

**FEC
FORM 3X**

**REPORT OF RECEIPTS
AND DISBURSEMENTS**
For Other Than An Authorized Committee

SECRETARY OF THE SENATE

10 JUL 15 PM 3:27

Office Use Only

1. NAME OF COMMITTEE (in full) **USE FEC MAILING LABEL OR TYPE OR PRINT** Example: If typing, type over the lines

FIORINA VICTORY COMMITTEE

ADDRESS (number and street) PO BOX 365

Check if different than previously reported. (ACC)

MCLEAN VA 22101

2. FEC IDENTIFICATION NUMBER CITY STATE ZIP CODE

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 Quarterly Report(YE)
- July 31 Mid-Year Report(Non-election Year Only) (MY)
- Termination Report (TER)

(b) Monthly Report Due On:

- Feb 20 (M2) May 20 (M5) Aug 20 (M8) Nov 20 (M11) (Non-Election Year Only)
- Mar 20 (M3) Jun 20 (M6) Sep 20 (M9) Dec 20 (M12) (Non-Election Year Only)
- Apr 20 (M4) Jul 20 (M7) Oct 20 (M10) Jan 31 (YE)

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

- Primary (12P) General (12G) Runoff (12R)
- Convention (12C) Special (12G)

Election on _____ in the State of _____

(d) 30-Day Post-Election Report for the:

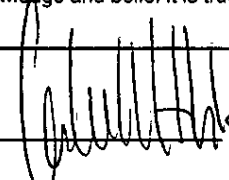
- General (30G) Runoff (30R) Special (30S)

Election on _____ in the State of _____

5. Covering Period 04 01 2010 through 06 30 2010

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 CABELL HOBBS

Signature of Treasurer  Date 07 15 2010

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

10020441411

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

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Write or Type Committee Name
FIORINA VICTORY COMMITTEE

Report Covering the Period: From:

M	M
0	4

D	D
0	1

Y	Y	Y	Y
2	0	1	0

 To:

M	M
0	6

D	D
3	0

Y	Y	Y	Y
2	0	1	0

	COLUMN A This Period	COLUMN B Calendar Year-to-Date										
6. (a) Cash on Hand January 1 <table border="1" style="display: inline-table; vertical-align: middle;"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>1</td><td>0</td></tr></table>	Y	Y	Y	Y	2	0	1	0	<table border="1"><tr><td>0.00</td></tr></table>	0.00	<table border="1"><tr><td>0.00</td></tr></table>	0.00
Y	Y	Y	Y									
2	0	1	0									
0.00												
0.00												
(b) Cash on Hand at Beginning of Reporting Period	<table border="1"><tr><td>23116.20</td></tr></table>	23116.20										
23116.20												
(c) Total Receipts (from Line 19)	<table border="1"><tr><td>17400.00</td></tr></table>	17400.00	<table border="1"><tr><td>134100.00</td></tr></table>	134100.00								
17400.00												
134100.00												
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	<table border="1"><tr><td>40516.20</td></tr></table>	40516.20	<table border="1"><tr><td>134100.00</td></tr></table>	134100.00								
40516.20												
134100.00												
7. Total Disbursements (from Line 31)	<table border="1"><tr><td>11807.84</td></tr></table>	11807.84	<table border="1"><tr><td>105391.64</td></tr></table>	105391.64								
11807.84												
105391.64												
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	<table border="1"><tr><td>28708.36</td></tr></table>	28708.36	<table border="1"><tr><td>28708.36</td></tr></table>	28708.36								
28708.36												
28708.36												
9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D)	<table border="1"><tr><td>0.00</td></tr></table>	0.00										
0.00												
10. Debts and Obligations owed BY the committee (Itemize all on Schedule C and/or Schedule D)	<table border="1"><tr><td>0.00</td></tr></table>	0.00										
0.00												

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

For further information contact:

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

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

10020441412

**DETAILED SUMMARY PAGE
OF RECEIPTS**

FEC Form 3X (Rev. 06/2004)

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Write or Type Committee Name
FIORINA VICTORY COMMITTEE

Report Covering the Period: From:

M	M
0	4

D	D
0	1

Y	Y	W	Y
2	0	1	0

 To:

M	M
0	6

D	D
3	0

Y	Y	Y	Y
2	0	1	0

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)	15000.00	131700.00
(ii) Unitemized	0.00	0.00
(iii) TOTAL (add Lines 11(a)(i) and (ii))	15000.00	131700.00
(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)	15000.00	131700.00
12. Transfers From Affiliated/Other Party Committees	2400.00	2400.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)	0.00	0.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.)	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3)	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfer (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))	17400.00	134100.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	17400.00	134100.00

10020441413

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

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II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Shared 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.....	6807.84	12391.64
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶	6807.84	12391.64
22. Transfers to Affiliated/Other Party Committees.....	5000.00	93000.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditure (use Schedule E).....	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees.....	0.00	0.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))..... ▶	0.00	0.00
29. Other Disbursements.....	0.00	0.00
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared 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))..	11807.84	105391.64
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	11807.84	105391.64

10020441414

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

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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)	15000.00	131700.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	15000.00	131700.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	6807.84	12391.64
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	6807.84	12391.64

FE6AN026

10020441415

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

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

FOR LINE NUMBER: PAGE 6 / 11

(check only one)

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

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)
FIORINA VICTORY COMMITTEE

A.

Full Name (Last, First, Middle Initial)

Gene W. Ray

Mailing Address 16136 El Camino Real

City State Zip Code
Rancho Santa Fe CA 92091

FEC ID number of contributing federal political committee.

C

Name of Employer
GMT Ventures LLC

Occupation
Managing Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt

MM / DD / YYYY
04 / 28 / 2010

Transaction ID: SA11AI.4145

Amount of Each Receipt this Period

5000.00

Contribution

B.

Full Name (Last, First, Middle Initial)

Ann Reed

Mailing Address P.O. Box 7270

City State Zip Code
Rancho Santa Fe CA 92067

FEC ID number of contributing federal political committee.

C

Name of Employer
Information Requested

Occupation
Information Requested

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
10000.00

Date of Receipt

MM / DD / YYYY
05 / 11 / 2010

Transaction ID: SA11AI.4147

Amount of Each Receipt this Period

10000.00

Contribution

SUBTOTAL of Receipts This Page (optional)

15000.00

TOTAL This Period (last page this line number only)

15000.00

10020441416

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

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

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

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NAME OF COMMITTEE (In Full)
FIORINA VICTORY COMMITTEE

A.

Full Name (Last, First, Middle Initial)
CARLY FOR CALIFORNIA, INC

Mailing Address 455 CAPITOL MALL
SUITE 801

City State Zip Code
SACRAMENTO CA 95814

FEC ID number of contributing federal political committee.
C C00469924

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2400.00

Date of Receipt
MM / DD / YYYY
06 / 11 / 2010

Transaction ID: SA12.4149

Amount of Each Receipt this Period
2400.00

Transfer

B.

Full Name (Last, First, Middle Initial)
Lisa Wilcox-Cassidy

Mailing Address PO Box 3535

City State Zip Code
Rancho Sante Fe CA 92062

FEC ID number of contributing federal political committee.
C

Name of Employer Occupation
Retired Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
12400.00

Date of Receipt
MM / DD / YYYY
06 / 11 / 2010

Transaction ID: SA12.4149.0

Amount of Each Receipt this Period
2400.00

Return of Contribution

[MEMO ITEM]

SUBTOTAL of Receipts This Page (optional)	2400.00
TOTAL This Period (last page this line number only)	2400.00

10020441417

**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)

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<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
	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)
FIORINA VICTORY COMMITTEE

<p>A.</p> <p>Full Name (Last, First, Middle Initial) Alan Decker Photography</p> <p>Mailing Address 1142 Archer Street</p> <p>City San Diego State CA Zip Code 92109</p> <p>Purpose of Disbursement Photography Services</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B.4142 Date of Disbursement 06 / 30 / 2010</p> <p>Amount of Each Disbursement this Period 489.38</p> <p>003 Category/ Type</p>	
<p>B.</p> <p>Full Name (Last, First, Middle Initial) American Express</p> <p>Mailing Address P.O. Box 53852</p> <p>City Phoenix State AZ Zip Code 85072</p> <p>Purpose of Disbursement Credit Card Merchant Fee</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B.4136 Date of Disbursement 04 / 05 / 2010</p> <p>Amount of Each Disbursement this Period 292.30</p> <p>001 Category/ Type</p>	
<p>C.</p> <p>Full Name (Last, First, Middle Initial) American Express</p> <p>Mailing Address P.O. Box 53852</p> <p>City Phoenix State AZ Zip Code 85072</p> <p>Purpose of Disbursement Credit Card Merchant Fee</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B.4138 Date of Disbursement 05 / 03 / 2010</p> <p>Amount of Each Disbursement this Period 2359.96</p> <p>001 Category/ Type</p>	
<p>SUBTOTAL of Disbursements This Page (optional) ▶</p>		<p>3141.64</p>
<p>TOTAL This Period (last page this line number only) ▶</p>		<p></p>

10020441418

**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)		PAGE 9 / 11		
	<input checked="" type="checkbox"/> 21b 27	<input type="checkbox"/> 22 28a	<input type="checkbox"/> 23 28b	<input type="checkbox"/> 24 28c	<input type="checkbox"/> 25 29

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NAME OF COMMITTEE (In Full)
FIORINA VICTORY COMMITTEE

A.	Full Name (Last, First, Middle Initial) Compliance Consulting LLC	Transaction ID: SB21B.4141 Date of Disbursement
	Mailing Address P.O. Box 365	<input type="text" value="04"/> ^M / <input type="text" value="29"/> ^D / <input type="text" value="2010"/> ^Y
	City McLean State VA Zip Code 22101	Amount of Each Disbursement this Period
	Purpose of Disbursement Compliance Consulting	<input type="text" value="3000.00"/>
	Candidate Name	<input type="text" value="001"/> Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Elavon	Transaction ID: SB21B.4131 Date of Disbursement
	Mailing Address 1 Concourse Parkway Ste. 300	<input type="text" value="04"/> ^M / <input type="text" value="02"/> ^D / <input type="text" value="2010"/> ^Y
	City Atlanta State GA Zip Code 30328	Amount of Each Disbursement this Period
	Purpose of Disbursement Credit Card Merchant Fee	<input type="text" value="65.60"/>
	Candidate Name	<input type="text" value="001"/> Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Elavon	Transaction ID: SB21B.4135 Date of Disbursement
	Mailing Address 1 Concourse Parkway Ste. 300	<input type="text" value="05"/> ^M / <input type="text" value="03"/> ^D / <input type="text" value="2010"/> ^Y
	City Atlanta State GA Zip Code 30328	Amount of Each Disbursement this Period
	Purpose of Disbursement Credit Card Merchant Fee	<input type="text" value="50.60"/>
	Candidate Name	<input type="text" value="001"/> Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="3116.20"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

10020441419

**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)

PAGE 10 / 11

<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)
FIORINA VICTORY COMMITTEE

A.

Full Name (Last, First, Middle Initial)
Elavon

Transaction ID: SB21B.4134
Date of Disbursement

Mailing Address 1 Concourse Parkway
Ste. 300

/

City Atlanta State GA Zip Code 30328

Amount of Each Disbursement this Period

Purpose of Disbursement
Credit Card Merchant Fee

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

B.

Full Name (Last, First, Middle Initial)
Sheraton San Diego

Transaction ID: SB21B.4139
Date of Disbursement

Mailing Address 1380 Harbor Island Drive

/

City San Diego State CA Zip Code 92101

Amount of Each Disbursement this Period

Purpose of Disbursement
Catering

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)

TOTAL This Period (last page this line number only)

10020441420

**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)

PAGE 11 / 11

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

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NAME OF COMMITTEE (In Full)
FIORINA VICTORY COMMITTEE

Full Name (Last, First, Middle Initial)
NATIONAL REPUBLICAN SENATORIAL COMMITTEE

Transaction ID: SB22.4144
Date of Disbursement

Mailing Address 425 SECOND STREET NE

MM / DD / YYYY
06 / 30 / 2010

City State Zip Code
WASHINGTON DC 20002

Amount of Each Disbursement this Period

5000.00

Purpose of Disbursement
Transfer - Net Joint Fundraising Proceeds

008
Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

SUBTOTAL of Disbursements This Page (optional)

5000.00

TOTAL This Period (last page this line number only)

5000.00

10020441421

NANCY ERICKSON
SECRETARY

DANA K. MCCALLUM
SUPERINTENDENT
HART SENATE OFFICE BUILDING
SUITE 232
WASHINGTON, DC 20510-7116
PHONE: (202) 224-0322

United States Senate

OFFICE OF THE SECRETARY
OFFICE OF PUBLIC RECORDS

THE PRECEDING DOCUMENT WAS:

HAND DELIVERED 07-15-10
Date of Receipt

USPS FIRST CLASS MAIL _____
Postmark

USPS REGISTERED/CERTIFIED _____
Postmark

USPS PRIORITY MAIL _____
Postmark
DELIVERY CONFIRMATION OR SIGNATURE CONFIRMATION LABEL

USPS EXPRESS MAIL _____
Postmark

OVERNIGHT DELIVERY SERVICE:

	SHIPPING DATE	NEXT BUSINESS DAY DELIVERY
FEDERAL EXPRESS	_____	<input type="checkbox"/>
UPS	_____	<input type="checkbox"/>
DHL	_____	<input type="checkbox"/>
AIRBORNE EXPRESS	_____	<input type="checkbox"/>

RECEIVED FROM FEDERAL ELECTION COMMISSION _____
Date of Receipt

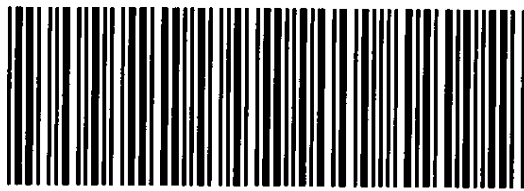
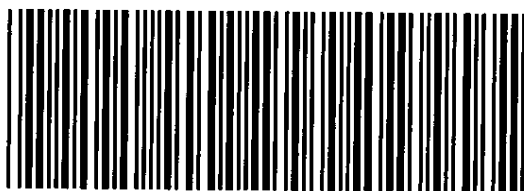
POSTMARK ILLEGIBLE NO POSTMARK

FAX _____
Date of Receipt

OTHER _____
Date of Receipt or Postmark

PREPARER RD DATE PREPARED 07-15-10

10020441422



10020441423