

FEC FORM 3

REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full)

TYPE OR PRINT ▼

Example: If typing, type over the lines.

12FE4M5

VICTORY TRUST 2014

ADDRESS (number and street)

228 S WASHINGTON STREET

SUITE 115

Check if different than previously reported. (ACC)

ALEXANDRIA

VA

22314

2. FEC IDENTIFICATION NUMBER ▼

C C00564641

CITY ▲

STATE ▲

ZIP CODE ▲

STATE ▼ DISTRICT

3. IS THIS REPORT

NEW (N)

OR

AMENDED (A)

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:

April 15 Quarterly Report (Q1)

July 15 Quarterly Report (Q2)

October 15 Quarterly Report (Q3)

January 31 Year-End Report (YE)

Termination Report (TER)

(b) 12-Day PRE-Election Report for the:

Primary (12P)

General (12G)

Runoff (12R)

Convention (12C)

Special (12S)

Election on

M M /

D D /

Y Y Y Y

in the State of

(c) 30-Day POST-Election Report for the:

General (30G)

Runoff (30R)

Special (30S)

Election on

M M /

D D /

Y Y Y Y

in the State of

5. Covering Period

M M /

D D /

Y Y Y Y

through

M M /

D D /

Y Y Y Y

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

Type or Print Name of Treasurer Keith A. Davis

Signature of Treasurer Keith A. Davis

[Electronically Filed]

Date

M M /

D D /

Y Y Y Y

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

Office Use Only

FEC FORM 3 (Revised 02/2003)

SUMMARY PAGE
of Receipts and Disbursements

Write or Type Committee Name
VICTORY TRUST 2014

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

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e))....	319585.00	465985.00
(b) Total Contribution Refunds (from Line 20(d))	12585.00	12585.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	307000.00	453400.00
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	18055.64	76555.64
(b) Total Offsets to Operating Expenditures (from Line 14).....	0.00	0.00
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	18055.64	76555.64
8. Cash on Hand at Close of Reporting Period (from Line 27).....	41504.92	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	

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

FEC Form 3 (Revised 12/2003)

Write or Type Committee Name

VICTORY TRUST 2014

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

I. RECEIPTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
11. CONTRIBUTIONS (other than loans) FROM:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	319585.00	465985.00
(ii) Unitemized.....	0.00	0.00
(iii) TOTAL of contributions from individuals ▶	319585.00	465985.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) The Candidate.....	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	319585.00	465985.00
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES		
	0.00	0.00
13. LOANS:		
(a) Made or Guaranteed by the Candidate.....	0.00	0.00
(b) All Other Loans.....	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	0.00	0.00
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.)		
	0.00	0.00
15. OTHER RECEIPTS (Dividends, Interest, etc.).....		
	0.00	0.00
16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶	319585.00	465985.00

DETAILED SUMMARY PAGE
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	18055.64	76555.64
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES	296139.42	335339.44
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	0.00
(b) Of All Other Loans	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees	12585.00	12585.00
(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 20(a), (b), and (c)).....	12585.00	12585.00
21. OTHER DISBURSEMENTS	0.00	0.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ►	326780.06	424480.08

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	48699.98
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	319585.00
25. SUBTOTAL (add Line 23 and Line 24).....	368284.98
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	326780.06
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	41504.92

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5 OF 26
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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)
VICTORY TRUST 2014

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

Mailing Address 4713 Rock Spring Road

City State Zip Code
Arlington VA 22207

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

Name of Employer Occupation
Patomak Global Partners CEO

Receipt For: Primary General Other (specify)

Election Cycle-to-Date
20800.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 08 / 2014

Transaction ID : SA11AI.4209

Amount of Each Receipt this Period
20800.00

B. Full Name (Last, First, Middle Initial)
Sarah Atkins

Mailing Address 4713 Rock Spring Road

City State Zip Code
Arlington VA 22207

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

Name of Employer Occupation
Tamko Building Products, Inc. Director

Receipt For: Primary General Other (specify)

Election Cycle-to-Date
20800.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 08 / 2014

Transaction ID : SA11AI.4210

Amount of Each Receipt this Period
20800.00

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

Mailing Address 824 Cherry Hill Lane

City State Zip Code
El Paso TX 79912

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

Name of Employer Occupation
Fambran Enterprises CEO

Receipt For: Primary General Other (specify)

Election Cycle-to-Date
23400.00

Date of Receipt
M M / D D / Y Y Y Y
07 / 11 / 2014

Transaction ID : SA11AI.4157

Amount of Each Receipt this Period
23400.00

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

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

65000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 OF 26
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
VICTORY TRUST 2014

A. Full Name (Last, First, Middle Initial)
M. Jeanne Brandmeyer

Mailing Address 824 Cherry Hill Lane

City El Paso State TX Zip Code 79912

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

Name of Employer Homemaker Occupation Homemaker

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date
5200.00

Date of Receipt
 M M / D D / Y Y Y Y
 07 / 11 / 2014

Transaction ID : SA11AI.4158

Amount of Each Receipt this Period
5200.00

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

Mailing Address P.O. Box 75020

City Cincinnati State OH Zip Code 45275

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

Name of Employer Corporex Occupation Chairman & CEO

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date
25000.00

Date of Receipt
 M M / D D / Y Y Y Y
 07 / 08 / 2014

Transaction ID : SA11AI.4153

Amount of Each Receipt this Period
25000.00

C. Full Name (Last, First, Middle Initial)
Becky Cark

Mailing Address 1625 N. Gatewood Street

City Wichita State KS Zip Code 67206

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

Name of Employer Homemaker Occupation Homemaker

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date
7800.00

Date of Receipt
 M M / D D / Y Y Y Y
 07 / 17 / 2014

Transaction ID : SA11AI.4168

Amount of Each Receipt this Period
7800.00

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

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

38000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 26
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
VICTORY TRUST 2014

Full Name (Last, First, Middle Initial) A. Stephen L. Clark		Date of Receipt M M / D D / Y Y Y Y 07 / 17 / 2014	
Mailing Address 1625 N. Gatewood Street		Transaction ID : SA11AI.4169	
City Wichita	State KS	Zip Code 67206	Amount of Each Receipt this Period _____ 7800.00
FEC ID number of contributing federal political committee.		C	
Name of Employer Clark Investment Group	Occupation Financial investor		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date _____ 7800.00		

Full Name (Last, First, Middle Initial) B. Jenny Craig		Date of Receipt M M / D D / Y Y Y Y 07 / 03 / 2014	
Mailing Address 11601 Wilshire Boulevard #1840		Transaction ID : SA11AI.4141	
City Los Angeles	State CA	Zip Code 90025	Amount of Each Receipt this Period _____ 24000.00
FEC ID number of contributing federal political committee.		C	
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date _____ 24000.00		

Full Name (Last, First, Middle Initial) C. Henry H. Gordon		Date of Receipt M M / D D / Y Y Y Y 07 / 28 / 2014	
Mailing Address 335 High Street		Transaction ID : SA11AI.4171	
City Denver	State CO	Zip Code 80218	Amount of Each Receipt this Period _____ 20800.00
FEC ID number of contributing federal political committee.		C	
Name of Employer Strata Resources	Occupation President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date _____ 20800.00		

SUBTOTAL of Receipts This Page (optional).....	_____ 52600.00
TOTAL This Period (last page this line number only).....	_____

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 OF 26
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
VICTORY TRUST 2014

Full Name (Last, First, Middle Initial) A. Forrest E. Hoglund		Date of Receipt M M / D D / Y Y Y Y 09 / 12 / 2014	
Mailing Address 3510 Turtle Creek Boulevard #3A		Transaction ID : SA11AI.4224	
City	State	Zip Code	Amount of Each Receipt this Period 18200.00
Dallas	TX	75219	
FEC ID number of contributing federal political committee.		C	
Name of Employer SeaOne Maritime Corp.		Occupation Chairman	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 18200.00	

Full Name (Last, First, Middle Initial) B. Sally R. Hoglund		Date of Receipt M M / D D / Y Y Y Y 09 / 12 / 2014	
Mailing Address 3510 Turtle Creek Boulevard #3A		Transaction ID : SA11AI.4226	
City	State	Zip Code	Amount of Each Receipt this Period 18200.00
Dallas	TX	75219	
FEC ID number of contributing federal political committee.		C	
Name of Employer Homemaker		Occupation Homemaker	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 18200.00	

Full Name (Last, First, Middle Initial) C. David C. Humphreys		Date of Receipt M M / D D / Y Y Y Y 08 / 25 / 2014	
Mailing Address P.O. Box 4050		Transaction ID : SA11AI.4195	
City	State	Zip Code	Amount of Each Receipt this Period 23400.00
Joplin	MO	64803	
FEC ID number of contributing federal political committee.		C	
Name of Employer Tamko Building Products, Inc.		Occupation President	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 23400.00	

SUBTOTAL of Receipts This Page (optional).....	59800.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 OF 26
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
VICTORY TRUST 2014

A. Full Name (Last, First, Middle Initial)
Ethelmae Humphreys

Mailing Address 2505 East 11th Street

City Joplin State MO Zip Code 64801

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

Name of Employer Tamko Building Products, Inc. Occupation Charman

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date
23985.00

Date of Receipt
 M M / D D / Y Y Y Y
 08 / 25 / 2014

Transaction ID : SA11AI.4191

Amount of Each Receipt this Period
23985.00

B. Full Name (Last, First, Middle Initial)
Dave Lamp

Mailing Address 524 St.Laurent Court

City Southlake State TX Zip Code 76092

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

Name of Employer Northern Tier Energy Group Occupation CEO

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date
13000.00

Date of Receipt
 M M / D D / Y Y Y Y
 08 / 11 / 2014

Transaction ID : SA11AI.4185

Amount of Each Receipt this Period
13000.00

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

Mailing Address 1111 N. Post Oak Boulevard

City Houston State TX Zip Code 77055

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

Name of Employer Weekley Properties Occupation Real estate developer

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date
600.00

Date of Receipt
 M M / D D / Y Y Y Y
 07 / 07 / 2014

Transaction ID : SA11AI.4144

Amount of Each Receipt this Period
600.00

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

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

37585.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 OF 26
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
VICTORY TRUST 2014

Full Name (Last, First, Middle Initial) Richard W. Weekley		Date of Receipt M M / D D / Y Y Y Y Y Y 07 / 07 / 2014	
Mailing Address 1111 N. Post Oak Boulevard		Transaction ID : SA11AI.4145	
City Houston	State TX	Zip Code 77055	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2600.00	
Name of Employer Weekley Properties	Occupation Real estate developer		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 3200.00		

Full Name (Last, First, Middle Initial) Richard W. Weekley		Date of Receipt M M / D D / Y Y Y Y Y Y 07 / 07 / 2014	
Mailing Address 1111 N. Post Oak Boulevard		Transaction ID : SA11AI.4146	
City Houston	State TX	Zip Code 77055	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2600.00	
Name of Employer Weekley Properties	Occupation Real estate developer		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 5800.00		

Full Name (Last, First, Middle Initial) Richard W. Weekley		Date of Receipt M M / D D / Y Y Y Y Y Y 07 / 07 / 2014	
Mailing Address 1111 N. Post Oak Boulevard		Transaction ID : SA11AI.4148	
City Houston	State TX	Zip Code 77055	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 4200.00	
Name of Employer Weekley Properties	Occupation Real estate developer		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 10000.00		

SUBTOTAL of Receipts This Page (optional).....	9400.00
TOTAL This Period (last page this line number only).....	[Empty Box]

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

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

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

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NAME OF COMMITTEE (In Full)
VICTORY TRUST 2014

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

Mailing Address 1111 N. Post Oak Boulevard

City State Zip Code
Houston TX 77055

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

Name of Employer Occupation
Weekley Properties Real estate developer

Receipt For: Primary General
 Other (specify)

Election Cycle-to-Date
12600.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
07 / 07 / 2014

Transaction ID : SA11AI.4149

Amount of Each Receipt this Period
2600.00

B. Full Name (Last, First, Middle Initial)
Richard W. Weekley

Mailing Address 1111 N. Post Oak Boulevard

City State Zip Code
Houston TX 77055

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

Name of Employer Occupation
Weekley Properties Real estate developer

Receipt For: Primary General
 Other (specify)

Election Cycle-to-Date
17800.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
07 / 07 / 2014

Transaction ID : SA11AI.4150

Amount of Each Receipt this Period
5200.00

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

Mailing Address 1111 N. Post Oak Boulevard

City State Zip Code
Houston TX 77055

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

Name of Employer Occupation
Weekley Properties Real estate developer

Receipt For: Primary General
 Other (specify)

Election Cycle-to-Date
20400.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
07 / 07 / 2014

Transaction ID : SA11AI.4151

Amount of Each Receipt this Period
2600.00

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

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

10400.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 OF 26
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
VICTORY TRUST 2014

A. Full Name (Last, First, Middle Initial)
Robert M. Weekley

Mailing Address 621 S. Barrington Avenue
#306

City Los Angeles State CA Zip Code 90049

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

Name of Employer Lowe Enterprises Occupation Real estate developer

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date
23400.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 01 / 2014

Transaction ID : SA11AI.4183

Amount of Each Receipt this Period
23400.00

B. Full Name (Last, First, Middle Initial)
Clarence L. Werner

Mailing Address P.O. Box 45308

City Omaha State NE Zip Code 68145

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

Name of Employer Werner Enterprises Occupation Chairman Emeritus

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date
23400.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 14 / 2014

Transaction ID : SA11AI.4162

Amount of Each Receipt this Period
23400.00

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)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

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

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

46800.00

319585.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 OF 26			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
VICTORY TRUST 2014

Full Name (Last, First, Middle Initial)		Date of Disbursement								
A. BB&T		<table border="1"> <tr> <td>M M / D D / Y Y Y Y</td> </tr> <tr> <td>07 / 18 / 2014</td> </tr> </table>		M M / D D / Y Y Y Y	07 / 18 / 2014					
M M / D D / Y Y Y Y										
07 / 18 / 2014										
Mailing Address 1909 K Street NW		Amount of Each Disbursement this Period								
<table border="1"> <tr> <td>City</td> <td>State</td> <td>Zip Code</td> </tr> <tr> <td>Washington</td> <td>DC</td> <td>20006</td> </tr> </table>		City	State	Zip Code	Washington	DC	20006	<table border="1"> <tr> <td>250.00</td> </tr> </table>		250.00
City	State	Zip Code								
Washington	DC	20006								
250.00										
Purpose of Disbursement credit card processing fee		Transaction ID : SB17.4163								
Candidate Name										
<table border="1"> <tr> <td>Office Sought:</td> <td>Disbursement For:</td> </tr> <tr> <td><input type="checkbox"/> House</td> <td><input type="checkbox"/> Primary <input type="checkbox"/> General</td> </tr> <tr> <td><input type="checkbox"/> Senate</td> <td><input type="checkbox"/> Other (specify)</td> </tr> <tr> <td><input type="checkbox"/> President</td> <td></td> </tr> </table>				Office Sought:	Disbursement For:	<input type="checkbox"/> House	<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="checkbox"/> Senate	<input type="checkbox"/> Other (specify)	<input type="checkbox"/> President
Office Sought:	Disbursement For:									
<input type="checkbox"/> House	<input type="checkbox"/> Primary <input type="checkbox"/> General									
<input type="checkbox"/> Senate	<input type="checkbox"/> Other (specify)									
<input type="checkbox"/> President										
State: District:										

Full Name (Last, First, Middle Initial)		Date of Disbursement								
B. BB&T		<table border="1"> <tr> <td>M M / D D / Y Y Y Y</td> </tr> <tr> <td>07 / 24 / 2014</td> </tr> </table>		M M / D D / Y Y Y Y	07 / 24 / 2014					
M M / D D / Y Y Y Y										
07 / 24 / 2014										
Mailing Address 1909 K Street NW		Amount of Each Disbursement this Period								
<table border="1"> <tr> <td>City</td> <td>State</td> <td>Zip Code</td> </tr> <tr> <td>Washington</td> <td>DC</td> <td>20006</td> </tr> </table>		City	State	Zip Code	Washington	DC	20006	<table border="1"> <tr> <td>786.39</td> </tr> </table>		786.39
City	State	Zip Code								
Washington	DC	20006								
786.39										
Purpose of Disbursement credit card processing fee		Transaction ID : SB17.4165								
Candidate Name										
<table border="1"> <tr> <td>Office Sought:</td> <td>Disbursement For:</td> </tr> <tr> <td><input type="checkbox"/> House</td> <td><input type="checkbox"/> Primary <input type="checkbox"/> General</td> </tr> <tr> <td><input type="checkbox"/> Senate</td> <td><input type="checkbox"/> Other (specify)</td> </tr> <tr> <td><input type="checkbox"/> President</td> <td></td> </tr> </table>				Office Sought:	Disbursement For:	<input type="checkbox"/> House	<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="checkbox"/> Senate	<input type="checkbox"/> Other (specify)	<input type="checkbox"/> President
Office Sought:	Disbursement For:									
<input type="checkbox"/> House	<input type="checkbox"/> Primary <input type="checkbox"/> General									
<input type="checkbox"/> Senate	<input type="checkbox"/> Other (specify)									
<input type="checkbox"/> President										
State: District:										

Full Name (Last, First, Middle Initial)		Date of Disbursement								
C. BB&T		<table border="1"> <tr> <td>M M / D D / Y Y Y Y</td> </tr> <tr> <td>08 / 21 / 2014</td> </tr> </table>		M M / D D / Y Y Y Y	08 / 21 / 2014					
M M / D D / Y Y Y Y										
08 / 21 / 2014										
Mailing Address 1909 K Street NW		Amount of Each Disbursement this Period								
<table border="1"> <tr> <td>City</td> <td>State</td> <td>Zip Code</td> </tr> <tr> <td>Washington</td> <td>DC</td> <td>20006</td> </tr> </table>		City	State	Zip Code	Washington	DC	20006	<table border="1"> <tr> <td>18.00</td> </tr> </table>		18.00
City	State	Zip Code								
Washington	DC	20006								
18.00										
Purpose of Disbursement service charge		Transaction ID : SB17.4189								
Candidate Name										
<table border="1"> <tr> <td>Office Sought:</td> <td>Disbursement For:</td> </tr> <tr> <td><input type="checkbox"/> House</td> <td><input type="checkbox"/> Primary <input type="checkbox"/> General</td> </tr> <tr> <td><input type="checkbox"/> Senate</td> <td><input type="checkbox"/> Other (specify)</td> </tr> <tr> <td><input type="checkbox"/> President</td> <td></td> </tr> </table>				Office Sought:	Disbursement For:	<input type="checkbox"/> House	<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="checkbox"/> Senate	<input type="checkbox"/> Other (specify)	<input type="checkbox"/> President
Office Sought:	Disbursement For:									
<input type="checkbox"/> House	<input type="checkbox"/> Primary <input type="checkbox"/> General									
<input type="checkbox"/> Senate	<input type="checkbox"/> Other (specify)									
<input type="checkbox"/> President										
State: District:										

SUBTOTAL of Disbursements This Page (optional).....	1054.39
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 14 OF 26			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
VICTORY TRUST 2014

Full Name (Last, First, Middle Initial) A. BB&T		Date of Disbursement M M / D D / Y Y Y Y 08 / 22 / 2014
Mailing Address 1909 K Street NW		Amount of Each Disbursement this Period 169.95
City Washington	State DC	
Zip Code 20006	Purpose of Disbursement credit card processing fee	Transaction ID : SB17.4206
Candidate Name	Category/Type	
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. EFT Corporation		Date of Disbursement M M / D D / Y Y Y Y 08 / 15 / 2014
Mailing Address 1210 Progressive Drive #101		Amount of Each Disbursement this Period 846.23
City Chesapeake	State VA	
Zip Code 23320	Purpose of Disbursement credit card processing fee	Transaction ID : SB17.4187
Candidate Name	Category/Type	
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. EFT Corporation		Date of Disbursement M M / D D / Y Y Y Y 09 / 15 / 2014
Mailing Address 1210 Progressive Drive #101		Amount of Each Disbursement this Period 864.49
City Chesapeake	State VA	
Zip Code 23320	Purpose of Disbursement credit card processing fee	Transaction ID : SB17.4219
Candidate Name	Category/Type	
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).....	1880.67
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 15 OF 26	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
VICTORY TRUST 2014

Full Name (Last, First, Middle Initial) A. Huckaby Davis Lisker		Date of Disbursement M M / D D / Y Y Y Y 09 / 30 / 2014
Mailing Address 228 S. Washington Street Suite 115		Amount of Each Disbursement this Period 6683.86 Transaction ID : SB17.4228
City Alexandria	State VA Zip Code 22314	
Purpose of Disbursement jfc accounting/compliance svcs phone/delivery/postage		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) B. Jones Day		Date of Disbursement M M / D D / Y Y Y Y 09 / 17 / 2014
Mailing Address P.O. Box 7805 Ben Franklin Station		Amount of Each Disbursement this Period 8370.00 Transaction ID : SB17.4222
City Washington	State DC Zip Code 20044	
Purpose of Disbursement jfc legal services		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 M M / D D / Y Y Y Y
Mailing Address		Amount of Each Disbursement this Period
City	State Zip Code	
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).....	15053.86
TOTAL This Period (last page this line number only).....	17988.92

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 16 OF 26	
	<input type="checkbox"/> 17 20a	<input checked="" type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
VICTORY TRUST 2014

Full Name (Last, First, Middle Initial) A. COMSTOCK FOR CONGRESS		Date of Disbursement M M / D D / Y Y Y Y 07 / 30 / 2014
Mailing Address PO BOX 71596		Amount of Each Disbursement this Period 19018.58 Transaction ID : SB18.4178
City RICHMOND State VA Zip Code 23255	Purpose of Disbursement transfer of net proceeds	
Candidate Name BARBARA J. COMSTOCK		Category/Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: VA District: 10		

Full Name (Last, First, Middle Initial) B. COMSTOCK FOR CONGRESS		Date of Disbursement M M / D D / Y Y Y Y 08 / 26 / 2014
Mailing Address PO BOX 71596		Amount of Each Disbursement this Period 9086.31 Transaction ID : SB18.4197
City RICHMOND State VA Zip Code 23255	Purpose of Disbursement transfer of net proceeds	
Candidate Name BARBARA J. COMSTOCK		Category/Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: VA District: 10		

Full Name (Last, First, Middle Initial) C. COMSTOCK FOR CONGRESS		Date of Disbursement M M / D D / Y Y Y Y 09 / 12 / 2014
Mailing Address PO BOX 71596		Amount of Each Disbursement this Period 4919.13 Transaction ID : SB18.4211
City RICHMOND State VA Zip Code 23255	Purpose of Disbursement transfer of net proceeds	
Candidate Name BARBARA J. COMSTOCK		Category/Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: VA District: 10		

SUBTOTAL of Disbursements This Page (optional).....	33024.02
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 17 OF 26
	<input type="checkbox"/> 17 20a <input checked="" type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
VICTORY TRUST 2014

Full Name (Last, First, Middle Initial) A. CORY GARDNER FOR SENATE		Date of Disbursement M M / D D / Y Y Y Y 07 / 30 / 2014
Mailing Address 9227 E. LINCOLN AVE., #200-234		Amount of Each Disbursement this Period 3200.00 Transaction ID : SB18.4175
City LONE TREE State CO Zip Code 80124	Purpose of Disbursement transfer of net proceeds	
Candidate Name CORY GARDNER		Category/Type
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: CO District: 00		

Full Name (Last, First, Middle Initial) B. CORY GARDNER FOR SENATE		Date of Disbursement M M / D D / Y Y Y Y 08 / 26 / 2014
Mailing Address 9227 E. LINCOLN AVE., #200-234		Amount of Each Disbursement this Period 10400.00 Transaction ID : SB18.4198
City LONE TREE State CO Zip Code 80124	Purpose of Disbursement transfer of net proceeds	
Candidate Name CORY GARDNER		Category/Type
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: CO District: 00		

Full Name (Last, First, Middle Initial) C. CORY GARDNER FOR SENATE		Date of Disbursement M M / D D / Y Y Y Y 09 / 11 / 2014
Mailing Address 9227 E. LINCOLN AVE., #200-234		Amount of Each Disbursement this Period 5200.00 Transaction ID : SB18.4212
City LONE TREE State CO Zip Code 80124	Purpose of Disbursement transfer of net proceeds	
Candidate Name CORY GARDNER		Category/Type
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: CO District: 00		

SUBTOTAL of Disbursements This Page (optional).....	39000.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 18 OF 26
	<input type="checkbox"/> 17 20a <input checked="" type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
VICTORY TRUST 2014

Full Name (Last, First, Middle Initial) A. COTTON FOR SENATE		Date of Disbursement M M / D D / Y Y Y Y 07 / 30 / 2014
Mailing Address PO BOX 379		Amount of Each Disbursement this Period 24010.32 Transaction ID : SB18.4173
City DARDANELLE State AR Zip Code 72834	Purpose of Disbursement transfer of net proceeds	
Candidate Name THOMAS COTTON		Category/Type
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: AR District: 00		

Full Name (Last, First, Middle Initial) B. COTTON FOR SENATE		Date of Disbursement M M / D D / Y Y Y Y 08 / 26 / 2014
Mailing Address PO BOX 379		Amount of Each Disbursement this Period 7252.19 Transaction ID : SB18.4199
City DARDANELLE State AR Zip Code 72834	Purpose of Disbursement transfer of net proceeds	
Candidate Name THOMAS COTTON		Category/Type
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: AR District: 00		

Full Name (Last, First, Middle Initial) C. COTTON FOR SENATE		Date of Disbursement M M / D D / Y Y Y Y 09 / 12 / 2014
Mailing Address PO BOX 379		Amount of Each Disbursement this Period 5005.51 Transaction ID : SB18.4213
City DARDANELLE State AR Zip Code 72834	Purpose of Disbursement transfer of net proceeds	
Candidate Name THOMAS COTTON		Category/Type
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: AR District: 00		

SUBTOTAL of Disbursements This Page (optional).....	36268.02
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 19 OF 26	
	<input type="checkbox"/> 17 20a	<input checked="" type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
VICTORY TRUST 2014

Full Name (Last, First, Middle Initial) A. JONI ERNST FOR US SENATE INC		Date of Disbursement M M / D D / Y Y Y Y 07 / 30 / 2014
Mailing Address PO BOX 93441		Amount of Each Disbursement this Period 24010.32 Transaction ID : SB18.4174
City DES MOINES State IA Zip Code 50393	Purpose of Disbursement transfer of net proceeds	
Candidate Name JONI K ERNST		Category/ Type
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: IA District: 00		

Full Name (Last, First, Middle Initial) B. JONI ERNST FOR US SENATE INC		Date of Disbursement M M / D D / Y Y Y Y 08 / 26 / 2014
Mailing Address PO BOX 93441		Amount of Each Disbursement this Period 7252.19 Transaction ID : SB18.4200
City DES MOINES State IA Zip Code 50393	Purpose of Disbursement transfer of net proceeds	
Candidate Name JONI K ERNST		Category/ Type
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: IA District: 00		

Full Name (Last, First, Middle Initial) C. JONI ERNST FOR US SENATE INC		Date of Disbursement M M / D D / Y Y Y Y 09 / 12 / 2014
Mailing Address PO BOX 93441		Amount of Each Disbursement this Period 5005.51 Transaction ID : SB18.4214
City DES MOINES State IA Zip Code 50393	Purpose of Disbursement transfer of net proceeds	
Candidate Name JONI K ERNST		Category/ Type
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: IA District: 00		

SUBTOTAL of Disbursements This Page (optional).....	36268.02
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 20 OF 26	
	<input type="checkbox"/> 17 20a	<input checked="" type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
VICTORY TRUST 2014

Full Name (Last, First, Middle Initial) A. MARILINDA GARCIA FOR CONGRESS		Date of Disbursement M M / D D / Y Y Y Y 07 / 30 / 2014
Mailing Address PO BOX 821		Amount of Each Disbursement this Period 19602.32 Transaction ID : SB18.4179
City SALEM State NH Zip Code 03079	Purpose of Disbursement transfer of net proceeds	
Candidate Name MARILINDA GARCIA		Category/ Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NH District: 02		

Full Name (Last, First, Middle Initial) B. MARILINDA GARCIA FOR CONGRESS		Date of Disbursement M M / D D / Y Y Y Y 07 / 30 / 2014
Mailing Address PO BOX 821		Amount of Each Disbursement this Period 19322.58 Transaction ID : SB18.4180
City SALEM State NH Zip Code 03079	Purpose of Disbursement transfer of net proceeds	
Candidate Name MARILINDA GARCIA		Category/ Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NH District: 02		

Full Name (Last, First, Middle Initial) C. MARILINDA GARCIA FOR CONGRESS		Date of Disbursement M M / D D / Y Y Y Y 08 / 26 / 2014
Mailing Address PO BOX 821		Amount of Each Disbursement this Period 7080.75 Transaction ID : SB18.4201
City SALEM State NH Zip Code 03079	Purpose of Disbursement transfer of net proceeds	
Candidate Name MARILINDA GARCIA		Category/ Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NH District: 02		

SUBTOTAL of Disbursements This Page (optional).....	46005.65
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 21 OF 26	
	<input type="checkbox"/> 17 20a	<input checked="" type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
VICTORY TRUST 2014

Full Name (Last, First, Middle Initial) A. MARILINDA GARCIA FOR CONGRESS		Date of Disbursement M M / D D / Y Y Y Y 08 / 26 / 2014
Mailing Address PO BOX 821		Amount of Each Disbursement this Period 7045.29 Transaction ID : SB18.4202
City SALEM State NH Zip Code 03079	Purpose of Disbursement transfer of net proceeds	
Candidate Name MARILINDA GARCIA		Category/Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NH District: 02		

Full Name (Last, First, Middle Initial) B. MARILINDA GARCIA FOR CONGRESS		Date of Disbursement M M / D D / Y Y Y Y 09 / 12 / 2014
Mailing Address PO BOX 821		Amount of Each Disbursement this Period 4901.13 Transaction ID : SB18.4215
City SALEM State NH Zip Code 03079	Purpose of Disbursement transfer of net proceeds	
Candidate Name MARILINDA GARCIA		Category/Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NH District: 02		

Full Name (Last, First, Middle Initial) C. MARILINDA GARCIA FOR CONGRESS		Date of Disbursement M M / D D / Y Y Y Y 09 / 12 / 2014
Mailing Address PO BOX 821		Amount of Each Disbursement this Period 4879.53 Transaction ID : SB18.4216
City SALEM State NH Zip Code 03079	Purpose of Disbursement transfer of net proceeds	
Candidate Name MARILINDA GARCIA		Category/Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NH District: 02		

SUBTOTAL of Disbursements This Page (optional).....	16825.93
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 22 OF 26	
	<input type="checkbox"/> 17 20a	<input checked="" type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
VICTORY TRUST 2014

Full Name (Last, First, Middle Initial) A. SULLIVAN FOR US SENATE		Date of Disbursement M M / D D / Y Y Y Y 07 / 30 / 2014
Mailing Address 3705 ARCTIC BLVD #447		Amount of Each Disbursement this Period 4,998.35 Transaction ID : SB18.4176
City ANCHORAGE State AK Zip Code 99503	Purpose of Disbursement transfer of net proceeds	
Candidate Name DAN SULLIVAN		Category/Type
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: AK District: 00		

Full Name (Last, First, Middle Initial) B. SULLIVAN FOR US SENATE		Date of Disbursement M M / D D / Y Y Y Y 07 / 30 / 2014
Mailing Address 3705 ARCTIC BLVD #447		Amount of Each Disbursement this Period 1,960.32 Transaction ID : SB18.4177
City ANCHORAGE State AK Zip Code 99503	Purpose of Disbursement transfer of net proceeds	
Candidate Name DAN SULLIVAN		Category/Type
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: AK District: 00		

Full Name (Last, First, Middle Initial) C. SULLIVAN FOR US SENATE		Date of Disbursement M M / D D / Y Y Y Y 08 / 26 / 2014
Mailing Address 3705 ARCTIC BLVD #447		Amount of Each Disbursement this Period 4,998.35 Transaction ID : SB18.4203
City ANCHORAGE State AK Zip Code 99503	Purpose of Disbursement transfer of net proceeds	
Candidate Name DAN SULLIVAN		Category/Type
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: AK District: 00		

SUBTOTAL of Disbursements This Page (optional).....	43442.99
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 23 OF 26	
	<input type="checkbox"/> 17 20a	<input checked="" type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
VICTORY TRUST 2014

Full Name (Last, First, Middle Initial) A. SULLIVAN FOR US SENATE		Date of Disbursement M M / D D / Y Y Y Y 08 / 26 / 2014
Mailing Address 3705 ARCTIC BLVD #447		Amount of Each Disbursement this Period 7080.75 Transaction ID : SB18.4204
City ANCHORAGE State AK Zip Code 99503	Purpose of Disbursement transfer of net proceeds	
Candidate Name DAN SULLIVAN		Category/Type
Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: AK District: 00		

Full Name (Last, First, Middle Initial) B. SULLIVAN FOR US SENATE		Date of Disbursement M M / D D / Y Y Y Y 09 / 12 / 2014
Mailing Address 3705 ARCTIC BLVD #447		Amount of Each Disbursement this Period 5200.00 Transaction ID : SB18.4217
City ANCHORAGE State AK Zip Code 99503	Purpose of Disbursement transfer of net proceeds	
Candidate Name DAN SULLIVAN		Category/Type
Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: AK District: 00		

Full Name (Last, First, Middle Initial) C. WESTERMAN FOR CONGRESS		Date of Disbursement M M / D D / Y Y Y Y 07 / 30 / 2014
Mailing Address PO BOX 21097		Amount of Each Disbursement this Period 19018.58 Transaction ID : SB18.4181
City HOT SPRINGS State AR Zip Code 71903	Purpose of Disbursement transfer of net proceeds	
Candidate Name BRUCE WESTERMAN		Category/Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: AR District: 04		

SUBTOTAL of Disbursements This Page (optional).....	31299.33
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 24 OF 26
	<input type="checkbox"/> 17 20a <input checked="" type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
VICTORY TRUST 2014

Full Name (Last, First, Middle Initial) A. WESTERMAN FOR CONGRESS		Date of Disbursement M M / D D / Y Y Y Y 08 / 26 / 2014
Mailing Address PO BOX 21097		Amount of Each Disbursement this Period 9086.31 Transaction ID : SB18.4205
City HOT SPRINGS	State AR	
Zip Code 71903	Purpose of Disbursement transfer of net proceeds	Category/ Type
Candidate Name BRUCE WESTERMAN	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: AR District: 04	

Full Name (Last, First, Middle Initial) B. WESTERMAN FOR CONGRESS		Date of Disbursement M M / D D / Y Y Y Y 09 / 12 / 2014
Mailing Address PO BOX 21097		Amount of Each Disbursement this Period 4919.13 Transaction ID : SB18.4218
City HOT SPRINGS	State AR	
Zip Code 71903	Purpose of Disbursement transfer of net proceeds	Category/ Type
Candidate Name BRUCE WESTERMAN	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: AR District: 04	

Full Name (Last, First, Middle Initial) C.		Date of Disbursement M M / D D / Y Y Y Y
Mailing Address		Amount of Each Disbursement this Period
City	State	
Zip Code	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).....	14005.44
TOTAL This Period (last page this line number only).....	296139.42

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 25 OF 26			
	<input type="checkbox"/> 17 <input checked="" type="checkbox"/> 20a <input type="checkbox"/> 18 <input type="checkbox"/> 20b <input type="checkbox"/> 19a <input type="checkbox"/> 20c <input type="checkbox"/> 19b <input type="checkbox"/> 21				

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NAME OF COMMITTEE (In Full)
VICTORY TRUST 2014

Full Name (Last, First, Middle Initial) A. William P. Butler		Date of Disbursement M M / D D / Y Y Y Y 07 / 15 / 2014
Mailing Address P.O. Box 75020		Amount of Each Disbursement this Period 1600.00 Transaction ID : SB20A.4154
City Cincinnati	State OH Zip Code 45275	
Purpose of Disbursement contribution refund	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) B. Jenny Craig		Date of Disbursement M M / D D / Y Y Y Y 07 / 08 / 2014
Mailing Address 11601 Wilshire Boulevard #1840		Amount of Each Disbursement this Period 2600.00 Transaction ID : SB20A.4142
City Los Angeles	State CA Zip Code 90025	
Purpose of Disbursement contribution refund	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. David C. Humphreys		Date of Disbursement M M / D D / Y Y Y Y 08 / 25 / 2014
Mailing Address P.O. Box 4050		Amount of Each Disbursement this Period 5200.00 Transaction ID : SB20A.4196
City Joplin	State MO Zip Code 64803	
Purpose of Disbursement contribution refund	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).....	9400.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 26 OF 26			
	<input type="checkbox"/> 17 <input checked="" type="checkbox"/> 20a <input type="checkbox"/> 18 <input type="checkbox"/> 20b <input type="checkbox"/> 19a <input type="checkbox"/> 20c <input type="checkbox"/> 19b <input type="checkbox"/> 21				

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NAME OF COMMITTEE (In Full)
VICTORY TRUST 2014

Full Name (Last, First, Middle Initial) A. Ethelmae Humphreys		Date of Disbursement MM / DD / YYYY 08 / 25 / 2014
Mailing Address 2505 East 11th Street		Amount of Each Disbursement this Period \$ 3185.00 Transaction ID : SB20A.4193
City Joplin	State MO Zip Code 64801	
Purpose of Disbursement contribution refund	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) B.		Date of Disbursement MM / DD / YYYY
Mailing Address		Amount of Each Disbursement this Period
City	State Zip Code	
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 Zip Code	
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).....	\$ 3185.00
TOTAL This Period (last page this line number only).....	\$ 12585.00