

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS For Other Than An Authorized Committee

Office Use Only

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

ADDRESS (number and street) 228 S WASHINGTON STREET SUITE 115
Check if different than previously reported. (ACC) Alexandria VA 22314

2. FEC IDENTIFICATION NUMBER CITY STATE ZIP CODE
C C00494617
3. IS THIS REPORT NEW OR AMENDED
[X] (N) [] (A)

4. TYPE OF REPORT (Choose One)
(a) Quarterly Reports:
[] April 15 Quarterly Report (Q1)
[] July 15 Quarterly Report (Q2)
[] October 15 Quarterly Report (Q3)
[X] January 31 Year-End Report (YE)
[] July 31 Mid-Year Report (Non-election Year Only) (MY)
[] Termination Report (TER)
(b) Monthly Report Due On:
[] Feb 20 (M2) [] May 20 (M5) [] Aug 20 (M8) [] Nov 20 (M11) (Non-Election Year Only)
[] Mar 20 (M3) [] Jun 20 (M6) [] Sep 20 (M9) [] Dec 20 (M12) (Non-Election Year Only)
[] Apr 20 (M4) [] Jul 20 (M7) [] Oct 20 (M10) [] Jan 31 (YE)
(c) 12-Day PRE-Election Report for the:
[] Primary (12P) [] General (12G) [] Runoff (12R)
[] Convention (12C) [] Special (12S)
Election on [] in the State of []
(d) 30-Day POST-Election Report for the:
[] General (30G) [] Runoff (30R) [] Special (30S)
Election on [] in the State of []

5. Covering Period 11 / 25 / 2014 through 12 / 31 / 2014

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

Type or Print Name of Treasurer Lisa R. Lisker

Signature of Treasurer Lisa R. Lisker [Electronically Filed] Date 01 / 30 / 2015

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

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name

Rubio Victory 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="2014"/>	<input type="text" value="269113.04"/>	<input type="text" value="269113.04"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="33732.76"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="145370.00"/>	<input type="text" value="3870323.61"/>
(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="179102.76"/>	<input type="text" value="4139436.65"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="132373.79"/>	<input type="text" value="4092707.68"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="46728.97"/>	<input type="text" value="46728.97"/>
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

Rubio Victory 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).....	131275.00	2855604.00
(ii) Unitemized	9095.00	883982.30
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	140370.00	3739586.30
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	5000.00	130300.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	145370.00	3869886.30
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	437.31
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))..... ▶	145370.00	3870323.61
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	145370.00	3870323.61

DETAILED SUMMARY PAGE

of Disbursements

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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	45873.79	2647740.20
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	45873.79	2647740.20
22. Transfers to Affiliated/Other Party Committees.....	86500.00	1436667.48
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	3300.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	5000.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	8300.00
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)) ..	132373.79	4092707.68
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	132373.79	4092707.68

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)	145370.00	3869886.30
34. Total Contribution Refunds (from Line 28(d))	0.00	8300.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	145370.00	3861586.30
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	45873.79	2647740.20
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	437.31
38. Net Operating Expenditures (subtract Line 37 from Line 36)	45873.79	2647302.89

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

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

FOR LINE NUMBER: PAGE 6 OF 36
(check only one)
 11a 11b 11c 12
 13 14 15 16 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)
Rubio Victory Committee

Full Name (Last, First, Middle Initial)
A. MR. SCOTT H. ADAMS

Mailing Address 350 CAMINO GARDENS BLVD. #102

City State Zip Code
BOCA RATON FL 33432-5825

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

Name of Employer Occupation
GROUP CARE TECHNOLOGIES LLC C.E.O.

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
12 / 23 / 2014
Transaction ID : SA11.723139

Amount of Each Receipt this Period
2500.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)
B. MS. SHELLEY ADELSON

Mailing Address 20 SANKATY CIRCLE

City State Zip Code
HENDERSON NV 89052-6670

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

Name of Employer Occupation
SELF-EMPLOYED REAL ESTATE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
10200.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
12 / 31 / 2014
Transaction ID : SA11.723389

Amount of Each Receipt this Period
10200.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)
C. MR. ROBERT E. AHLF

Mailing Address PO BOX 1301

City State Zip Code
HOMEWOOD IL 60430-0301

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

Name of Employer Occupation
SELF-EMPLOYED ENGINEER

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
12 / 02 / 2014
Transaction ID : SA11.721864

Amount of Each Receipt this Period
100.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 12800.00

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

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

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

FOR LINE NUMBER: PAGE 7 OF 36
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Rubio Victory Committee

Full Name (Last, First, Middle Initial)
A. MRS. ESTHER L. ALVAREZ
 Mailing Address 4834 NW 94TH DORAL PLACE
 City DORAL State FL Zip Code 33178-2046
 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 ▼ **10200.00**

Date of Receipt: **12 / 19 / 2014**
Transaction ID : SA11.723022
 Amount of Each Receipt this Period: **10200.00**
CONTRIBUTION

Full Name (Last, First, Middle Initial)
B. MR. MAXIMO RICARDO ALVAREZ
 Mailing Address 4834 NW 94TH DORAL PLACE SUITE 109
 City DORAL State FL Zip Code 33178-2046
 FEC ID number of contributing federal political committee. **C**
 Name of Employer: **SUNSHINE GASOLINE DISTRIBUTORS, INC.** Occupation: **PRESIDENT**
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ **10200.00**

Date of Receipt: **12 / 19 / 2014**
Transaction ID : SA11.723023
 Amount of Each Receipt this Period: **10200.00**
CONTRIBUTION

Full Name (Last, First, Middle Initial)
C. MR. JASON BATALLAN
 Mailing Address P.O. BOX 6942
 City WEST PALM BEACH State FL Zip Code 33405-6942
 FEC ID number of contributing federal political committee. **C**
 Name of Employer: **BATALLAN ENTERTAINMENT INC.** Occupation: **SMALL BUSINESS OWNER**
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ **1500.00**

Date of Receipt: **12 / 22 / 2014**
Transaction ID : SA11.723090
 Amount of Each Receipt this Period: **500.00**
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... **20900.00**
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 36
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Rubio Victory Committee

A. YULIET BATALLAN
 Full Name (Last, First, Middle Initial)
 Mailing Address 4105 S. FLAGLER DRIVE
 City WEST PALM BEACH State FL Zip Code 33405-2703
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 INFORMATION REQUESTED PER BEST EFFC INFORMATION REQUESTED PER BEST EFFC
 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
 12 / 22 / 2014
Transaction ID : SA11.723092
 Amount of Each Receipt this Period
 500.00
 CONTRIBUTION

B. MR. ERIK J. BLOMQVIST
 Full Name (Last, First, Middle Initial)
 Mailing Address 5 CAMBRIA RD E.
 City PALM BEACH GARDENS State FL Zip Code 33418-7028
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 FLORIDA CRYSTALS CORPORATION VICE PRESIDENT
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 2600.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 10 / 2014
Transaction ID : SA11.722356
 Amount of Each Receipt this Period
 2600.00
 CONTRIBUTION

C. HON. GASTON CANTENS
 Full Name (Last, First, Middle Initial)
 Mailing Address ONE NORTH CLEMATIS STREET
 SUITE 200
 City WEST PALM BEACH State FL Zip Code 33401-5551
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 FLORIDA CRYSTALS CORPORATION EXECUTIVE
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 2600.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 10 / 2014
Transaction ID : SA11.722358
 Amount of Each Receipt this Period
 2600.00
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 5700.00
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 36
	<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)
Rubio Victory Committee

A. MR. CHARLES A. CHOMAS
 Full Name (Last, First, Middle Initial)
 Mailing Address 9729 CAMPI DRIVE
 City LAKE WORTH State FL Zip Code 33467-6996
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BEST EFFORTS
 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
 12 / 22 / 2014
Transaction ID : SA11.723089
 Amount of Each Receipt this Period
 500.00
 CONTRIBUTION

B. MR. STEVE CHRISTOPOULOS
 Full Name (Last, First, Middle Initial)
 Mailing Address 11 SAN MARCO STREET APT. 1602
 City CLEARWATER BEACH State FL Zip Code 33767-2076
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BEST EFFORTS
 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
 12 / 22 / 2014
Transaction ID : SA11.723099
 Amount of Each Receipt this Period
 2500.00
 CONTRIBUTION

C. MR. AARON K. COHEN
 Full Name (Last, First, Middle Initial)
 Mailing Address 1007 W. BRADDOCK ROAD
 City ALEXANDRIA State VA Zip Code 22302-3229
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 CAPITOL COUNSEL LLC PRINCIPAL
 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
 12 / 30 / 2014
Transaction ID : SA11.723307
 Amount of Each Receipt this Period
 250.00
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	3250.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 OF 36
	<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)
Rubio Victory Committee

A. MR. PATRICK DUMONT
Full Name (Last, First, Middle Initial)

Mailing Address 800 5TH AVENUE SUITE 210

City NEW YORK	State NY	Zip Code 10065-7216
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FEC ID number of contributing federal political committee. **C**

Name of Employer SANDS	Occupation EXECUTIVE
---------------------------	-------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
10200.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	24	/	2014

Transaction ID : SA11.723156

Amount of Each Receipt this Period
10200.00

CONTRIBUTION

B. MRS. LOURDES M. FANJUL
Full Name (Last, First, Middle Initial)

Mailing Address ONE NORTH CLEMATIS STREET STE. 200

City WEST PALM BEACH	State FL	Zip Code 33401-5551
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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 ▼
5200.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	10	/	2014

Transaction ID : SA11.722357

Amount of Each Receipt this Period
5200.00

CONTRIBUTION

C. MR. PEPE FANJUL JR
Full Name (Last, First, Middle Initial)

Mailing Address ONE NORTH CLEMATIS STREET SUITE 200

City WEST PALM BEACH	State FL	Zip Code 33401-5551
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FEC ID number of contributing federal political committee. **C**

Name of Employer FLORIDA CRYSTALS CORPORATION	Occupation EXECUTIVE
--	-------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5200.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	10	/	2014

Transaction ID : SA11.722359

Amount of Each Receipt this Period
5200.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	20600.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 OF 36
	<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)
Rubio Victory Committee

A. MR. JOSEPH FRONT
Full Name (Last, First, Middle Initial)

Mailing Address 1276 NATIONAL RD

City WHEELING	State WV	Zip Code 26003-5767
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FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS	Occupation INFORMATION REQUESTED PER BEST EFFORTS
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
0.00

Date of Receipt
12 / 16 / 2014
Transaction ID : SA11.722882

Amount of Each Receipt this Period
-10.00

CONTRIBUTION

CHARGED BACK

B. MR. ALEX GARCIA
Full Name (Last, First, Middle Initial)

Mailing Address INFO REQUESTED

City INFO REQUESTED	State XX	Zip Code 99999-
------------------------	-------------	--------------------

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

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS	Occupation SMART MANAGEMENT
--	--------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2500.00

Date of Receipt
12 / 22 / 2014
Transaction ID : SA11.723102

Amount of Each Receipt this Period
2500.00

CONTRIBUTION

C. MS. LEONOR M. GAVINA-VALLS
Full Name (Last, First, Middle Initial)

Mailing Address 1010 ROSSMOYNE AVENUE

City GLENDALE	State CA	Zip Code 91207-1800
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FEC ID number of contributing federal political committee. **C**

Name of Employer F. GAVINA & SONS	Occupation VICE PRESIDENT MARKETING
--------------------------------------	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2500.00

Date of Receipt
12 / 31 / 2014
Transaction ID : SA11.723390

Amount of Each Receipt this Period
2500.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	4990.00
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 12 OF 36
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Rubio Victory Committee

A. DR. THOMAS F. GUMPRECHT
 Full Name (Last, First, Middle Initial)
 Mailing Address 8301 161ST AVENUE NE
 SUITE 200
 City REDMOND State WA Zip Code 98052-3858
 FEC ID number of contributing federal political committee. **C**
 Name of Employer PROLIANCE SURGEONS Occupation PHYSICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 850.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 17 / 2014
Transaction ID : SA11.722950
 Amount of Each Receipt this Period
 100.00
 CONTRIBUTION

B. MR. JONATHAN K. HAGE
 Full Name (Last, First, Middle Initial)
 Mailing Address 2841 NE 38TH STREET
 City FORT LAUDERDALE State FL Zip Code 33308-5825
 FEC ID number of contributing federal political committee. **C**
 Name of Employer CHARTER SCHOOL U.S.A. Occupation C.E.O.
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 22 / 2014
Transaction ID : SA11.723100
 Amount of Each Receipt this Period
 2500.00
 CONTRIBUTION

C. LAUREN RODBERG HOLLANDER
 Full Name (Last, First, Middle Initial)
 Mailing Address 803 FLORET DRIVE
 City PALM BEACH GARDENS State FL Zip Code 33410-1607
 FEC ID number of contributing federal political committee. **C**
 Name of Employer MAVERICKS IN EDUCATION Occupation C.E.O.
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 22 / 2014
Transaction ID : SA11.723101
 Amount of Each Receipt this Period
 2500.00
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 5100.00
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 36
	<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)
Rubio Victory Committee

Full Name (Last, First, Middle Initial)
A. MR. MANUEL KADRE

Mailing Address 5345 HAMMOCK DRIVE

City State Zip Code
CORAL GABLES FL 33156-2103

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

Name of Employer Occupation
MBB AUTO LLC C.E.O.

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 11 / 2014
Transaction ID : SA11.722465

Amount of Each Receipt this Period
5600.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)
B. MR. JOHN F. KIRTLEY

Mailing Address 511 W. BAY STREET
STE 350

City State Zip Code
TAMPA FL 33606-2770

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

Name of Employer Occupation
FLORIDA CAPITAL PARTNERS VENTURE CAPITALIST

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 11 / 2014
Transaction ID : SA11.722466

Amount of Each Receipt this Period
5000.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)
C. MR. HAROLD EUGENE LINDSEY

Mailing Address 3306 CRYSTAL COURT

City State Zip Code
MIAMI FL 33133-3335

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

Name of Employer Occupation
INFORMATION REQUESTED PER BEST EFFC ATTORNEY

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 / 22 / 2014
Transaction ID : SA11.723097

Amount of Each Receipt this Period
1000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	11600.00
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 36
	<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)
Rubio Victory Committee

A. MR. BERNARD MARCUS
 Full Name (Last, First, Middle Initial)
 Mailing Address 1266 W. PACES FERRY ROAD #615
 City ATLANTA State GA Zip Code 30327-2306
 FEC ID number of contributing federal political committee. **C**
 Name of Employer RETIRED Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 31 / 2014
Transaction ID : SA11.723388
 Amount of Each Receipt this Period
 5000.00
 CONTRIBUTION

B. MR. DANIEL M. MATTOX
 Full Name (Last, First, Middle Initial)
 Mailing Address 2445 PINNACLE CT N
 City PALM HARBOR State FL Zip Code 34684-1770
 FEC ID number of contributing federal political committee. **C**
 Name of Employer INFORMATION REQUESTED PER BEST EFFORTS Occupation INFORMATION REQUESTED PER BEST EFF
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 335.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 23 / 2014
Transaction ID : SA11.723127
 Amount of Each Receipt this Period
 335.00
 CONTRIBUTION

C. MR. DEMETRIO PEREZ
 Full Name (Last, First, Middle Initial)
 Mailing Address 2700 SW 8TH STREET
 City MIAMI State FL Zip Code 33135-4619
 FEC ID number of contributing federal political committee. **C**
 Name of Employer D.P. REAL ESTATE HOLDINGS Occupation SELF-EMPLOYED
 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
 12 / 22 / 2014
Transaction ID : SA11.723088
 Amount of Each Receipt this Period
 2500.00
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	7835.00
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 15 OF 36
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Rubio Victory Committee

Full Name (Last, First, Middle Initial)
A. MR. JAVIER PEREZ

Mailing Address 1419 NW 8TH TERRACE

City State Zip Code
MIAMI FL 33125-3610

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

Name of Employer Occupation
INFORMATION REQUESTED PER BEST EFFC INFORMATION REQUESTED PER BEST EFF

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
 12 / 22 / 2014
Transaction ID : SA11.723087

Amount of Each Receipt this Period
500.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)
B. MR. EDWARD J. POZZUOLI

Mailing Address 2613 DATURA COURT

City State Zip Code
FORT LAUDERDALE FL 33301-2723

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

Name of Employer Occupation
TRIPP SCOTT ATTORNEY

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 22 / 2014
Transaction ID : SA11.723093

Amount of Each Receipt this Period
500.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)
C. MR. JAMES A. RUBRIGHT

Mailing Address 3435 WOODHAVEN ROAD NW

City State Zip Code
ATLANTA GA 30305-1008

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

Name of Employer Occupation
PRIVET FUND MANAGEMENT L.L.C. PRINICIPAL

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
6000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 24 / 2014
Transaction ID : SA11.723161

Amount of Each Receipt this Period
5000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 6000.00

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

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

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

FOR LINE NUMBER: PAGE 16 OF 36
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Rubio Victory Committee

A. MR. JAMES A. SCOTT
 Full Name (Last, First, Middle Initial)
 Mailing Address 110 SE 6TH STREET FLR. 15
 City State Zip Code
 FORT LAUDERDALE FL 33301-5004
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BEST EFFORTS
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 22 / 2014
Transaction ID : SA11.723098
 Amount of Each Receipt this Period
 1000.00
 CONTRIBUTION

B. MR. MICHAEL STRADER
 Full Name (Last, First, Middle Initial)
 Mailing Address 10320 NW 6TH STREET
 City State Zip Code
 CORAL SPRINGS FL 33071-6843
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BEST EFFORTS
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 22 / 2014
Transaction ID : SA11.723095
 Amount of Each Receipt this Period
 1000.00
 CONTRIBUTION

C. MR. STEVE TAYLOR
 Full Name (Last, First, Middle Initial)
 Mailing Address 515 SANTA PAULA DRIVE
 City State Zip Code
 SALINAS CA 93901-1517
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 VERITAS V. MANAGER
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 5000.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 31 / 2014
Transaction ID : SA11.723387
 Amount of Each Receipt this Period
 5000.00
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 7000.00
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 36
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Rubio Victory Committee

A. MR. JOSE FRANCISCO TERAN
 Full Name (Last, First, Middle Initial)
 Mailing Address INFO REQUESTED
 City State Zip Code
 INFO REQUESTED XX 99999-
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 INFORMATION REQUESTED PER BEST EFFC INFORMATION REQUESTED PER BEST EFF
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 2550.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 11 / 2014
Transaction ID : SA11.722468
 Amount of Each Receipt this Period
 2550.00
 CONTRIBUTION

B. MRS. MARIA LOURDES TERAN
 Full Name (Last, First, Middle Initial)
 Mailing Address INFO REQUESTED
 City State Zip Code
 INFO REQUESTED XX 99999-
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 INFORMATION REQUESTED PER BEST EFFC INFORMATION REQUESTED PER BEST EFF
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 2550.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 11 / 2014
Transaction ID : SA11.722469
 Amount of Each Receipt this Period
 2550.00
 CONTRIBUTION

C. ANDREINA TRAVIESA
 Full Name (Last, First, Middle Initial)
 Mailing Address 943 HARBOUR BAY DR
 City State Zip Code
 TAMPA FL 33602-5738
 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 ▼
 10200.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 31 / 2014
Transaction ID : SA11.723348
 Amount of Each Receipt this Period
 10200.00
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 15300.00
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 36
(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)
Rubio Victory Committee

A. MR. ANTHONY TREY TRAVIESA
Full Name (Last, First, Middle Initial)
Mailing Address 943 HARBOUR BAY DRIVE
City TAMPA State FL Zip Code 33602-5738
FEC ID number of contributing federal political committee. **C**
Name of Employer V-3 Occupation MANAGING PARTNER
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 20200.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
12 / 11 / 2014
Transaction ID : SA11.722467
Amount of Each Receipt this Period
10200.00
CONTRIBUTION
REATTRIBUTION / REDESIGNATION REQUESTED (AUTOMATIC)

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).....▶	10200.00
TOTAL This Period (last page this line number only).....▶	131275.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER:		PAGE 19 OF 36	
<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)
Rubio Victory Committee

A. JM FAMILY ENTERPRISES, INC. PAC
Full Name (Last, First, Middle Initial)
Mailing Address 111 JIM MORAN BLVD.
City DEERFIELD BEACH State FL Zip Code 33442-1701
FEC ID number of contributing federal political committee. **C** C00240911
Name of Employer Occupation
Receipt For:
 Primary General
 Other (specify) ▼
Aggregate Year-to-Date ▼ 5000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
12 / 31 / 2014
Transaction ID : SA11.723391
Amount of Each Receipt this Period
5000.00
CONTRIBUTION

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).....▶	5000.00
TOTAL This Period (last page this line number only).....▶	5000.00

**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)
Rubio Victory Committee

Full Name (Last, First, Middle Initial)

A. ANNIE BAKER

Mailing Address 503 C STREET SE

City WASHINGTON State DC Zip Code 20002

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

M M / D D / Y Y Y Y Y
11 / 30 / 2014

Transaction ID : 98202

Amount of Each Disbursement this Period

3024.11

Full Name (Last, First, Middle Initial)

B. ANNIE BAKER

Mailing Address 503 C STREET SE

City WASHINGTON State DC Zip Code 20002

Purpose of Disbursement
PAYROLL

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
12 / 12 / 2014

Transaction ID : 98203

Amount of Each Disbursement this Period

3024.11

Full Name (Last, First, Middle Initial)

C. ANNIE BAKER

Mailing Address 503 C STREET SE

City WASHINGTON State DC Zip Code 20002

Purpose of Disbursement
REIMBURSEMENT: SEE MEMO ENTRIES

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
12 / 02 / 2014

Transaction ID : 98204

Amount of Each Disbursement this Period

901.35

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

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

6949.57

**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)
Rubio Victory Committee

Full Name (Last, First, Middle Initial)

A. 19TH HOLE

Mailing Address 1200 ANASTASIA AVE

City State Zip Code
CORAL GABLES FL 33134

Purpose of Disbursement
BAKER REIMBURSEMENT: MEETING EXPENSE: MEAL

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
12		02		2014

Transaction ID : 98211

Amount of Each Disbursement this Period

72.50

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. APPLE

Mailing Address 1 INFINITE LOOP

City State Zip Code
CUPERTINO CA 95014

Purpose of Disbursement
BAKER REIMBURSEMENT: OFFICE SUPPLIES

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
12		02		2014

Transaction ID : 98218

Amount of Each Disbursement this Period

103.97

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. CALIFORNIA TORTILLA

Mailing Address 20 COURTHOUSE SQ
SUITE 206

City State Zip Code
ROCKVILLE MD 20850

Purpose of Disbursement
BAKER REIMBURSEMENT: TRAVEL: FOOD

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
12		02		2014

Transaction ID : 98208

Amount of Each Disbursement this Period

11.92

[MEMO ITEM]

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

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

0.00

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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)
Rubio Victory Committee

Full Name (Last, First, Middle Initial)

A. DC TAXI

Mailing Address 1636 BLADENSBURG ROAD NORTHEAST

City WASHINGTON State DC Zip Code 20002

Purpose of Disbursement
BAKER REIMBURSEMENT: TRAVEL: GROUND TRANSPORTATION

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
12 / 02 / 2014

Transaction ID : 98209

Amount of Each Disbursement this Period

21.07

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. HERTZ

Mailing Address 3900 NORTHWEST 25TH ST

City MIAMI State FL Zip Code 33142

Purpose of Disbursement
BAKER REIMBURSEMENT: TRAVEL: CAR RENTAL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
12 / 02 / 2014

Transaction ID : 98210

Amount of Each Disbursement this Period

125.69

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. JERSEY MIKE'S SUBS

Mailing Address 2251 LANDMARK PL

City MANASQUAN State NJ Zip Code 08736

Purpose of Disbursement
BAKER REIMBURSEMENT: TRAVEL: FOOD

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
12 / 02 / 2014

Transaction ID : 98205

Amount of Each Disbursement this Period

7.92

[MEMO ITEM]

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

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

0.00

**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)
Rubio Victory Committee

Full Name (Last, First, Middle Initial)

A. PIZZA HUT

Mailing Address 7100 CORPORATE DR

City PLANO State TX Zip Code 75024

Purpose of Disbursement
BAKER REIMBURSEMENT: TRAVEL: FOOD

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		02		2014

Transaction ID : 98215

Amount of Each Disbursement this Period

10.14

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. SPRINGS CAB

Mailing Address 680 MILLER DR

City MIAMI SPRINGS State FL Zip Code 33166

Purpose of Disbursement
BAKER REIMBURSEMENT: TRAVEL: GROUND TRANSPORTATION

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		02		2014

Transaction ID : 98207

Amount of Each Disbursement this Period

48.88

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. STAPLES

Mailing Address 500 STAPLES DR

City FARMINGHAM State MA Zip Code 01702

Purpose of Disbursement
BAKER REIMBURSEMENT: OFFICE SUPPLIES

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		02		2014

Transaction ID : 98214

Amount of Each Disbursement this Period

165.86

[MEMO ITEM]

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

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

0.00

--

**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)
Rubio Victory Committee

Full Name (Last, First, Middle Initial)

A. USPS

Mailing Address 475 L'ENFANT PLAZA SW

City WASHINGTON State DC Zip Code 20260

Purpose of Disbursement
BAKER REIMBURSEMENT: POSTAGE

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 / 2014

Transaction ID : 98216

Amount of Each Disbursement this Period

98.00

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. USPS

Mailing Address 475 L'ENFANT PLAZA SW

City WASHINGTON State DC Zip Code 20260

Purpose of Disbursement
BAKER REIMBURSEMENT: POSTAGE

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 / 2014

Transaction ID : 98217

Amount of Each Disbursement this Period

49.00

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. VERIZON WIRELESS

Mailing Address 140 WEST ST

City NEW YORK State NY Zip Code 10007

Purpose of Disbursement
BAKER REIMBURSEMENT: MOBILE PHONE EXPENSE

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 / 2014

Transaction ID : 98206

Amount of Each Disbursement this Period

136.40

[MEMO ITEM]

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

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

0.00

**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)
Rubio Victory Committee

Full Name (Last, First, Middle Initial)

A. YELLOW CAB

Mailing Address 3600 NW 37TH CT

City MIAMI State FL Zip Code 33412

Purpose of Disbursement
BAKER REIMBURSEMENT: TRAVEL: GROUND TRANSPORTATION

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

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

Transaction ID : 98212

Amount of Each Disbursement this Period

2	5	.	0	0
---	---	---	---	---

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. YELLOW CAB

Mailing Address 3600 NW 37TH CT

City MIAMI State FL Zip Code 33412

Purpose of Disbursement
BAKER REIMBURSEMENT: TRAVEL: GROUND TRANSPORTATION

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

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

Transaction ID : 98213

Amount of Each Disbursement this Period

2	5	.	0	0
---	---	---	---	---

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. MAIANNE SAHL

Mailing Address 16714 FITZHUGH ROAD

City DRIPPING SPRINGS State TX Zip Code 78620

Purpose of Disbursement
FUNDRAISING CONSULTING

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

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

Transaction ID : 98237

Amount of Each Disbursement this Period

2	4	9	7	2	.	6	0
---	---	---	---	---	---	---	---

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

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

2	4	9	7	2	.	6	0
---	---	---	---	---	---	---	---

2	4	9	7	2	.	6	0
---	---	---	---	---	---	---	---

**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)
Rubio Victory Committee

Full Name (Last, First, Middle Initial)

A. MATT TERRILL

Mailing Address 503 C STREET, NE

City WASHINGTON State DC Zip Code 20002

Purpose of Disbursement
VOIDED CHECK ISSUED 10/2/14: STRATEGY CONSULTING

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		2	5		2	0	1	4

Transaction ID : 98242

Amount of Each Disbursement this Period

-	7	5	0	0	0
---	---	---	---	---	---

Full Name (Last, First, Middle Initial)

B. AMERICAN EXPRESS

Mailing Address PO BOX 1270

City NEWARK State NJ Zip Code 07101

Purpose of Disbursement
MERCHANT FEES

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	2		2	0	1	4

Transaction ID : 98200

Amount of Each Disbursement this Period

7	9	5
---	---	---

Full Name (Last, First, Middle Initial)

C. AMERICAN EXPRESS

Mailing Address PO BOX 1270

City NEWARK State NJ Zip Code 07101

Purpose of Disbursement
MERCHANT FEES

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	5		2	0	1	4

Transaction ID : 98201

Amount of Each Disbursement this Period

1	7	3	1	9	2	5
---	---	---	---	---	---	---

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

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

-	7	3	1	9	2	5
---	---	---	---	---	---	---

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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)
Rubio Victory Committee

Full Name (Last, First, Middle Initial)

A. AUTHORIZE.NET

Mailing Address PO BOX 8999

City State Zip Code
SAN FRANCISCO CA 94128

Purpose of Disbursement
MERCHANT FEES

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
12			02			2014			

Transaction ID : 98219

Amount of Each Disbursement this Period

24.95

Full Name (Last, First, Middle Initial)

B. BB&T VISA BUSINESS CARD (2237)

Mailing Address 514 GREENVILLE BLVD SE

City State Zip Code
GREENVILLE NC 27858

Purpose of Disbursement
CREDIT CARD PAYMENT: SEE MEMO ENTRIES

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
12			17			2014			

Transaction ID : 98220

Amount of Each Disbursement this Period

518.00

Full Name (Last, First, Middle Initial)

C. MARRIOT

Mailing Address 102-05 DITMARS BLVD

City State Zip Code
EAST ELMHURST NY 11369

Purpose of Disbursement
BB&T 12/17 CREDIT CARD PAYMENT: TRAVEL: LODGING

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
12			17			2014			

Transaction ID : 98223

Amount of Each Disbursement this Period

2.80

[MEMO ITEM]

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

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

542.95

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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)
Rubio Victory Committee

Full Name (Last, First, Middle Initial)

A. US AIRWAYS

Mailing Address 4000 E. SKY HARBOR BLVD

City PHOENIX State AZ Zip Code 85034

Purpose of Disbursement
BB&T 12/17 CREDIT CARD PAYMENT: TRAVEL: AIR

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 / 17 / 2014

Transaction ID : 98221

Amount of Each Disbursement this Period

267.10

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. US AIRWAYS

Mailing Address 4000 E. SKY HARBOR BLVD

City PHOENIX State AZ Zip Code 85034

Purpose of Disbursement
BB&T 12/17 CREDIT CARD PAYMENT: TRAVEL: AIR

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 / 17 / 2014

Transaction ID : 98222

Amount of Each Disbursement this Period

248.10

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. CAPITAL CITY CLUB

Mailing Address ATTN: DEBRA WILSON
7 PORTMAN BLVD. NW

City ATLANTA State GA Zip Code 30303

Purpose of Disbursement
FACILITY RENTRAL/CATERING SERVICES

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 / 2014

Transaction ID : 98224

Amount of Each Disbursement this Period

214.10

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

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

214.10

**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)
Rubio Victory Committee

Full Name (Last, First, Middle Initial)

A. DELAWARE NORTH COMPANIES, INC.

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		02		2014

Mailing Address **ATTN: KAREN REGENSDORFER
40 FOUNTAIN PLAZA**

Transaction ID : 98225

City **BUFFALO** State **NY** Zip Code **14202**

Amount of Each Disbursement this Period

109.00

Purpose of Disbursement
EVENT REGISTRATION FEE

--

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

B. EPAY BUSINESS SOLUTIONS INC.

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11		28		2014

Mailing Address **27A MIDSTATE DRIVE
SUITE 218**

Transaction ID : 98226

City **AUBURN** State **MA** Zip Code **22314**

Amount of Each Disbursement this Period

33.90

Purpose of Disbursement
PAYROLL SERVICES

--

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

C. EPAY BUSINESS SOLUTIONS INC.

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11		28		2014

Mailing Address **27A MIDSTATE DRIVE
SUITE 218**

Transaction ID : 98227

City **AUBURN** State **MA** Zip Code **22314**

Amount of Each Disbursement this Period

1927.79

Purpose of Disbursement
PAYROLL TAX

--

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

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

2070.69

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

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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)
Rubio Victory Committee

Full Name (Last, First, Middle Initial)

A. EPAY BUSINESS SOLUTIONS INC.

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		12		2014

Mailing Address 27A MIDSTATE DRIVE
SUITE 218

Transaction ID : 98228

City AUBURN State MA Zip Code 22314

Amount of Each Disbursement this Period

33.90

Purpose of Disbursement
PAYROLL SERVICES

--

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

B. EPAY BUSINESS SOLUTIONS INC.

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		31		2014

Mailing Address 27A MIDSTATE DRIVE
SUITE 218

Transaction ID : 98229

City AUBURN State MA Zip Code 22314

Amount of Each Disbursement this Period

1927.79

Purpose of Disbursement
PAYROLL TAX

--

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

C. EPAY BUSINESS SOLUTIONS INC.

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		30		2014

Mailing Address 27A MIDSTATE DRIVE
SUITE 218

Transaction ID : 98230

City AUBURN State MA Zip Code 22314

Amount of Each Disbursement this Period

1488.92

Purpose of Disbursement
PAYROLL TAX

--

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

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

3450.61

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

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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)
Rubio Victory Committee

Full Name (Last, First, Middle Initial)

A. EPAY BUSINESS SOLUTIONS INC.

Mailing Address 27A MIDSTATE DRIVE
SUITE 218

City AUBURN State MA Zip Code 22314

Purpose of Disbursement
PAYROLL TAX

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 / 12 / 2014

Transaction ID : 98246

Amount of Each Disbursement this Period

1927.79

Full Name (Last, First, Middle Initial)

B. LISA WAGNER & COMPANY INC.

Mailing Address 102 NORTH CROSS STREET
SUITE 6

City WHEATON State IL Zip Code 60189

Purpose of Disbursement
REIMBURSEMENT: SEE MEMO ENTRIES

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 / 2014

Transaction ID : 98231

Amount of Each Disbursement this Period

1534.41

Full Name (Last, First, Middle Initial)

C. FEDEX

Mailing Address 3875 AIRWAYS

City MEMPHIS State TN Zip Code 38116

Purpose of Disbursement
LISA WAGNER & COMPANY INC REIMBURSEMENT.: DELIVERY SERVICES

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 / 2014

Transaction ID : 98233

Amount of Each Disbursement this Period

38.63

[MEMO ITEM]

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

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

3462.20

**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)
Rubio Victory Committee

Full Name (Last, First, Middle Initial)

A. FEDEX

Mailing Address 3875 AIRWAYS

City MEMPHIS State TN Zip Code 38116

Purpose of Disbursement
LISA WAGNER & COMPANY INC REIMBURSEMENT.: DELIVERY SERVICES
Candidate Name

Category/
Type

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
12 / 02 / 2014

Transaction ID : 98234

Amount of Each Disbursement this Period

43.56

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. FEDEX

Mailing Address 3875 AIRWAYS

City MEMPHIS State TN Zip Code 38116

Purpose of Disbursement
LISA WAGNER & COMPANY INC REIMBURSEMENT.: DELIVERY SERVICES
Candidate Name

Category/
Type

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
12 / 02 / 2014

Transaction ID : 98235

Amount of Each Disbursement this Period

27.22

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. NATIONAL BLACK CAR

Mailing Address PO BOX 602

City FRANKFORT State IL Zip Code 60423

Purpose of Disbursement
LISA WAGNER & COMPANY INC REIMBURSEMENT.: TRAVEL: GROUND TRANSPORTATION
Candidate Name

Category/
Type

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
12 / 02 / 2014

Transaction ID : 98232

Amount of Each Disbursement this Period

1425.00

[MEMO ITEM]

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

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

0.00

**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)
Rubio Victory Committee

Full Name (Last, First, Middle Initial)

A. LISA WAGNER & COMPANY INC.

Mailing Address 102 NORTH CROSS STREET
SUITE 6

City WHEATON State IL Zip Code 60189

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
12 / 12 / 2014

Transaction ID : 98236

Amount of Each Disbursement this Period

11442.00

Full Name (Last, First, Middle Initial)

B. PIRYX, INC.

Mailing Address 144 2ND STREET
1ST FLOOR

City SAN FRANCISCO State CA Zip Code 94105

Purpose of Disbursement
MERCHANT 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 / 04 / 2014

Transaction ID : 98238

Amount of Each Disbursement this Period

0.52

Full Name (Last, First, Middle Initial)

C. TSYS MERCHANT SOLUTIONS

Mailing Address 1601 DODGE STREET

City OMAHA State NE Zip Code 68102

Purpose of Disbursement
MERCHANT 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 / 15 / 2014

Transaction ID : 98243

Amount of Each Disbursement this Period

41.90

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

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

11484.42

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

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

FOR LINE NUMBER:
(check only one)

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

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

NAME OF COMMITTEE (In Full)
Rubio Victory Committee

Full Name (Last, First, Middle Initial)

A. TSYS MERCHANT SOLUTIONS

Mailing Address 1601 DODGE STREET

City OMAHA State NE Zip Code 68102

Purpose of Disbursement
MERCHANT FEES

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y
12 / 15 / 2014

Transaction ID : 98244

Amount of Each Disbursement this Period

45.90

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

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

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

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

Amount of Each Disbursement this Period

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

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

45.90

45873.79

**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)
Rubio Victory Committee

Full Name (Last, First, Middle Initial)

A. MARCO RUBIO FOR US SENATE

Mailing Address PO BOX 140420

City MIAMI State FL Zip Code 33114

Purpose of Disbursement
DISTRIBUTION OF NET JFC PROCEEDS

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
12 / 31 / 2014

Transaction ID : 98245

Amount of Each Disbursement this Period

15000.00

Full Name (Last, First, Middle Initial)

B. RECLAIM AMERICA PAC

Mailing Address 228 S WASHINGTON STREET
SUITE 115

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement
DISTRIBUTION OF NET JFC PROCEEDS

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
12 / 12 / 2014

Transaction ID : 98239

Amount of Each Disbursement this Period

20000.00

Full Name (Last, First, Middle Initial)

C. RECLAIM AMERICA PAC

Mailing Address 228 S WASHINGTON STREET
SUITE 115

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement
DISTRIBUTION OF NET JFC PROCEEDS

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
12 / 23 / 2014

Transaction ID : 98240

Amount of Each Disbursement this Period

17500.00

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

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

52500.00

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

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input 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)
Rubio Victory Committee

Full Name (Last, First, Middle Initial)

A. RECLAIM AMERICA PAC

Mailing Address 228 S WASHINGTON STREET
SUITE 115

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement
DISTRIBUTION OF NET JFC PROCEEDS

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 / 31 / 2014

Transaction ID : 98241

Amount of Each Disbursement this Period

34000.00

B.

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

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

Amount of Each Disbursement this Period

C.

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

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

Amount of Each Disbursement this Period

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

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

34000.00

86500.00