PAGE 1/9

FEC FORM 3

REPORT OF RECEIPTS AND DISBURSEMENTS

FORM 3	7 (1	For An A	uthorize	ed Com	nittee			Office Us	se Only	
1. NAME OF COMMITTEE (in		PE OR PRINT	▼		ample: If typinger the lines.	g, type	12FE4M5	5		
MEYERS, VIC	TOR S									
ADDRESS (number ar	ADDRESS (number and street)									
•										
Check if difthan previous reported. (A	usly	TRINIDAD					CO	81082		
2. FEC IDENTIFIC	CATION NUM	IBER ▼		CITY A			STATE A		ZIP CODE A	DISTRICT
C C0054766	51		3. IS RE	THIS PORT	NEW (N)	OR	× AMENE (A)	DED	CO	04
4. TYPE OF RE	•	se One)	(b) 12-	Day PRE -	Election Repo	rt for the:				
					Primary (12P)		General (*	12G)	Runo	ff (12R)
	Quarterly Rep				Convention (12C)	Special (1	2S)		
July 15	Quarterly Rep	ort (Q2)			M M	D D	/ V V V V		in also	_
Octobe	r 15 Quarterly	Report (Q3)	Ele	ection on	,				in the State of	
× January	31 Year-End	Report (YE)	(c) 30-	Day POS	r -Election Rep	ort for the	:			
					General (30G)	Runoff (30	OR)	Speci	ial (30S)
Termina	ition Report (Ti	≣R)	Ele	ection on	M M /	D D	Y Y Y Y		in the State of	
5. Covering Period	M M 07	/ D D /	y y 2013		through	M 12	31	Y Y 20	ү ү 13	
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 James E Duvall										
Signature of Treasurer James E Duvall [Electronically Filed] Date										
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								FF	C FORM	3
Only									vised 02/2003)	

SUMMARY PAGE

FEC Form 3 (Revised 02/2003)

of Receipts and Disbursements

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Write or Type Committee Name

MEYERS,	VICT	OR	S
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2013 12 31 01 2013 Report Covering the Period: From: To: **COLUMN A COLUMN B** This Period **Election Cycle-to-Date** Net Contributions (other than loans) **Total Contributions** (a) 5832.04 5832.04 (other than loans) (from Line 11(e)) (b) Total Contribution Refunds 0.00 0.00 (from Line 20(d)) (c) Net Contributions (other than loans) 5832.04 5832.04 (subtract Line 6(b) from Line 6(a)) Net Operating Expenditures (a) Total Operating Expenditures 4263.43 4263.43 (from Line 17) (b) Total Offsets to Operating 0.00 0.00 Expenditures (from Line 14)..... (c) Net Operating Expenditures 4263.43 4263.43 (subtract Line 7(b) from Line 7(a)) Cash on Hand at Close of 1573.61 Reporting Period (from Line 27)..... Debts and Obligations Owed TO the Committee (Itemize all on 0.00 Schedule C and/or Schedule D) 10. Debts and Obligations Owed BY the Committee (Itemize all on 5.00 Schedule C and/or Schedule D).....

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

PAGE 3/9

FEC Form 3 (Revised 12/2003)

Write or Type Committee Name

MEYERS, VICTOR S

07 12 2013 01 2013 31 Report Covering the Period: From: To: **COLUMN A COLUMN B** I. RECEIPTS **Total This Period Election Cycle-to-Date** 11. CONTRIBUTIONS (other than loans) FROM: Individuals/Persons Other Than Political Committees 0.00 0.00 (i) Itemized (use Schedule A)...... 3832.04 3832.04 (ii) Unitemized..... (iii) TOTAL of contributions 3832.04 3832.04 from individuals 2000.00 2000.00 Political Party Committees..... Other Political Committees 0.00 0.00 (such as PACs)..... 0.00 0.00 The Candidate..... (d) TOTAL CONTRIBUTIONS (other than loans) 5832.04 5832.04 (add Lines 11(a)(iii), (b), (c), and (d)).. 12. TRANSFERS FROM OTHER 0.00 0.00 AUTHORIZED COMMITTEES 13. LOANS: (a) Made or Guaranteed by the 25.00 25.00 Candidate..... 0.00 0.00 (b) All Other Loans..... TOTAL LOANS 25.00 25.00 (add Lines 13(a) and (b))..... 14. OFFSETS TO OPERATING **EXPENDITURES** 0.00 0.00 (Refunds, Rebates, etc.) 15. OTHER RECEIPTS 0.00 0.00 (Dividends, Interest, etc.) 16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) 5857.04 5857.04

(Carry Total to Line 24, page 4).....

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3 (Revised 02/2003)

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	II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17.	OPERATING EXPENDITURES	4263.43	4263.43
18.	TRANSFERS TO OTHER AUTHORIZED COMMITTEES	0.00	0.00
19.	LOAN REPAYMENTS:		
	(a) Of Loans Made or Guaranteed by the Candidate	20.00	20.00
	(b) Of All Other Loans	0.00	0.00
	(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b))	20.00	20.00
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	
22.	TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21)	4283.43	
	III. CASH SU	JMMARY	
23.	CASH ON HAND AT BEGINNING OF REPO	0.00	
24	TOTAL RECEIPTS THIS PERIOD (from Line	5857.04	
25.	SUBTOTAL (add Line 23 and Line 24)	5857.04	
26.	TOTAL DISBURSEMENTS THIS PERIOD (fro	4283.43	
	, -		

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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) MEYERS, VICTOR S Full Name (Last, First, Middle Initial) COLORADO DEMOCRATIC PARTY Date of Receipt Mailing Address 789 SHERMAN STREET, SUITE 110 2013 11 City State Zip Code Transaction ID: SA11B.5504 CO 80203 **DENVER** FEC ID number of contributing Amount of Each Receipt this Period C00161786 federal political committee. 2000.00 Name of Employer Occupation In-kind - Vote Builder Receipt For: 2014 Election Cycle-to-Date Primary General 2000.00 Other (specify) Full Name (Last, First, Middle Initial) Date of Receipt Mailing Address City State Zip Code FEC ID number of contributing C Amount of Each Receipt this Period federal political committee. Name of Employer Occupation

Receipt For: Primary General Other (specify)	Election Cycle-to-Date	
Full Name (Last, First, Middle Initial) Mailing Address		Date of Receipt
City	State Zip Code	M M / D D / Y Y Y Y
FEC ID number of contributing federal political committee.	С	Amount of Each Receipt this Period
Name of Employer	Occupation	L.,,.,,
Receipt For: Primary General Other (specify)	Election Cycle-to-Date	
SURTOTAL of Receipts This Page (optional)		2000.00

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

2000.00

lm	age# 14970083515			
IT	CHEDULE A (FEC Form 3) EMIZED RECEIPTS The property of the pr	tatements m	Use separate schedule(s) for each category of the Detailed Summary Page ay not be sold or used by any p	FOR LINE NUMBER: (check only one) 11a
	for commercial purposes, other than using the			
	NAME OF COMMITTEE (In Full) MEYERS, VICTOR S			
— А.	Full Name (Last, First, Middle Initial) MEYERS, VICTOR S			Date of Receipt
Λ.	Mailing Address 34900 EASTVIEW RD			07 01 2013
	City	State CO	Zip Code	Transaction ID : SA13A.5501
	TRINIDAD FEC ID number of contributing federal political committee.		81082 0547661	Amount of Each Receipt this Period
	Name of Employer	Occupation	1	Open Bank Account Balance
	Receipt For: 2014 Primary General Other (specify)	Election C	ycle-to-Date 25.00	
	Full Name (Last, First, Middle Initial)			Date of Receipt
B.	Mailing Address			M M / D D / Y Y Y Y
	City	State	Zip Code	
	FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Period
	Name of Employer	Occupation	1	
	Receipt For: Primary General Other (specify)	Election C	ycle-to-Date	_
	Full Name (Last, First, Middle Initial)			Date of Receipt
C.	Mailing Address			M M / D D / Y Y Y Y
	City	State	Zin Code	

FEC ID number of contributing

General

federal political committee.

Other (specify)

Name of Employer

Primary

Receipt For:

С

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

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

Occupation

Election Cycle-to-Date

25.00

25.00

Amount of Each Receipt this Period

S

	CHEDULE B (FEC Form 3) EMIZED DISBURSEMENTS	Use separate sc for each categor Detailed Summa	y of the	FOR LINE NUMBER: PAGE 7 OF 9 (check only one) X 17
	ny information copied from such Reports and Statements me for commercial purposes, other than using the name and			person for the purpose of soliciting contributions
	NAME OF COMMITTEE (In Full) MEYERS, VICTOR S			
Α.	Full Name (Last, First, Middle Initial) C & D Printing			Date of Disbursement
	Mailing Address Main st			10 09 2013
	City State Trinidad CO	Zip Code 81082	ı	Amount of Each Disbursement this Period
	Purpose of Disbursement campaign material Candidate Name		006	254.00 Transaction ID : SB17.4261
	VICTOR S MEYERS Office Sought:	General	Category/ Type	
В.	Full Name (Last, First, Middle Initial) COLORADO DEMOCRATIC PARTY Mailing Address 789 SHERMAN STREET, SUITE 110			Date of Disbursement M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City State DENVER CO	Zip Code 80203		Amount of Each Disbursement this Period
	Purpose of Disbursement In-kind - Vote Builder	00200		2000.00 Transaction ID : SB17.5505
		r: 2014	Category/ Type	
	Office Sought: House Disbursement For	General		
_	Full Name (Last, First, Middle Initial)			Date of Disbursement
C.	Mailing Address			M M / D D / Y Y Y
	City State Zi	ip Code		Amount of Each Disbursement this Period
	Purpose of Disbursement Candidate Name		Category/	
	Office Sought: House Senate President Disbursement For Primary Other (s	General	Type	
	State: District:			

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

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

2254.00

2254.00

	CHEDULE B (FEC Form 3) EMIZED DISBURSEMENTS	Use separate sch for each category Detailed Summar	of the	FOR LINE NUMBER: PAGE 8 OF 9 (check only one) 17 18 X 19a 19b 20a 20b 20c 21		
	ly information copied from such Reports and Statements m for commercial purposes, other than using the name and a			person for the purpose of soliciting contributions		
\rangle	NAME OF COMMITTEE (In Full) MEYERS, VICTOR S					
۸.	Full Name (Last, First, Middle Initial) MEYERS, VICTOR S			Date of Disbursement		
	Mailing Address 34900 EASTVIEW RD			12 10 2013		
	City State TRINIDAD CO	Zip Code 81082		Amount of Each Disbursement this Period		
	Purpose of Disbursement Loan Repayment - Opening Balance Candidate Name		009	20.00 Transaction ID : SB19A.5522		
	MEYERS, VICTOR S		Category/ Type			
	Senate Primary President Other (s	General				
	State: CO District: 04 Full Name (Last, First, Middle Initial)			Data of Distance and		
3.				Date of Disbursement		
	Mailing Address					
City State Zip Code			Amount of Each Disbursement this Period			
	Purpose of Disbursement]		
	Candidate Name		Category/ Type			
	Office Sought: House Senate Primary President Disbursement For Primary Other (s	General				
	State: District: Full Name (Last, First, Middle Initial)					
Э.		Date of Disbursement				
Mailing Address				M M / D D / Y Y Y		
City State Zip Code Purpose of Disbursement			Amount of Each Disbursement this Period			
Candidate Name Category/ Type						
	Office Sought: House Senate Primary President State: Disbursement For Primary Other (s	General				
s	UBTOTAL of Disbursements This Page (optional)			20.00		
	TOTAL This Period (last page this line number only)					

SCHEDULE C (FEC Form 3)

Use separate schedule(s) for each category of the

FOR LINE NUMBER:

PAGE

DANS		Detailed Summary Page	
AME OF COMMITTEE (In Full) MEYERS, VICTOR S		Transacti	on ID : SC/10.5501
LOAN SOURCE Full Name (Last, First, Midd MEYERS, VICTOR S Mailing Address	lle Initial)		Election: 2014 Primary General Other (specify) ▼
34900 EASTVIEW RD			
City STRINIDAD	State ZIP Code CO 81082	е	
Original Amount of Loan 25.00	Cumulative Payment To D	Date Balance 20.00	ce Outstanding at Close of This Period 5.00
Date Incurred M 07	12/3	Interest Rate §1/2014 0.00	Secured: % (apr) Secured: Yes No
Full Name (Last, First, Middle Initial)		Name of Employer	
Mailing Address		Occupation	
City State	ZIP Code	Amount Guaranteed Outstanding:	, , , , , , ,
2. Full Name (Last, First, Middle Initial)		Name of Employer	
Mailing Address		Occupation	
City State	ZIP Code	Amount Guaranteed Outstanding:	, ,
3. Full Name (Last, First, Middle Initial)		Name of Employer	
Mailing Address		Occupation	
City State	ZIP Code	Amount Guaranteed Outstanding:	, , , , , , ,
4. Full Name (Last, First, Middle Initial)		Name of Employer	
Mailing Address		Occupation	
City State	ZIP Code	Amount Guaranteed Outstanding:	, , , , , , , , , , , , , , , , , , , ,
SUBTOTALS This Period This Page (optional) FOTALS This Period (last page in this line only)		······································	5.00 5.00