## **FEC** FORM 3

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> Office Use

Only

## REPORT OF RECEIPTS **AND DISBURSEMENTS**

For An Authorized Committee

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**FEC FORM 3** 

(Revised 02/2003)

1.	NAME OF COMMITTEE (in full)	TYPE OR PRINT	▼	Example: If typin over the lines.		12FE4M5	, no = 5, ·
Ľ	ictor Kocher for US S	enate				1 1 1 1 1 1	
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ADI	ORESS (number and street)	85 Inway D	rive		1111		
	Check if different than previously reported. (ACC)	Columbia				SC 2922	23  -   -
2.	FEC IDENTIFICATION NO	JMBER ♥	СПҮ			STATE A	ZIP CODE A STATE ▼ DISTRICT
	C 0564906	TE TO THE COLUMN	3. IS THIS REPORT	X NEW	OR	AMENDED (A)	SC
4.	TYPE OF REPORT (Ch.  (a) Quarterly Reports:  April 15 Quarterly R  July 15 Quarterly R  October 15 Quarter  January 31 Year-En	Report (Q1) Report (Q2) By Report (Q3) By Report (YE)	Election	on  OST-Election Rep  General (30G	oort for the:	General (12G) Special (12S) Runoff (30R)	in the State of Special (30S)  in the State of S C
5.	Covering Period 1	16	2014	through	1 1 1	24 20	14.
	rtify that I have examined the e or Print Name of Treasurer			knowledge and t	pelief it is tr	ue, correct and comp	olete.
	nature of Treasurer	HIK			Ε	Date 212 1	02 / 2014

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

of Receipts and Disbursements

Write or Type Committee Name

#### Victor Kocher for US Senate

Report Covering the Period:

From:

10 16 2014

To:



## COLUMN A This Period

COLUMN B Election Cycle-to-Date

- Net Contributions (other than loans)
  - (a) Total Contributions (other than loans) (from Line 11(e))...
  - (b) Total Contribution Refunds (from Line 20(d))...
  - (c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a))...
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  - secretary secret

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4,4,2,6,7,6

- 7. Net Operating Expenditures
  - (a) Total Operating Expenditures (from Line 17)...
  - (b) Total Offsets to Operating Expenditures (from Line 14)...
  - (c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a))...
- Cash on Hand at Close of Reporting Period (from Line 27)...
- Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)...
- Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)...

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  - 160117
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#### For further information contact:

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

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

**COLUMN A** 

**Total This Period** 

Page 3

Write or Type Committee Name

Victor Kocher for US Senate	V	/ictor	Kocher	for	US	Senate
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Report Covering the Period:

From:

10 16 2014

To:

11 24 2014

## 11. CONTRIBUTIONS (other than loans) FROM:

- (a) Individuals/Persons Other Than Political Committees
  - (i) Itemized (use Schedule A)...

I. RECEIPTS

- (ii) Unitemized.....
- (iii) TOTAL of contributions from individuals .
- (b) Political Party Committees...
- (c) Other Political Committees (such as PACs)..
- (d) The Candidate.....
- (e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))...
- TRANSFERS FROM OTHER AUTHORIZED COMMITTEES ..
- 13. LOANS:

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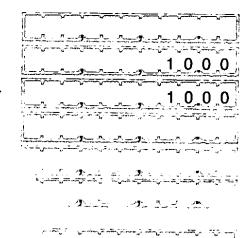
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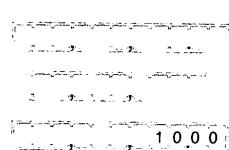
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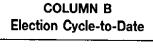
- (a) Made or Guaranteed by the Candidate...
- (b) All Other Loans...
- (c) TOTAL LOANS (add Lines 13(a) and (b))...
- OFFSETS TO OPERATING EXPENDITURES
   (Refunds, Rebates, etc.)...
- 15. OTHER RECEIPTS
  (Dividends, Interest, etc.).....
- TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)...

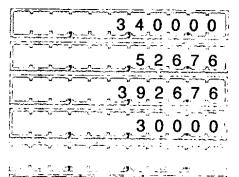


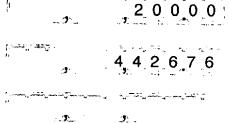


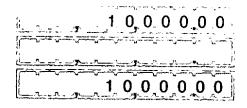




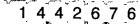












of Disbursements

_	, 20 Tolli ( (levised 02/2000)	3. 2.032.30(1101.10	Page 4			
II. DISBURSEMENTS		COLUMN A Total This Period	COLUMN B Election Cycle-to-Date			
17	7. OPERATING EXPENDITURES	1,6,0,1,1,7	10,35580			
18	3. TRANSFERS TO OTHER AUTHORIZED COMMITTEES	· Town	erm manningstrå fordern. Den da kander 1978 – Toman Toman			
19	LOAN REPAYMENTS:     (a) Of Loans Made or Guaranteed     by the Candidate	30000	3,00000			
	(b) Of All Other Loans (c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b))	3000000	The second of th			
20	. REFUNDS OF CONTRIBUTIONS TO: (a) Individuals/Persons Other Than Political Committees	Section of the control of the contro	Stranger was assumed to the second			
	<ul><li>(b) Political Party Committees</li><li>(c) Other Political Committees</li><li>(such as PACs)</li></ul>	The second of the second secon	All works are formered from the real many of more from the former			
	(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c))	्राक्षणां व्यक्षणां अवश्यक्षणां अवश्यक्षणां । विकास विकास के स्वर्थकार विकास व	Stranger Company of Company of Company			
21.	OTHER DISBURSEMENTS	granger - promp. Similarly to the manual of the second of	Sandansalasada da			
22.	TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21)	4 6 0 1 1 7 / Family August 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	1,3,3,5,5,8,0			
	III. CASH S	UMMARY				
23.	CASH ON HAND AT BEGINNING OF REPO	DRTING PERIOD	5 6 6 4 1 3			
24	TOTAL RECEIPTS THIS PERIOD (from Line	16, page 3)	1000			
25.	SUBTOTAL (add Line 23 and Line 24)		5,67413			
			### parameter ### ## ### ### ####################			
26.	TOTAL DISBURSEMENTS THIS PERIOD (fro	om Line 22)	46.01.7			

### SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMB	ER:	PAGE	1_	OF	1
(check only one)					
X 17	<u> </u>		19a		19b
20a	20b	. [ ]:	20c		21

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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) Victor Kocher for US Senate Full Name (Last, First, Middle Initial) Date of Disbursement Eacebook Inc W-M: 1 , D D 1 EY Y Y Y Y . Mailing Address 1.1. \1.0\ \2.0,1\_4 1601 Willow Road City State Zip Code Amount of Each Disbursement this Period कर कर राज्य के प्रदेश हैं । जिस्की प्रदेश के अध्यक्षिक प्रदेश हैं Menio Park CA 94025 9,4,9,9,4 Purpose of Disbursement <u>Advertisina</u> 0 0 4 Candidate Name Category/ Victor Kocher Type Office Sought: Disbursement For: House Senate Primary X General SC President Other (specify) District: Full Name (Last, First, Middle Initial) В. Date of Disbursement Mailing Address City State Zip Code Amount of Each Disbursement this Period Purpose of Disbursement Candidate Name Category/ Type Office Sought: House Disbursement For: Senate Primary General President Other (specify) State: District: Full Name (Last, First, Middle Initial) Date of Disbursement C. Mailing Address City State Zip Code Amount of Each Disbursement this Period Purpose of Disbursement Candidate Name Category/ Type Office Sought: House Disbursement For: Senate Primary General President Other (specify) District: State: SUBTOTAL of Disbursements This Page (optional)..... TOTAL This Period (last page this line number only).....

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#### PAGE 1 OF 1 FOR LINE NUMBER: SCHEDULE B (FEC Form 3) Use separate schedule(s) (check only one) ITEMIZED DISBURSEMENTS for each category of the X 19a 17 18 19b Detailed Summary Page 20b 21 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) Victor Kocher for US Senate Full Name (Last, First, Middle Initial) Date of Disbursement Victor Kocher LOND \ LANAMA Mailing Address 85 Inway Drive City State Zip Code Amount of Each Disbursement this Period Columbia SC 29223 Purpose of Disbursement 3 0 0 0 0 0 0.0.4 Loan Repayment Candidate Name Category/ Victor Kocher Type Office Sought: Disbursement For: House Senate Primary X General SC President Other (specify) State: District: Full Name (Last, First, Middle Initial) Date of Disbursement В. Mailing Address City State Zip Code Amount of Each Disbursement this Period Purpose of Disbursement Candidate Name Category/ Type Office Sought: House Disbursement For: Senate Primary General President Other (specify) State: District: Full Name (Last, First, Middle Initial) Date of Disbursement C. Mailing Address City State Zip Code Amount of Each Disbursement this Period Purpose of Disbursement Candidate Name Category/ Type Office Sought: Disbursement For: House Senate Primary General President Other (specify) State: District: 3,0,0,0,0

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

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

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# United States Senate

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