

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name

VETERANS VICTORY FUND

Report Covering the Period: From: / / To: / /

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2014"/>	<input type="text" value=""/>	<input type="text" value="1933.16"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="9749.66"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="24317.64"/>	<input type="text" value="288803.16"/>
(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="34067.30"/>	<input type="text" value="290736.32"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="32414.90"/>	<input type="text" value="289083.92"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="1652.40"/>	<input type="text" value="1652.40"/>
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="206280.95"/>	

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

VETERANS VICTORY FUND

Report Covering the Period: From: / / To: / /

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	8595.00	95221.60
(ii) Unitemized	15722.64	192456.96
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	24317.64	287678.56
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	24317.64	287678.56
12. Transfers From Affiliated/Other Party Committees.....	0.00	1124.60
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))..... ▶	24317.64	288803.16
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	24317.64	288803.16

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	32414.90	268583.92
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	32414.90	268583.92
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	20000.00
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	500.00
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)) ..	32414.90	289083.92
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	32414.90	289083.92

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)	24317.64	287678.56
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	24317.64	287678.56
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	32414.90	268583.92
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	32414.90	268583.92

**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 47
	<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)
VETERANS VICTORY FUND

Full Name (Last, First, Middle Initial) A. MR KEN BAER 298		Date of Receipt
Mailing Address 27 COKER DR		<input type="text" value="10"/> / <input type="text" value="20"/> / <input type="text" value="2014"/>
City AIKEN	State SC	Zip Code 29803
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : SA11AI.25867
Name of Employer NONE		Amount of Each Receipt this Period
Occupation RETIRED		<input type="text" value="50.00"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
	<input type="text" value="350.00"/>	

Full Name (Last, First, Middle Initial) B. MR KEN BAER 298		Date of Receipt
Mailing Address 27 COKER DR		<input type="text" value="10"/> / <input type="text" value="27"/> / <input type="text" value="2014"/>
City AIKEN	State SC	Zip Code 29803
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : SA11AI.25868
Name of Employer NONE		Amount of Each Receipt this Period
Occupation RETIRED		<input type="text" value="50.00"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
	<input type="text" value="400.00"/>	

Full Name (Last, First, Middle Initial) C. MS ADOLYN C BARTELS 675		Date of Receipt
Mailing Address PO BOX 246		<input type="text" value="10"/> / <input type="text" value="20"/> / <input type="text" value="2014"/>
City INMAN	State KS	Zip Code 67546
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : SA11AI.25875
Name of Employer NONE		Amount of Each Receipt this Period
Occupation RETIRED		<input type="text" value="50.00"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
	<input type="text" value="400.00"/>	

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="150.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 47
	<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)
VETERANS VICTORY FUND

A. MR RICHARD BENNETT 838
 Full Name (Last, First, Middle Initial)
 Mailing Address 1694 E HAYDEN AVE
 City HAYDEN State ID Zip Code 83835
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NONE Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 20 / 2014
Transaction ID : SA11AI.25885
 Amount of Each Receipt this Period
 100.00

B. MR ROBERT E BLEDSOE 547
 Full Name (Last, First, Middle Initial)
 Mailing Address S5240 DAMAR PRIVATE DR
 City EAU CLAIRE State WI Zip Code 54701
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NONE Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 218.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 16 / 2014
Transaction ID : SA11AI.25900
 Amount of Each Receipt this Period
 38.00

C. MR ROBERT E BLEDSOE 547
 Full Name (Last, First, Middle Initial)
 Mailing Address S5240 DAMAR PRIVATE DR
 City EAU CLAIRE State WI Zip Code 54701
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NONE Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 368.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 20 / 2014
Transaction ID : SA11AI.25901
 Amount of Each Receipt this Period
 150.00

SUBTOTAL of Receipts This Page (optional).....▶	288.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 OF 47
	<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)
VETERANS VICTORY FUND

A. MR VERNON BOZARTH 982
 Full Name (Last, First, Middle Initial)
 Mailing Address 12015 MARINE DR # 38
 City TULALIP State WA Zip Code 98271
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NONE Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 27 / 2014
Transaction ID : SA11AI.25913
 Amount of Each Receipt this Period
 200.00

B. MR ROBERT BROOKS 600
 Full Name (Last, First, Middle Initial)
 Mailing Address PO BOX 2008
 City GLENVIEW State IL Zip Code 60025
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NONE Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 235.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 28 / 2014
Transaction ID : SA11AI.25915
 Amount of Each Receipt this Period
 30.00

C. MR E BROOKS 752 JR
 Full Name (Last, First, Middle Initial)
 Mailing Address 4625 GREENVILLE AVE STE 204
 City DALLAS State TX Zip Code 75206
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NONE Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 30 / 2014
Transaction ID : SA11AI.25916
 Amount of Each Receipt this Period
 100.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 330.00
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 47
	<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)
VETERANS VICTORY FUND

A. MS ELIZABETH E BRUNETTE 482
 Full Name (Last, First, Middle Initial)
 Mailing Address 911 N BRYS DR
 City GROSSE POINTE State MI Zip Code 48236
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NONE Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 22 / 2014
Transaction ID : SA11AI.25921
 Amount of Each Receipt this Period
 200.00

B. MS HELEN BURROWS 212
 Full Name (Last, First, Middle Initial)
 Mailing Address 8800 WALTHER BLVD APT 1102
 City PARKVILLE State MD Zip Code 21234
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NONE Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 280.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 27 / 2014
Transaction ID : SA11AI.25930
 Amount of Each Receipt this Period
 30.00

C. DR ORLANDO CABRERA 331 MD
 Full Name (Last, First, Middle Initial)
 Mailing Address 1865 BRICKELL AVE APT A2003
 City MIAMI State FL Zip Code 33129
 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 ▼ 235.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 20 / 2014
Transaction ID : SA11AI.25937
 Amount of Each Receipt this Period
 35.00

SUBTOTAL of Receipts This Page (optional).....▶	85.00
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 47
	<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)
VETERANS VICTORY FUND

A. MRS BILLIE M CAMPBELL 427
 Full Name (Last, First, Middle Initial)
 Mailing Address 108 DIECKS DR APT 320
 City ELIZABETHTOWN State KY Zip Code 42701
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NONE Occupation WIDOW
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 650.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 31 / 2014
Transaction ID : SA11AI.25941
 Amount of Each Receipt this Period
 200.00

B. MRS MARGARET L CLARY 285
 Full Name (Last, First, Middle Initial)
 Mailing Address PO BOX 11
 City STONEWALL State NC Zip Code 28583
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NONE Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 285.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 29 / 2014
Transaction ID : SA11AI.25960
 Amount of Each Receipt this Period
 100.00

C. MR ROLAND B COPE 170
 Full Name (Last, First, Middle Initial)
 Mailing Address 420 15TH ST
 City NEW CUMBERLAND State PA Zip Code 17070
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NONE Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 27 / 2014
Transaction ID : SA11AI.25974
 Amount of Each Receipt this Period
 35.00

SUBTOTAL of Receipts This Page (optional).....▶	335.00
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 47
	<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)
VETERANS VICTORY FUND

A. MS IRENE CUDNEY 535
Full Name (Last, First, Middle Initial)

Mailing Address 7207 W EMERSON RD

City BELOIT State WI Zip Code 53511

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

Name of Employer NONE Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **515.00**

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

Transaction ID : SA11AI.25990

Amount of Each Receipt this Period
75.00

B. MS GISELA DALES 296
Full Name (Last, First, Middle Initial)

Mailing Address 8 GARY AVE

City TAYLORS State SC Zip Code 29687

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

Name of Employer NONE Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **280.00**

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

Transaction ID : SA11AI.25998

Amount of Each Receipt this Period
15.00

C. MS GISELA DALES 296
Full Name (Last, First, Middle Initial)

Mailing Address 8 GARY AVE

City TAYLORS State SC Zip Code 29687

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

Name of Employer NONE Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **295.00**

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

Transaction ID : SA11AI.25997

Amount of Each Receipt this Period
15.00

SUBTOTAL of Receipts This Page (optional).....▶	105.00
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 47
	<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)
VETERANS VICTORY FUND

Full Name (Last, First, Middle Initial) A. MS MATILDA DANLER 675			Date of Receipt
Mailing Address 1145 90TH AVE			<input type="text" value="10"/> / <input type="text" value="28"/> / <input type="text" value="2014"/>
City	State	Zip Code	Transaction ID : SA11AI.26004
KINSLEY	KS	67547	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>		<input type="text" value="105.00"/>
Name of Employer	Occupation		
NONE	RETIRED		
Receipt For:	Aggregate Year-to-Date ▼		
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="210.00"/>		
<input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) B. MS ROSEMARY DEVITO 130			Date of Receipt
Mailing Address 3226 HOLLY RDG			<input type="text" value="10"/> / <input type="text" value="31"/> / <input type="text" value="2014"/>
City	State	Zip Code	Transaction ID : SA11AI.26019
BALDWINVILLE	NY	13027	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>		<input type="text" value="60.00"/>
Name of Employer	Occupation		
KPMG LLP	PARTNER		
Receipt For:	Aggregate Year-to-Date ▼		
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="303.00"/>		
<input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) C. MRS ROSE EDWARDS 658			Date of Receipt
Mailing Address 2068 S BROADWAY AVE			<input type="text" value="10"/> / <input type="text" value="30"/> / <input type="text" value="2014"/>
City	State	Zip Code	Transaction ID : SA11AI.26043
SPRINGFIELD	MO	65807	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>		<input type="text" value="25.00"/>
Name of Employer	Occupation		
NONE	RETIRED		
Receipt For:	Aggregate Year-to-Date ▼		
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="250.00"/>		
<input type="checkbox"/> Other (specify) ▼			

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="190.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 OF 47
	<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)
VETERANS VICTORY FUND

A. MS E ENDRESEN 922
Full Name (Last, First, Middle Initial)
Mailing Address 57 TENNIS CLUB DR
City RANCHO MIRAGE State CA Zip Code 92270
FEC ID number of contributing federal political committee. **C**
Name of Employer CAPITOL MGMT PARTNERS Occupation CONSULTANT
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date **350.00**

Date of Receipt **10 / 20 / 2014**
Transaction ID : SA11AI.26045
Amount of Each Receipt this Period **100.00**

B. MR JOHN FEHSENFELD 891
Full Name (Last, First, Middle Initial)
Mailing Address PO BOX 35200
City LAS VEGAS State NV Zip Code 89133
FEC ID number of contributing federal political committee. **C**
Name of Employer NONE Occupation RETIRED
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date **300.00**

Date of Receipt **10 / 27 / 2014**
Transaction ID : SA11AI.26058
Amount of Each Receipt this Period **100.00**

C. MR WINSTON FRENZEL 922
Full Name (Last, First, Middle Initial)
Mailing Address 41505 CARLOTTA DR APT 620
City PALM DESERT State CA Zip Code 92211
FEC ID number of contributing federal political committee. **C**
Name of Employer NONE Occupation RETIRED
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date **275.00**

Date of Receipt **11 / 04 / 2014**
Transaction ID : SA11AI.26069
Amount of Each Receipt this Period **85.00**

SUBTOTAL of Receipts This Page (optional)..... **285.00**
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 47
	<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)
VETERANS VICTORY FUND

A. MR WINSTON FRENZEL 922
Full Name (Last, First, Middle Initial)

Mailing Address 41505 CARLOTTA DR APT 620

City	State	Zip Code
PALM DESERT	CA	92211

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

Name of Employer	Occupation
NONE	RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **300.00**

Date of Receipt

M M	/	D D	/	Y Y Y Y
11	/	10	/	2014

Transaction ID : SA11AI.26071

Amount of Each Receipt this Period

25.00

B. CHARLES FROST 341
Full Name (Last, First, Middle Initial)

Mailing Address 176 S COLLIER BLVD UNIT 405

City	State	Zip Code
MARCO ISLAND	FL	34145

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

Name of Employer	Occupation
NONE	RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **295.00**

Date of Receipt

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

Transaction ID : SA11AI.26075

Amount of Each Receipt this Period

100.00

C. MARY A GOOD 741
Full Name (Last, First, Middle Initial)

Mailing Address 3729 S RICHMOND AVE

City	State	Zip Code
TULSA	OK	74135

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

Name of Employer	Occupation
NONE	NOT EMPLOYED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **287.00**

Date of Receipt

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

Transaction ID : SA11AI.26092

Amount of Each Receipt this Period

25.00

SUBTOTAL of Receipts This Page (optional).....▶	150.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 15 OF 47
	<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)
VETERANS VICTORY FUND

A. MISS CHARLOTTE HARBS 113
 Full Name (Last, First, Middle Initial)
 Mailing Address 6486 82ND PL
 City MIDDLE VILLAGE State NY Zip Code 11379
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NONE Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 16 / 2014
Transaction ID : SA11AI.26111
 Amount of Each Receipt this Period
 100.00

B. MRS ELIZABETH R HASKINS 244
 Full Name (Last, First, Middle Initial)
 Mailing Address 150 FOREST HILL VW
 City LEXINGTON State VA Zip Code 24450
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NONE Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 205.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 20 / 2014
Transaction ID : SA11AI.26118
 Amount of Each Receipt this Period
 25.00

C. MR GERMANO J HASSLOCHER 782
 Full Name (Last, First, Middle Initial)
 Mailing Address 219 LABURNUM DR
 City SAN ANTONIO State TX Zip Code 78209
 FEC ID number of contributing federal political committee. **C**
 Name of Employer SELF EMPLOYED Occupation RESTAURANTER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 20 / 2014
Transaction ID : SA11AI.26119
 Amount of Each Receipt this Period
 100.00

SUBTOTAL of Receipts This Page (optional).....▶	225.00
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 47
	(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)
VETERANS VICTORY FUND

Full Name (Last, First, Middle Initial) A. MS HELEN J HAUSER 070		Date of Receipt
Mailing Address 7 MEAD TER		<input type="text" value="10"/> / <input type="text" value="17"/> / <input type="text" value="2014"/>
City	State	Zip Code
GLEN RIDGE	NJ	07028
FEC ID number of contributing federal political committee.		Transaction ID : SA11AI.26120
<input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="200.00"/>
Name of Employer	Occupation	
NONE	RETIRED	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="300.00"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. MRS AGNES HAYDEN 496		Date of Receipt
Mailing Address 929 PENINSULA DR		<input type="text" value="10"/> / <input type="text" value="20"/> / <input type="text" value="2014"/>
City	State	Zip Code
TRAVERSE CITY	MI	49686
FEC ID number of contributing federal political committee.		Transaction ID : SA11AI.26124
<input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="150.00"/>
Name of Employer	Occupation	
HAYCO INDUSTRIES	EXECUTIVE	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="450.00"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. MRS CLAIRE HOLLAND 370		Date of Receipt
Mailing Address 5508 SADDLEWOOD LN		<input type="text" value="10"/> / <input type="text" value="23"/> / <input type="text" value="2014"/>
City	State	Zip Code
BRENTWOOD	TN	37027
FEC ID number of contributing federal political committee.		Transaction ID : SA11AI.26144
<input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="100.00"/>
Name of Employer	Occupation	
NONE	HOMEMAKER	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="300.00"/>	
<input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="450.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 17 OF 47
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
VETERANS VICTORY FUND

A. MR EDWARD HOLSEN 542
 Full Name (Last, First, Middle Initial)
 Mailing Address 560 S LIBERTY ST
 City VALDERS State WI Zip Code 54245
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NONE Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 235.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 18 / 2014
Transaction ID : SA11AI.26148
 Amount of Each Receipt this Period
 35.00

B. MRS ETHEL HUSER 667
 Full Name (Last, First, Middle Initial)
 Mailing Address 1704 DECATUR RD
 City FREDONIA State KS Zip Code 66736
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NONE Occupation HOUSEWIFE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 685.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 17 / 2014
Transaction ID : SA11AI.26157
 Amount of Each Receipt this Period
 200.00

C. MR PAUL E JACKSON 324
 Full Name (Last, First, Middle Initial)
 Mailing Address 917 MARINA DR
 City PANAMA CITY BEACH State FL Zip Code 32407
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NONE Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 995.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 20 / 2014
Transaction ID : SA11AI.26165
 Amount of Each Receipt this Period
 600.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 835.00
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 47
	(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)
VETERANS VICTORY FUND

Full Name (Last, First, Middle Initial) A. MR WILLIAM JACKY 891		Date of Receipt
Mailing Address 8332 FAWN BROOK CT		<input type="text" value="10"/> / <input type="text" value="20"/> / <input type="text" value="2014"/>
City	State	Zip Code
LAS VEGAS	NV	89149
FEC ID number of contributing federal political committee.		Transaction ID : SA11AI.26169
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="41.00"/>
Name of Employer	Occupation	
NONE	RETIRED	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="287.00"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. MR WILLIAM JACKY 891		Date of Receipt
Mailing Address 8332 FAWN BROOK CT		<input type="text" value="10"/> / <input type="text" value="27"/> / <input type="text" value="2014"/>
City	State	Zip Code
LAS VEGAS	NV	89149
FEC ID number of contributing federal political committee.		Transaction ID : SA11AI.26168
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="41.00"/>
Name of Employer	Occupation	
NONE	RETIRED	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="328.00"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. MRS GERALDINE M JOHNS 981		Date of Receipt
Mailing Address 1440 NW RCHMND BEACH RD UNIT 101		<input type="text" value="10"/> / <input type="text" value="17"/> / <input type="text" value="2014"/>
City	State	Zip Code
SHORELINE	WA	98177
FEC ID number of contributing federal political committee.		Transaction ID : SA11AI.26177
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="50.00"/>
Name of Employer	Occupation	
NONE	RETIRED	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="235.00"/>	
<input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="132.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text" value=""/>

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 19 OF 47
	<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)
VETERANS VICTORY FUND

A. MRS MARY F JOINER 675
 Full Name (Last, First, Middle Initial)
 Mailing Address 2507 RUSSELL PKWY
 City GREAT BEND State KS Zip Code 67530
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NONE Occupation HOMEMAKER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 270.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 27 / 2014
Transaction ID : SA11AI.26188
 Amount of Each Receipt this Period
 200.00

B. MRS BETTY J JONES 902
 Full Name (Last, First, Middle Initial)
 Mailing Address 1821 CHASTAIN PKWY E
 City PACIFIC PALISADES State CA Zip Code 90272
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NONE Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 24 / 2014
Transaction ID : SA11AI.26189
 Amount of Each Receipt this Period
 100.00

C. MR DONALD K KAUP 328
 Full Name (Last, First, Middle Initial)
 Mailing Address 2117 PINEWAY DR
 City ORLANDO State FL Zip Code 32839
 FEC ID number of contributing federal political committee. **C**
 Name of Employer U OF CENTRAL FLORIDA Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 235.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 27 / 2014
Transaction ID : SA11AI.26194
 Amount of Each Receipt this Period
 50.00

SUBTOTAL of Receipts This Page (optional).....▶	170.00
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 47
	<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)
VETERANS VICTORY FUND

Full Name (Last, First, Middle Initial) A. MRS LIZ YOUNG KRAUSE 490			Date of Receipt
Mailing Address 630 SHERMAN ST			<input type="text" value="10"/> / <input type="text" value="20"/> / <input type="text" value="2014"/>
City	State	Zip Code	Transaction ID : SA11AI.26217
ALLEGAN	MI	49010	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee. <input type="text" value="C"/>			<input type="text" value="36.00"/>
Name of Employer	Occupation		
NONE	RETIRED		
Receipt For:	Aggregate Year-to-Date ▼		
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="281.00"/>		
<input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) B. MRS GERTRUDE LACEY 553			Date of Receipt
Mailing Address 12650 DAYTON RIVER RD			<input type="text" value="10"/> / <input type="text" value="28"/> / <input type="text" value="2014"/>
City	State	Zip Code	Transaction ID : SA11AI.26220
DAYTON	MN	55327	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee. <input type="text" value="C"/>			<input type="text" value="100.00"/>
Name of Employer	Occupation		
NONE	RETIRED		
Receipt For:	Aggregate Year-to-Date ▼		
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="340.00"/>		
<input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) C. MAJ DANIEL J LACHUT 142			Date of Receipt
Mailing Address 387 GEORGE URBAN BLVD			<input type="text" value="10"/> / <input type="text" value="27"/> / <input type="text" value="2014"/>
City	State	Zip Code	Transaction ID : SA11AI.26221
CHEEKTOWAGA	NY	14225	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee. <input type="text" value="C"/>			<input type="text" value="200.00"/>
Name of Employer	Occupation		
US MILITARY	OFFICER		
Receipt For:	Aggregate Year-to-Date ▼		
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="920.00"/>		
<input type="checkbox"/> Other (specify) ▼			

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="336.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text" value=""/>

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 21 OF 47
	<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)
VETERANS VICTORY FUND

A. MS VICKIE LAIR 453
Full Name (Last, First, Middle Initial)

Mailing Address 1161 SANCTUARY DR

City FAIRBORN State OH Zip Code 45324

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

Name of Employer NONE Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **275.00**

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

Transaction ID : SA11AI.26222

Amount of Each Receipt this Period
50.00

B. MS JEAN M LAMB 836
Full Name (Last, First, Middle Initial)

Mailing Address 2814 S ILLINOIS AVE

City CALDWELL State ID Zip Code 83605

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

Name of Employer NONE Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **545.00**

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

Transaction ID : SA11AI.26223

Amount of Each Receipt this Period
25.00

C. ERNEST LEGER 863
Full Name (Last, First, Middle Initial)

Mailing Address 1575 E ARROWHEAD LN

City COTTONWOOD State AZ Zip Code 86326

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

Name of Employer US MILITARY Occupation OFFICER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **228.00**

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

Transaction ID : SA11AI.26232

Amount of Each Receipt this Period
35.00

SUBTOTAL of Receipts This Page (optional).....▶	110.00
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 47
	<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)
VETERANS VICTORY FUND

A. MRS HILMA A LEVIS 775
Full Name (Last, First, Middle Initial)

Mailing Address 6901 AVENUE E

City SANTA FE State TX Zip Code 77510

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

Name of Employer NONE Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 234.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 28 / 2014
Transaction ID : SA11AI.26235

Amount of Each Receipt this Period
 40.00

B. MR RALPH LEWIS 460
Full Name (Last, First, Middle Initial)

Mailing Address 13559 KENSINGTON PL

City CARMEL State IN Zip Code 46032

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

Name of Employer NONE Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 325.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 27 / 2014
Transaction ID : SA11AI.26236

Amount of Each Receipt this Period
 25.00

C. MR RALPH LEWIS 460
Full Name (Last, First, Middle Initial)

Mailing Address 13559 KENSINGTON PL

City CARMEL State IN Zip Code 46032

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

Name of Employer NONE Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 03 / 2014
Transaction ID : SA11AI.26237

Amount of Each Receipt this Period
 25.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 90.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 23 OF 47
	(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)
VETERANS VICTORY FUND

Full Name (Last, First, Middle Initial) A. MS MARJORIE R LINDSEY 933		Date of Receipt
Mailing Address 10202 DUTCH IRIS DR		<input type="text" value="10"/> / <input type="text" value="17"/> / <input type="text" value="2014"/>
City	State	Zip Code
BAKERSFIELD	CA	93311
FEC ID number of contributing federal political committee.		Transaction ID : SA11AI.26240
<input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="100.00"/>
Name of Employer	Occupation	
NONE	HOMEMAKER	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="600.00"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. DR WALTER LUNG 968 DDS		Date of Receipt
Mailing Address 4244 HUANUI ST		<input type="text" value="10"/> / <input type="text" value="28"/> / <input type="text" value="2014"/>
City	State	Zip Code
HONOLULU	HI	96816
FEC ID number of contributing federal political committee.		Transaction ID : SA11AI.26247
<input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="240.00"/>
Name of Employer	Occupation	
RETIRED	DENTIST	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="720.00"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. MRS CHARLOTTE MCGHEE 625		Date of Receipt
Mailing Address 3651 N KAREN CT		<input type="text" value="10"/> / <input type="text" value="17"/> / <input type="text" value="2014"/>
City	State	Zip Code
DECATUR	IL	62526
FEC ID number of contributing federal political committee.		Transaction ID : SA11AI.26264
<input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="100.00"/>
Name of Employer	Occupation	
NONE	RETIRED	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="500.00"/>	
<input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="440.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 24 OF 47
	<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)
VETERANS VICTORY FUND

A. MISS ORA MCLELLAN 210

Full Name (Last, First, Middle Initial)
MISS ORA MCLELLAN 210

Mailing Address 2107 PUDDINGTONS PATENT WAY

City State Zip Code
GAMBRILLS MD 21054

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

Name of Employer Occupation
NONE RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
290.00

Date of Receipt
10 / 20 / 2014
Transaction ID : SA11AI.26269

Amount of Each Receipt this Period
20.00

B. MISS ORA MCLELLAN 210

Full Name (Last, First, Middle Initial)
MISS ORA MCLELLAN 210

Mailing Address 2107 PUDDINGTONS PATENT WAY

City State Zip Code
GAMBRILLS MD 21054

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

Name of Employer Occupation
NONE RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
310.00

Date of Receipt
10 / 27 / 2014
Transaction ID : SA11AI.26270

Amount of Each Receipt this Period
20.00

C. MR HARRY A METZ 320

Full Name (Last, First, Middle Initial)
MR HARRY A METZ 320

Mailing Address 205 FIDDLERS POINT DR

City State Zip Code
SAINT AUGUSTINE FL 32080

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

Name of Employer Occupation
NONE RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
450.00

Date of Receipt
10 / 17 / 2014
Transaction ID : SA11AI.26277

Amount of Each Receipt this Period
50.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 90.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 25 OF 47
	<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)
VETERANS VICTORY FUND

Full Name (Last, First, Middle Initial) A. MS JOYCE E MORWAY 070		Date of Receipt
Mailing Address 19 ACKEN DR		<input type="text" value="10"/> / <input type="text" value="27"/> / <input type="text" value="2014"/>
City	State	Zip Code
CLARK	NJ	07066
FEC ID number of contributing federal political committee.		Transaction ID : SA11AI.26289
<input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="25.00"/>
Name of Employer	Occupation	
RETIRED	ELEMENTARY SCHOOL TEACHER	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="355.00"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. MR G ROBERT MURDOCH 841		Date of Receipt
Mailing Address 1957 LAURELHURST DR		<input type="text" value="10"/> / <input type="text" value="27"/> / <input type="text" value="2014"/>
City	State	Zip Code
SALT LAKE CITY	UT	84108
FEC ID number of contributing federal political committee.		Transaction ID : SA11AI.26294
<input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="25.00"/>
Name of Employer	Occupation	
NONE	RETIRED	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="240.00"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. MR DONALD NOTSCH 563		Date of Receipt
Mailing Address 745 31ST AVE N		<input type="text" value="10"/> / <input type="text" value="20"/> / <input type="text" value="2014"/>
City	State	Zip Code
SAINT CLOUD	MN	56303
FEC ID number of contributing federal political committee.		Transaction ID : SA11AI.26303
<input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="20.00"/>
Name of Employer	Occupation	
NONE	RETIRED	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="245.00"/>	
<input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="70.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

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

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

FOR LINE NUMBER: PAGE 26 OF 47
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
VETERANS VICTORY FUND

Full Name (Last, First, Middle Initial)
A. MR DALE OYHUS 586

Mailing Address 13973 FRANKS CREEK RD

City MEDORA State ND Zip Code 58645

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

Name of Employer SELF EMPLOYED Occupation RANCHER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
800.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
10 / 30 / 2014
Transaction ID : SA11AI.26314

Amount of Each Receipt this Period
160.00

Full Name (Last, First, Middle Initial)
B. MR JAMES PANKONIEN 537

Mailing Address 2313 GOLD DR

City FITCHBURG State WI Zip Code 53711

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

Name of Employer NONE Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
600.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
10 / 20 / 2014
Transaction ID : SA11AI.26318

Amount of Each Receipt this Period
150.00

Full Name (Last, First, Middle Initial)
C. MRS ROSELY PLOTZ 523

Mailing Address 3232 BENTON IOWA RD

City NORWAY State IA Zip Code 52318

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

Name of Employer NONE Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
370.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
10 / 20 / 2014
Transaction ID : SA11AI.26333

Amount of Each Receipt this Period
45.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 355.00

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 47
	<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)
VETERANS VICTORY FUND

A. MS CLAIRE RAINS 941
Full Name (Last, First, Middle Initial)

Mailing Address 420 41ST AVE

City SAN FRANCISCO State CA Zip Code 94121

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

Name of Employer NONE Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
560.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
10 / 20 / 2014
Transaction ID : SA11AI.26346

Amount of Each Receipt this Period
200.00

B. MS LORRAINE RATAJECK 073
Full Name (Last, First, Middle Initial)

Mailing Address 225 SAINT PAULS AVE APT 9R

City JERSEY CITY State NJ Zip Code 07306

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

Name of Employer NONE Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
475.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
10 / 20 / 2014
Transaction ID : SA11AI.26348

Amount of Each Receipt this Period
75.00

C. MR JOHN REDER 486
Full Name (Last, First, Middle Initial)

Mailing Address 4304 CASTLE DR

City MIDLAND State MI Zip Code 48640

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

Name of Employer RETIRED Occupation SHERIFF

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
370.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
10 / 24 / 2014
Transaction ID : SA11AI.26349

Amount of Each Receipt this Period
50.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 325.00

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 47
	<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)
VETERANS VICTORY FUND

A. MR NORMAN E REES 945
 Full Name (Last, First, Middle Initial)
 Mailing Address 2406 HIGH POINTE CT
 City State Zip Code
 FAIRFIELD CA 94534
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 NONE RETIRED
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 435.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 03 / 2014
Transaction ID : SA11AI.26352
 Amount of Each Receipt this Period
 100.00

B. JAMES REICH 191
 Full Name (Last, First, Middle Initial)
 Mailing Address 8839 WINCHESTER AVE
 City State Zip Code
 PHILADELPHIA PA 19115
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 NONE RETIRED
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 23 / 2014
Transaction ID : SA11AI.26355
 Amount of Each Receipt this Period
 20.00

C. MR PHILIP E RITCH 967
 Full Name (Last, First, Middle Initial)
 Mailing Address 146 KALUAMOO ST
 City State Zip Code
 KAILUA HI 96734
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 NONE RETIRED
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 360.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 20 / 2014
Transaction ID : SA11AI.26365
 Amount of Each Receipt this Period
 15.00

SUBTOTAL of Receipts This Page (optional).....▶	135.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 29 OF 47
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
VETERANS VICTORY FUND

A. MR JACK C ROSENAU 323
 Full Name (Last, First, Middle Initial)
 Mailing Address 1177 OLD FORT DR
 City TALLAHASSEE State FL Zip Code 32301
 FEC ID number of contributing federal political committee. **C**
 Name of Employer USMC Occupation RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **225.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 17 / 2014
Transaction ID : SA11AI.26376
 Amount of Each Receipt this Period
50.00

B. MR ELMER H RUEHLMANN 980
 Full Name (Last, First, Middle Initial)
 Mailing Address 7454 NEWCASTLE GOLF CLUB RD #321
 City NEWCASTLE State WA Zip Code 98059
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NONE Occupation RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **205.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 29 / 2014
Transaction ID : SA11AI.26379
 Amount of Each Receipt this Period
30.00

C. MR JACK A SANDHAUS 112
 Full Name (Last, First, Middle Initial)
 Mailing Address 3744 OCEANIC AVE
 City BROOKLYN State NY Zip Code 11224
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NONE Occupation RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **284.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 27 / 2014
Transaction ID : SA11AI.26386
 Amount of Each Receipt this Period
50.00

SUBTOTAL of Receipts This Page (optional).....	130.00
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 47
	<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)
VETERANS VICTORY FUND

A. MR ALVIN SCHETTLER 512
 Full Name (Last, First, Middle Initial)
 Mailing Address 1445 CLEVELAND AVE
 City LARCHWOOD State IA Zip Code 51241
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NONE Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 31 / 2014
Transaction ID : SA11AI.26390
 Amount of Each Receipt this Period
 30.00

B. MS LORETTA SCHOPF 958
 Full Name (Last, First, Middle Initial)
 Mailing Address 7370 PRITCHARD RD
 City SACRAMENTO State CA Zip Code 95828
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NONE Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 215.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 03 / 2014
Transaction ID : SA11AI.26395
 Amount of Each Receipt this Period
 25.00

C. MARK W SCHUMACHER 740
 Full Name (Last, First, Middle Initial)
 Mailing Address 1105 N 177TH WEST AVE
 City SAND SPRINGS State OK Zip Code 74063
 FEC ID number of contributing federal political committee. **C**
 Name of Employer SCHUMACHER PROFESSIONAL SERVICES Occupation PRINCIPAL
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 20 / 2014
Transaction ID : SA11AI.26399
 Amount of Each Receipt this Period
 100.00

SUBTOTAL of Receipts This Page (optional).....▶	155.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 31 OF 47
	<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)
VETERANS VICTORY FUND

A. MRS EVA F SCOTT 230
 Full Name (Last, First, Middle Initial)
 Mailing Address 15830 GOODES BRIDGE RD
 City State Zip Code
 AMELIA COURT HOUSE VA 23002
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 SELF EMPLOYED SMALL BUSINESS OWNER
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 27 / 2014
Transaction ID : SA11AI.26401
 Amount of Each Receipt this Period
 100.00

B. MRS MADELEINE SOUDEE 200
 Full Name (Last, First, Middle Initial)
 Mailing Address 2325 20TH ST NW
 City State Zip Code
 WASHINGTON DC 20009
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 GEORGETOWN UNIVERSITY PROFESSOR
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 440.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 20 / 2014
Transaction ID : SA11AI.26430
 Amount of Each Receipt this Period
 35.00

C. MRS MADELEINE SOUDEE 200
 Full Name (Last, First, Middle Initial)
 Mailing Address 2325 20TH ST NW
 City State Zip Code
 WASHINGTON DC 20009
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 GEORGETOWN UNIVERSITY PROFESSOR
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 490.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 24 / 2014
Transaction ID : SA11AI.26429
 Amount of Each Receipt this Period
 50.00

SUBTOTAL of Receipts This Page (optional).....▶	185.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 32 OF 47
	<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)
VETERANS VICTORY FUND

Full Name (Last, First, Middle Initial)
A. C E SPORCK 967

Mailing Address 22 KAUMANA PL

City KAILUA	State HI	Zip Code 96734
----------------	-------------	-------------------

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

Name of Employer NONE	Occupation RETIRED
--------------------------	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 21 / 2014
Transaction ID : SA11AI.26432

Amount of Each Receipt this Period
400.00

Full Name (Last, First, Middle Initial)
B. MR DONALD KEARN SURGEON 620

Mailing Address PO BOX 363

City JERSEYVILLE	State IL	Zip Code 62052
---------------------	-------------	-------------------

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

Name of Employer NONE	Occupation RETIRED
--------------------------	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 30 / 2014
Transaction ID : SA11AI.26444

Amount of Each Receipt this Period
100.00

Full Name (Last, First, Middle Initial)
C. MR DONALD KEARN SURGEON 620

Mailing Address PO BOX 363

City JERSEYVILLE	State IL	Zip Code 62052
---------------------	-------------	-------------------

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

Name of Employer NONE	Occupation RETIRED
--------------------------	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 30 / 2014
Transaction ID : SA11AI.26446

Amount of Each Receipt this Period
100.00

SUBTOTAL of Receipts This Page (optional).....▶	600.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 33 OF 47
	<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)
VETERANS VICTORY FUND

Full Name (Last, First, Middle Initial) A. LCDR JACK C TARWATER 378			Date of Receipt
Mailing Address 400 HICKS DR			<input type="text" value="10"/> / <input type="text" value="27"/> / <input type="text" value="2014"/>
City	State	Zip Code	Transaction ID : SA11AI.26451
SEVIERVILLE	TN	37862	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee. <input type="text" value="C"/>			<input type="text" value="39.00"/>
Name of Employer	Occupation		
US MILITARY	OFFICER		
Receipt For:	Aggregate Year-to-Date ▼		
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="275.00"/>		
<input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) B. MS JEANNETTE L THERRIAULT 997			Date of Receipt
Mailing Address 2473 OLD RICHARDSON HWY			<input type="text" value="10"/> / <input type="text" value="21"/> / <input type="text" value="2014"/>
City	State	Zip Code	Transaction ID : SA11AI.26453
NORTH POLE	AK	99705	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee. <input type="text" value="C"/>			<input type="text" value="40.00"/>
Name of Employer	Occupation		
HECTORS WELDING	OFFICE WORK		
Receipt For:	Aggregate Year-to-Date ▼		
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="380.00"/>		
<input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) C. MR QUENTIN E THOMPSON 622			Date of Receipt
Mailing Address 7405 CONCORDIA RD			<input type="text" value="10"/> / <input type="text" value="27"/> / <input type="text" value="2014"/>
City	State	Zip Code	Transaction ID : SA11AI.26454
BELLEVILLE	IL	62223	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee. <input type="text" value="C"/>			<input type="text" value="50.00"/>
Name of Employer	Occupation		
NONE	RETIRED		
Receipt For:	Aggregate Year-to-Date ▼		
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="250.00"/>		
<input type="checkbox"/> Other (specify) ▼			

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="129.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 34 OF 47
	<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)
VETERANS VICTORY FUND

A. MS MARGIE TOWNSEND 856
 Full Name (Last, First, Middle Initial)
 Mailing Address 2600 E 8TH ST
 City DOUGLAS State AZ Zip Code 85607
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NONE Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 223.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 27 / 2014
Transaction ID : SA11AI.26463
 Amount of Each Receipt this Period
 50.00

B. MRS MARJORIE TURECHEK 802
 Full Name (Last, First, Middle Initial)
 Mailing Address 2543 S PEARL ST
 City DENVER State CO Zip Code 80210
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NONE Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 27 / 2014
Transaction ID : SA11AI.26466
 Amount of Each Receipt this Period
 300.00

C. MRS EDNA TURNER 430
 Full Name (Last, First, Middle Initial)
 Mailing Address 417 MONTREAL PL
 City WESTERVILLE State OH Zip Code 43081
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NONE Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 12 / 2014
Transaction ID : SA11AI.26467
 Amount of Each Receipt this Period
 50.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 400.00
TOTAL This Period (last page this line number only)..... ▶

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

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

FOR LINE NUMBER: PAGE 35 OF 47
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
VETERANS VICTORY FUND

A. MR CHESTER E TUSSEY 920
 Full Name (Last, First, Middle Initial)
 Mailing Address 5724 DOLPHIN PL
 City LA JOLLA State CA Zip Code 92037
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NONE Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 17 / 2014
Transaction ID : SA11AI.26468
 Amount of Each Receipt this Period
 50.00

B. TERRY UEHLING 675
 Full Name (Last, First, Middle Initial)
 Mailing Address 25085 20 RD
 City NESS CITY State KS Zip Code 67560
 FEC ID number of contributing federal political committee. **C**
 Name of Employer SELF EMPLOYED Occupation FARMING
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 27 / 2014
Transaction ID : SA11AI.26473
 Amount of Each Receipt this Period
 400.00

C. MR HUNT B WAGSTAFF 616
 Full Name (Last, First, Middle Initial)
 Mailing Address 3514 N PEORIA AVE
 City PEORIA State IL Zip Code 61603
 FEC ID number of contributing federal political committee. **C**
 Name of Employer SELF EMPLOYED Occupation CONTRACTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 31 / 2014
Transaction ID : SA11AI.26491
 Amount of Each Receipt this Period
 100.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 36 OF 47
	<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)
VETERANS VICTORY FUND

Full Name (Last, First, Middle Initial) A. FLORENCE WINDHORST 190		Date of Receipt
Mailing Address 409 WILLOWS LN		<input type="text" value="10"/> / <input type="text" value="27"/> / <input type="text" value="2014"/>
City	State	Zip Code
ALDAN	PA	19018
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : SA11AI.26522
Name of Employer	Occupation	Amount of Each Receipt this Period
NONE	HOMEMAKER	<input type="text" value="200.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="450.00"/>	

Full Name (Last, First, Middle Initial) B. MRS KATHLEEN M WITWER 176		Date of Receipt
Mailing Address 2329 WOODWICK RD		<input type="text" value="10"/> / <input type="text" value="27"/> / <input type="text" value="2014"/>
City	State	Zip Code
LANCASTER	PA	17601
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : SA11AI.26524
Name of Employer	Occupation	Amount of Each Receipt this Period
NONE	RETIRED	<input type="text" value="50.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="260.00"/>	

Full Name (Last, First, Middle Initial) C. MR EDWARD G WONG 921		Date of Receipt
Mailing Address 11186 PACEMONT LN		<input type="text" value="10"/> / <input type="text" value="27"/> / <input type="text" value="2014"/>
City	State	Zip Code
SAN DIEGO	CA	92126
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : SA11AI.26526
Name of Employer	Occupation	Amount of Each Receipt this Period
US NAVY	RETIRED	<input type="text" value="100.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="600.00"/>	

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="350.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 37 OF 47
	<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)
VETERANS VICTORY FUND

A. MR EDWARD G WONG 921
 Full Name (Last, First, Middle Initial)
 Mailing Address 11186 PACEMONT LN
 City SAN DIEGO State CA Zip Code 92126
 FEC ID number of contributing federal political committee. **C**
 Name of Employer US NAVY Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 635.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 30 / 2014
Transaction ID : SA11AI.26525
 Amount of Each Receipt this Period
 35.00

B. MR PIERS WOODRIF 229
 Full Name (Last, First, Middle Initial)
 Mailing Address PO BOX 503
 City SOMERSET State VA Zip Code 22972
 FEC ID number of contributing federal political committee. **C**
 Name of Employer RETIRED Occupation FARMER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 800.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 27 / 2014
Transaction ID : SA11AI.26529
 Amount of Each Receipt this Period
 100.00

C. MR GEORGE YODER 206
 Full Name (Last, First, Middle Initial)
 Mailing Address 15702 BLACKBURN ST
 City ACCOKEEK State MD Zip Code 20607
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NONE Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 24 / 2014
Transaction ID : SA11AI.26538
 Amount of Each Receipt this Period
 150.00

SUBTOTAL of Receipts This Page (optional).....▶	285.00
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 38 OF 47
	(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)
VETERANS VICTORY FUND

A. MR ARTHUR ZELLMER 991
 Full Name (Last, First, Middle Initial)
 Mailing Address PO BOX 325
 City DAVENPORT State WA Zip Code 99122
 FEC ID number of contributing federal political committee. **C**
 Name of Employer SELF EMPLOYED Occupation FARMER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 27 / 2014
Transaction ID : SA11AI.26540
 Amount of Each Receipt this Period
 100.00

B. MS VIRGINIA M ZINNS 946
 Full Name (Last, First, Middle Initial)
 Mailing Address 245 PERKINS ST APT 59
 City OAKLAND State CA Zip Code 94610
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NONE Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 31 / 2014
Transaction ID : SA11AI.26545
 Amount of Each Receipt this Period
 30.00

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 M / D D D / Y Y Y Y Y Y
 Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional).....▶	130.00
TOTAL This Period (last page this line number only).....▶	8595.00

**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)
VETERANS VICTORY FUND

Full Name (Last, First, Middle Initial)

A. BASE CONNECT INC

Mailing Address 1155 - 15TH STREET NW
SUITE 410

City WASHINGTON State DC Zip Code 20005

Purpose of Disbursement
DIRECT MAIL - CREATIVE

003

Candidate Name

VETERANS VICTORY FUND

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
10 / 16 / 2014

Transaction ID : **SB21B.26552**

Amount of Each Disbursement this Period

12345678901234567890
2166.74

Full Name (Last, First, Middle Initial)

B. CAPITOL CAGING CORP

Mailing Address 504 SHAW RD

City STERLING State VA Zip Code 20166

Purpose of Disbursement
CAGING SERVICES

001

Candidate Name

VETERANS VICTORY FUND

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
10 / 16 / 2014

Transaction ID : **SB21B.26554**

Amount of Each Disbursement this Period

12345678901234567890
823.57

Full Name (Last, First, Middle Initial)

C. CAPITOL CAGING CORP

Mailing Address 504 SHAW RD

City STERLING State VA Zip Code 20166

Purpose of Disbursement
CAGING SERVICES

001

Candidate Name

VETERANS VICTORY FUND

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
11 / 12 / 2014

Transaction ID : **SB21B.26553**

Amount of Each Disbursement this Period

12345678901234567890
748.00

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

12345678901234567890
3738.31

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

12345678901234567890

**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)
VETERANS VICTORY FUND

Full Name (Last, First, Middle Initial)

A. CENTURY DATA MAILING SERVICES

Mailing Address 1155 - 15TH STREET NW
SUITE 410

City WASHINGTON State DC Zip Code 20005

Purpose of Disbursement
DIRECT MAIL - POSTAGE

003

Candidate Name
VETERANS VICTORY FUND

Category/
Type

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

Date of Disbursement

MM / DD / YYYY
10 / 16 / 2014

Transaction ID : SB21B.26555

Amount of Each Disbursement this Period

803.29

Full Name (Last, First, Middle Initial)

B. CENTURY DATA MAILING SERVICES

Mailing Address 1155 - 15TH STREET NW
SUITE 410

City WASHINGTON State DC Zip Code 20005

Purpose of Disbursement
DIRECT MAIL - POSTAGE

003

Candidate Name
VETERANS VICTORY FUND

Category/
Type

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

Date of Disbursement

MM / DD / YYYY
10 / 30 / 2014

Transaction ID : SB21B.26556

Amount of Each Disbursement this Period

5114.52

Full Name (Last, First, Middle Initial)

C. CENTURY DATA MAILING SERVICES

Mailing Address 1155 - 15TH STREET NW
SUITE 410

City WASHINGTON State DC Zip Code 20005

Purpose of Disbursement
DIRECT MAIL - POSTAGE

003

Candidate Name
VETERANS VICTORY FUND

Category/
Type

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

Date of Disbursement

MM / DD / YYYY
11 / 06 / 2014

Transaction ID : SB21B.26557

Amount of Each Disbursement this Period

5084.24

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

11002.05

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)
VETERANS VICTORY FUND

Full Name (Last, First, Middle Initial)

A. COLORTREE

Mailing Address 2519 BRITTONS HILL RD

City RICHMOND State VA Zip Code 23230

Purpose of Disbursement
DIRECT MAIL - PRINTING & MAILSHOP

003

Candidate Name

VETERANS VICTORY FUND

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
10 / 16 / 2014

Transaction ID : **SB21B.26558**

Amount of Each Disbursement this Period

6400.50

Full Name (Last, First, Middle Initial)

B. DONOR BUREAU

Mailing Address 1900 N CULPEPPER ST

City ARLINGTON State VA Zip Code 22207

Purpose of Disbursement
DIRECT MAIL - LIST ENHANCEMENT

003

Candidate Name

VETERANS VICTORY FUND

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
10 / 30 / 2014

Transaction ID : **SB21B.26559**

Amount of Each Disbursement this Period

298.38

Full Name (Last, First, Middle Initial)

C. FIRST VIRGINIA COMMUNITY BANK

Mailing Address 11325 RANDOM HILLS RD

City FAIRFAX State VA Zip Code 22030

Purpose of Disbursement
SERVICE CHARGE

001

Candidate Name

VETERANS VICTORY FUND

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
11 / 03 / 2014

Transaction ID : **SB21B.26549**

Amount of Each Disbursement this Period

171.17

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

6870.05

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)
VETERANS VICTORY FUND

Full Name (Last, First, Middle Initial)
A. FIRST VIRGINIA COMMUNITY BANK

Mailing Address 11325 RANDOM HILLS RD

City FAIRFAX State VA Zip Code 22030

Purpose of Disbursement
CUSTOM CREDIT BILLING

Candidate Name
VETERANS VICTORY FUND

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

State: District:

Date of Disbursement
MM / DD / YYYY
11 / 05 / 2014

Transaction ID : SB21B.26550

Amount of Each Disbursement this Period
35.75

Full Name (Last, First, Middle Initial)
B. FIRST VIRGINIA COMMUNITY BANK

Mailing Address 11325 RANDOM HILLS RD

City FAIRFAX State VA Zip Code 22030

Purpose of Disbursement
MERCHANT SERVICE CHARGE

Candidate Name
VETERANS VICTORY FUND

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

State: District:

Date of Disbursement
MM / DD / YYYY
11 / 07 / 2014

Transaction ID : SB21B.26551

Amount of Each Disbursement this Period
86.40

Full Name (Last, First, Middle Initial)
C. INTEGRAM

Mailing Address 8421 HILLTOP RD

City FAIRFAX State VA Zip Code 22031

Purpose of Disbursement
DIRECT MAIL - PRINTING & MAILSHOP

Candidate Name
VETERANS VICTORY FUND

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

State: District:

Date of Disbursement
MM / DD / YYYY
10 / 16 / 2014

Transaction ID : SB21B.26560

Amount of Each Disbursement this Period
2969.24

SUBTOTAL of Disbursements This Page (optional)..... ▶ 3091.39

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)
VETERANS VICTORY FUND

Full Name (Last, First, Middle Initial)

A. INTEGRAM

Mailing Address 8421 HILLTOP RD

City State Zip Code
FAIRFAX VA 22031

Purpose of Disbursement
DIRECT MAIL - PRINTING & MAILSHOP

003

Candidate Name
VETERANS VICTORY FUND

Category/
Type

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

Date of Disbursement

MM / DD / YYYY
10 / 30 / 2014

Transaction ID : SB21B.26561

Amount of Each Disbursement this Period

5114.21

Full Name (Last, First, Middle Initial)

B. MACKENZIE & COMPANY

Mailing Address 2776 S ARLINGTON MILL DRIVE #806

City State Zip Code
ARLINGTON VA 22206

Purpose of Disbursement
CONSULTING - COMPLIANCE

001

Candidate Name
VETERANS VICTORY FUND

Category/
Type

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

Date of Disbursement

MM / DD / YYYY
10 / 30 / 2014

Transaction ID : SB21B.26563

Amount of Each Disbursement this Period

2000.00

Full Name (Last, First, Middle Initial)

C. SIMPKINS ESCROW LLC

Mailing Address ST JUST RD

City State Zip Code
UNIONVILLE VA 22567

Purpose of Disbursement
ESCROW SERVICES

001

Candidate Name
VETERANS VICTORY FUND

Category/
Type

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

Date of Disbursement

MM / DD / YYYY
10 / 30 / 2014

Transaction ID : SB21B.26564

Amount of Each Disbursement this Period

301.85

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

7416.06

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

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

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

FOR LINE NUMBER:
(check only one)

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

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

NAME OF COMMITTEE (In Full)
VETERANS VICTORY FUND

Full Name (Last, First, Middle Initial) A. SIMPKINS ESCROW LLC		Date of Disbursement MM / DD / YYYY 11 / 06 / 2014
Mailing Address ST JUST RD		Transaction ID : SB21B.26565
City UNIONVILLE	State VA	
Purpose of Disbursement ESCROW SERVICES		Amount of Each Disbursement this Period 297.04
Candidate Name VETERANS VICTORY FUND		Category/ Type 001
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: _____	District: _____	

Full Name (Last, First, Middle Initial) B.		Date of Disbursement MM / DD / YYYY
Mailing Address		Amount of Each Disbursement this Period
City	State	
Purpose of Disbursement		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: _____	District: _____	

Full Name (Last, First, Middle Initial) C.		Date of Disbursement MM / DD / YYYY
Mailing Address		Amount of Each Disbursement this Period
City	State	
Purpose of Disbursement		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: _____	District: _____	

SUBTOTAL of Disbursements This Page (optional)..... ▶	297.04
TOTAL This Period (last page this line number only)..... ▶	32414.90

SCHEDULE C (FEC Form 3X)

LOANS

NAME OF COMMITTEE (In Full) **VETERANS VICTORY FUND** Transaction ID : **SC/10.13707**

LOAN SOURCE Full Name (Last, First, Middle Initial) SCOTT B MACKENZIE	Election: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address 2776 S ARLINGTON MILL DRIVE #806	
City ARLINGTON State VA ZIP Code 22206	

Original Amount of Loan 500.00	Cumulative Payment To Date 0.00	Balance Outstanding at Close of This Period 500.00
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TERMS

Date Incurred: M M / D D / Y Y Y Y Y Y

Date Due: M M / D D / Y Y Y Y Y Y

Interest Rate: % (apr)

Secured: Yes No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>

SUBTOTALS This Period This Page (optional)..... ▶	<input type="text" value="500.00"/>
TOTALS This Period (last page in this line only)..... ▶	<input type="text" value="500.00"/>

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 46 OF 47
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)
VETERANS VICTORY FUND

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor BASE CONNECT INC	Nature of Debt (Purpose): DIRECT MAIL - CREATIVE
Mailing Address 1155 - 15TH STREET NW SUITE 410	
City State Zip Code WASHINGTON DC 20005	

Outstanding Balance Beginning This Period <input type="text" value="36837.14"/>	Transaction ID : SD10.19457	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="2166.74"/>	Outstanding Balance at Close of This Period <input type="text" value="34670.40"/>

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor CENTURY DATA SYSTEMS CORP	Nature of Debt (Purpose): DATA PROCESSING
Mailing Address 1155 - 15TH STREET NW SUITE 410	
City State Zip Code WASHINGTON DC 20005	

Outstanding Balance Beginning This Period <input type="text" value="4851.54"/>	Transaction ID : SD10.19501	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="4851.54"/>

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor CONSOLIDATED MAILING SERVICES	Nature of Debt (Purpose): DIRECT MAIL - PRINTING & MAILSHOP
Mailing Address 504 SHAW RD SUITE 206	
City State Zip Code STERLING VA 20166	

Outstanding Balance Beginning This Period <input type="text" value="72776.31"/>	Transaction ID : SD10.4113	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="72776.31"/>

1) SUBTOTALS This Period This Page (optional)..... ▶	<input type="text" value="112298.25"/>
2) TOTALS This Period (last page this line number only)..... ▶	<input type="text"/>
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) ▶	<input type="text"/>
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	<input type="text"/>

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 47 OF 47
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)
VETERANS VICTORY FUND

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor INTEGRAM	Nature of Debt (Purpose): DIRECT MAIL - PRINTING & MAILSHOP
Mailing Address 8421 HILLTOP RD	
City State Zip Code FAIRFAX VA 22031	

Outstanding Balance Beginning This Period 18771.23	Transaction ID : SD10.19485	
Amount Incurred This Period 0.00	Payment This Period 8083.45	Outstanding Balance at Close of This Period 10687.78

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor LEGACY LIST MANAGEMENT INC	Nature of Debt (Purpose): DIRECT MAIL - LIST RENTALS
Mailing Address 1155 - 15TH STREET NW SUITE 410	
City State Zip Code WASHINGTON DC 20005	

Outstanding Balance Beginning This Period 70794.92	Transaction ID : SD10.19487	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 70794.92

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor MACKENZIE & COMPANYY	Nature of Debt (Purpose): CONSULTING - COMPLIANCE
Mailing Address 2776 S ARLINGTON MILL DRIVE #806	
City State Zip Code ARLINGTON VA 22206	

Outstanding Balance Beginning This Period 11000.00	Transaction ID : SD10.19489	
Amount Incurred This Period 3000.00	Payment This Period 2000.00	Outstanding Balance at Close of This Period 12000.00

1) SUBTOTALS This Period This Page (optional)..... ▶	93482.70
2) TOTALS This Period (last page this line number only)..... ▶	205780.95
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) ▶	500.00
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	206280.95