

**FEC
FORM 3**

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

SECRETARY OF THE SENATE
15 JAN 28 PM 12:45
Office Use Only

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

Ohio Pennsylvania Victory Fund

ADDRESS (number and street) 600 Pennsylvania Ave SE, Ste 210

Check if different than previously reported. (ACC)

Washington DC 20003

2. **FEC IDENTIFICATION NUMBER** ▼ C00544296

CITY ▲ Washington STATE ▲ DC ZIP CODE ▲ 20003 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 M / D D D / Y Y Y Y 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 M / D D D / Y Y Y Y Y Y Y Y in the State of

5. Covering Period M M M / D D D / Y Y Y Y Y Y Y Y through M M M / D D D / Y Y Y Y Y Y Y Y

10 / 01 / 2014 through 12 / 31 / 2014

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

Type or Print Name of Treasurer Judith Zamore

Signature of Treasurer *Judith Zamore* Date M M M / D D D / Y Y Y Y Y Y Y Y

01 / 28 / 2015

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

15020041414

SUMMARY PAGE
of Receipts and Disbursements

FEC Form 3 (Revised 02/2003)

Page 2

Write or Type Committee Name

Ohio Pennsylvania Victory Fund

Report Covering the Period: From:

M M M / D D D / Y Y Y Y Y Y
10 / 01 / 2014

To:

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

	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))...	6,000.00	56,500.00
(b) Total Contribution Refunds (from Line 20(d)) ..	0.00	0.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a))...	6,000.00	56,500.00
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17) ..	1,414.91	8,472.88
(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))...	1,414.91	8,472.88
8. Cash on Hand at Close of Reporting Period (from Line 27) ..	1,689.12	
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

15020041415

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3 (Revised 12/2003)

Page 3

Write or Type Committee Name

Ohio Pennsylvania Victory Fund

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)...	2,000.00	28,750.00
(ii) Unitemized.....	0.00	0.00
(iii) TOTAL of contributions from individuals .	2,000.00	28,750.00
(b) Political Party Committees...	0.00	0.00
(c) Other Political Committees (such as PACs)...	4,000.00	27,750.00
(d) The Candidate	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	6,000.00	56,500.00
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)...	6,000.00	56,500.00

15020041416

DETAILED SUMMARY PAGE
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES ..	1,414.91	8,472.88
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES ..	23,100.00	46,338.00
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 ..	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 20(a), (b), and (c)) ..	0.00	0.00
21. OTHER DISBURSEMENTS	0.00	0.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ►	24,514.91	54,810.88

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD ...	20,204.03
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3) ..	6,000.00
25. SUBTOTAL (add Line 23 and Line 24) ..	26,204.03
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22) ...	24,514.91
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25) ..	1,689.12

15020041417

**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 1 OF 1
	<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)
Ohio Pennsylvania Victory Fund

Full Name (Last, First, Middle Initial) A. J. Michael Hogan		Date of Receipt MM / DD / YYYY 12 / 03 / 2014
Mailing Address 4648 24th St N City State Zip Code Arlington, VA 22207		Amount of Each Receipt this Period 2,000.00
FEC ID number of contributing federal political committee. C	Occupation Government Relations	
Name of Employer Ogilvy Government Relations	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2,000.00

Full Name (Last, First, Middle Initial) B.		Date of Receipt MM / DD / YYYY
Mailing Address City State Zip Code		Amount of Each Receipt this Period
FEC ID number of contributing federal political committee. C	Occupation	
Name of Employer	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date

Full Name (Last, First, Middle Initial) C.		Date of Receipt MM / DD / YYYY
Mailing Address City State Zip Code		Amount of Each Receipt this Period
FEC ID number of contributing federal political committee. C	Occupation	
Name of Employer	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date

SUBTOTAL of Receipts This Page (optional).....	2,000.00
TOTAL This Period (last page this line number only).....	2,000.00

15020041418

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:		PAGE 1 OF 1	
	(check only one)			
	<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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NAME OF COMMITTEE (In Full)
Ohio Pennsylvania Victory Fund

Full Name (Last, First, Middle Initial) Blank Rome LLP Federal PAC		Date of Receipt MM / DD / YYYY 10 / 20 / 2014
Mailing Address 600 New Hampshire Ave NW City State Zip Code Washington, DC 20037		Amount of Each Receipt this Period 4,000.00
FEC ID number of contributing federal political committee. C 00150797	Occupation	
Name of Employer	Election Cycle-to-Date 4,000.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		

Full Name (Last, First, Middle Initial) B.		Date of Receipt MM / DD / YYYY
Mailing Address City State Zip Code		Amount of Each Receipt this Period
FEC ID number of contributing federal political committee. C	Occupation	
Name of Employer	Election Cycle-to-Date	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		

Full Name (Last, First, Middle Initial) C.		Date of Receipt MM / DD / YYYY
Mailing Address City State Zip Code		Amount of Each Receipt this Period
FEC ID number of contributing federal political committee. C	Occupation	
Name of Employer	Election Cycle-to-Date	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		

SUBTOTAL of Receipts This Page (optional).....	4,000.00
TOTAL This Period (last page this line number only).....	4,000.00

15020041419

**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)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Ohio Pennsylvania Victory Fund

A. Full Name (Last, First, Middle Initial)
The Kauffman Group

Date of Disbursement
MM / DD / YYYY
12 / 03 / 2014

Mailing Address
328 Massachusetts Ave NE

City State Zip Code
Washington, DC 20002

Purpose of Disbursement
Reimburse Catering

Candidate Name

Category/Type

Office Sought: House Senate President

Disbursement For: Primary General Other (specify)

State: District:

Amount of Each Disbursement this Period
1,408.91

B. Full Name (Last, First, Middle Initial)
Trattoria Alberto

Date of Disbursement
MM / DD / YYYY
12 / 03 / 2014

Mailing Address
506 8th St SE

City State Zip Code
Washington, DC 20003

Purpose of Disbursement
Catering

Candidate Name

Category/Type

Office Sought: House Senate President

Disbursement For: Primary General Other (specify)

State: District:

Amount of Each Disbursement this Period
MEMO 1,408.91

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

Date of Disbursement
MM / DD / YYYY

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Category/Type

Office Sought: House Senate President

Disbursement For: Primary General Other (specify)

State: District:

Amount of Each Disbursement this Period

SUBTOTAL of Disbursements This Page (optional) 1,408.91

TOTAL This Period (last page this line number only) 1,414.91

15020041420

**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 1 OF 1
	<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)
Ohio Pennsylvania Victory Fund

A. Full Name (Last, First, Middle Initial) Bob Casey for Senate		Date of Disbursement MM / DD / YYYY 12 / 17 / 2014
Mailing Address PO Box 58746		Amount of Each Disbursement this Period 6,000.00
City Philadelphia, PA	State PA	
Zip Code 19102		Category/ Type
Purpose of Disbursement Transfer		
Candidate Name Robert Casey Jr		
Office Sought: <input checked="" 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: PA	District:	

B. Full Name (Last, First, Middle Initial) Friends of Sherrod Brown		Date of Disbursement MM / DD / YYYY 12 / 17 / 2014
Mailing Address PO Box 15293		Amount of Each Disbursement this Period 17,100.00
City Washington, DC	State DC	
Zip Code 20003		Category/ Type
Purpose of Disbursement Transfer		
Candidate Name Sherrod Brown		
Office Sought: <input checked="" 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: OH	District:	

C. Full Name (Last, First, Middle Initial)		Date of Disbursement MM / DD / YYYY
Mailing Address		Amount of Each Disbursement this Period
City	State	
Zip Code		Category/ Type
Purpose of Disbursement		
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).....	23,100.00
TOTAL This Period (last page this line number only).....	1,414.91

15020041421

JULIE ADAMS
SECRETARY

DANA K. MACCALLUM
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 1-28-15
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

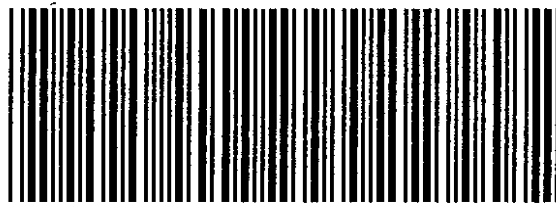
POSTMARK ILLEGIBLE POSTMARK

FAX _____
Date of Receipt

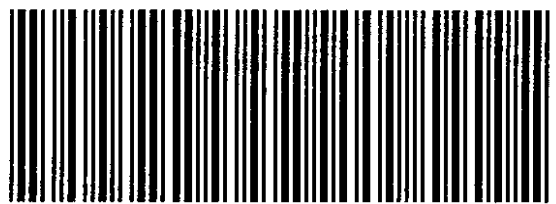
OTHER _____
Date of Receipt or Postmark

PREPARER DH DATE PREPARED 1-28-15

15020041422



SEN PATCH



SEN PATCH

15020041423