

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

American Victory Fund Committee

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="2011"/>	<input type="text" value="2818.20"/>	<input type="text" value="2818.20"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="45080.78"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="187795.00"/>	<input type="text" value="897108.03"/>
(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="232875.78"/>	<input type="text" value="899926.23"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="204429.15"/>	<input type="text" value="871479.60"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="28446.63"/>	<input type="text" value="28446.63"/>
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="0.00"/>	

This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

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

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

DETAILED SUMMARY PAGE
of Receipts

Write or Type Committee Name

American Victory Fund Committee

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).....	173800.00	862215.68
(ii) Unitemized	1995.00	4742.35
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	175795.00	866958.03
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	12000.00	20000.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	187795.00	886958.03
12. Transfers From Affiliated/Other Party Committees.....	0.00	10150.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))..... ▶	187795.00	897108.03
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	187795.00	897108.03

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	103539.45	214687.71
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	103539.45	214687.71
22. Transfers to Affiliated/Other Party Committees.....	100889.70	656791.89
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements	0.00	0.00
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	204429.15	871479.60
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	204429.15	871479.60

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)	187795.00	886958.03
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	187795.00	886958.03
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	103539.45	214687.71
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	103539.45	214687.71

**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 59
	<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)
American Victory Fund Committee

A. R. Marshall Ackerman
Full Name (Last, First, Middle Initial)

Mailing Address 12500 Park Potomac Ave, 602S

City Potomac	State MD	Zip Code 20854
-----------------	-------------	-------------------

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

Name of Employer Shady Grove Orthopaedic Assoc	Occupation physician
---------------------------------------------------	-------------------------

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	/	11	/	2011

Transaction ID : 11116.C407

Amount of Each Receipt this Period
500.00

Receipt

B. Antonio Argiz
Full Name (Last, First, Middle Initial)

Mailing Address 1001 Brickell Bay Drive

City Miami	State FL	Zip Code 33131
---------------	-------------	-------------------

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

Name of Employer Morrison Brown Argiz & Farra	Occupation Chairman/CEO
--------------------------------------------------	----------------------------

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
12	/	16	/	2011

Transaction ID : 20119.C448

Amount of Each Receipt this Period
2000.00

Receipt

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

Mailing Address 3 Jupiter Hills Court

City Durham	State NC	Zip Code 27712
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FEC ID number of contributing federal political committee. **C**

Name of Employer Duke Orthopaedics	Occupation 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	/	16	/	2011

Transaction ID : 11206.C441

Amount of Each Receipt this Period
250.00

Receipt

SUBTOTAL of Receipts This Page (optional).....	2750.00
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 7 OF 59
	<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)
American Victory Fund Committee

A. Henry Backe
 Full Name (Last, First, Middle Initial)
 Mailing Address 75 Kings Highway Curoff
 City State Zip Code
 Fairfield CT 06824
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 OSG.PC physician
 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 / 11 / 2011
Transaction ID : 11116.C403
 Amount of Each Receipt this Period
 1000.00
 Receipt

B. Sycuan Band Of The K
 Full Name (Last, First, Middle Initial)
 Mailing Address 5459 Sycuan Road
 City State Zip Code
 El Cajon CA 92019
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Indian Tribe Indian Tribe
 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
 08 / 19 / 2011
Transaction ID : 10823.C359
 Amount of Each Receipt this Period
 2500.00
 Receipt

C. Michael Berend
 Full Name (Last, First, Middle Initial)
 Mailing Address 1335 North Park Ave
 City State Zip Code
 Indianapolis IN 46202
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 self employed physician
 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 / 14 / 2011
Transaction ID : 11116.C433
 Amount of Each Receipt this Period
 1000.00
 Receipt

SUBTOTAL of Receipts This Page (optional).....▶	4500.00
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 8 OF 59
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
American Victory Fund Committee

Full Name (Last, First, Middle Initial)
A. Howard Berg

Mailing Address 7900 Bennington Drive

City State Zip Code
 Amarillo TX 79119

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

Name of Employer Occupation
 self employed 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 / 11 / 2011

Transaction ID : 11116.C380

Amount of Each Receipt this Period
 250.00

Receipt

Full Name (Last, First, Middle Initial)
B. Daniel Berry

Mailing Address 8953 11th Ave NE

City State Zip Code
 Rochester MN 55906

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

Name of Employer Occupation
 self employed physician

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 / 14 / 2011

Transaction ID : 11116.C429

Amount of Each Receipt this Period
 1000.00

Receipt

Full Name (Last, First, Middle Initial)
C. Lyn Berry

Mailing Address PO Box 303125

City State Zip Code
 St. Thomas VI 00803

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

Name of Employer Occupation
 homemaker homemaker

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
 08 / 19 / 2011

Transaction ID : 10823.C361

Amount of Each Receipt this Period
 500.00

Receipt

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 9 OF 59
	<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)
American Victory Fund Committee

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

Mailing Address 1566 Edgehill Lane

City Redlands State CA Zip Code 92373

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

Name of Employer self employed Occupation physician

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 11 / 15 / 2011
Transaction ID : 11206.C438

Amount of Each Receipt this Period 250.00

Receipt

B. Patricia Book
Full Name (Last, First, Middle Initial)

Mailing Address 491 Coconut Palm Terrace

City Fort Lauderdale State FL Zip Code 33324

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

Name of Employer homemaker Occupation homemaker

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 09 / 27 / 2011
Transaction ID : 10930.C368

Amount of Each Receipt this Period 5000.00

Receipt

C. Ronald Book
Full Name (Last, First, Middle Initial)

Mailing Address 491 Coconut Palm Terrace

City Fort Lauderdale State FL Zip Code 33324

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

Name of Employer Ronald L. Book, PA Occupation attorney

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 09 / 27 / 2011
Transaction ID : 10930.C367

Amount of Each Receipt this Period 5000.00

Receipt

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: PAGE 10 OF 59
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
American Victory Fund Committee

Full Name (Last, First, Middle Initial)
A. Kevin Brandt

Mailing Address 5001 Tamarind Reef, Ste 28

City State Zip Code
Christiansted VI 00820

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

Name of Employer Occupation
James River Capitol Corp President

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
 M M / D D / Y Y Y Y
 08 / 19 / 2011
Transaction ID : 10823.C362

Amount of Each Receipt this Period
1000.00

Receipt

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

Mailing Address PO Box 2282

City State Zip Code
Iowa City IA 52244

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

Name of Employer Occupation
University of Iowa physician

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2500.00

Date of Receipt
 M M / D D / Y Y Y Y
 11 / 14 / 2011
Transaction ID : 11116.C417

Amount of Each Receipt this Period
2500.00

Receipt

Full Name (Last, First, Middle Initial)
C. Frederick Chaney

Mailing Address 16140 Sand Canyon Avenue

City State Zip Code
Irvine CA 92618-3715

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 ▼
10500.00

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 06 / 2011
Transaction ID : 11012.C373

Amount of Each Receipt this Period
10000.00

Receipt

SUBTOTAL of Receipts This Page (optional)..... ▶ 13500.00

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 11 OF 59
	(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"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
American Victory Fund Committee

Full Name (Last, First, Middle Initial)
A. Thomas Cook

Mailing Address 7980 North Main Street

City State Zip Code
Dayton OH 45415

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

Name of Employer Occupation
Grandview Medical Center physician

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
11 / 11 / 2011
Transaction ID : 11116.C400

Amount of Each Receipt this Period
500.00

Receipt

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

Mailing Address 601 Broadway

City State Zip Code
Seattle WA 98122

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

Name of Employer Occupation
Proliance Surgeons Inc. physician

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 / 11 / 2011
Transaction ID : 11116.C392

Amount of Each Receipt this Period
1000.00

Receipt

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

Mailing Address 111 17 St E, Ste 101

City State Zip Code
Alexandria MN 56308

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

Name of Employer Occupation
Heartland Orthopaedic Speciali physician

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 / 11 / 2011
Transaction ID : 11116.C394

Amount of Each Receipt this Period
1000.00

Receipt

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 12 OF 59
	<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)
American Victory Fund Committee

A. Kevin Darr
Full Name (Last, First, Middle Initial)

Mailing Address 71617 Riverside Dr

City Covington State LA Zip Code 70433

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

Name of Employer self employed Occupation physician

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 11 / 11 / 2011
Transaction ID : 11116.C413

Amount of Each Receipt this Period 1000.00

Receipt

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

Mailing Address 216 N. Hoernerstown Road

City Hummelstown State PA Zip Code 17036

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

Name of Employer self employed Occupation physician

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 12 / 01 / 2011
Transaction ID : 11206.C447

Amount of Each Receipt this Period 1000.00

Receipt

C. Alberto De La Cruz
Full Name (Last, First, Middle Initial)

Mailing Address 35 Munoz Rivera, Apt 2004

City San Juan State PR Zip Code 00901

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

Name of Employer Coca Cola Puerto Rico Bottlers Occupation President/CEO

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 10000.00

Date of Receipt 07 / 15 / 2011
Transaction ID : 10809.C355

Amount of Each Receipt this Period 10000.00

Receipt

SUBTOTAL of Receipts This Page (optional)..... ► 12000.00

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 59
	<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)
American Victory Fund Committee

A. Carol Dopkin
Full Name (Last, First, Middle Initial)

Mailing Address 122 West Main Street

City Aspen State CO Zip Code 81611

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

Name of Employer Carol Dopkin Real Estate Inc Occupation owner/broker

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
 08 / 05 / 2011
Transaction ID : 10809.C356

Amount of Each Receipt this Period
 1000.00

Receipt

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

Mailing Address 1507 The Oaks Drive

City Maitland State FL Zip Code 32751

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

Name of Employer Celebration Orthopaedics Occupation physician

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 / 14 / 2011
Transaction ID : 11116.C423

Amount of Each Receipt this Period
 1000.00

Receipt

C. Norman Dunitz
Full Name (Last, First, Middle Initial)

Mailing Address 4722 S Yorktown Place

City Tulsa State OK Zip Code 74105

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

Name of Employer self employed Occupation 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 / 11 / 2011
Transaction ID : 11116.C405

Amount of Each Receipt this Period
 250.00

Receipt

SUBTOTAL of Receipts This Page (optional).....▶	2250.00
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 14 OF 59
	<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)
American Victory Fund Committee

A. Roger Emerson
Full Name (Last, First, Middle Initial)
Mailing Address 6020 W Parker Road #470

City Plano	State TX	Zip Code 75093
---------------	-------------	-------------------

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

Name of Employer Texas Health Physicians Group	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
11	/	11	/	2011

Transaction ID : 11116.C401

Amount of Each Receipt this Period
250.00

Receipt

B. Thomas Fehring
Full Name (Last, First, Middle Initial)
Mailing Address 2317 Pender Place

City Charlotte	State NC	Zip Code 28209
-------------------	-------------	-------------------

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

Name of Employer Ortho Carolina	Occupation physician
------------------------------------	-------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
11	/	11	/	2011

Transaction ID : 11116.C414

Amount of Each Receipt this Period
1000.00

Receipt

C. David Fisher
Full Name (Last, First, Middle Initial)
Mailing Address 351 Beechwater Drive

City Fishers	State IN	Zip Code 46037
-----------------	-------------	-------------------

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

Name of Employer Ortho Indy	Occupation physician
--------------------------------	-------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
11	/	11	/	2011

Transaction ID : 11116.C410

Amount of Each Receipt this Period
1000.00

Receipt

SUBTOTAL of Receipts This Page (optional).....	2250.00
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 59
	<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)
American Victory Fund Committee

Full Name (Last, First, Middle Initial) A. Steven Fisher		Date of Receipt 11 / 11 / 2011 Transaction ID : 11116.C415
Mailing Address 5020 Lodge Pole Lane		Amount of Each Receipt this Period 1000.00
City Ft. Wayne	State IN	Zip Code 40814
FEC ID number of contributing federal political committee. C	Receipt	
Name of Employer Ft. Wayne Orthopaedics	Occupation physician	
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) B. Frederick Fletcher		Date of Receipt 11 / 14 / 2011 Transaction ID : 11116.C426
Mailing Address 5 Stoneridge Drive		Amount of Each Receipt this Period 1000.00
City Loudonville	State NY	Zip Code 12211-2624
FEC ID number of contributing federal political committee. C	Receipt	
Name of Employer Northeast Orthopaedics	Occupation physician	
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. Andrew Freiberg		Date of Receipt 11 / 11 / 2011 Transaction ID : 11116.C377
Mailing Address 41 Ox Bow Road		Amount of Each Receipt this Period 1000.00
City Weston	State MA	Zip Code 02493
FEC ID number of contributing federal political committee. C	Receipt	
Name of Employer self employed	Occupation physician	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

SUBTOTAL of Receipts This Page (optional).....▶	3000.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 16 OF 59
	<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)
American Victory Fund Committee

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

Mailing Address 3121 Sheridan Blvd

City Lincoln State NE Zip Code 68502

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

Name of Employer self employed Occupation physician

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt 11 / 14 / 2011
Transaction ID : 11116.C425

Amount of Each Receipt this Period 500.00

Receipt

B. Ivis Garcia
Full Name (Last, First, Middle Initial)

Mailing Address 3504 Cragmont Dr., #100

City Tampa State FL Zip Code 33619

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

Name of Employer homemaker Occupation homemaker

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 40000.00

Date of Receipt 09 / 29 / 2011
Transaction ID : 10930.C371

Amount of Each Receipt this Period 40000.00

Receipt

C. Andres Guillemard
Full Name (Last, First, Middle Initial)

Mailing Address 1302 Ponce de Leon Ave., Ste 302

City San Juan State PR Zip Code 00907

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

Name of Employer self employed Occupation insurance agent

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 2500.00

Date of Receipt 09 / 23 / 2011
Transaction ID : 10926.C364

Amount of Each Receipt this Period 2500.00

Receipt

SUBTOTAL of Receipts This Page (optional)..... ▶ 43000.00

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 17 OF 59
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
American Victory Fund Committee

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

Mailing Address 56 Proctor Kelly Lane

City State Zip Code
Shelburne VT 05482

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

Name of Employer Occupation
University of Vermont physician

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 / 14 / 2011
Transaction ID : 11116.C416

Amount of Each Receipt this Period
1000.00

Receipt

Full Name (Last, First, Middle Initial)
B. Brian Hamlin

Mailing Address 3169 Beechwood Drive

City State Zip Code
Allison Park PA 15101

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

Name of Employer Occupation
UPMC physician

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 / 11 / 2011
Transaction ID : 11116.C393

Amount of Each Receipt this Period
1000.00

Receipt

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

Mailing Address 241 Kings Hwy West

City State Zip Code
Haddonfield NJ 08033

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

Name of Employer Occupation
Rothman Institute physician

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 / 11 / 2011
Transaction ID : 11116.C404

Amount of Each Receipt this Period
500.00

Receipt

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:	PAGE 18 OF 59
	(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)
American Victory Fund Committee

Full Name (Last, First, Middle Initial) A. Edward Hellman		Date of Receipt MM / DD / YYYY 11 / 11 / 2011 Transaction ID : 11116.C408
Mailing Address 8450 Northwest Blvd		Amount of Each Receipt this Period 250.00
City Indianapolis	State IN	Zip Code 46278
FEC ID number of contributing federal political committee. C		Receipt
Name of Employer Ortho Indy	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) B. Denise Henry		Date of Receipt MM / DD / YYYY 08 / 19 / 2011 Transaction ID : 10823.C357
Mailing Address 7400 Park Terrace Drive		Amount of Each Receipt this Period 2500.00
City Alexandria	State VA	Zip Code 22307
FEC ID number of contributing federal political committee. C		Receipt
Name of Employer Capitol Counsel LLC	Occupation Partner	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2500.00	

Full Name (Last, First, Middle Initial) C. William Hozack		Date of Receipt MM / DD / YYYY 11 / 14 / 2011 Transaction ID : 11116.C424
Mailing Address 925 Chestnut Street		Amount of Each Receipt this Period 1000.00
City Philadelphia	State PA	Zip Code 19107
FEC ID number of contributing federal political committee. C		Receipt
Name of Employer Rothman Institute	Occupation physician	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

SUBTOTAL of Receipts This Page (optional).....▶	3750.00
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 59
	<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)
American Victory Fund Committee

Full Name (Last, First, Middle Initial)
A. Patrick Hurley

Mailing Address 2634 CR 120 NE

City Alexandria State MN Zip Code 56308

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

Name of Employer Heartland Orthopaedic Speciali Occupation physician

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 / 11 / 2011
Transaction ID : 11116.C391

Amount of Each Receipt this Period
1000.00

Receipt

Full Name (Last, First, Middle Initial)
B. Joshua Jacobs

Mailing Address 2407 Pomona Lane

City Wilmette State IL Zip Code 60091

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

Name of Employer Midwest Orthopaedics Occupation physician

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 / 15 / 2011
Transaction ID : 11206.C437

Amount of Each Receipt this Period
1000.00

Receipt

Full Name (Last, First, Middle Initial)
C. William Jiranek

Mailing Address 4066 Old River Trail

City Powhatan State VA Zip Code 23139

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

Name of Employer self employed Occupation physician

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 / 11 / 2011
Transaction ID : 11116.C379

Amount of Each Receipt this Period
1000.00

Receipt

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

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 20 OF 59
	<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)
American Victory Fund Committee

Full Name (Last, First, Middle Initial)
A. Margie Kalik

Mailing Address 9118 McDonald Drive

City State Zip Code
Bethesda MD 20817-1942

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

Name of Employer Occupation
homemaker homemaker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2500.00

Date of Receipt
MM / DD / YYYY
09 / 27 / 2011
Transaction ID : 10930.C366

Amount of Each Receipt this Period
2500.00

Receipt

Full Name (Last, First, Middle Initial)
B. Thomas Kane

Mailing Address 550 S. Beretonia St., #402

City State Zip Code
Honolulu HI 96813

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

Name of Employer Occupation
self employed physician

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
MM / DD / YYYY
11 / 14 / 2011
Transaction ID : 11116.C422

Amount of Each Receipt this Period
1000.00

Receipt

Full Name (Last, First, Middle Initial)
C. Belinda Keiser

Mailing Address 6069 NW 87th Ave.

City State Zip Code
Pompano Beach FL 33067-5002

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

Name of Employer Occupation
Keiser Career College Vice Chancellor of Comm. Relat

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
10000.00

Date of Receipt
MM / DD / YYYY
09 / 28 / 2011
Transaction ID : 10930.C370

Amount of Each Receipt this Period
10000.00

Receipt

SUBTOTAL of Receipts This Page (optional)..... ▶ 13500.00

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 59
	<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)
American Victory Fund Committee

Full Name (Last, First, Middle Initial)
A. Belinda Keiser

Mailing Address 6069 NW 87th Ave.

City Pompano Beach	State FL	Zip Code 33067-5002
-----------------------	-------------	------------------------

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

Name of Employer Keiser Career College	Occupation Vice Chancellor of Comm. Relat
-------------------------------------------	----------------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
11000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 03 / 2011
Transaction ID : 1003201115C372

Amount of Each Receipt this Period
1000.00

Receipt

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

Mailing Address 290 East Layfair Drive, Ste. A

City Flowood	State MS	Zip Code 39232
-----------------	-------------	-------------------

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

Name of Employer self employed	Occupation physician
-----------------------------------	-------------------------

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 / 14 / 2011
Transaction ID : 11116.C430

Amount of Each Receipt this Period
500.00

Receipt

Full Name (Last, First, Middle Initial)
C. Stefan Kreuzer

Mailing Address 431 Pinehaven

City Houston	State TX	Zip Code 77024
-----------------	-------------	-------------------

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

Name of Employer self employed	Occupation physician
-----------------------------------	-------------------------

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 / 14 / 2011
Transaction ID : 11116.C420

Amount of Each Receipt this Period
1000.00

Receipt

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 22 OF 59
	<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)
American Victory Fund Committee

Full Name (Last, First, Middle Initial)
A. Randall Lewis

Mailing Address 5631 Bent Branch Road

City Bethesda State MD Zip Code 20816

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

Name of Employer WOSM Occupation physician

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 / 11 / 2011
Transaction ID : 11116.C383

Amount of Each Receipt this Period
500.00

Receipt

Full Name (Last, First, Middle Initial)
B. Craig Loucks

Mailing Address 1060 Cypress Way

City Castle Rock State CO Zip Code 80108

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

Name of Employer Peak Orthopedics Occupation physician

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 / 14 / 2011
Transaction ID : 11116.C418

Amount of Each Receipt this Period
500.00

Receipt

Full Name (Last, First, Middle Initial)
C. Scott Marwin

Mailing Address 115 Allen Street

City New York State NY Zip Code 10002

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

Name of Employer self employed Occupation 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 / 11 / 2011
Transaction ID : 11116.C399

Amount of Each Receipt this Period
250.00

Receipt

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 23 OF 59
	<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)
American Victory Fund Committee

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

Mailing Address 2716 Braynard Way

City Sacramento State CA Zip Code 95864

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

Name of Employer Sacramento Knee & Sports Med Occupation physician

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
11 / 14 / 2011
Transaction ID : 11116.C432

Amount of Each Receipt this Period
500.00

Receipt

B. William Montgomery
Full Name (Last, First, Middle Initial)

Mailing Address 6309 Whittier Drive

City Plano State TX Zip Code 75093

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

Name of Employer self employed Occupation physician

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
11 / 11 / 2011
Transaction ID : 11116.C409

Amount of Each Receipt this Period
1000.00

Receipt

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

Mailing Address 1 Cedar Hill Court

City Voorhees State NJ Zip Code 08043

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

Name of Employer self employed Occupation physician

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
11 / 15 / 2011
Transaction ID : 11116.C434

Amount of Each Receipt this Period
500.00

Receipt

SUBTOTAL of Receipts This Page (optional)..... ▶ 2000.00

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 59
	<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)
American Victory Fund Committee

A. William Neville
Full Name (Last, First, Middle Initial)

Mailing Address PO Box 3040

City Christiansted State NJ Zip Code 00822

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

Name of Employer U. S. Viking Occupation President

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
 09 / 21 / 2011
Transaction ID : 10921.C363

Amount of Each Receipt this Period
500.00

Receipt

B. Airell Nygaard
Full Name (Last, First, Middle Initial)

Mailing Address 680 Guzzi Lane #102

City Sonora State CA Zip Code 95370

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

Name of Employer self employed Occupation 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 / 11 / 2011
Transaction ID : 11116.C412

Amount of Each Receipt this Period
250.00

Receipt

c. Mary OConnor
Full Name (Last, First, Middle Initial)

Mailing Address 3205 Ocean Drive South

City Jacksonville Beach State FL Zip Code 32250

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

Name of Employer Mayo Clinic Occupation orthopedic surgeon

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
 12 / 20 / 2011
Transaction ID : 20119.C452

Amount of Each Receipt this Period
1000.00

Receipt

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 25 OF 59
	<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)
American Victory Fund Committee

A. Douglas Padgett
Full Name (Last, First, Middle Initial)
Mailing Address 535 East 70th Street

City New York	State NY	Zip Code 10021
------------------	-------------	-------------------

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

Name of Employer self employed	Occupation physician
-----------------------------------	-------------------------

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
12	/	01	/	2011

Transaction ID : 11206.C446

Amount of Each Receipt this Period
1000.00

Receipt

B. Michael Parks
Full Name (Last, First, Middle Initial)
Mailing Address 535 E 70th Street

City New York	State NY	Zip Code 10021
------------------	-------------	-------------------

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

Name of Employer Hospital for Special Surgery	Occupation physician
--------------------------------------------------	-------------------------

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	/	11	/	2011

Transaction ID : 11116.C384

Amount of Each Receipt this Period
500.00

Receipt

C. Brian Parsley
Full Name (Last, First, Middle Initial)
Mailing Address 302 Pine Shadows Drive

City Houston	State TX	Zip Code 77056
-----------------	-------------	-------------------

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

Name of Employer self employed	Occupation physician
-----------------------------------	-------------------------

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	/	11	/	2011

Transaction ID : 11116.C378

Amount of Each Receipt this Period
1000.00

Receipt

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 26 OF 59
	<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	

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)
American Victory Fund Committee

Full Name (Last, First, Middle Initial) A. Javad Parvizi		Date of Receipt M M / D D / Y Y Y Y Y Y 11 / 16 / 2011 Transaction ID : 11206.C442
Mailing Address 925 Chestnut Street		Amount of Each Receipt this Period 1000.00
City Philadelphia State PA Zip Code 19107	FEC ID number of contributing federal political committee. C	Receipt
Name of Employer Rothman Institute Occupation physician	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) B. Kimberly Powers		Date of Receipt M M / D D / Y Y Y Y Y Y 12 / 20 / 2011 Transaction ID : 20119.C453
Mailing Address 70 S Sewalls Point Rd		Amount of Each Receipt this Period 250.00
City Stuart State FL Zip Code 34996-6433	FEC ID number of contributing federal political committee. C	Receipt
Name of Employer homemaker Occupation homemaker	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. David Reicher		Date of Receipt M M / D D / Y Y Y Y Y Y 11 / 14 / 2011 Transaction ID : 11116.C431
Mailing Address 110 West Road Ste 227		Amount of Each Receipt this Period 250.00
City Towson State MD Zip Code 21204	FEC ID number of contributing federal political committee. C	Receipt
Name of Employer Data Trace Occupation CEO	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 27 OF 59
	<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)
American Victory Fund Committee

A. William Robb
Full Name (Last, First, Middle Initial)

Mailing Address 223 Indian Hill Road

City Winnetka State IL Zip Code 60093

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

Name of Employer Illinois Bone & Joint Institut Occupation physician

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
11 / 11 / 2011
Transaction ID : 11116.C385

Amount of Each Receipt this Period
1000.00

Receipt

B. Russell Roberts
Full Name (Last, First, Middle Initial)

Mailing Address 2117 Bancroft Place NW

City Washington State DC Zip Code 20008

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

Name of Employer BGR Government Affairs LLC Occupation Managing Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
11 / 04 / 2011
Transaction ID : 11104.C374

Amount of Each Receipt this Period
500.00

Receipt

C. Bernard Roehr
Full Name (Last, First, Middle Initial)

Mailing Address 8184 Barony Point

City Mattawan State MI Zip Code 49071

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

Name of Employer Healthcare Midwest Occupation physician

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
11 / 14 / 2011
Transaction ID : 11116.C421

Amount of Each Receipt this Period
1000.00

Receipt

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 28 OF 59
	<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)
American Victory Fund Committee

Full Name (Last, First, Middle Initial) A. Michael Rogers		Date of Receipt M M M / D D D / Y Y Y Y Y Y 11 / 21 / 2011
Mailing Address 165 Bryant Drive		Transaction ID : 11206.C443
City Sarasota	State FL	Zip Code 34236
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2500.00
Name of Employer Risk Services, LLC	Occupation Chairman and CEO	Receipt
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2500.00	

Full Name (Last, First, Middle Initial) B. Jeffrey Rosen		Date of Receipt M M M / D D D / Y Y Y Y Y Y 11 / 14 / 2011
Mailing Address 1684 Indian Dance Court		Transaction ID : 11116.C419
City Maitland	State FL	Zip Code 32751
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer Orlando Ortho Center	Occupation physician	Receipt
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. Andrew Star		Date of Receipt M M M / D D D / Y Y Y Y Y Y 11 / 11 / 2011
Mailing Address 1223 Marietta Drive		Transaction ID : 11116.C411
City Ambler	State PA	Zip Code 19002
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer self employed	Occupation physician	Receipt
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

SUBTOTAL of Receipts This Page (optional).....▶	4000.00
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 29 OF 59
	(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)
American Victory Fund Committee

Full Name (Last, First, Middle Initial)
A. Michael Star

Mailing Address 85 Mt. Tenaya Drive

City San Rafael State CA Zip Code 94903

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

Name of Employer Santa Rosa Orthopaedic Occupation physician

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
11			14			2011			

Transaction ID : 11116.C428

Amount of Each Receipt this Period
500.00

Receipt

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

Mailing Address 5519 Silverleaf Court

City Haslett State MI Zip Code 48840

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

Name of Employer Charles J. Taunt Jr. PC Occupation physician

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
11			11			2011			

Transaction ID : 11116.C386

Amount of Each Receipt this Period
500.00

Receipt

Full Name (Last, First, Middle Initial)
C. Thomas Vail

Mailing Address 3474 Clay Street

City San Francisco State CA Zip Code 94118

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

Name of Employer self employed Occupation physician

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
11			04			2011			

Transaction ID : 11104.C376

Amount of Each Receipt this Period
1000.00

Receipt

SUBTOTAL of Receipts This Page (optional).....▶	2000.00
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 59
	<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)
American Victory Fund Committee

Full Name (Last, First, Middle Initial) A. David Waxman		Date of Receipt MM / DD / YYYY 12 / 01 / 2011 Transaction ID : 11206.C445
Mailing Address 30 Diamond Cove		Amount of Each Receipt this Period 500.00
City Bridgeport	State WV	Zip Code 26330
FEC ID number of contributing federal political committee. C		Receipt
Name of Employer self employed	Occupation orthopedic surgeon	
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. John Wessel		Date of Receipt MM / DD / YYYY 08 / 19 / 2011 Transaction ID : 10823.C360
Mailing Address RR 1 Box 2, 72 Estate River		Amount of Each Receipt this Period 1000.00
City St. Croix	State VI	Zip Code 00850
FEC ID number of contributing federal political committee. C		Receipt
Name of Employer U & W Industrial Supply	Occupation Managing Director	
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. Mark Woolf		Date of Receipt MM / DD / YYYY 11 / 16 / 2011 Transaction ID : 11206.C439
Mailing Address 3628 Country Club Circle		Amount of Each Receipt this Period 1000.00
City Fort Worth	State TX	Zip Code 76109
FEC ID number of contributing federal political committee. C		Receipt
Name of Employer Arlington Orthopedic Associate	Occupation physician	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 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: PAGE 31 OF 59
(check only one)

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

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NAME OF COMMITTEE (In Full)
American Victory Fund Committee

Full Name (Last, First, Middle Initial)
A. Martha Zumwalt

Mailing Address 10203 Tarpin Springs Road

City Odessa	State FL	Zip Code 33556
----------------	-------------	-------------------

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

Name of Employer American Reprographics Co	Occupation executive director
-----------------------------------------------	----------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
30800.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	27	/	2011

Transaction ID : 10930.C369

Amount of Each Receipt this Period
30800.00

Receipt

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

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

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

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

Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional).....▶	30800.00
TOTAL This Period (last page this line number only).....▶	173800.00

**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 59
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" 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)
American Victory Fund Committee

Full Name (Last, First, Middle Initial) A. American Health Care Association		Date of Receipt MM / DD / YYYY 08 / 19 / 2011 Transaction ID : 10823.C358
Mailing Address 1201 L Street NW		Amount of Each Receipt this Period 2500.00
City Washington	State DC	Zip Code 20005
FEC ID number of contributing federal political committee. C C00006080	Name of Employer	Occupation
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2500.00	

Full Name (Last, First, Middle Initial) B. American Health Care Association		Date of Receipt MM / DD / YYYY 12 / 19 / 2011 Transaction ID : 20119.C449
Mailing Address 1201 L Street NW		Amount of Each Receipt this Period 2500.00
City Washington	State DC	Zip Code 20005
FEC ID number of contributing federal political committee. C C00006080	Name of Employer	Occupation
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	

Full Name (Last, First, Middle Initial) C. College of American Pathologists PAC		Date of Receipt MM / DD / YYYY 09 / 27 / 2011 Transaction ID : 10930.C365
Mailing Address 1350 I Street, NW, Ste 590		Amount of Each Receipt this Period 5000.00
City Washington	State DC	Zip Code 20005-3305
FEC ID number of contributing federal political committee. C C00274944	Name of Employer	Occupation
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	

SUBTOTAL of Receipts This Page (optional).....▶	10000.00
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 59
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" 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)
American Victory Fund Committee

Full Name (Last, First, Middle Initial)
A. Cooperative Of American Physicians PAC

Mailing Address 333 S Hope St, 8th Floor

City Los Angeles State CA Zip Code 90071

FEC ID number of contributing federal political committee. **C** C00161604

Name of Employer Occupation

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
 11 / 11 / 2011

Transaction ID : 11116.C388

Amount of Each Receipt this Period
 300.00

Receipt

Full Name (Last, First, Middle Initial)
B. Cooperative Of American Physicians PAC

Mailing Address 333 S Hope St, 8th Floor

City Los Angeles State CA Zip Code 90071

FEC ID number of contributing federal political committee. **C** C00161604

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
 11 / 15 / 2011

Transaction ID : 11116.C435

Amount of Each Receipt this Period
 700.00

Earmarked(Receipt)

Full Name (Last, First, Middle Initial)
C. Dr. Richard F. Santore

Mailing Address 7910 Frost St #200

City San Diego State CA Zip Code 92123

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

Name of Employer Occupation
 self employed physician

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 700.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 15 / 2011

Transaction ID : CM9811116.C435

Amount of Each Receipt this Period
 700.00

Memo - Conduit memo total

[MEMO ITEM]
 Earmarked Memo - Conduit total

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: PAGE 34 OF 59
(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" 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)
American Victory Fund Committee

A. Taco PAC
Full Name (Last, First, Middle Initial)
Mailing Address 6405 Metcalf Ave Ste 503
City Shawnee Mission State KS Zip Code 66202
FEC ID number of contributing federal political committee. **C** C00330118
Name of Employer Occupation
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
12 / 19 / 2011
Transaction ID : 20119.C450
Amount of Each Receipt this Period
1000.00
Receipt

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).....▶	1000.00
TOTAL This Period (last page this line number only).....▶	12000.00

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
American Victory Fund Committee

Full Name (Last, First, Middle Initial)

A. American Express

Mailing Address P.O. Box 360001

City Fort Lauderdale State FL Zip Code 33336-0001

Purpose of Disbursement merchant service charge

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
08 / 02 / 2011

Transaction ID : 10809.E157

Amount of Each Disbursement this Period

4.95

MERCHANT SERVICE CHARGE

Full Name (Last, First, Middle Initial)

B. American Express

Mailing Address P.O. Box 360001

City Fort Lauderdale State FL Zip Code 33336-0001

Purpose of Disbursement merchant service charge

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
09 / 02 / 2011

Transaction ID : 10913.E174

Amount of Each Disbursement this Period

4.95

MERCHANT SERVICE CHARGE

Full Name (Last, First, Middle Initial)

C. American Express

Mailing Address P.O. Box 360001

City Fort Lauderdale State FL Zip Code 33336-0001

Purpose of Disbursement merchant service charge

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
09 / 30 / 2011

Transaction ID : 10930.E187

Amount of Each Disbursement this Period

890.27

MERCHANT SERVICE CHARGE

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

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

900.17

**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)
American Victory Fund Committee

Full Name (Last, First, Middle Initial)

A. American Express

Mailing Address P.O. Box 360001

City Fort Lauderdale State FL Zip Code 33336-0001

Purpose of Disbursement
merchant service charge

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			03			2011			

Transaction ID : 1003201115E190

Amount of Each Disbursement this Period

1161.10

MERCHANT SERVICE CHARGE

Full Name (Last, First, Middle Initial)

B. American Express

Mailing Address P.O. Box 360001

City Fort Lauderdale State FL Zip Code 33336-0001

Purpose of Disbursement
merchant service charge

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			02			2011			

Transaction ID : 11104.E205

Amount of Each Disbursement this Period

4.95

MERCHANT SERVICE CHARGE

Full Name (Last, First, Middle Initial)

C. American Express

Mailing Address P.O. Box 360001

City Fort Lauderdale State FL Zip Code 33336-0001

Purpose of Disbursement
merchant service charge

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			04			2011			

Transaction ID : 11116.E208

Amount of Each Disbursement this Period

29.05

MERCHANT SERVICE CHARGE

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

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

1195.10

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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)
American Victory Fund Committee

Full Name (Last, First, Middle Initial)

A. American Express

Mailing Address P.O. Box 360001

City Fort Lauderdale State FL Zip Code 33336-0001

Purpose of Disbursement
merchant service charge

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

M M / D D / Y Y Y Y Y Y
11 / 14 / 2011

Transaction ID : 11206.E214

Amount of Each Disbursement this Period

346.31

MERCHANT SERVICE CHARGE

Full Name (Last, First, Middle Initial)

B. American Express

Mailing Address P.O. Box 360001

City Fort Lauderdale State FL Zip Code 33336-0001

Purpose of Disbursement
merchant service charge

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

M M / D D / Y Y Y Y Y Y
11 / 15 / 2011

Transaction ID : 11206.E215

Amount of Each Disbursement this Period

14.60

MERCHANT SERVICE CHARGE

Full Name (Last, First, Middle Initial)

C. American Express

Mailing Address P.O. Box 360001

City Fort Lauderdale State FL Zip Code 33336-0001

Purpose of Disbursement
merchant service charge

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

M M / D D / Y Y Y Y Y Y
11 / 16 / 2011

Transaction ID : 11206.E216

Amount of Each Disbursement this Period

29.05

MERCHANT SERVICE CHARGE

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

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

389.96

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

Use separate schedule(s)
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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)
American Victory Fund Committee

Full Name (Last, First, Middle Initial)

A. American Express

Mailing Address P.O. Box 360001

City Fort Lauderdale State FL Zip Code 33336-0001

Purpose of Disbursement
merchant service charge

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
12 / 02 / 2011

Transaction ID : 11206.E218

Amount of Each Disbursement this Period

4.95

MERCHANT SERVICE CHARGE

Full Name (Last, First, Middle Initial)

B. American Express

Mailing Address P.O. Box 360001

City Fort Lauderdale State FL Zip Code 33336-0001

Purpose of Disbursement
merchant service charge

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
12 / 16 / 2011

Transaction ID : 20119.E233

Amount of Each Disbursement this Period

57.95

MERCHANT SERVICE CHARGE

Full Name (Last, First, Middle Initial)

C. Buckpoint Services

Mailing Address 377 Emma Road

City Basalt State CO Zip Code 81621-

Purpose of Disbursement
JFC Event - entertainment

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
08 / 01 / 2011

Transaction ID : 10823.E167

Amount of Each Disbursement this Period

555.00

JFC EVENT - ENTERTAINMENT

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

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

617.90

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

Use separate schedule(s)
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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)
American Victory Fund Committee

Full Name (Last, First, Middle Initial)

A. Cooters Country Catering

Mailing Address 424 Wagon Wheel Circle

City State Zip Code
New Castle CO 81647-

Purpose of Disbursement
JFC Event - catering

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
08 / 01 / 2011

Transaction ID : 10809.E162

Amount of Each Disbursement this Period

1360.36

JFC EVENT - CATERING

Full Name (Last, First, Middle Initial)

B. CT Jensen & Associates

Mailing Address 1961 Brookhaven Drive

City State Zip Code
Sarasota FL 34239-

Purpose of Disbursement
fundraising consulting

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
09 / 27 / 2011

Transaction ID : 10930.E181

Amount of Each Disbursement this Period

3508.33

FUNDRAISING CONSULTING

Full Name (Last, First, Middle Initial)

C. CT Jensen & Associates

Mailing Address 1961 Brookhaven Drive

City State Zip Code
Sarasota FL 34239-

Purpose of Disbursement
fundraising consulting

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 / 12 / 2011

Transaction ID : 11104.E197

Amount of Each Disbursement this Period

5500.00

FUNDRAISING CONSULTING

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

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

10368.69

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

Use separate schedule(s)
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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)
American Victory Fund Committee

Full Name (Last, First, Middle Initial)

A. Election Compliance Services

Mailing Address 22780 Indian Creek Dr., Ste 100

City Sterling State VA Zip Code 20166-

Purpose of Disbursement reporting services

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
08 / 03 / 2011

Transaction ID : 10809.E166

Amount of Each Disbursement this Period

1051.50

REPORTING SERVICES

Full Name (Last, First, Middle Initial)

B. Election Compliance Services

Mailing Address 22780 Indian Creek Dr., Ste 100

City Sterling State VA Zip Code 20166-

Purpose of Disbursement reporting services

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
08 / 31 / 2011

Transaction ID : 10913.E171

Amount of Each Disbursement this Period

1581.52

REPORTING SERVICES

Full Name (Last, First, Middle Initial)

C. Election Compliance Services

Mailing Address 22780 Indian Creek Dr., Ste 100

City Sterling State VA Zip Code 20166-

Purpose of Disbursement reporting services

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
09 / 30 / 2011

Transaction ID : 1003201115E188

Amount of Each Disbursement this Period

2380.12

REPORTING SERVICES

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

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

5013.14

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

Use separate schedule(s)
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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)
American Victory Fund Committee

Full Name (Last, First, Middle Initial)

A. Election Compliance Services

Mailing Address 22780 Indian Creek Dr., Ste 100

City Sterling State VA Zip Code 20166-

Purpose of Disbursement
reporting services

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	1		0	4		2	0	1	1

Transaction ID : 11104.E207

Amount of Each Disbursement this Period

1	6	6	1	.	2	5
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REPORTING SERVICES

Full Name (Last, First, Middle Initial)

B. Election Compliance Services

Mailing Address 22780 Indian Creek Dr., Ste 100

City Sterling State VA Zip Code 20166-

Purpose of Disbursement
reporting service

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	2		0	6		2	0	1	1

Transaction ID : 11206.E223

Amount of Each Disbursement this Period

1	9	4	8	.	6	2
---	---	---	---	---	---	---

REPORTING SERVICE

Full Name (Last, First, Middle Initial)

C. European Caterers Ltd

Mailing Address 402-A Aspen Airport Business Cente

City Aspen State CO Zip Code 81611-

Purpose of Disbursement
JFC Event - catering

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	8		1	9		2	0	1	1

Transaction ID : 10823.E170

Amount of Each Disbursement this Period

1	4	4	3	.	0	2
---	---	---	---	---	---	---

JFC EVENT - CATERING

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

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

5	0	5	3	.	0	2
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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
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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)
American Victory Fund Committee

Full Name (Last, First, Middle Initial)

A. EV Strategies

Mailing Address 2 West Windsor Avenue

City Alexandria State VA Zip Code 22301-

Purpose of Disbursement
airfare - JFC event

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
08 / 31 / 2011

Transaction ID : 10913.E173

Amount of Each Disbursement this Period

780.00

AIRFARE - JFC EVENT

Full Name (Last, First, Middle Initial)

B. EV Strategies

Mailing Address 2 West Windsor Avenue

City Alexandria State VA Zip Code 22301-

Purpose of Disbursement
Commission - fundraising

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
09 / 26 / 2011

Transaction ID : 10930.E177

Amount of Each Disbursement this Period

5585.00

COMMISSION - FUNDRAISING

Full Name (Last, First, Middle Initial)

C. EV Strategies

Mailing Address 2 West Windsor Avenue

City Alexandria State VA Zip Code 22301-

Purpose of Disbursement
commission - fundraising

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
09 / 27 / 2011

Transaction ID : 10930.E184

Amount of Each Disbursement this Period

3080.00

COMMISSION - FUNDRAISING

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

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

9445.00

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
American Victory Fund Committee

Full Name (Last, First, Middle Initial)

A. EV Strategies

Mailing Address 2 West Windsor Avenue

City Alexandria State VA Zip Code 22301-

Purpose of Disbursement
reimburse air fare

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : 10930.E183

Amount of Each Disbursement this Period

REIMBURSE AIR FARE

Full Name (Last, First, Middle Initial)

B. EV Strategies

Mailing Address 2 West Windsor Avenue

City Alexandria State VA Zip Code 22301-

Purpose of Disbursement
commission - fundraising

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : 10930.E185

Amount of Each Disbursement this Period

COMMISSION - FUNDRAISING

Full Name (Last, First, Middle Initial)

C. EV Strategies

Mailing Address 2 West Windsor Avenue

City Alexandria State VA Zip Code 22301-

Purpose of Disbursement
fundrasing commission

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : 11104.E196

Amount of Each Disbursement this Period

FUNDRASING COMMISSION

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

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NAME OF COMMITTEE (In Full)
American Victory Fund Committee

Full Name (Last, First, Middle Initial)

A. EV Strategies

Mailing Address 2 West Windsor Avenue

City Alexandria State VA Zip Code 22301-

Purpose of Disbursement
fundraising commission

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Category/
Type

Date of Disbursement

MM / DD / YYYY
11 / 16 / 2011

Transaction ID : 11206.E209

Amount of Each Disbursement this Period

1000.00

FUNDRAISING COMMISSION

Full Name (Last, First, Middle Initial)

B. EV Strategies

Mailing Address 2 West Windsor Avenue

City Alexandria State VA Zip Code 22301-

Purpose of Disbursement
reimburse travel

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Category/
Type

Date of Disbursement

MM / DD / YYYY
11 / 16 / 2011

Transaction ID : 11206.E212

Amount of Each Disbursement this Period

1066.73

REIMBURSE TRAVEL

Full Name (Last, First, Middle Initial)

C. EV Strategies

Mailing Address 2 West Windsor Avenue

City Alexandria State VA Zip Code 22301-

Purpose of Disbursement
reimburse supplies & internet fee

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Category/
Type

Date of Disbursement

MM / DD / YYYY
11 / 16 / 2011

Transaction ID : 11206.E213

Amount of Each Disbursement this Period

93.74

REIMBURSE SUPPLIES & INTERNET FEE

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

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

2160.47

**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)
American Victory Fund Committee

Full Name (Last, First, Middle Initial)

A. EV Strategies

Mailing Address 2 West Windsor Avenue

City Alexandria State VA Zip Code 22301-

Purpose of Disbursement fundraising commission

Candidate Name

Office Sought: House Senate President

State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		20		2011

Transaction ID : 20119.E242

Amount of Each Disbursement this Period

4855.00

FUNDRAISING COMMISSION

B. Federal City Caterers

Full Name (Last, First, Middle Initial)

Mailing Address 1119 12th Street NW

City Washington State DC Zip Code 20005-

Purpose of Disbursement JFC event - catering

Candidate Name

Office Sought: House Senate President

State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11		16		2011

Transaction ID : 11206.E210

Amount of Each Disbursement this Period

458.68

JFC EVENT - CATERING

C. First Bankcard

Full Name (Last, First, Middle Initial)

Mailing Address PO Box 2818

City Omaha State NE Zip Code 68103-2818

Purpose of Disbursement SEE BELOW

Candidate Name

Office Sought: House Senate President

State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		07		2011

Transaction ID : 20119.E227

Amount of Each Disbursement this Period

2462.73

SEE BELOW

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

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

7776.41

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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)
American Victory Fund Committee

Full Name (Last, First, Middle Initial)

A. American Airlines

Mailing Address 4333 Amon Carter Boulevard

City State Zip Code
Fort Worth TX 76155-

Purpose of Disbursement
travel - airfare

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	07	/	2011

Transaction ID : 20119.E228

Amount of Each Disbursement this Period

2152.40

[MEMO ITEM]
MEMO: TRAVEL - AIRFARE

Full Name (Last, First, Middle Initial)

B. Greenbrier Sporting Club

Mailing Address 5 Kates Mountain Road

City State Zip Code
White Sulphur Spgs WV 24986-

Purpose of Disbursement
JFC Event -golf fees

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	07	/	2011

Transaction ID : 20119.E229

Amount of Each Disbursement this Period

202.88

[MEMO ITEM]
MEMO: JFC EVENT -GOLF FEES

Full Name (Last, First, Middle Initial)

C. First Bankcard

Mailing Address PO Box 2818

City State Zip Code
Omaha NE 68103-2818

Purpose of Disbursement
SEE BELOW

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	07	/	2011

Transaction ID : 20119.E225

Amount of Each Disbursement this Period

881.40

SEE BELOW

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

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

881.40

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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)
American Victory Fund Committee

Full Name (Last, First, Middle Initial)

A. Rosewood Crescent Hotel

Mailing Address 400 Crescent Court

City Dallas State TX Zip Code 75201-

Purpose of Disbursement
JFC Event - lodging

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
12 / 07 / 2011

Transaction ID : 20119.E226

Amount of Each Disbursement this Period

881.40

[MEMO ITEM]
MEMO: JFC EVENT - LODGING

Full Name (Last, First, Middle Initial)

B. Giant Printing

Mailing Address 4116 Walney Road, Ste F

City Chantilly State VA Zip Code 20151-

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 M / D D D / Y Y Y Y Y Y
12 / 19 / 2011

Transaction ID : 20119.E234

Amount of Each Disbursement this Period

126.00

PRINTING

Full Name (Last, First, Middle Initial)

C. JNJ Management LLC

Mailing Address 215 Cape Harbour Loop #106

City Bradenton State FL Zip Code 34212-

Purpose of Disbursement
fundraising consulting

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
10 / 12 / 2011

Transaction ID : 11104.E198

Amount of Each Disbursement this Period

3250.00

FUNDRAISING CONSULTING

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

3376.00

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)
American Victory Fund Committee

Full Name (Last, First, Middle Initial)

A. Joseph Leach

Mailing Address 5316 Creekside Trail

City Sarasota State FL Zip Code 34243-

Purpose of Disbursement
SEE BELOW

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
09 / 27 / 2011

Transaction ID : 10930.E179

Amount of Each Disbursement this Period

411.00

SEE BELOW

Full Name (Last, First, Middle Initial)

B. Associated Limo

Mailing Address 1969 Park Ave

City Miami State FL Zip Code 33139-

Purpose of Disbursement
limo service for JFC event

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
09 / 27 / 2011

Transaction ID : 10930.E180

Amount of Each Disbursement this Period

411.00

[MEMO ITEM]

MEMO: LIMO SERVICE FOR JFC EVENT

Full Name (Last, First, Middle Initial)

C. Lindsey Soucie

Mailing Address 377 Emma Road

City Basalt State CO Zip Code 81621-

Purpose of Disbursement
JFC Event - Entertainment

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
08 / 01 / 2011

Transaction ID : 10823.E168

Amount of Each Disbursement this Period

187.50

JFC EVENT - ENTERTAINMENT

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

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

598.50

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

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

FOR LINE NUMBER:
(check only one)

<input 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)
American Victory Fund Committee

Full Name (Last, First, Middle Initial)

A. Lindsey Soucie

Mailing Address 377 Emma Road

City Basalt State CO Zip Code 81621-

Purpose of Disbursement
JFC Event - Reimburse travel

Candidate Name

Office Sought: House Senate President

State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
08 / 19 / 2011

Transaction ID : 10823.E169

Amount of Each Disbursement this Period

300.00

JFC EVENT - REIMBURSE TRAVEL

Full Name (Last, First, Middle Initial)

B. Maiellano Political Consulting Services

Mailing Address 3600 S. Glebe Rd., #331

City Arlington State VA Zip Code 22202-

Purpose of Disbursement
fundraising consulting

Candidate Name

Office Sought: House Senate President

State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
07 / 08 / 2011

Transaction ID : 10809.E160

Amount of Each Disbursement this Period

6500.00

FUNDRAISING CONSULTING

Full Name (Last, First, Middle Initial)

C. Maiellano Political Consulting Services

Mailing Address 3600 S. Glebe Rd., #331

City Arlington State VA Zip Code 22202-

Purpose of Disbursement
travel - airfare

Candidate Name

Office Sought: House Senate President

State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
07 / 20 / 2011

Transaction ID : 10809.E161

Amount of Each Disbursement this Period

745.80

TRAVEL - AIRFARE

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

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

7545.80

**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)
American Victory Fund Committee

Full Name (Last, First, Middle Initial)

A. Maiellano Political Consulting Services

Mailing Address 3600 S. Glebe Rd., #331

City State Zip Code
Arlington VA 22202-

Purpose of Disbursement
fundraising consulting

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : 10809.E164

Amount of Each Disbursement this Period

FUNDRAISING CONSULTING

Full Name (Last, First, Middle Initial)

B. Maiellano Political Consulting Services

Mailing Address 3600 S. Glebe Rd., #331

City State Zip Code
Arlington VA 22202-

Purpose of Disbursement
fundraising consulting

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : 10913.E172

Amount of Each Disbursement this Period

FUNDRAISING CONSULTING

Full Name (Last, First, Middle Initial)

C. Maiellano Political Consulting Services

Mailing Address 3600 S. Glebe Rd., #331

City State Zip Code
Arlington VA 22202-

Purpose of Disbursement
fundraising consulting

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : 10930.E182

Amount of Each Disbursement this Period

FUNDRAISING CONSULTING

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

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NAME OF COMMITTEE (In Full)
American Victory Fund Committee

Full Name (Last, First, Middle Initial)

A. Maiellano Political Consulting Services

Mailing Address 3600 S. Glebe Rd., #331

City State Zip Code
Arlington VA 22202-

Purpose of Disbursement
fundraising consulting

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 / 01 / 2011

Transaction ID : 11104.E206

Amount of Each Disbursement this Period

5000.00

FUNDRAISING CONSULTING

Full Name (Last, First, Middle Initial)

B. Maiellano Political Consulting Services

Mailing Address 3600 S. Glebe Rd., #331

City State Zip Code
Arlington VA 22202-

Purpose of Disbursement
fundraising consulting

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
12 / 02 / 2011

Transaction ID : 11206.E220

Amount of Each Disbursement this Period

6000.00

FUNDRAISING CONSULTING

Full Name (Last, First, Middle Initial)

C. Maiellano Political Consulting Services

Mailing Address 3600 S. Glebe Rd., #331

City State Zip Code
Arlington VA 22202-

Purpose of Disbursement
reimburse travel expense

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
12 / 02 / 2011

Transaction ID : 11206.E221

Amount of Each Disbursement this Period

82.32

REIMBURSE TRAVEL EXPENSE

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

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

11082.32

**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)
American Victory Fund Committee

Full Name (Last, First, Middle Initial)

A. Maiellano Political Consulting Services

Mailing Address 3600 S. Glebe Rd., #331

City Arlington State VA Zip Code 22202-

Purpose of Disbursement
fundraising consulting

Candidate Name

Office Sought: House Senate President

State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		19		2011

Transaction ID : 20119.E235

Amount of Each Disbursement this Period

7668.27

FUNDRAISING CONSULTING

Full Name (Last, First, Middle Initial)

B. Matters Of Taste LLC

Mailing Address PO Box 1248

City Alexandria State VA Zip Code 22313-

Purpose of Disbursement
JFC Event - catering

Candidate Name

Office Sought: House Senate President

State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		29		2011

Transaction ID : 10930.E186

Amount of Each Disbursement this Period

1089.00

JFC EVENT - CATERING

Full Name (Last, First, Middle Initial)

C. Morgan, Meredith & Associates

Mailing Address 22780 Indian Creek Dr., STE 100

City Sterling State VA Zip Code 20166-

Purpose of Disbursement
postage & shipping charges

Candidate Name

Office Sought: House Senate President

State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		03		2011

Transaction ID : 10809.E165

Amount of Each Disbursement this Period

59.10

POSTAGE & SHIPPING CHARGES

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

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

8816.37

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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)
American Victory Fund Committee

Full Name (Last, First, Middle Initial)

A. Morgan, Meredith & Associates

Mailing Address 22780 Indian Creek Dr., STE 100

City Sterling State VA Zip Code 20166-

Purpose of Disbursement
fundraising commission

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
12 / 06 / 2011

Transaction ID : 20119.E224

Amount of Each Disbursement this Period

1250.00

FUNDRAISING COMMISSION

Full Name (Last, First, Middle Initial)

B. Sage Payment Solutions

Mailing Address 1750 Old Meadow Rd., #300

City Mc Lean State VA Zip Code 22102-

Purpose of Disbursement
merchant service charge

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
07 / 05 / 2011

Transaction ID : 10706.E156

Amount of Each Disbursement this Period

302.02

MERCHANT SERVICE CHARGE

Full Name (Last, First, Middle Initial)

C. Sage Payment Solutions

Mailing Address 1750 Old Meadow Rd., #300

City Mc Lean State VA Zip Code 22102-

Purpose of Disbursement
merchant service charge

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
08 / 02 / 2011

Transaction ID : 10809.E158

Amount of Each Disbursement this Period

44.10

MERCHANT SERVICE CHARGE

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

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

1596.12

**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)
American Victory Fund Committee

Full Name (Last, First, Middle Initial)

A. Sage Payment Solutions

Mailing Address 1750 Old Meadow Rd., #300

City State Zip Code
Mc Lean VA 22102-

Purpose of Disbursement
merchant service charge

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
08 / 05 / 2011

Transaction ID : 10809.E159

Amount of Each Disbursement this Period

29.05

MERCHANT SERVICE CHARGE

Full Name (Last, First, Middle Initial)

B. Sage Payment Solutions

Mailing Address 1750 Old Meadow Rd., #300

City State Zip Code
Mc Lean VA 22102-

Purpose of Disbursement
merchant service charge

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
09 / 02 / 2011

Transaction ID : 10913.E175

Amount of Each Disbursement this Period

44.35

MERCHANT SERVICE CHARGE

Full Name (Last, First, Middle Initial)

C. Sage Payment Solutions

Mailing Address 1750 Old Meadow Rd., #300

City State Zip Code
Mc Lean VA 22102-

Purpose of Disbursement
merchant service charge

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
10 / 03 / 2011

Transaction ID : 1003201115E191

Amount of Each Disbursement this Period

113.45

MERCHANT SERVICE CHARGE

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

186.85

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)
American Victory Fund Committee

Full Name (Last, First, Middle Initial)

A. Sage Payment Solutions

Mailing Address 1750 Old Meadow Rd., #300

City State Zip Code
Mc Lean VA 22102-

Purpose of Disbursement
merchant service charge

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
11 / 02 / 2011

Transaction ID : 11104.E204

Amount of Each Disbursement this Period

43.22

MERCHANT SERVICE CHARGE

Full Name (Last, First, Middle Initial)

B. Sage Payment Solutions

Mailing Address 1750 Old Meadow Rd., #300

City State Zip Code
Mc Lean VA 22102-

Purpose of Disbursement
merchant service charge

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
12 / 02 / 2011

Transaction ID : 11206.E219

Amount of Each Disbursement this Period

961.28

MERCHANT SERVICE CHARGE

Full Name (Last, First, Middle Initial)

C. St Regis Aspen Resort

Mailing Address 315 East Dean Street

City State Zip Code
Aspen CO 81611-

Purpose of Disbursement
JFC Event - deposit

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
12 / 09 / 2011

Transaction ID : 20119.E232

Amount of Each Disbursement this Period

3000.00

JFC EVENT - DEPOSIT

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

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

4004.50

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

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

FOR LINE NUMBER:
(check only one)

<input 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)
American Victory Fund Committee

Full Name (Last, First, Middle Initial)

A. Twirp Anderson

Mailing Address Box 3559

City State Zip Code
Glenwood Springs CO 81602-

Purpose of Disbursement
JFC event - entertainment

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
08 / 01 / 2011

Transaction ID : 10809.E163

Amount of Each Disbursement this Period

500.00

JFC EVENT - ENTERTAINMENT

Full Name (Last, First, Middle Initial)

B. Yvonne M. Buchanan

Mailing Address 215 Cape Harbour Loop, #106

City State Zip Code
Bradenton FL 34212-

Purpose of Disbursement
fundraising consulting

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
09 / 27 / 2011

Transaction ID : 10930.E178

Amount of Each Disbursement this Period

2208.33

FUNDRAISING CONSULTING

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY

Amount of Each Disbursement this Period

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

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

2708.33

103529.45

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
American Victory Fund Committee

Full Name (Last, First, Middle Initial)

A. National Republican Congressional Committ

Mailing Address 320 First Street

City Washington State DC Zip Code 20003-

Purpose of Disbursement transfer to affiliated committee

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
09 / 30 / 2011

Transaction ID : 11012.E195

Amount of Each Disbursement this Period

14720.83

Full Name (Last, First, Middle Initial)

B. National Republican Congressional Committ

Mailing Address 320 First Street

City Washington State DC Zip Code 20003-

Purpose of Disbursement transfer to affiliated committee

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
10 / 12 / 2011

Transaction ID : 11104.E199

Amount of Each Disbursement this Period

25317.78

Full Name (Last, First, Middle Initial)

C. Republican Party of Florida

Mailing Address 420 Jefferson St.

City Tallahassee State FL Zip Code 32301-

Purpose of Disbursement transfer to affiliated committee

Candidate Name

REPUBLICAN PARTY OF FLORIDA

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
10 / 12 / 2011

Transaction ID : 11104.E200

Amount of Each Disbursement this Period

7211.26

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

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

47249.87

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
American Victory Fund Committee

Full Name (Last, First, Middle Initial)

A. Vern Buchanan for Congress

Mailing Address P.O. Box 48928

City Sarasota State FL Zip Code 34230-

Purpose of Disbursement
transfer to affiliated committee

Candidate Name
VERN BUCHANAN FOR CONGRESS

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
12 / 20 / 2011

Transaction ID : 20119.E243

Amount of Each Disbursement this Period

11427.14

Full Name (Last, First, Middle Initial)

B. Vern Buchanan for Congress

Mailing Address P.O. Box 48928

City Sarasota State FL Zip Code 34230-

Purpose of Disbursement
transfer to affiliated

Candidate Name
VERN BUCHANAN FOR CONGRESS

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
09 / 30 / 2011

Transaction ID : 11012.E193

Amount of Each Disbursement this Period

24641.66

Full Name (Last, First, Middle Initial)

C. Vern Buchanan for Congress

Mailing Address P.O. Box 48928

City Sarasota State FL Zip Code 34230-

Purpose of Disbursement
transfer to affiliated committee

Candidate Name
VERN BUCHANAN FOR CONGRESS

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
10 / 12 / 2011

Transaction ID : 11104.E202

Amount of Each Disbursement this Period

3527.24

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

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

39596.04

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
American Victory Fund Committee

Full Name (Last, First, Middle Initial)

A. Vote To Elect Republicans Now PAC

Mailing Address 2278 Indian Creek Dr., STE 100

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	0		1	2		2	0	1	1

City Sterling State VA Zip Code 20166-

Transaction ID : 11104.E201

Purpose of Disbursement
transfer to affiliated committee

Amount of Each Disbursement this Period

3	9	1	6
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Candidate Name
VOTE TO ELECT REPUBLICANS NOW PAC (VERN PAC)

Category/
Type

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

Full Name (Last, First, Middle Initial)

B. Vote To Elect Republicans Now PAC

Mailing Address 2278 Indian Creek Dr., STE 100

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	2		2	0		2	0	1	1

City Sterling State VA Zip Code 20166-

Transaction ID : 20119.E244

Purpose of Disbursement
transfer to affiliated committee

Amount of Each Disbursement this Period

5	6	5	1	4
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Candidate Name
VOTE TO ELECT REPUBLICANS NOW PAC (VERN PAC)

Category/
Type

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

Full Name (Last, First, Middle Initial)

C. Vote To Elect Republicans Now PAC

Mailing Address 2278 Indian Creek Dr., STE 100

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		3	0		2	0	1	1

City Sterling State VA Zip Code 20166-

Transaction ID : 11012.E194

Purpose of Disbursement
transfer to affiliated committee

Amount of Each Disbursement this Period

9	5	5	9	4	9
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Candidate Name
VOTE TO ELECT REPUBLICANS NOW PAC (VERN PAC)

Category/
Type

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

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

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

1	4	0	4	3	7	9
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1	0	0	8	9	7	0
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