This Period 146.60	Outstanding Balance at Close of This Period 0.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor League of Conservation Voters, Inc.	Nature of Debt (Purpose): Postage
Mailing Address 1920 L St NW Ste 800	
City State Zip Code Washington DC 20036-5045	

Outstanding Balance Beginning This Period 146.60	Transaction ID : D27333011E65249CA9B0	
Amount Incurred This Period 0.00	Payment This Period 146.60	Outstanding Balance at Close of This Period 0.00

1) SUBTOTALS This Period This Page (optional)..... ▶	0.00
2) TOTALS This Period (last page this line number only)..... ▶	
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) ▶	
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 122 OF 183
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)
LCV Victory Fund

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor League of Conservation Voters, Inc.	Nature of Debt (Purpose): Postage
Mailing Address 1920 L St NW Ste 800	
City State Zip Code Washington DC 20036-5045	

Outstanding Balance Beginning This Period 146.60	Transaction ID : DBA216015F1C44018828	
Amount Incurred This Period 0.00	Payment This Period 146.60	Outstanding Balance at Close of This Period 0.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor League of Conservation Voters, Inc.	Nature of Debt (Purpose): Postage
Mailing Address 1920 L St NW Ste 800	
City State Zip Code Washington DC 20036-5045	

Outstanding Balance Beginning This Period 146.60	Transaction ID : D0BE30B6862824E63B36	
Amount Incurred This Period 0.00	Payment This Period 146.60	Outstanding Balance at Close of This Period 0.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor League of Conservation Voters, Inc.	Nature of Debt (Purpose): Staff Time for Mail Copy
Mailing Address 1920 L St NW Ste 800	
City State Zip Code Washington DC 20036-5045	

Outstanding Balance Beginning This Period 23.80	Transaction ID : D7AC060B356174EE38E6	
Amount Incurred This Period 0.00	Payment This Period 23.80	Outstanding Balance at Close of This Period 0.00

1) SUBTOTALS This Period This Page (optional)..... ▶	0.00
2) TOTALS This Period (last page this line number only)..... ▶	
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) ▶	
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 123 OF 183
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)
LCV Victory Fund

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor League of Conservation Voters, Inc.	Nature of Debt (Purpose): Staff Time for Mail Copy
Mailing Address 1920 L St NW Ste 800	
City State Zip Code Washington DC 20036-5045	

Outstanding Balance Beginning This Period <input type="text" value="23.80"/>	Transaction ID : D42CFB28C248D436B896	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="23.80"/>	Outstanding Balance at Close of This Period <input type="text" value="0.00"/>

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor League of Conservation Voters, Inc.	Nature of Debt (Purpose): Postage
Mailing Address 1920 L St NW Ste 800	
City State Zip Code Washington DC 20036-5045	

Outstanding Balance Beginning This Period <input type="text" value="57.98"/>	Transaction ID : D4441333DD14540B9B9F	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="57.98"/>	Outstanding Balance at Close of This Period <input type="text" value="0.00"/>

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor League of Conservation Voters, Inc.	Nature of Debt (Purpose): Postage
Mailing Address 1920 L St NW Ste 800	
City State Zip Code Washington DC 20036-5045	

Outstanding Balance Beginning This Period <input type="text" value="57.99"/>	Transaction ID : D2AFF0EDFFE0D4DC8B48	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="57.99"/>	Outstanding Balance at Close of This Period <input type="text" value="0.00"/>

1) SUBTOTALS This Period This Page (optional)..... ▶	<input type="text" value="0.00"/>
2) TOTALS This Period (last page this line number only)..... ▶	<input type="text"/>
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) ▶	<input type="text"/>
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	<input type="text"/>

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 124 OF 183
	FOR LINE NUMBER: (check only one)
<input type="checkbox"/> 9	<input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)
LCV Victory Fund

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor League of Conservation Voters, Inc.	Nature of Debt (Purpose): Postage
Mailing Address 1920 L St NW Ste 800	
City State Zip Code Washington DC 20036-5045	

Outstanding Balance Beginning This Period <input type="text" value="57.98"/>	Transaction ID : DC6BFEA1DE47642B4928	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="57.98"/>	Outstanding Balance at Close of This Period <input type="text" value="0.00"/>

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor League of Conservation Voters, Inc.	Nature of Debt (Purpose): Postage
Mailing Address 1920 L St NW Ste 800	
City State Zip Code Washington DC 20036-5045	

Outstanding Balance Beginning This Period <input type="text" value="57.99"/>	Transaction ID : D9EAEB1225F4B4004A15	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="57.99"/>	Outstanding Balance at Close of This Period <input type="text" value="0.00"/>

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor League of Conservation Voters, Inc.	Nature of Debt (Purpose): Staff Time for Mail Copy
Mailing Address 1920 L St NW Ste 800	
City State Zip Code Washington DC 20036-5045	

Outstanding Balance Beginning This Period <input type="text" value="23.80"/>	Transaction ID : D8B0F9146251F482F8D7	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="23.80"/>	Outstanding Balance at Close of This Period <input type="text" value="0.00"/>

1) SUBTOTALS This Period This Page (optional)..... ▶	<input type="text" value="0.00"/>
2) TOTALS This Period (last page this line number only)..... ▶	<input type="text"/>
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) ▶	<input type="text"/>
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	<input type="text"/>

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 125 OF 183
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)
LCV Victory Fund

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor League of Conservation Voters, Inc.	Nature of Debt (Purpose): Staff Time for Mail Copy (Previously reported as \$25.00 on 10/19/14 48 Hour Report)
Mailing Address 1920 L St NW Ste 800	
City State Zip Code Washington DC 20036-5045	

Outstanding Balance Beginning This Period 23.80	Transaction ID : D61499A655D2145F5B00	
Amount Incurred This Period 0.00	Payment This Period 23.80	Outstanding Balance at Close of This Period 0.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor League of Conservation Voters, Inc.	Nature of Debt (Purpose): Postage
Mailing Address 1920 L St NW Ste 800	
City State Zip Code Washington DC 20036-5045	

Outstanding Balance Beginning This Period 57.98	Transaction ID : D225A770722924B11AA7	
Amount Incurred This Period 0.00	Payment This Period 57.98	Outstanding Balance at Close of This Period 0.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor League of Conservation Voters, Inc.	Nature of Debt (Purpose): Staff Time for Mail Copy
Mailing Address 1920 L St NW Ste 800	
City State Zip Code Washington DC 20036-5045	

Outstanding Balance Beginning This Period 23.80	Transaction ID : DDE88585A4EB043CAB5C	
Amount Incurred This Period 0.00	Payment This Period 23.80	Outstanding Balance at Close of This Period 0.00

1) SUBTOTALS This Period This Page (optional)..... ▶	0.00
2) TOTALS This Period (last page this line number only)..... ▶	
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) ▶	
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 126 OF 183
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)
LCV Victory Fund

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor League of Conservation Voters, Inc.	Nature of Debt (Purpose): Staff Time for Field Canvass
Mailing Address 1920 L St NW Ste 800	
City State Washington DC Zip Code 20036-5045	

Outstanding Balance Beginning This Period 2676.13	Transaction ID : D59D5737883A14DFAA44	
Amount Incurred This Period 0.00	Payment This Period 2676.13	Outstanding Balance at Close of This Period 0.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor League of Conservation Voters, Inc.	Nature of Debt (Purpose): ESTIMATE: Additional Staff Housing, 11/2-11/4
Mailing Address 1920 L St NW Ste 800	
City State Washington DC Zip Code 20036-5045	

Outstanding Balance Beginning This Period 0.00	Transaction ID : DE4D4604A58C44C66B8B	
Amount Incurred This Period 420.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 420.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor League of Conservation Voters, Inc.	Nature of Debt (Purpose): ESTIMATE: Additional Staff Travel Costs, 11/2-11/4
Mailing Address 1920 L St NW Ste 800	
City State Washington DC Zip Code 20036-5045	

Outstanding Balance Beginning This Period 0.00	Transaction ID : D221D13916F85487199C	
Amount Incurred This Period 500.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 500.00

1) SUBTOTALS This Period This Page (optional)..... ▶	920.00
2) TOTALS This Period (last page this line number only)..... ▶	
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) ▶	
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 127 OF 183
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)
LCV Victory Fund

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor AMM Political Strategies	Nature of Debt (Purpose): Phone Calls (Previously reported as estimate of \$38,000 on 10/10/14 48 hour report)
Mailing Address 507 N. Sylvania Ave	
City State Zip Code Ft Worth TX 76111-2317	

Outstanding Balance Beginning This Period <input type="text" value="33465.69"/>	Transaction ID : DF90C5508061746D6A41	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="33465.69"/>	Outstanding Balance at Close of This Period <input type="text" value="0.00"/>

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Mack-Sumner Communications, LLC	Nature of Debt (Purpose): Doorhangers
Mailing Address 2001 N Beauregard St Ste 420	
City State Zip Code Alexandria VA 22311-1750	

Outstanding Balance Beginning This Period <input type="text" value="17488.86"/>	Transaction ID : DB8CA6FDFD8C3433BAA2	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="17488.86"/>	Outstanding Balance at Close of This Period <input type="text" value="0.00"/>

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Mack-Sumner Communications, LLC	Nature of Debt (Purpose): Pledge Cards
Mailing Address 2001 N Beauregard St Ste 420	
City State Zip Code Alexandria VA 22311-1750	

Outstanding Balance Beginning This Period <input type="text" value="3835.55"/>	Transaction ID : D23B6C18C19AE4F36BAA	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="3835.55"/>	Outstanding Balance at Close of This Period <input type="text" value="0.00"/>

1) SUBTOTALS This Period This Page (optional)..... ▶	<input type="text" value="0.00"/>
2) TOTALS This Period (last page this line number only)..... ▶	<input type="text"/>
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) ▶	<input type="text"/>
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	<input type="text"/>

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 128 OF 183
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)
LCV Victory Fund

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Mack-Sumner Communications, LLC	Nature of Debt (Purpose): T-Shirts
Mailing Address 2001 N Beauregard St Ste 420	
City State Zip Code Alexandria VA 22311-1750	

Outstanding Balance Beginning This Period <input type="text" value="787.10"/>	Transaction ID : DB041E03CFA1C437782B	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="787.10"/>	Outstanding Balance at Close of This Period <input type="text" value="0.00"/>

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Mack-Sumner Communications, LLC	Nature of Debt (Purpose): Stickers
Mailing Address 2001 N Beauregard St Ste 420	
City State Zip Code Alexandria VA 22311-1750	

Outstanding Balance Beginning This Period <input type="text" value="529.25"/>	Transaction ID : D03BBD0221CFC453B937	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="529.25"/>	Outstanding Balance at Close of This Period <input type="text" value="0.00"/>

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Mosaic	Nature of Debt (Purpose): Printing
Mailing Address 1920 L St NW Street Level	
City State Zip Code Washington DC 20036-5004	

Outstanding Balance Beginning This Period <input type="text" value="190.81"/>	Transaction ID : DE52994994ECE4E10BBC	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="190.81"/>	Outstanding Balance at Close of This Period <input type="text" value="0.00"/>

1) SUBTOTALS This Period This Page (optional)..... ▶	<input type="text" value="0.00"/>
2) TOTALS This Period (last page this line number only)..... ▶	<input type="text"/>
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) ▶	<input type="text"/>
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	<input type="text"/>

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: (check only one)

9
 10

NAME OF COMMITTEE (In Full)
LCV Victory Fund

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <p style="text-align: center; font-size: 1.2em;">Mosaic</p>	Nature of Debt (Purpose): Printing
Mailing Address 1920 L St NW Street Level	
City State Zip Code Washington DC 20036-5004	

Outstanding Balance Beginning This Period <div style="border: 1px solid black; padding: 2px; text-align: right;">190.80</div>	Transaction ID : D15FD80F87C034F269ED
Amount Incurred This Period <div style="border: 1px solid black; padding: 2px; text-align: right;">0.00</div>	Payment This Period <div style="border: 1px solid black; padding: 2px; text-align: right;">190.80</div>
Outstanding Balance at Close of This Period <div style="border: 1px solid black; padding: 2px; text-align: right;">0.00</div>	

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor <p style="text-align: center; font-size: 1.2em;">Mosaic</p>	Nature of Debt (Purpose): Printing (Previously reported as \$80.00 on 10/19/14 48 Hour Report)
Mailing Address 1920 L St NW Street Level	
City State Zip Code Washington DC 20036-5004	

Outstanding Balance Beginning This Period <div style="border: 1px solid black; padding: 2px; text-align: right;">190.80</div>	Transaction ID : D757F00F226564B26BEB
Amount Incurred This Period <div style="border: 1px solid black; padding: 2px; text-align: right;">0.00</div>	Payment This Period <div style="border: 1px solid black; padding: 2px; text-align: right;">190.80</div>
Outstanding Balance at Close of This Period <div style="border: 1px solid black; padding: 2px; text-align: right;">0.00</div>	

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor <p style="text-align: center; font-size: 1.2em;">Mosaic</p>	Nature of Debt (Purpose): Printing
Mailing Address 1920 L St NW Street Level	
City State Zip Code Washington DC 20036-5004	

Outstanding Balance Beginning This Period <div style="border: 1px solid black; padding: 2px; text-align: right;">190.81</div>	Transaction ID : D26A35606602B4B758E6
Amount Incurred This Period <div style="border: 1px solid black; padding: 2px; text-align: right;">0.00</div>	Payment This Period <div style="border: 1px solid black; padding: 2px; text-align: right;">190.81</div>
Outstanding Balance at Close of This Period <div style="border: 1px solid black; padding: 2px; text-align: right;">0.00</div>	

1) SUBTOTALS This Period This Page (optional)..... ▶	<div style="border: 1px solid black; padding: 2px;">0.00</div>
2) TOTALS This Period (last page this line number only)..... ▶	<div style="border: 1px solid black; padding: 2px;"> </div>
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) ▶	<div style="border: 1px solid black; padding: 2px;"> </div>
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	<div style="border: 1px solid black; padding: 2px;"> </div>

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 130 OF 183
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)
LCV Victory Fund

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Mosaic	Nature of Debt (Purpose): Printing
Mailing Address 1920 L St NW Street Level	
City State Zip Code Washington DC 20036-5004	

Outstanding Balance Beginning This Period <input type="text" value="190.81"/>	Transaction ID : D7CAD67A5A57B4B9283E	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="190.81"/>	Outstanding Balance at Close of This Period <input type="text" value="0.00"/>

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Matt Pahler	Nature of Debt (Purpose): Design
Mailing Address 3803 SE Cesar E Chavez Blvd #1	
City State Zip Code Portland OR 97202-1706	

Outstanding Balance Beginning This Period <input type="text" value="145.00"/>	Transaction ID : DEEFDB4FEF64A499796D	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="145.00"/>	Outstanding Balance at Close of This Period <input type="text" value="0.00"/>

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Matt Pahler	Nature of Debt (Purpose): Design
Mailing Address 3803 SE Cesar E Chavez Blvd #1	
City State Zip Code Portland OR 97202-1706	

Outstanding Balance Beginning This Period <input type="text" value="145.00"/>	Transaction ID : D97756BDB279344FF9B2	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="145.00"/>	Outstanding Balance at Close of This Period <input type="text" value="0.00"/>

1) SUBTOTALS This Period This Page (optional)..... ▶	<input type="text" value="0.00"/>
2) TOTALS This Period (last page this line number only)..... ▶	<input type="text"/>
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) ▶	<input type="text"/>
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	<input type="text"/>

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 131 OF 183
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)
LCV Victory Fund

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Matt Pahler	Nature of Debt (Purpose): Design
Mailing Address 3803 SE Cesar E Chavez Blvd #1	
City State Zip Code Portland OR 97202-1706	

Outstanding Balance Beginning This Period 145.00	Transaction ID : D904E4B59C79F4779BA9	
Amount Incurred This Period 0.00	Payment This Period 145.00	Outstanding Balance at Close of This Period 0.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Matt Pahler	Nature of Debt (Purpose): Design
Mailing Address 3803 SE Cesar E Chavez Blvd #1	
City State Zip Code Portland OR 97202-1706	

Outstanding Balance Beginning This Period 145.00	Transaction ID : DBE3ADD68ED80426A940	
Amount Incurred This Period 0.00	Payment This Period 145.00	Outstanding Balance at Close of This Period 0.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Matt Pahler	Nature of Debt (Purpose): Design
Mailing Address 3803 SE Cesar E Chavez Blvd #1	
City State Zip Code Portland OR 97202-1706	

Outstanding Balance Beginning This Period 145.00	Transaction ID : D24DE9ECECE204272BD7	
Amount Incurred This Period 0.00	Payment This Period 145.00	Outstanding Balance at Close of This Period 0.00

1) SUBTOTALS This Period This Page (optional)..... ▶	0.00
2) TOTALS This Period (last page this line number only)..... ▶	
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) ▶	
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 132 OF 183
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)
LCV Victory Fund

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Sir Speedy	Nature of Debt (Purpose): Printing
Mailing Address 2001 L St NW	
City State Zip Code Washington DC 20036-4905	

Outstanding Balance Beginning This Period <input type="text" value="28.53"/>	Transaction ID : D37CFFA8B3B2245CDA30	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="28.53"/>	Outstanding Balance at Close of This Period <input type="text" value="0.00"/>

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Sir Speedy	Nature of Debt (Purpose): Printing
Mailing Address 2001 L St NW	
City State Zip Code Washington DC 20036-4905	

Outstanding Balance Beginning This Period <input type="text" value="28.53"/>	Transaction ID : D3410DB6531574EFC817	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="28.53"/>	Outstanding Balance at Close of This Period <input type="text" value="0.00"/>

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Sir Speedy	Nature of Debt (Purpose): Printing
Mailing Address 2001 L St NW	
City State Zip Code Washington DC 20036-4905	

Outstanding Balance Beginning This Period <input type="text" value="28.54"/>	Transaction ID : D89936F19A3C34FF9833	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="28.54"/>	Outstanding Balance at Close of This Period <input type="text" value="0.00"/>

1) SUBTOTALS This Period This Page (optional)..... ▶	<input type="text" value="0.00"/>
2) TOTALS This Period (last page this line number only)..... ▶	<input type="text"/>
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) ▶	<input type="text"/>
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	<input type="text"/>

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 133 OF 183
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)
LCV Victory Fund

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Sir Speedy	Nature of Debt (Purpose): Printing
Mailing Address 2001 L St NW	
City State Zip Code Washington DC 20036-4905	

Outstanding Balance Beginning This Period 28.53	Transaction ID : D16119DDB04AA4C36BC7	
Amount Incurred This Period 0.00	Payment This Period 28.53	Outstanding Balance at Close of This Period 0.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Sir Speedy	Nature of Debt (Purpose): Printing
Mailing Address 2001 L St NW	
City State Zip Code Washington DC 20036-4905	

Outstanding Balance Beginning This Period 28.53	Transaction ID : D64EF44F3A43F415D866	
Amount Incurred This Period 0.00	Payment This Period 28.53	Outstanding Balance at Close of This Period 0.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Stones' Phones, Inc.	Nature of Debt (Purpose): Phone Calls (Previously reported \$350,000 on Pre-General report)
Mailing Address 41-750 Las Palmas Drive Ste E-3	
City State Zip Code Rancho Mirage CA 92270-4678	

Outstanding Balance Beginning This Period 115318.43	Transaction ID : DA63605B57A444778B95	
Amount Incurred This Period 0.00	Payment This Period 115318.43	Outstanding Balance at Close of This Period 0.00

1) SUBTOTALS This Period This Page (optional)..... ▶	0.00
2) TOTALS This Period (last page this line number only)..... ▶	920.00
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) ▶	0.00
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	920.00

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full)
LCV Victory Fund
FEC IDENTIFICATION NUMBER
C C00486845

Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee: Freestone Communications
Mailing Address: 7442 Stratford Avenue
City: Saint Louis, State: MO, Zip Code: 63130-4000
Date of Public Distribution/Dissemination: 10/18/2014
Amount: 212735.25
Transaction ID: E55B49BE2FA1846799E8
Date of Disbursement or Obligation: 10/27/2014
Purpose of Expenditure: Phone Calls (Previously reported as an estimate of \$320,000.00 on 10/19/14 24 hour report)
Category/Type:
Name of Federal Candidate: Gary Peters
Support: [X] Support, [] Oppose
Office Sought: [] House, [X] Senate, State: MI
Calendar Year-To-Date Per Election for Office Sought: 214428.64
Disbursement For: [] Primary, [X] General, [] Other (specify)

Full Name of Payee: League of Conservation Voters, Inc.
Mailing Address: 1920 L St NW, Ste 800
City: Washington, State: DC, Zip Code: 20036-5045
Date of Public Distribution/Dissemination: 10/20/2014
Amount: 219.03
Transaction ID: E9C79466E83664DEFA4A
Date of Disbursement or Obligation: 10/22/2014
Purpose of Expenditure: Staff and Email for Online Message
Category/Type:
Name of Federal Candidate: Sen. Mark E Udall
Support: [X] Support, [] Oppose
Office Sought: [] House, [X] Senate, State: CO
Calendar Year-To-Date Per Election for Office Sought: 517710.80
Disbursement For: [] Primary, [X] General, [] Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures: 212954.28
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.
Signature: Patrick Collins
[Electronically Filed]
Date: 12/04/2014

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full)
LCV Victory Fund
FEC IDENTIFICATION NUMBER
C C00486845

Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee: League of Conservation Voters, Inc.
Mailing Address: 1920 L St NW, Ste 800, Washington DC 20036-5045
Purpose of Expenditure: Staff and Email for Online Message
Category/Type:
Name of Federal Candidate: Sen. Kay R Hagan
Support: [X]
Office Sought: Senate
Disbursement For: General
Amount: 219.03
Transaction ID: EA205DE590F3A4B3FAFB
Date of Disbursement or Obligation: 10/22/2014

Full Name of Payee: League of Conservation Voters, Inc.
Mailing Address: 1920 L St NW, Ste 800, Washington DC 20036-5045
Purpose of Expenditure: Staff and Email for Online Message
Category/Type:
Name of Federal Candidate: Sen. Mark E Udall
Support: [X]
Office Sought: Senate
Disbursement For: General
Amount: 25.00
Transaction ID: E4576E92019BB46F9962
Date of Disbursement or Obligation: 10/24/2014

(a) SUBTOTAL of Itemized Independent Expenditures: 244.03
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Signature: Patrick Collins
[Electronically Filed]
Date: 12/04/2014

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) LCV Victory Fund
FEC IDENTIFICATION NUMBER C C00486845
Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee League of Conservation Voters, Inc.
Mailing Address 1920 L St NW Ste 800
City Washington State DC Zip Code 20036-5045
Purpose of Expenditure Additional Staff Time for Field Canvass, 10/22
Category/Type

Date of Public Distribution/Dissemination 10/22/2014
Amount 276.40
Transaction ID : E543D519D3A2C4CA3A0B
Date of Disbursement or Obligation 11/12/2014

Name of Federal Candidate Sen. Kay R Hagan
Support [X] Oppose []
Office Sought: House [] Senate [X]
State: NC

Disbursement For: Primary [] General [X]
2014 Other (specify)

Full Name of Payee League of Conservation Voters, Inc.
Mailing Address 1920 L St NW Ste 800
City Washington State DC Zip Code 20036-5045
Purpose of Expenditure Staff Housing Costs
Category/Type

Date of Public Distribution/Dissemination 10/22/2014
Amount 129.00
Transaction ID : E0C788E9DBBD6499894D
Date of Disbursement or Obligation 11/07/2014

Name of Federal Candidate Sen. Kay R Hagan
Support [X] Oppose []
Office Sought: House [] Senate [X]
State: NC

Disbursement For: Primary [] General [X]
2014 Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 405.40
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Signature Patrick Collins [Electronically Filed] Date 12/04/2014

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) LCV Victory Fund	FEC IDENTIFICATION NUMBER ▼ C C00486845
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on M M / D D / Y Y Y Y Y Y	

Full Name of Payee League of Conservation Voters, Inc.	Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 10 / 27 / 2014
Mailing Address 1920 L St NW Ste 800	Amount 829.50
City State Zip Code Washington DC 20036-5045	
Purpose of Expenditure Additional Staff Time for Field Canvass, 10/27-10/29	Category/Type
Name of Federal Candidate Sen. Kay R Hagan	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 4916732.19	Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <u>NC</u>
	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶ _____

Transaction ID : EDE656CFAF071421095D
Date of Disbursement or Obligation

M M / D D / Y Y Y Y Y Y
11 / 12 / 2014

Full Name of Payee League of Conservation Voters, Inc.	Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 10 / 27 / 2014
Mailing Address 1920 L St NW Ste 800	Amount 84.00
City State Zip Code Washington DC 20036-5045	
Purpose of Expenditure Staff Mileage Reimbursement, 10/27-10/29	Category/Type
Name of Federal Candidate Sen. Kay R Hagan	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 4916732.19	Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <u>NC</u>
	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶ _____

Transaction ID : ECB9EDACEA07D48F9AC
Date of Disbursement or Obligation

M M / D D / Y Y Y Y Y Y
11 / 07 / 2014

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	913.50
(b) SUBTOTAL of Unitemized Independent Expenditures ▶	
(c) TOTAL Independent Expenditures..... ▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Patrick Collins [Electronically Filed] Date M M / D D / Y Y Y Y Y Y
12 / 04 / 2014

Signature _____

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) LCV Victory Fund	FEC IDENTIFICATION NUMBER ▼ C C00486845
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on M M / D D / Y Y Y Y Y Y	

Full Name of Payee League of Conservation Voters, Inc.	Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 10 / 27 / 2014
Mailing Address 1920 L St NW Ste 800	Amount 420.00
City State Zip Code Washington DC 20036-5045	
Purpose of Expenditure Staff Housing, 10/27-10/29	Category/Type
Name of Federal Candidate Sen. Kay R Hagan	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <u>NC</u>
Calendar Year-To-Date Per Election for Office Sought 4916732.19	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶ _____

Transaction ID : E458BD56172B44BD9AA1
Date of Disbursement or Obligation

M M / D D / Y Y Y Y Y Y
11 / 07 / 2014

Full Name of Payee League of Conservation Voters, Inc.	Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 10 / 29 / 2014
Mailing Address 1920 L St NW Ste 800	Amount 1457.09
City State Zip Code Washington DC 20036-5045	
Purpose of Expenditure Staff Housing Costs (originally reported at \$1400.00 on 10/30/14 24 Hr rpt)	Category/Type
Name of Federal Candidate Sen. Mark E Udall	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <u>CO</u>
Calendar Year-To-Date Per Election for Office Sought 1053644.62	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶ _____

Transaction ID : E2C450E8CE9CB4C62996
Date of Disbursement or Obligation

M M / D D / Y Y Y Y Y Y
11 / 24 / 2014

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	1877.09
(b) SUBTOTAL of Unitemized Independent Expenditures ▶	
(c) TOTAL Independent Expenditures..... ▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Signature Patrick Collins [Electronically Filed] Date M M / D D / Y Y Y Y Y Y
12 / 04 / 2014

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) LCV Victory Fund	FEC IDENTIFICATION NUMBER ▼ C C00486845
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on M M / D D / Y Y Y Y Y Y	

Full Name of Payee League of Conservation Voters, Inc.	Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 10 / 29 / 2014
Mailing Address 1920 L St NW Ste 800	Amount 1812.25
City State Zip Code Washington DC 20036-5045	
Purpose of Expenditure Staff Time for Field Canvass	Category/Type
Name of Federal Candidate Sen. Mark E Udall	Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 11 / 24 / 2014
Name of Federal Candidate Sen. Mark E Udall	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/> Other (specify) ▶
1053644.62	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶

Full Name of Payee League of Conservation Voters, Inc.	Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 10 / 30 / 2014
Mailing Address 1920 L St NW Ste 800	Amount 538.10
City State Zip Code Washington DC 20036-5045	
Purpose of Expenditure Staff Housing, 10/30-11/4 (rptd as est of \$840.00 on 10/31/14 24 hr rpt)	Category/Type
Name of Federal Candidate Sen. Kay R Hagan	Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 11 / 07 / 2014
Name of Federal Candidate Sen. Kay R Hagan	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/> Other (specify) ▶
4973421.46	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	2350.35
(b) SUBTOTAL of Unitemized Independent Expenditures ▶	
(c) TOTAL Independent Expenditures..... ▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Patrick Collins

Signature _____ Date M M / D D / Y Y Y Y Y Y 12 / 04 / 2014

[Electronically Filed]

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) LCV Victory Fund	FEC IDENTIFICATION NUMBER ▼ C C00486845
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on M M / D D / Y Y Y Y Y Y	

Full Name of Payee League of Conservation Voters, Inc.	Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 10 / 30 / 2014
Mailing Address 1920 L St NW Ste 800	Amount 330.00
City State Zip Code Washington DC 20036-5045	
Purpose of Expenditure Staff Food and Gas Reimbursements (rptd as est. of \$240.00 on 10/31/14 24 hr rpt)	Category/Type
Name of Federal Candidate Sen. Kay R Hagan	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <u>NC</u>
Calendar Year-To-Date Per Election for Office Sought 4973421.46	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ _____

Transaction ID : EE5F50FFCA8894756BF4

Date of Disbursement or Obligation
M M / D D / Y Y Y Y Y Y
11 / 07 / 2014

Full Name of Payee League of Conservation Voters, Inc.	Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 10 / 30 / 2014
Mailing Address 1920 L St NW Ste 800	Amount 4058.13
City State Zip Code Washington DC 20036-5045	
Purpose of Expenditure Staff Time for Field Canvass,10/30-11/4	Category/Type
Name of Federal Candidate Sen. Kay R Hagan	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <u>NC</u>
Calendar Year-To-Date Per Election for Office Sought 4973421.46	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ _____

Transaction ID : E0BB4E94FE07D4D02B2E

Date of Disbursement or Obligation
M M / D D / Y Y Y Y Y Y
11 / 12 / 2014

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	4388.13
(b) SUBTOTAL of Unitemized Independent Expenditures.....▶	
(c) TOTAL Independent Expenditures.....▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Signature Patrick Collins [Electronically Filed] Date M M / D D / Y Y Y Y Y Y
12 / 04 / 2014

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) LCV Victory Fund	FEC IDENTIFICATION NUMBER ▼ C C00486845
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on M M / D D / Y Y Y Y Y Y	

Full Name of Payee League of Conservation Voters, Inc.	Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 10 / 31 / 2014
Mailing Address 1920 L St NW Ste 800	Amount 402.55
City State Zip Code Washington DC 20036-5045	
Purpose of Expenditure Staff and Email for Online Message	Category/Type
Name of Federal Candidate Cory Gardner	<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <u>CO</u>
Calendar Year-To-Date Per Election for Office Sought 1061734.94	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶ _____

Transaction ID : E78D4B1829B084710BE7
Date of Disbursement or Obligation

M M / D D / Y Y Y Y Y Y
10 / 31 / 2014

Full Name of Payee League of Conservation Voters, Inc.	Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 10 / 31 / 2014
Mailing Address 1920 L St NW Ste 800	Amount 402.55
City State Zip Code Washington DC 20036-5045	
Purpose of Expenditure Staff and Email for Online Message	Category/Type
Name of Federal Candidate Thom R Tillis	<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <u>NC</u>
Calendar Year-To-Date Per Election for Office Sought 4973824.01	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶ _____

Transaction ID : E16FDA10F3E6C40CEA27
Date of Disbursement or Obligation

M M / D D / Y Y Y Y Y Y
10 / 31 / 2014

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	805.10
(b) SUBTOTAL of Unitemized Independent Expenditures ▶	
(c) TOTAL Independent Expenditures..... ▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Patrick Collins [Electronically Filed] Date M M / D D / Y Y Y Y Y Y
12 / 04 / 2014

Signature _____

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) LCV Victory Fund	FEC IDENTIFICATION NUMBER ▼ C C00486845
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on M M / D D / Y Y Y Y Y Y	

Full Name of Payee League of Conservation Voters, Inc.	Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 10 / 31 / 2014
Mailing Address 1920 L St NW Ste 800	Amount 3197.66
City State Zip Code Washington DC 20036-5045	
Purpose of Expenditure Staff Time for Field Canvass	Category/Type
Name of Federal Candidate Sen. Mark E Udall	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <u>CO</u>
Calendar Year-To-Date Per Election for Office Sought	1061734.94 Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶ _____

Transaction ID : E1C6BE42EC29F4A53865
Date of Disbursement or Obligation

M M / D D / Y Y Y Y Y Y
11 / 24 / 2014

Full Name of Payee League of Conservation Voters, Inc.	Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 10 / 31 / 2014
Mailing Address 1920 L St NW Ste 800	Amount 402.55
City State Zip Code Washington DC 20036-5045	
Purpose of Expenditure Staff and Email for Online Message	Category/Type
Name of Federal Candidate Joni K Ernst	<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <u>IA</u>
Calendar Year-To-Date Per Election for Office Sought	296861.21 Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶ _____

Transaction ID : EA06C3F2E052E48419FC
Date of Disbursement or Obligation

M M / D D / Y Y Y Y Y Y
10 / 31 / 2014

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	3600.21
(b) SUBTOTAL of Unitemized Independent Expenditures ▶	
(c) TOTAL Independent Expenditures..... ▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Signature Patrick Collins [Electronically Filed] Date M M / D D / Y Y Y Y Y Y
12 / 04 / 2014

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full)
LCV Victory Fund
FEC IDENTIFICATION NUMBER
C C00486845
Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee
League of Conservation Voters, Inc.
MEMO ITEM
Mailing Address
1920 L St NW
Ste 800
City
Washington State
DC Zip Code
20036-5045
Purpose of Expenditure
ESTIMATE: Additional Staff Housing, 11/2-11/4
Category/Type
Name of Federal Candidate
Sen. Kay R Hagan
Support
Office Sought:
Senate State: NC
Calendar Year-To-Date
Per Election for Office Sought
4985493.45

Date of Public Distribution/Dissemination
11 / 02 / 2014
Amount
420.00
Transaction ID : EE59DED4CA2AA4ECFBD
Date of Disbursement or Obligation
Disbursement For:
General
2014

Full Name of Payee
League of Conservation Voters, Inc.
MEMO ITEM
Mailing Address
1920 L St NW
Ste 800
City
Washington State
DC Zip Code
20036-5045
Purpose of Expenditure
ESTIMATE: Additional Staff Travel Costs, 11/2-11/4
Category/Type
Name of Federal Candidate
Sen. Kay R Hagan
Support
Office Sought:
Senate State: NC
Calendar Year-To-Date
Per Election for Office Sought
4985493.45

Date of Public Distribution/Dissemination
11 / 02 / 2014
Amount
500.00
Transaction ID : E1872E8BA988E49C1A17
Date of Disbursement or Obligation
Disbursement For:
General
2014

(a) SUBTOTAL of Itemized Independent Expenditures..... 0.00
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures.....

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.
Patrick Collins
[Electronically Filed]
Date 12 / 04 / 2014
Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) LCV Victory Fund		FEC IDENTIFICATION NUMBER ▼ C C00486845
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on		

Full Name of Payee League of Conservation Voters, Inc.		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 15 / 2014	
Mailing Address 1920 L St NW Ste 800		Amount 2676.13	
City Washington	State DC	Zip Code 20036-5045	Transaction ID : EC430201D63724671B22
Purpose of Expenditure Staff Time for Field Canvass	Category/Type	Date of Disbursement or Obligation MM / DD / YYYY 11 / 12 / 2014	
Name of Federal Candidate Sen. Kay R Hagan		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: NC
Calendar Year-To-Date Per Election for Office Sought 4985493.45		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶ _____	

Full Name of Payee League of Conservation Voters, Inc.		Date of Public Distribution/Dissemination MM / DD / YYYY 09 / 10 / 2014	
Mailing Address 1920 L St NW Ste 800		Amount 146.60	
City Washington	State DC	Zip Code 20036-5045	Transaction ID : E3C7DE5F8EFF448D896A
Purpose of Expenditure Postage	Category/Type	Date of Disbursement or Obligation MM / DD / YYYY 11 / 13 / 2014	
Name of Federal Candidate Bruce L Braley		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: IA
Calendar Year-To-Date Per Election for Office Sought 296861.21		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶ _____	

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	2822.73
(b) SUBTOTAL of Unitemized Independent Expenditures ▶	
(c) TOTAL Independent Expenditures..... ▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Patrick Collins

[Electronically Filed]

Date MM / DD / YYYY
12 / 04 / 2014

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) LCV Victory Fund	FEC IDENTIFICATION NUMBER ▼ C C00486845
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on M M / D D / Y Y Y Y Y Y	

Full Name of Payee League of Conservation Voters, Inc.	Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 09 / 10 / 2014
Mailing Address 1920 L St NW Ste 800	Amount 146.60
City State Zip Code Washington DC 20036-5045	
Purpose of Expenditure Postage	Category/Type
Name of Federal Candidate Sen. Kay R Hagan	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <u>NC</u>
Calendar Year-To-Date Per Election for Office Sought 4985493.45	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶ _____

Transaction ID : E4DFAB5A5B4224A96A45

Full Name of Payee League of Conservation Voters, Inc.	Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 09 / 10 / 2014
Mailing Address 1920 L St NW Ste 800	Amount 146.60
City State Zip Code Washington DC 20036-5045	
Purpose of Expenditure Postage	Category/Type
Name of Federal Candidate Jeanne Shaheen	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <u>NH</u>
Calendar Year-To-Date Per Election for Office Sought 84969.04	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶ _____

Transaction ID : EE7C88945182C41138F5

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	293.20
(b) SUBTOTAL of Unitemized Independent Expenditures.....▶	
(c) TOTAL Independent Expenditures.....▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Patrick Collins
[Electronically Filed]
Date M M / D D / Y Y Y Y Y Y
12 / 04 / 2014

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) LCV Victory Fund	FEC IDENTIFICATION NUMBER ▼ C C00486845
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on M M / D D / Y Y Y Y Y Y	

Full Name of Payee League of Conservation Voters, Inc.	Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 09 / 10 / 2014
Mailing Address 1920 L St NW Ste 800	Amount 146.60
City State Zip Code Washington DC 20036-5045	
Purpose of Expenditure Postage	Category/Type
Name of Federal Candidate Gary Peters	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <u>MI</u>
Calendar Year-To-Date Per Election for Office Sought 215928.64	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶ _____

Transaction ID : E3A0825C248F44A7CB26
Date of Disbursement or Obligation

M M / D D / Y Y Y Y Y Y
11 / 13 / 2014

Full Name of Payee League of Conservation Voters, Inc.	Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 09 / 10 / 2014
Mailing Address 1920 L St NW Ste 800	Amount 146.60
City State Zip Code Washington DC 20036-5045	
Purpose of Expenditure Postage	Category/Type
Name of Federal Candidate Sen. Mark E Udall	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <u>CO</u>
Calendar Year-To-Date Per Election for Office Sought 1061734.94	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶ _____

Transaction ID : E8D6486817B904E22B43
Date of Disbursement or Obligation

M M / D D / Y Y Y Y Y Y
11 / 13 / 2014

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	293.20
(b) SUBTOTAL of Unitemized Independent Expenditures ▶	
(c) TOTAL Independent Expenditures..... ▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Signature Patrick Collins [Electronically Filed] Date M M / D D / Y Y Y Y Y Y
12 / 04 / 2014

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) LCV Victory Fund	FEC IDENTIFICATION NUMBER ▼ C C00486845
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on M M / D D / Y Y Y Y Y Y	

Full Name of Payee League of Conservation Voters, Inc.	Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 10 / 14 / 2014
Mailing Address 1920 L St NW Ste 800	Amount 57.98
City State Zip Code Washington DC 20036-5045	
Purpose of Expenditure Postage	Category/Type
Name of Federal Candidate Jeanne Shaheen	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <u>NH</u>
Calendar Year-To-Date Per Election for Office Sought 84969.04	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶ _____

Transaction ID : EEB3651F21B2241CBB66
Date of Disbursement or Obligation

M M / D D / Y Y Y Y Y Y
11 / 14 / 2014

Full Name of Payee League of Conservation Voters, Inc.	Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 10 / 14 / 2014
Mailing Address 1920 L St NW Ste 800	Amount 57.99
City State Zip Code Washington DC 20036-5045	
Purpose of Expenditure Postage	Category/Type
Name of Federal Candidate Bruce L Braley	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <u>IA</u>
Calendar Year-To-Date Per Election for Office Sought 296861.21	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶ _____

Transaction ID : E2972557726A24CC90A
Date of Disbursement or Obligation

M M / D D / Y Y Y Y Y Y
11 / 14 / 2014

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	115.97
(b) SUBTOTAL of Unitemized Independent Expenditures ▶	
(c) TOTAL Independent Expenditures..... ▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Patrick Collins [Electronically Filed] Date M M / D D / Y Y Y Y Y Y
12 / 04 / 2014

Signature _____

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) LCV Victory Fund	FEC IDENTIFICATION NUMBER ▼ C C00486845
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on M M / D D / Y Y Y Y Y Y	

Full Name of Payee League of Conservation Voters, Inc.	Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 10 / 14 / 2014
Mailing Address 1920 L St NW Ste 800	Amount 23.80
City State Zip Code Washington DC 20036-5045	
Purpose of Expenditure Staff Time for Mail Copy (Previously reported as \$25.00 on 10/19/14 48 Hour Report)	Category/Type
Name of Federal Candidate Gary Peters	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <u>MI</u>
Calendar Year-To-Date Per Election for Office Sought 215928.64	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶ _____

Transaction ID : E43F4444AE26F484BBAE
Date of Disbursement or Obligation

M M / D D / Y Y Y Y Y Y
11 / 14 / 2014

Full Name of Payee League of Conservation Voters, Inc.	Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 10 / 14 / 2014
Mailing Address 1920 L St NW Ste 800	Amount 57.98
City State Zip Code Washington DC 20036-5045	
Purpose of Expenditure Postage	Category/Type
Name of Federal Candidate Sen. Mark E Udall	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <u>CO</u>
Calendar Year-To-Date Per Election for Office Sought 1061734.94	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶ _____

Transaction ID : E3ACDC66BEE2E4AE58D
Date of Disbursement or Obligation

M M / D D / Y Y Y Y Y Y
11 / 14 / 2014

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	81.78
(b) SUBTOTAL of Unitemized Independent Expenditures.....▶	
(c) TOTAL Independent Expenditures.....▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Signature Patrick Collins [Electronically Filed] Date M M / D D / Y Y Y Y Y Y
12 / 04 / 2014

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) LCV Victory Fund	FEC IDENTIFICATION NUMBER ▼ C C00486845
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on M M / D D / Y Y Y Y Y Y	

Full Name of Payee League of Conservation Voters, Inc.	Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 10 / 14 / 2014
Mailing Address 1920 L St NW Ste 800	Amount 23.80
City State Zip Code Washington DC 20036-5045	
Purpose of Expenditure Staff Time for Mail Copy	Category/Type
Name of Federal Candidate Sen. Mark E Udall	Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 11 / 14 / 2014
Name of Federal Candidate Sen. Mark E Udall	Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <u>CO</u>
Calendar Year-To-Date Per Election for Office Sought 1061734.94	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶ _____

Full Name of Payee League of Conservation Voters, Inc.	Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 10 / 14 / 2014
Mailing Address 1920 L St NW Ste 800	Amount 57.99
City State Zip Code Washington DC 20036-5045	
Purpose of Expenditure Postage	Category/Type
Name of Federal Candidate Mark Begich	Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 11 / 14 / 2014
Name of Federal Candidate Mark Begich	Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <u>AK</u>
Calendar Year-To-Date Per Election for Office Sought 793.72	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶ _____

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	81.79
(b) SUBTOTAL of Unitemized Independent Expenditures ▶	
(c) TOTAL Independent Expenditures..... ▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Patrick Collins [Electronically Filed] Date M M / D D / Y Y Y Y Y Y
12 / 04 / 2014

Signature _____

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) LCV Victory Fund	FEC IDENTIFICATION NUMBER ▼ C C00486845
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on M M / D D / Y Y Y Y Y Y	

Full Name of Payee Mack-Sumner Communications, LLC	Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 10 / 27 / 2014
Mailing Address 2001 N Beauregard St Ste 420	Amount 23781.00
City State Zip Code Alexandria VA 22311-1750	
Purpose of Expenditure GOTV Door Hangers	Category/Type
Name of Federal Candidate Sen. Kay R Hagan	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <u>NC</u>
Calendar Year-To-Date Per Election for Office Sought 4916732.19	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶ _____

Transaction ID : EFD81F544AEBE436BB51
Date of Disbursement or Obligation

M M / D D / Y Y Y Y Y Y
10 / 27 / 2014

Full Name of Payee Mack-Sumner Communications, LLC	Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 10 / 30 / 2014
Mailing Address 2001 N Beauregard St Ste 420	Amount 14641.30
City State Zip Code Alexandria VA 22311-1750	
Purpose of Expenditure Door Hangers	Category/Type
Name of Federal Candidate Pete Aguilar	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House District: <u>31</u> <input type="checkbox"/> President <input type="checkbox"/> Senate State: <u>CA</u>
Calendar Year-To-Date Per Election for Office Sought 159691.30	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶ _____

Transaction ID : E5999925C88AD43F39D3
Date of Disbursement or Obligation

M M / D D / Y Y Y Y Y Y
11 / 07 / 2014

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	38422.30
(b) SUBTOTAL of Unitemized Independent Expenditures ▶	
(c) TOTAL Independent Expenditures..... ▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Signature Patrick Collins [Electronically Filed] Date M M / D D / Y Y Y Y Y Y
12 / 04 / 2014

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) LCV Victory Fund	FEC IDENTIFICATION NUMBER ▼ C C00486845
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on M M / D D / Y Y Y Y Y Y	

Full Name of Payee Mack-Sumner Communications, LLC	Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 10 / 15 / 2014
Mailing Address 2001 N Beauregard St Ste 420	Amount 17488.86
City State Zip Code Alexandria VA 22311-1750	Transaction ID : EA85A8F38F6104BA6B57 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 10 / 31 / 2014
Purpose of Expenditure Doorhangers	Category/Type
Name of Federal Candidate Sen. Kay R Hagan	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/> District: _____ <input type="checkbox"/> State: NC
Calendar Year-To-Date Per Election for Office Sought 4973824.01	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶ _____

Full Name of Payee Mack-Sumner Communications, LLC	Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 10 / 31 / 2014
Mailing Address 2001 N Beauregard St Ste 420	Amount 469.31
City State Zip Code Alexandria VA 22311-1750	Transaction ID : E9B1BB41117C04D55BB5 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 11 / 07 / 2014
Purpose of Expenditure Stickers	Category/Type
Name of Federal Candidate Sen. Mark E Udall	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/> District: _____ <input type="checkbox"/> State: CO
Calendar Year-To-Date Per Election for Office Sought 1061734.94	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶ _____

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	17958.17
(b) SUBTOTAL of Unitemized Independent Expenditures ▶	
(c) TOTAL Independent Expenditures..... ▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Patrick Collins
Signature

[Electronically Filed] Date M M / D D / Y Y Y Y Y Y
12 / 04 / 2014

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) LCV Victory Fund	FEC IDENTIFICATION NUMBER ▼ C C00486845
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on M M M / D D D / Y Y Y Y Y Y	

Full Name of Payee Mack-Sumner Communications, LLC	Date of Public Distribution/Dissemination M M M / D D D / Y Y Y Y Y Y 10 / 15 / 2014
Mailing Address 2001 N Beauregard St Ste 420	Amount 787.10
City Alexandria	State VA
Zip Code 22311-1750	Transaction ID : E7E3582694B844EF8B92
Purpose of Expenditure T-Shirts	Date of Disbursement or Obligation M M M / D D D / Y Y Y Y Y Y 10 / 31 / 2014
Name of Federal Candidate Sen. Kay R Hagan	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/> District: _____ <input type="checkbox"/> State: <u>NC</u>
Calendar Year-To-Date Per Election for Office Sought 4973824.01	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶ _____

Full Name of Payee Mack-Sumner Communications, LLC	Date of Public Distribution/Dissemination M M M / D D D / Y Y Y Y Y Y 10 / 15 / 2014
Mailing Address 2001 N Beauregard St Ste 420	Amount 3835.55
City Alexandria	State VA
Zip Code 22311-1750	Transaction ID : E6DA27FBAC1F44D009E7
Purpose of Expenditure Pledge Cards	Date of Disbursement or Obligation M M M / D D D / Y Y Y Y Y Y 10 / 31 / 2014
Name of Federal Candidate Sen. Kay R Hagan	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/> District: _____ <input type="checkbox"/> State: <u>NC</u>
Calendar Year-To-Date Per Election for Office Sought 4973824.01	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶ _____

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	4622.65
(b) SUBTOTAL of Unitemized Independent Expenditures ▶	
(c) TOTAL Independent Expenditures..... ▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Patrick Collins

Signature _____ [Electronically Filed] Date M M M / D D D / Y Y Y Y Y Y
12 / 04 / 2014

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) LCV Victory Fund
FEC IDENTIFICATION NUMBER C C00486845
Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee Mosaic
Mailing Address 1920 L St NW
City Washington State DC Zip Code 20036-5004
Purpose of Expenditure Printing
Name of Federal Candidate Sen. Mark E Udall
Calendar Year-To-Date Per Election for Office Sought 1061734.94

Date of Public Distribution/Dissemination 10 / 14 / 2014
Amount 190.80
Transaction ID : E268E3D3117EE415991
Date of Disbursement or Obligation 10 / 31 / 2014
Office Sought: Senate State: CO
Disbursement For: General 2014

Full Name of Payee Mosaic
Mailing Address 1920 L St NW
City Washington State DC Zip Code 20036-5004
Purpose of Expenditure Printing (Previously reported as \$80.00 on 10/19/14 24 Hour Report)
Name of Federal Candidate Gary Peters
Calendar Year-To-Date Per Election for Office Sought 215928.64

Date of Public Distribution/Dissemination 10 / 14 / 2014
Amount 190.80
Transaction ID : E73DC72B2D98B49A589F
Date of Disbursement or Obligation 10 / 31 / 2014
Office Sought: Senate State: MI
Disbursement For: General 2014

(a) SUBTOTAL of Itemized Independent Expenditures 381.60
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Patrick Collins
Signature

[Electronically Filed]

Date 12 / 04 / 2014

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) LCV Victory Fund	FEC IDENTIFICATION NUMBER ▼ C C00486845
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on M M M / D D D / Y Y Y Y Y Y	

Full Name of Payee Mosaic	Date of Public Distribution/Dissemination M M M / D D D / Y Y Y Y Y Y 10 / 14 / 2014
Mailing Address 1920 L St NW Street Level	Amount 999.99 190.81
City State Zip Code Washington DC 20036-5004	Transaction ID : E05DCD36D7C85415BA49 Date of Disbursement or Obligation M M M / D D D / Y Y Y Y Y Y 10 / 31 / 2014
Purpose of Expenditure Printing	Category/Type
Name of Federal Candidate Mark Begich	Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <u>AK</u>
Calendar Year-To-Date Per Election for Office Sought 999.99 793.72	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶ _____

Full Name of Payee Nexus Strategies, Inc.	Date of Public Distribution/Dissemination M M M / D D D / Y Y Y Y Y Y 11 / 02 / 2014
Mailing Address 434 Fayetteville Street Two Hannover Square, Suite 2020	Amount 999.99 5500.00
City State Zip Code Raleigh NC 27601-1701	Transaction ID : E6532D924FD6040439C9 Date of Disbursement or Obligation M M M / D D D / Y Y Y Y Y Y 11 / 02 / 2014
Purpose of Expenditure Communications Consulting	Category/Type
Name of Federal Candidate Sen. Kay R Hagan	Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <u>NC</u>
Calendar Year-To-Date Per Election for Office Sought 999.99 4985493.45	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶ _____

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	999.99 5690.81
(b) SUBTOTAL of Unitemized Independent Expenditures ▶	999.99
(c) TOTAL Independent Expenditures..... ▶	999.99

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Patrick Collins [Electronically Filed] Date M M M / D D D / Y Y Y Y Y Y
12 / 04 / 2014

Signature _____

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) LCV Victory Fund	FEC IDENTIFICATION NUMBER ▼ C C00486845
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on M M M / D D D / Y Y Y Y Y Y	

Full Name of Payee Public Policy Polling	Date of Public Distribution/Dissemination M M M / D D D / Y Y Y Y Y Y 10 / 22 / 2014
Mailing Address 2912 Highwoods Blvd	Amount 1500.00
City Raleigh State NC Zip Code 27604-1064	Transaction ID : E9BBE49B7041E4D4AB28 Date of Disbursement or Obligation M M M / D D D / Y Y Y Y Y Y 10 / 28 / 2014
Purpose of Expenditure Polling Category/Type []	Name of Federal Candidate Jeanne Shaheen <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: NH
Calendar Year-To-Date Per Election for Office Sought 3440.86	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶ _____

Full Name of Payee Public Policy Polling	Date of Public Distribution/Dissemination M M M / D D D / Y Y Y Y Y Y 10 / 23 / 2014
Mailing Address 2912 Highwoods Blvd	Amount 1500.00
City Raleigh State NC Zip Code 27604-1064	Transaction ID : E311FB143DCD1456DAC1 Date of Disbursement or Obligation M M M / D D D / Y Y Y Y Y Y 10 / 28 / 2014
Purpose of Expenditure Polling Category/Type []	Name of Federal Candidate Gary Peters <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: MI
Calendar Year-To-Date Per Election for Office Sought 215928.64	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶ _____

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	3000.00
(b) SUBTOTAL of Unitemized Independent Expenditures ▶	[]
(c) TOTAL Independent Expenditures..... ▶	[]

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Patrick Collins [Electronically Filed] Date M M M / D D D / Y Y Y Y Y Y
12 / 04 / 2014

Signature _____

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) LCV Victory Fund	FEC IDENTIFICATION NUMBER ▼ C C00486845
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on M M / D D / Y Y Y Y Y Y	

Full Name of Payee Public Policy Polling	Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 10 / 30 / 2014
Mailing Address 2912 Highwoods Blvd	Amount 1500.00
City Raleigh State NC Zip Code 27604-1064	Transaction ID : EF7A1CFA610E94014A98 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 11 / 07 / 2014
Purpose of Expenditure Polling	Category/Type
Name of Federal Candidate Sen. Mark E Udall	Office Sought: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President State: <u>CO</u>
Calendar Year-To-Date Per Election for Office Sought 1057665.42	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶ _____

Full Name of Payee Public Policy Polling	Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 10 / 30 / 2014
Mailing Address 2912 Highwoods Blvd	Amount 1500.00
City Raleigh State NC Zip Code 27604-1064	Transaction ID : EDE2AD3424C3C4EF99D Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 10 / 28 / 2014
Purpose of Expenditure Polling	Category/Type
Name of Federal Candidate Pete Aguilar	Office Sought: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate District: <u>31</u> <input type="checkbox"/> President State: <u>CA</u>
Calendar Year-To-Date Per Election for Office Sought 159691.30	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶ _____

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	3000.00
(b) SUBTOTAL of Unitemized Independent Expenditures..... ▶	
(c) TOTAL Independent Expenditures..... ▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Patrick Collins
Signature

[Electronically Filed] Date M M / D D / Y Y Y Y Y Y
12 / 04 / 2014

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) LCV Victory Fund	FEC IDENTIFICATION NUMBER ▼ C C00486845
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on M M M / D D D / Y Y Y Y Y Y	

Full Name of Payee Sir Speedy	Date of Public Distribution/Dissemination M M M / D D D / Y Y Y Y Y Y 10 / 14 / 2014
Mailing Address 2001 L St NW	Amount 28.53
City Washington State DC Zip Code 20036-4905	Transaction ID : E3C9711ADE490426D881 Date of Disbursement or Obligation M M M / D D D / Y Y Y Y Y Y 10 / 22 / 2014
Purpose of Expenditure Printing	Category/Type
Name of Federal Candidate Bruce L Braley	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President State: IA
Calendar Year-To-Date Per Election for Office Sought 1667.93	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶ _____

Full Name of Payee Sir Speedy	Date of Public Distribution/Dissemination M M M / D D D / Y Y Y Y Y Y 10 / 14 / 2014
Mailing Address 2001 L St NW	Amount 28.54
City Washington State DC Zip Code 20036-4905	Transaction ID : EC919CFB5A4FA400CBA: Date of Disbursement or Obligation M M M / D D D / Y Y Y Y Y Y 10 / 22 / 2014
Purpose of Expenditure Printing	Category/Type
Name of Federal Candidate Sen. Mark E Udall	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President State: CO
Calendar Year-To-Date Per Election for Office Sought 735121.80	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶ _____

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	57.07
(b) SUBTOTAL of Unitemized Independent Expenditures.....▶	
(c) TOTAL Independent Expenditures.....▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Patrick Collins
Signature

[Electronically Filed] Date M M M / D D D / Y Y Y Y Y Y
12 / 04 / 2014

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) LCV Victory Fund	FEC IDENTIFICATION NUMBER ▼ C C00486845
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on M M / D D / Y Y Y Y Y Y	

Full Name of Payee Terra Strategies, LLC	Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 10 / 30 / 2014
Mailing Address 321 E. Walnut Ste 340	Amount 143550.00
City State Zip Code Des Moines IA 50309-2013	Transaction ID : E1BA1F076E19D47FA8C8 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 10 / 31 / 2014
Purpose of Expenditure Field Canvass Consulting	Category/Type
Name of Federal Candidate Pete Aguilar	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate District: <u>31</u> <input type="checkbox"/> President State: <u>CA</u>
Calendar Year-To-Date Per Election for Office Sought 159691.30	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶

Full Name of Payee Terris, Barnes & Walters	Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 10 / 22 / 2014
Mailing Address 400 Montgomery St Suite 700	Amount 217386.00
City State Zip Code San Francisco CA 94104-1219	Transaction ID : E62EDC5A4D7854F0FA55 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 10 / 22 / 2014
Purpose of Expenditure Series of Mailers	Category/Type
Name of Federal Candidate Cory Gardner	<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President State: <u>CO</u>
Calendar Year-To-Date Per Election for Office Sought 735121.80	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	360936.00
(b) SUBTOTAL of Unitemized Independent Expenditures ▶	
(c) TOTAL Independent Expenditures..... ▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Patrick Collins

Signature _____ [Electronically Filed] Date M M / D D / Y Y Y Y Y Y
12 / 04 / 2014

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) LCV Victory Fund	FEC IDENTIFICATION NUMBER ▼ C C00486845
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on M M / D D / Y Y Y Y Y Y	

Full Name of Payee Terris, Barnes & Walters	Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 10 / 27 / 2014
Mailing Address 400 Montgomery St Suite 700	Amount 110189.00
City State Zip Code San Francisco CA 94104-1219	Transaction ID : E492F5222C9FC4306B04 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 10 / 27 / 2014
Purpose of Expenditure Series of Mailers	Category/Type
Name of Federal Candidate Cory Gardner	<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President State: <u>CO</u>
Calendar Year-To-Date Per Election for Office Sought 945310.80	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶ _____

Full Name of Payee Terris, Barnes & Walters	Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 10 / 29 / 2014
Mailing Address 400 Montgomery St Suite 700	Amount 103182.00
City State Zip Code San Francisco CA 94104-1219	Transaction ID : E78B865B29B704ED793B Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 10 / 28 / 2014
Purpose of Expenditure Mailers	Category/Type
Name of Federal Candidate Cory Gardner	<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President State: <u>CO</u>
Calendar Year-To-Date Per Election for Office Sought 1053644.62	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶ _____

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	213371.00
(b) SUBTOTAL of Unitemized Independent Expenditures ▶	
(c) TOTAL Independent Expenditures..... ▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Patrick Collins [Electronically Filed] Date M M / D D / Y Y Y Y Y Y
12 / 04 / 2014

Signature _____

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) LCV Victory Fund	FEC IDENTIFICATION NUMBER ▼ C C00486845
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on M M / D D / Y Y Y Y Y Y	

Full Name of Payee The Strategy Group, Inc	Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 10 / 23 / 2014
Mailing Address 1603 Orrington Ave Ste 1730	Amount 1347948.62
City State Zip Code Evanston IL 60201-5017	Transaction ID : E633200B368B34E5F9A5 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 10 / 23 / 2014
Purpose of Expenditure Series of Mailers	Category/Type
Name of Federal Candidate Thom R Tillis	<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President State: <u>NC</u>
Calendar Year-To-Date Per Election for Office Sought 4062170.74	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶ _____

Full Name of Payee Waterfront Strategies	Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 10 / 23 / 2014
Mailing Address 3050 K St NW Ste 100	Amount 398351.00
City State Zip Code Washington DC 20007-5108	Transaction ID : E615994CFE30040AE852 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 10 / 21 / 2014
Purpose of Expenditure TV Ad Buy	Category/Type
Name of Federal Candidate Thom R Tillis	<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President State: <u>NC</u>
Calendar Year-To-Date Per Election for Office Sought 4062170.74	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶ _____

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	1746299.62
(b) SUBTOTAL of Unitemized Independent Expenditures ▶	
(c) TOTAL Independent Expenditures..... ▶	

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Patrick Collins [Electronically Filed] Date M M / D D / Y Y Y Y Y Y
12 / 04 / 2014

Signature _____

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) LCV Victory Fund	FEC IDENTIFICATION NUMBER ▼ C C00486845
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on M M M / D D D / Y Y Y Y Y Y	

Full Name of Payee Waterfront Strategies	Date of Public Distribution/Dissemination M M M / D D D / Y Y Y Y Y Y 10 / 27 / 2014
Mailing Address 3050 K St NW Ste 100	Amount M M M M M M . 00 596625.00
City Washington State DC Zip Code 20007-5108	Transaction ID : EFE903284A12C42A694D Date of Disbursement or Obligation M M M / D D D / Y Y Y Y Y Y 10 / 24 / 2014
Purpose of Expenditure Additional TV Ad Buy	Category/Type M M M M M M
Name of Federal Candidate Thom R Tillis	<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President State: NC
Calendar Year-To-Date Per Election for Office Sought M M M M M M . 00 4916732.19	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶ _____

Full Name of Payee Waterfront Strategies	Date of Public Distribution/Dissemination M M M / D D D / Y Y Y Y Y Y 10 / 30 / 2014
Mailing Address 3050 K St NW Ste 100	Amount M M M M M M . 00 49950.00
City Washington State DC Zip Code 20007-5108	Transaction ID : E1799297CFD4F48D4BB1 Date of Disbursement or Obligation M M M / D D D / Y Y Y Y Y Y 10 / 30 / 2014
Purpose of Expenditure TV Ad Buy Expansion	Category/Type M M M M M M
Name of Federal Candidate Thom R Tillis	<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President State: NC
Calendar Year-To-Date Per Election for Office Sought M M M M M M . 00 4973421.46	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶ _____

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	M M M M M M . 00 646575.00
(b) SUBTOTAL of Unitemized Independent Expenditures ▶	M M M M M M . 00
(c) TOTAL Independent Expenditures..... ▶	M M M M M M . 00

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Patrick Collins [Electronically Filed] Date M M M / D D D / Y Y Y Y Y Y
12 / 04 / 2014

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) LCV Victory Fund	FEC IDENTIFICATION NUMBER ▼ C C00486845
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on M M M / D D D / Y Y Y Y Y Y	

Full Name of Payee Well & Lighthouse, LLC	Date of Public Distribution/Dissemination M M M / D D D / Y Y Y Y Y Y 10 / 27 / 2014
Mailing Address 1244 19th Street NW	Amount M M M M M M . 00 10000.00
City State Zip Code Washington DC 20036-6618	Transaction ID : EB691CA1A1FB641CE925 Date of Disbursement or Obligation M M M / D D D / Y Y Y Y Y Y 10 / 27 / 2014
Purpose of Expenditure Additional Online Ad Buy	Category/Type M M M M M M
Name of Federal Candidate Cory Gardner	<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/> Senate State: <u>CO</u>
Calendar Year-To-Date Per Election for Office Sought	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶
M M M M M M . 00 945310.80	

Full Name of Payee Winning Connections, Inc.	Date of Public Distribution/Dissemination M M M / D D D / Y Y Y Y Y Y 10 / 28 / 2014
Mailing Address 317 Pennsylvania Ave SE 2nd Floor	Amount M M M M M M . 00 48132.46
City State Zip Code Washington DC 20003-1148	Transaction ID : EC54459998EA4494884D Date of Disbursement or Obligation M M M / D D D / Y Y Y Y Y Y 11 / 07 / 2014
Purpose of Expenditure Phone Call (Previously reported as an estimate of \$50,000 on 10/29/14 24 hour report)	Category/Type M M M M M M
Name of Federal Candidate Gwen Graham	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/> Senate State: <u>FL</u>
Calendar Year-To-Date Per Election for Office Sought	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶
M M M M M M . 00 48132.46	

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	M M M M M M . 00 148132.46
(b) SUBTOTAL of Unitemized Independent Expenditures ▶	M M M M M M . 00
(c) TOTAL Independent Expenditures..... ▶	M M M M M M . 00 5036811.07

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Patrick Collins
Signature

[Electronically Filed] Date M M M / D D D / Y Y Y Y Y Y
12 / 04 / 2014