

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name

LCV Victory Fund

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

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2014"/>		418795.56
(b) Cash on Hand at Beginning of Reporting Period.....	637769.12	
(c) Total Receipts (from Line 19)	16574.43	9327482.29
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	654343.55	9746277.85
7. Total Disbursements (from Line 31).....	17408.60	9109342.90
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	636934.95	636934.95
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	

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

For further information contact:

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

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

DETAILED SUMMARY PAGE of Receipts

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

LCV Victory Fund

Report Covering the Period: From: M M / D D / Y Y Y Y 11 / 25 / 2014 To: M M / D D / Y Y Y Y 12 / 31 / 2014

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).....	8914.00	7085995.78
(ii) Unitemized	7568.00	367008.57
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	16482.00	7453004.35
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	1873500.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	16482.00	9326504.35
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
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.).....	92.43	977.94
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))..... ▶	16574.43	9327482.29
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	16574.43	9327482.29

DETAILED SUMMARY PAGE
of Disbursements

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures	16653.92	197084.16
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	16653.92	197084.16
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	1435000.00
24. Independent Expenditures (use Schedule E)	622.68	7475890.79
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	132.00	1110.00
(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)).....	132.00	1110.00
29. Other Disbursements	0.00	257.95
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	17408.60	9109342.90
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	17408.60	9109342.90

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	16482.00	9326504.35
34. Total Contribution Refunds (from Line 28(d))	132.00	1110.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	16350.00	9325394.35
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	16653.92	197084.16
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	16653.92	197084.16

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 OF 27
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

NAME OF COMMITTEE (In Full)
LCV Victory Fund

A. Mr. Christopher Ahrens
Full Name (Last, First, Middle Initial)

Mailing Address 3715 W 65th St

City Mission Hills State KS Zip Code 66208-1737

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

Name of Employer Gilmore & Bell, P.C. Occupation Attorney

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **475.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
11 / 26 / 2014

Transaction ID : A3F006FCCEF9A4BDEA31

Amount of Each Receipt this Period
25.00

B. Mr. Christopher Ahrens
Full Name (Last, First, Middle Initial)

Mailing Address 3715 W 65th St

City Mission Hills State KS Zip Code 66208-1737

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

Name of Employer Gilmore & Bell, P.C. Occupation Attorney

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **500.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
12 / 25 / 2014

Transaction ID : AF8C6A5552B4B4EE3A28

Amount of Each Receipt this Period
25.00

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

Mailing Address 2425 Ellentown Rd

City La Jolla State CA Zip Code 92037-1108

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

Name of Employer Retired Occupation Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1500.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
12 / 12 / 2014

Transaction ID : AF242C91E075646599B5

Amount of Each Receipt this Period
1500.00

SUBTOTAL of Receipts This Page (optional).....▶	1550.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 27
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
LCV Victory Fund

Full Name (Last, First, Middle Initial)
A. John Arnsparger

Mailing Address 2606 Coastal Oak Dr

City Houston State TX Zip Code 77059-6448

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

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 420.00

Date of Receipt 12 / 06 / 2014

Transaction ID : **A8064FEF47FEA4E97A96**

Amount of Each Receipt this Period 35.00

Full Name (Last, First, Middle Initial)
B. Mary BARRETT

Mailing Address 10 Crestmont Rd Apt 4m

City Montclair State NJ Zip Code 07042-1933

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

Name of Employer Self Occupation Psychotherapist

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt 12 / 23 / 2014

Transaction ID : **A0F62CD61F7124D04901**

Amount of Each Receipt this Period 25.00

Full Name (Last, First, Middle Initial)
C. Mr. George Bentley

Mailing Address 1198 Churchill St

City Saint Paul State MN Zip Code 55103-1011

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

Name of Employer Northern Ingredients Occupation office

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 226.00

Date of Receipt 11 / 30 / 2014

Transaction ID : **AB40376F1DF0A4C28955**

Amount of Each Receipt this Period 20.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 80.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 OF 27
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
LCV Victory Fund

Full Name (Last, First, Middle Initial)
A. Mr. George Bentley

Mailing Address 1198 Churchill St

City Saint Paul State MN Zip Code 55103-1011

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

Name of Employer Northern Ingredients Occupation office

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **246.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 31 / 2014

Transaction ID : A2DF6C2899FD7453E91A

Amount of Each Receipt this Period
20.00

Full Name (Last, First, Middle Initial)
B. Dr. Edith F. Borie

Mailing Address Friedrich-Naumann Str. 109

City New Paltz State NY Zip Code 12561-0000

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

Name of Employer Retired Occupation Physicist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1800.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 01 / 2014

Transaction ID : A3C4773CBECB144CFBBC

Amount of Each Receipt this Period
150.00

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

Mailing Address 2277 Osborne Rd

City Chittenango State NY Zip Code 13037-8791

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

Name of Employer Credit Suisse Occupation Trader

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **225.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 02 / 2014

Transaction ID : A6831547033A44C8A845

Amount of Each Receipt this Period
25.00

SUBTOTAL of Receipts This Page (optional).....▶	195.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 9 OF 27
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
LCV Victory Fund

A. Warren Carlson
Full Name (Last, First, Middle Initial)
Mailing Address 827 Pear Ct NE
City Olympia State WA Zip Code 98506-1239
FEC ID number of contributing federal political committee. **C**
Name of Employer Retired Occupation Retired
Receipt For: Primary General Other (specify) Aggregate Year-to-Date **255.00**

Date of Receipt
12 / 23 / 2014
Transaction ID : ADF9C839AA83A46E0A91
Amount of Each Receipt this Period
200.00

B. Sarah Faulkner
Full Name (Last, First, Middle Initial)
Mailing Address 108 Sumach St
City Lookout Mountain State TN Zip Code 37350-1132
FEC ID number of contributing federal political committee. **C**
Name of Employer None Occupation Homemaker
Receipt For: Primary General Other (specify) Aggregate Year-to-Date **1200.00**

Date of Receipt
12 / 17 / 2014
Transaction ID : AD1C8D14AEFBE451DA21
Amount of Each Receipt this Period
100.00

C. Tessa Flores
Full Name (Last, First, Middle Initial)
Mailing Address 154 Compton Rd
City Ithaca State NY Zip Code 14850-9455
FEC ID number of contributing federal political committee. **C**
Name of Employer Retired Occupation Retired
Receipt For: Primary General Other (specify) Aggregate Year-to-Date **1800.00**

Date of Receipt
12 / 02 / 2014
Transaction ID : A703F6E2BFFAF4C33B01
Amount of Each Receipt this Period
25.00

SUBTOTAL of Receipts This Page (optional)..... **145.00**
TOTAL This Period (last page this line number only).....

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 OF 27
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
LCV Victory Fund

A. Jeff Gerecke
 Full Name (Last, First, Middle Initial)
 Mailing Address 241 W 259th St
 City Bronx State NY Zip Code 10471-1922
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Self Occupation literary agent
 Receipt For: Primary General Other (specify)

Date of Receipt
 11 / 30 / 2014
Transaction ID : A417AE4415BC846A7B97
 Amount of Each Receipt this Period
 200.00
 Aggregate Year-to-Date
 240.00

B. Jeff Gerecke
 Full Name (Last, First, Middle Initial)
 Mailing Address 241 W 259th St
 City Bronx State NY Zip Code 10471-1922
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Self Occupation literary agent
 Receipt For: Primary General Other (specify)

Date of Receipt
 12 / 31 / 2014
Transaction ID : A72B2260E139B444E8E0
 Amount of Each Receipt this Period
 200.00
 Aggregate Year-to-Date
 260.00

C. Daniel Harris
 Full Name (Last, First, Middle Initial)
 Mailing Address 2838 Meadowwood Dr
 City Toledo State OH Zip Code 43606-3067
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Self Occupation Musician
 Receipt For: Primary General Other (specify)

Date of Receipt
 12 / 03 / 2014
Transaction ID : ABEA0922A75494740B06
 Amount of Each Receipt this Period
 50.00
 Aggregate Year-to-Date
 600.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 90.00
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 OF 27
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
LCV Victory Fund

Full Name (Last, First, Middle Initial)
A. Deborah Harry

Mailing Address 405 W 23rd St Apt 7B

City	State	Zip Code
New York	NY	10011-1460

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

Name of Employer	Occupation
Self-Employed	Singer

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **600.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
12 / 23 / 2014

Transaction ID : AA2C3C35C793442E786A

Amount of Each Receipt this Period
50.00

Full Name (Last, First, Middle Initial)
B. Amanita Hart

Mailing Address 3135 Tarpon Dr

City	State	Zip Code
Las Vegas	NV	89120-1199

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

Name of Employer	Occupation
Professional Massage Inc.	Massage Therapist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **240.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
12 / 01 / 2014

Transaction ID : A9306F76941074F9DB2C

Amount of Each Receipt this Period
20.00

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

Mailing Address PO Box 21

City	State	Zip Code
The Plains	VA	20198-0021

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

Name of Employer	Occupation
Georgia H. Herbert, PC	lawyer

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1100.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
11 / 28 / 2014

Transaction ID : AFC5C1F4A2CE5410A8E0

Amount of Each Receipt this Period
100.00

SUBTOTAL of Receipts This Page (optional).....▶	170.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 OF 27
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
LCV Victory Fund

Full Name (Last, First, Middle Initial)
A. Georgia Herbert

Mailing Address **PO Box 21**

City **The Plains** State **VA** Zip Code **20198-0021**

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

Name of Employer **Georgia H. Herbert, PC** Occupation **lawyer**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1200.00**

Date of Receipt
12 / 28 / 2014

Transaction ID : A324E962E2A3343DDB7C

Amount of Each Receipt this Period
100.00

Full Name (Last, First, Middle Initial)
B. Elizabeth Holsten

Mailing Address **912 Coker Dr**

City **Chapel Hill** State **NC** Zip Code **27517-4406**

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

Name of Employer **Retired Unc-ch** Occupation **retired archivist**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **290.00**

Date of Receipt
12 / 02 / 2014

Transaction ID : ABF8737F2C74C4D5FA76

Amount of Each Receipt this Period
25.00

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

Mailing Address **27101 W Chicago**

City **Redford** State **MI** Zip Code **48239-2332**

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

Name of Employer **Self** Occupation **Priest**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **240.00**

Date of Receipt
12 / 03 / 2014

Transaction ID : A34940C113DCD4A268EF

Amount of Each Receipt this Period
20.00

SUBTOTAL of Receipts This Page (optional)..... ▶ **145.00**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 OF 27
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
LCV Victory Fund

A. Kathryn Mueller
Full Name (Last, First, Middle Initial)
Mailing Address 317 Travis Ln
City State Zip Code
Hewitt TX 76643-3102
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
Baylor University College Professor
Receipt For:
 Primary General
 Other (specify) ▼
Aggregate Year-to-Date ▼
275.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
11 / 28 / 2014
Transaction ID : A9D4D4745137E4A73BE2
Amount of Each Receipt this Period
25.00

B. Kathryn Mueller
Full Name (Last, First, Middle Initial)
Mailing Address 317 Travis Ln
City State Zip Code
Hewitt TX 76643-3102
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
Baylor University College Professor
Receipt For:
 Primary General
 Other (specify) ▼
Aggregate Year-to-Date ▼
300.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
12 / 28 / 2014
Transaction ID : A6FEB3E59976E491EB96
Amount of Each Receipt this Period
25.00

C. benjamin oko
Full Name (Last, First, Middle Initial)
Mailing Address 11 Barlow Mountain Rd
City State Zip Code
Ridgefield CT 06877-2416
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 ▼
600.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
12 / 21 / 2014
Transaction ID : AC99A7E7700064C63B25
Amount of Each Receipt this Period
50.00

SUBTOTAL of Receipts This Page (optional).....▶	100.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 14 OF 27
	<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	

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NAME OF COMMITTEE (In Full)
LCV Victory Fund

A. Gilman Ordway
Full Name (Last, First, Middle Initial)
Mailing Address PO Box 40

City Wilson	State WY	Zip Code 83014-0040
----------------	-------------	------------------------

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

Name of Employer Retired	Occupation Retired
-----------------------------	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	30	/	2014

Transaction ID : A0ECD281E6F374413826

Amount of Each Receipt this Period
5000.00

B. Heather Phillips
Full Name (Last, First, Middle Initial)
Mailing Address 1465 N Davis Rd

City Bolton	State MS	Zip Code 39041-9591
----------------	-------------	------------------------

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

Name of Employer American School of Kuwait	Occupation Teacher
---	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
276.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	21	/	2014

Transaction ID : A91F20D38FEF84BD4A7A

Amount of Each Receipt this Period
12.00

C. Heather Phillips
Full Name (Last, First, Middle Initial)
Mailing Address 1465 N Davis Rd

City Bolton	State MS	Zip Code 39041-9591
----------------	-------------	------------------------

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

Name of Employer American School of Kuwait	Occupation Teacher
---	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
288.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	24	/	2014

Transaction ID : A85C7793E7B2641B48B6

Amount of Each Receipt this Period
12.00

SUBTOTAL of Receipts This Page (optional).....▶	5024.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 15 OF 27
	<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	

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NAME OF COMMITTEE (In Full)
LCV Victory Fund

A. Barbara Pyle
Full Name (Last, First, Middle Initial)

Mailing Address 4221 Brookview Dr SE

City Atlanta	State GA	Zip Code 30339-4606
-----------------	-------------	------------------------

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

Name of Employer Retired	Occupation film maker
-----------------------------	--------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **750.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
11 / 26 / 2014

Transaction ID : A62C12550190E4BC0A5E

Amount of Each Receipt this Period
125.00

B. Barbara Pyle
Full Name (Last, First, Middle Initial)

Mailing Address 4221 Brookview Dr SE

City Atlanta	State GA	Zip Code 30339-4606
-----------------	-------------	------------------------

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

Name of Employer Retired	Occupation film maker
-----------------------------	--------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **875.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
12 / 26 / 2014

Transaction ID : A5B0A819B86764EB591E

Amount of Each Receipt this Period
125.00

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

Mailing Address 862 Jonive Rd

City Sebastopol	State CA	Zip Code 95472-9567
--------------------	-------------	------------------------

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

Name of Employer Retired	Occupation Retired
-----------------------------	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **600.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
11 / 28 / 2014

Transaction ID : A8CA692095A994844806

Amount of Each Receipt this Period
200.00

SUBTOTAL of Receipts This Page (optional).....▶	450.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 16 OF 27
	<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	

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NAME OF COMMITTEE (In Full)
LCV Victory Fund

Full Name (Last, First, Middle Initial)
A. Janet Randall

Mailing Address 862 Jonive Rd

City Sebastopol State CA Zip Code 95472-9567

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

Name of Employer Retired Occupation Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **800.00**

Date of Receipt
12 / 28 / 2014

Transaction ID : A8B0DFA88D1CC4CBE85E

Amount of Each Receipt this Period
200.00

Full Name (Last, First, Middle Initial)
B. Deirdre Sheerr-Gross

Mailing Address 1452 Little Sunapee Rd

City New London State NH Zip Code 03257-5319

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

Name of Employer Sheerr & White Res. Architecture Occupation Architect

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1250.00**

Date of Receipt
11 / 27 / 2014

Transaction ID : AFBDE065AFF24FAEB62

Amount of Each Receipt this Period
25.00

Full Name (Last, First, Middle Initial)
C. Deirdre Sheerr-Gross

Mailing Address 1452 Little Sunapee Rd

City New London State NH Zip Code 03257-5319

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

Name of Employer Sheerr & White Res. Architecture Occupation Architect

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1275.00**

Date of Receipt
12 / 27 / 2014

Transaction ID : A9B987A8486AB4814B20

Amount of Each Receipt this Period
25.00

SUBTOTAL of Receipts This Page (optional).....▶	250.00
TOTAL This Period (last page this line number only).....▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 17 OF 27
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
LCV Victory Fund

Full Name (Last, First, Middle Initial)
A. Kathlin Sickel

Mailing Address 122 W Mission Rd

City State Zip Code
Green Bay WI 54301-1930

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

Name of Employer Occupation
Self Freelance Writer

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
204.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
12 / 28 / 2014
Transaction ID : AECF942743121411AAB4

Amount of Each Receipt this Period
200.00

Full Name (Last, First, Middle Initial)
B. Robert Thomas

Mailing Address 230 Lynx Ct

City State Zip Code
Fremont CA 94539-6051

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

Name of Employer Occupation
Retired Engineer

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1300.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
11 / 27 / 2014
Transaction ID : A93952C1F89514F2B89F

Amount of Each Receipt this Period
50.00

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

Mailing Address 230 Lynx Ct

City State Zip Code
Fremont CA 94539-6051

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

Name of Employer Occupation
Retired Engineer

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1350.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
12 / 27 / 2014
Transaction ID : A626E20D7955F4291913

Amount of Each Receipt this Period
50.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 120.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 18 OF 27
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
LCV Victory Fund

A. Charles Turk
 Full Name (Last, First, Middle Initial)
 Mailing Address 100 Broadway Ave
 City Wilmette State IL Zip Code 60091-3463
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Self Occupation Psychiatrist
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **600.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 22 / 2014
Transaction ID : AAEEFDC10F6D541D58A8
 Amount of Each Receipt this Period
50.00

B. Leni Windle
 Full Name (Last, First, Middle Initial)
 Mailing Address 210 W Hortter St
 City Philadelphia State PA Zip Code 19119-3101
 FEC ID number of contributing federal political committee. **C**
 Name of Employer School District Cheltenham Township Occupation High School Guidance Counselor
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **235.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 22 / 2014
Transaction ID : A1DB7431150C0402EB10
 Amount of Each Receipt this Period
15.00

C. Leni Windle
 Full Name (Last, First, Middle Initial)
 Mailing Address 210 W Hortter St
 City Philadelphia State PA Zip Code 19119-3101
 FEC ID number of contributing federal political committee. **C**
 Name of Employer School District Cheltenham Township Occupation High School Guidance Counselor
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **240.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 23 / 2014
Transaction ID : A338668B12AF14AEE8DA
 Amount of Each Receipt this Period
5.00

SUBTOTAL of Receipts This Page (optional)..... **70.00**
TOTAL This Period (last page this line number only).....

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 19 OF 27
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
LCV Victory Fund

Full Name (Last, First, Middle Initial) A. Ann Wyckoff		Date of Receipt 12 / 16 / 2014 Transaction ID : AF4E3012F4D224BDFB8A
Mailing Address 49 NW Cherry Loop		Amount of Each Receipt this Period 500.00
City Shoreline	State WA	Zip Code 98177-8011
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer Self-Employed	Occupation Civic Volunteer	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

Full Name (Last, First, Middle Initial) B. Bonnie Yelverton		Date of Receipt 12 / 02 / 2014 Transaction ID : A4A03DD0EFED8443C927
Mailing Address 7234 Annapolis Way		Amount of Each Receipt this Period 25.00
City Fontana	State CA	Zip Code 92336-0856
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 25.00
Name of Employer None	Occupation science and math teacher	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

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

SUBTOTAL of Receipts This Page (optional).....▶	525.00
TOTAL This Period (last page this line number only).....▶	8914.00

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 20 OF 27
<input 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 checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
LCV Victory Fund

A. Suntrust Bank
Full Name (Last, First, Middle Initial)
Mailing Address PO Box 622227

City Orlando	State FL	Zip Code 32862-2227
-----------------	-------------	------------------------

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

Name of Employer _____ Occupation _____

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **923.27**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	28	/	2014

Transaction ID : A3BBF079F9039474DB5B

Amount of Each Receipt this Period
37.76

Interest

B. Suntrust Bank
Full Name (Last, First, Middle Initial)
Mailing Address PO Box 622227

City Orlando	State FL	Zip Code 32862-2227
-----------------	-------------	------------------------

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

Name of Employer _____ Occupation _____

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **977.94**

Date of Receipt

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

Transaction ID : ACC0A89EF6E8A4B05A15

Amount of Each Receipt this Period
54.67

Interest

C.
Full Name (Last, First, Middle Initial)
Mailing Address _____

City	State	Zip Code
------	-------	----------

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

Name of Employer _____ Occupation _____

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
-------	---	-------	---	-------------

Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional).....▶	92.43
TOTAL This Period (last page this line number only).....▶	92.43

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
LCV Victory Fund

Full Name (Last, First, Middle Initial)

A. League of Conservation Voters, Inc.

Mailing Address 1920 L St NW
Ste 800

City Washington State DC Zip Code 20036-5045

Purpose of Disbursement
Admin and Compliance Support

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
12 / 17 / 2014

Transaction ID : **B5067B7926BBA4656ADC**

Amount of Each Disbursement this Period

1444.92

Full Name (Last, First, Middle Initial)

B. Chapman Cubine Adams + Hussey

Mailing Address 1600 Wilson Blvd
Ste 300

City Arlington State VA Zip Code 22209-2505

Purpose of Disbursement
Art, Copy and Production Fees for Appeal

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
12 / 08 / 2014

Transaction ID : **BB6862F6FADD44EE6B1A**

Amount of Each Disbursement this Period

2765.04

Full Name (Last, First, Middle Initial)

C. Linemark Printing, Inc.

Mailing Address 501 Prince Georges Blvd

City Upper Marlboro State MD Zip Code 20774-7415

Purpose of Disbursement
Printing for Fundraising Appeal

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
11 / 25 / 2014

Transaction ID : **B940D4125C6F44148BFB**

Amount of Each Disbursement this Period

640.00

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

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

4849.96

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
LCV Victory Fund

Full Name (Last, First, Middle Initial)

A. ProList

Mailing Address 8341 Beechcraft Ave

City Gaithersburg State MD Zip Code 20879-1509

Purpose of Disbursement
Printing for Fundraising Appeal

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	1		2	5		2	0	1	4

Transaction ID : B13890C1181E64C0A89D

Amount of Each Disbursement this Period

1	7	4	9	.	2	3
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Full Name (Last, First, Middle Initial)

B. Suntrust Bank

Mailing Address PO Box 622227

City Orlando State FL Zip Code 32862-2227

Purpose of Disbursement
Bank Fees

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	2		2	0		2	0	1	4

Transaction ID : BF177D33DB5AA405797D

Amount of Each Disbursement this Period

8	4	0	0	.	1	7
---	---	---	---	---	---	---

Full Name (Last, First, Middle Initial)

C. Suntrust Bank

Mailing Address PO Box 622227

City Orlando State FL Zip Code 32862-2227

Purpose of Disbursement
Bank Fees

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	2		2	0		2	0	1	4

Transaction ID : B56E6B5373A4C47498A2

Amount of Each Disbursement this Period

1	5	5	2	.	1	4
---	---	---	---	---	---	---

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

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

1	1	7	0	.	1	5
---	---	---	---	---	---	---

1	1	7	0	.	1	5
---	---	---	---	---	---	---

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
LCV Victory Fund

Full Name (Last, First, Middle Initial)

A. Woodsboro Bank

Mailing Address 5 N Main St

City Woodsboro State MD Zip Code 21798-8816

Purpose of Disbursement
Bank Fee

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y
11 / 28 / 2014

Transaction ID : B2526E0113EA546BE817

Amount of Each Disbursement this Period

52.94

Full Name (Last, First, Middle Initial)

B. Woodsboro Bank

Mailing Address 5 N Main St

City Woodsboro State MD Zip Code 21798-8816

Purpose of Disbursement
Bank Fee

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

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

Transaction ID : B3C08E475DE01485FB29

Amount of Each Disbursement this Period

49.48

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y

Amount of Each Disbursement this Period

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

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

102.42

16653.92

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

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

FOR LINE NUMBER:
(check only one)

<input 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 checked="" 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)
LCV Victory Fund

Full Name (Last, First, Middle Initial)

A. john Byrne

Mailing Address 11 Langside Road

City Biddeford State ME Zip Code 04007

Purpose of Disbursement
Refund of Contribution Made

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : B3411E5DF348146A4BE3

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

B. Sheila Crosby

Mailing Address 38712 Brea Baja
C/ San Jose 304-B

City Santa Cruz de Tenerife, Spain State ZZ Zip Code 00000

Purpose of Disbursement
Refund of Contribution Made

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : B6E42496D966443C8BAE

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

C. Sheila Crosby

Mailing Address 38712 Brea Baja
C/ San Jose 304-B

City Santa Cruz de Tenerife, Spain State ZZ Zip Code 00000

Purpose of Disbursement
Refund of Contribution Made

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : B078B241C3EF945968DE

Amount of Each Disbursement this Period

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

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

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

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

FOR LINE NUMBER:
(check only one)

<input 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 checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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

NAME OF COMMITTEE (In Full)
LCV Victory Fund

Full Name (Last, First, Middle Initial)

A. Roger Hoverman

Mailing Address 686 W Aspen Dr

City Kanab State UT Zip Code 84741-6198

Purpose of Disbursement
Refund of Contribution Made

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y
12 / 08 / 2014

Transaction ID : BE73BD0DC24724E8ABFD

Amount of Each Disbursement this Period

50.00

Full Name (Last, First, Middle Initial)

B. Marti Paskal

Mailing Address PO Box 1487

City Hanalei State HI Zip Code 96714-1487

Purpose of Disbursement
Refund of Contribution Made

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y
12 / 23 / 2014

Transaction ID : BB11EB40F879D41908AC

Amount of Each Disbursement this Period

50.00

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y

Amount of Each Disbursement this Period

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

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

100.00

132.00

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 26 OF 27
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)
LCV Victory Fund

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor League of Conservation Voters, Inc.	Nature of Debt (Purpose): Additional Staff Housing, 11/2-11/4 (Previously reported as \$420 on 11/3/14 24 hour report)
Mailing Address 1920 L St NW Ste 800	
City State Zip Code Washington DC 20036-5045	

Outstanding Balance Beginning This Period <input type="text" value="464.64"/>	Transaction ID : DE4D4604A58C44C66B8B	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="464.64"/>	Outstanding Balance at Close of This Period <input type="text" value="0.00"/>

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor League of Conservation Voters, Inc.	Nature of Debt (Purpose): Additional Staff Travel Costs, 11/2-11/4 (Previously reported as \$500 on 11/3/14 24 hour report)
Mailing Address 1920 L St NW Ste 800	
City State Zip Code Washington DC 20036-5045	

Outstanding Balance Beginning This Period <input type="text" value="158.04"/>	Transaction ID : D221D13916F85487199C	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="158.04"/>	Outstanding Balance at Close of This Period <input type="text" value="0.00"/>

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor	Nature of Debt (Purpose):
Mailing Address	
City State Zip Code	

Outstanding Balance Beginning This Period <input type="text"/>		
Amount Incurred This Period <input type="text"/>	Payment This Period <input type="text"/>	Outstanding Balance at Close of This Period <input type="text"/>

1) SUBTOTALS This Period This Page (optional)..... ▶	<input type="text" value="0.00"/>
2) TOTALS This Period (last page this line number only)..... ▶	<input type="text" value="0.00"/>
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) ▶	<input type="text"/>
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	<input type="text"/>

