Image# 13941734547 PAGE 1 / 7

## FEC FORM 3X

# REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

								Office Use C	nly	
1.	NAME OF COMMITTEE (in 1		E OR PRINT		ample: If typir er the lines.	ng, type	12FE4M5			
M	1ASSACHUSE	TTS VICT	ORY CO	MMITTEE	1 1 1 1	1 1 1 1	1 1 1 1		1 1 1 1	<sub>1</sub>
ADI	DRESS (number and	street)	10 FIRST STF	REET, SE						
r	Check if diffe									
h	than previous reported. (AC		WASHINGTON	<b>\</b> 			DC	20003		
2.	FEC IDENTIFICA	ATION NUMB	ER ▼	CITY 🛦		S	STATE 🛦	ZIF	CODE A	
	C C00549782			3. IS THIS REPORT	\ \ \	NEW OR	AM (A	MENDED )		
4.	TYPE OF REP (Choose One)	ORT	(b) Monthly Report	Feb 20 (M2	1 [] (	May 20 (M5)	Aug	20 (M8)	Nov 20 ( (Non-Electic Year Only)	( <b>M11</b> )
	(a) Quarterly Rep	orts:	Due On:	Mar 20 (M3	)	Jun 20 (M6)	Sep	20 (M9)	Dec 20 ( (Non-Election Year Only)	(M12) on
	April 15	April 15		Apr 20 (M4)		Jul 20 (M7)	Oct	20 (M10)	Jan 31 (	YE)
		Report (Q1)	(c) 12-D	ay	Primary (12P	)	General	(12G)	Runoff (1	2R)
	July 15 Quarterly	Report (Q2)		-Election ort for the:	Convention (		Special	_		
	X October Quarterly	15 Report (Q3)	Порс	of the the.	Convention (	120)	Орсска	(120)		
	January 3			Election on	M = M /	D   D /	Y		the ate of	
	July 31 N	/lid-Year lon-election		T-Election	General (300	à)	Runoff (	30R)	Special (	30S)
	Termination (TER)	on Report	Неро	ort for the:	M = M /	D   D /	Y Y Y	in	the	-
	(ILII)			Election on					ate of	
5.	Covering Period	м = м 07	01	2013	through	09	30	2013	Y	
l ce	ertify that I have ex	amined this R	eport and to	the best of my kno	owledge and b	pelief it is true	e, correct an	d complete.		_
	e or Print Name of			-						
							M = 1	/ D D	/ <b>Y                                   </b>	Υ
Sig	nature of Treasurer	BRADLEY	T. CRATE		[Electronically	Filed] Da	ate 10	07	2013	
NO <sup>.</sup>	TE: Submission of fa	alse, erroneous	, or incomplet	te information may s	ubject the pers	son signing thi	is Report to t	he penalties o	of 2 U.S.C. §43	37g.
	Office							FEC F	ORM 3X	
	Use Only								12/2004	

#### **SUMMARY PAGE** OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003) Page 2

Write or Type Committee Name

		COLUMN A This Period	COLUMN B Calendar Year-to-Date
i.	(a) Cash on Hand  January 1,  2013		0.00
	(b) Cash on Hand at Beginning of Reporting Period	0.00	
	(c) Total Receipts (from Line 19)	50000.00	50000.00
	(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	50000.00	50000.00
	Total Disbursements (from Line 31)	28855.00	28855.00
-	Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	21145.00	21145.00
	Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
0.	Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	

#### For further information contact:

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

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

#### **DETAILED SUMMARY PAGE**

of Receipts

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name

### MASSACHUSETTS VICTORY COMMITTEE

ributions (other than loans) From: ndividuals/Persons Other Than Political Committees (i) Itemized (use Schedule A)			
Than Political Committees			
i) Itemized (use Schedule A)			
i) Rollized (use Schedule A)	7	50000.00	50000.00
(ii) Unitemized	7	0.00	0.00
Lines 11(a)(i) and (ii)		50000.00	50000.00
Political Party Committees		0.00	0.00
Other Political Committees		0.00	0.00
	7	7	0.00
		50000.00	50000.00
	7	7	
Committees		0.00	0.00
pans Received	7	0.00	0.00
Renayments Received		0.00	0.00
	7	7	0.00
·		0.00	0.00
	7	7	0.00
		0.00	0.00
	7	0.00	0.00
·		0.00	0.00
· · · · · · · · · · · · · · · · · · ·		0.00	0.00
		0.00	0.00
from Schedule H3)	7	0.00	0.00
ania Francia (franc Calcadala 115)		0.00	0.00
evin Funds (from Schedule H5)	7	0.00	0.00
otal Transfers (add 18(a) and 18(b))		0.00	0.00
	Political Party Committees Other Political Committees Such as PACs)	Depolitical Party Committees	iii) TOTAL (add Lines 11(a)(i) and (ii)

#### **DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
. Operating Expenditures: —— (a) Allocated Federal/Non-Federal		Calchaa Tear-to-Date
Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share	0.00	0.00
(b) Other Federal Operating		
Expenditures	15.00	15.00
(c) Total Operating Expenditures		
(add 21(a)(i), (a)(ii), and (b))▶	15.00	15.00
Transfers to Affiliated/Other Party	28840.00	28840.00
Contributions to	28040.00	20040.00
Federal Candidates/Committees and Other Political Committees	0.00	0.00
Independent Expenditures		
(use Schedule E)	0.00	0.00
Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F)	0.00	
(use Schedule F)	0.00	0.00
Loan Repayments Made	0.00	0.00
Loan richaymento Made		
Loans Made	0.00	0.00
Refunds of Contributions To: (a) Individuals/Persons Other		
Than Political Committees	0.00	0.00
(h) Political Porty Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(such as PACs)	0.00	0.00
_		
(d) Total Contribution Refunds	0.00	0.00
(add Lines 28(a), (b), and (c))▶	0.00	0.00
Other Disbursements	0.00	0.00
Cutor Biobardemente	0.00	
Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity		
(from Schedule H6)	0.00	0.00
(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
Total Disbursements (add Lines 21(c), 22,		
23, 24, 25, 26, 27, 28(d), 29 and 30(c))	28855.00	28855.00
25, 2., 26, 25, 27, 25(d), 26 and 55(0))	20000.00	20033.00
Total Federal Disbursements		
(subtract Line 21(a)(ii) and Line 30(a)(ii)		
from Line 31)	28855.00	28855.00

#### **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		
3. Total Contributions (other than loans) (from Line 11(d), page 3)	50000.00	50000.00		
4. Total Contribution Refunds (from Line 28(d))	0.00	0.00		
5. Net Contributions (other than loans) (subtract Line 34 from Line 33)	50000.00	50000.00		
6. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))▶	15.00	15.00		
7. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00		
8. Net Operating Expenditures (subtract Line 37 from Line 36)	15.00	15.00		

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

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

FOR LINE NUMBER:				PAGE	6	OF	7	
(check only one)								
X	11a		11b		11c	12	2	
	13		14		15	16	6	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.

ΟI	tor commercial purposes, other than using the	name and address of any political committee to	SOUCH COMMUNISTROM SUCH COMMUNICE.
$\rangle$	NAME OF COMMITTEE (In Full) MASSACHUSETTS VICTORY (	COMMITTEE	
λ.	Full Name (Last, First, Middle Initial) MR. JOEL CUTLER  Mailing Address 220 BOYLSTON STREET  APARTMENT 1418  City BOSTON  FEC ID number of contributing federal political committee.  Name of Employer  GENERAL CATALYST  Receipt For:  Primary General Other (specify)	State Zip Code MA 02116  C  Occupation MANAGING DIRECTOR  Aggregate Year-to-Date ▼  40000.00	Date of Receipt  M M M
3.	Full Name (Last, First, Middle Initial)  TOM KERSHAW  Mailing Address 84 BEACON STREET  City  BOSTON  FEC ID number of contributing federal political committee.  Name of Employer  HAMPSHIRE HOUSE CORPORATION  Receipt For:  Primary General Other (specify)	State Zip Code MA 02108  C  Occupation BUSINESS OWNER  Aggregate Year-to-Date ▼	Date of Receipt  M M / D D / Y D Y D Y D Y D Y D Y D Y D Y D
).	Full Name (Last, First, Middle Initial)  Mailing Address  City  FEC ID number of contributing federal political committee.  Name of Employer  Receipt For:  Primary General Other (specify)	State Zip Code  C Occupation  Aggregate Year-to-Date ▼	Date of Receipt  M.M. / D.D. / Y.Y.Y.Y.Y.Y.Y.Y.Y.Y.Y.Y.Y.Y.Y.Y.Y.Y.
s	UBTOTAL of Receipts This Page (optional)	<u> </u>	50000.00
т	OTAL This Period (last page this line number of	only)	50000.00

Use separate schedule(s) for each category of the Detailed Summary Page    Check only one   21b   22   23   24   25   26   27   28a   28b   28c   29   30	SCHEDULE B (FEC Form 3X)		FOR LINE NUMBER: PAGE 7 OF 7				
Detailed Surimary Page 27 28 28 28 28 28 28 28 28 28 28 28 28 28	ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the	(check only	one)			
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 committees.  NAME OF COMMITTEE (IF INC.)  MASSACHUSETTS VICTORY COMMITTEE  Full Name (Last, First, Middle Initial)  Massachuse SableRRIMAC ST.  SUITE 400  City State Zip Code BOSTON MA 02114  Purpose of Disbursement  TRANSFER  Candidate Name  City Mashington Disbursement  TRANSFER  Cardidate Name  City Mashington  City State Zip Code BOSTON  Bright Strate:  City State Zip Code BOSTON  Malling Address 310 FIRST STREET SE  City Mashington  City State Zip Code BOSTON  City State Zip Code BOSTON  City State Zip Code BOSTON  Malling Address 310 FIRST STREET SE  City Mashington  City State Zip Code Boston  City State Zip Code Boston  City State Zip Code  Primary General  Primary General  Other (specify) ▼  Transaction ID: \$822.4107  Amount of Each Disbursement  TRANSFER  Category/ Type  21630.00  Transaction ID: \$822.4109  Amount of Each Disbursement this Period  Category/ Type  21630.00  Amount of Each Disbursement this Period  Category/ Type  City State Zip Code  Purpose of Disbursement  Candidate Name  City State Zip Code  Purpose of Disbursement  Candidate Name  City State Zip Code  Purpose of Disbursement  Candidate Name  City State Zip Code  Purpose of Disbursement  Candidate Name  City State Zip Code  Purpose of Disbursement  Candidate Name  City State Zip Code  Purpose of Disbursement  Candidate Name  City State Zip Code  Purpose of Disbursement  Candidate Name  City State Zip Code  Purpose of Disbursement  Candidate Name  City State Zip Code  Purpose of Disbursement  Candidate Name  City State Zip Code  Purpose of Disbursement  Candidate Name  City State Zip Code  City State Zip Co			I <u> </u>				
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)  MASSACHUSETTS VICTORY COMMITTEE  Full Name (Last, First, Middle Initial)  A. MASSACHUSETTS REPUBLICAN PARTY  Mailing Address 85 MERRIMAC ST.  SUITE 400  City  State  Prosident  Disbursement  TRANSFER  Candidate Name  Category/ Type  Office Sought:  Full Name (Last, First, Middle Initial)  B. REPUBLICAN NATIONAL COMMITTEE  Mailing Address 310 FIRST STREET SE  City  State:  District:  Full Name (Last, First, Middle Initial)  City  State  City  State  Disbursement  Transfer  Candidate Name  Category/ Type  District  Full Name (Last, First, Middle Initial)  C.  Mailing Address  City  State:  District  District  District  District  Amount of Each Disbursement this Period  Category/ Type  Category/ Type  Category/ Type  Category/ Type  Category/ Type  District  Amount of Each Disbursement this Period  Category/ Type  Candidate Name  Category/ Type  Candidate Name  Category/ Type  Candidate Name  Category/ Type  Category/ Typ	Any information copied from such Departs and Chite	nonte may not be sald as weed					
Full Name (Last, First, Middle Initial)  A. MASSACHUSETTS REPUBLICAN PARTY  Mailing Address 85 MERRIMAC ST. SUITE 400  City State Zip Code BOSTON MA 02114  Purpose of Disbursement TRANSFER  Candidate Name  City State: District:  Full Name (Last, First, Middle Initial)  Cardidate Name							
A. MASSACHUSETTS REPUBLICAN PARTY  Mailing Address 85 MERRIMAC ST. SUITE 400  City State Zip Code BOSTON MA 02114  Purpose of Disbursement TRANSFER  Candidate Name  Office Sought: House President State: District:  Full Name (Last, First, Middle Initial)  City State Zip Code Purpose of Disbursement this Period  Category' Type  Date of Disbursement this Period  Transaction ID : SB22.4107  Amount of Each Disbursement this Period  Category' Type  Date of Disbursement  Transaction ID : SB22.4107  Amount of Each Disbursement this Period  Category' Type  Date of Disbursement  Transaction ID : SB22.4109  Amount of Each Disbursement this Period  Category' Type  Date of Disbursement  Category' Type  Category' Type  Date of Disbursement  Category' Type  Category' Type  Category' Type  Category' Type  Date of Disbursement  Candidate Name  Category' Type  Category' Type  Category' Type  Category' Type  Date of Disbursement  Candidate Name  Category' Type  Categ	NAME OF COMMITTEE (In Full)						
A. MASSACHUSETTS REPUBLICAN PARTY  Mailing Address 85 MERRIMAC ST. SUITE 400  City BOSTON MA 02114  Purpose of Disbursement TRANSFER  Candidate Name  City Manual Clast, First, Middle Initial) City Malling Address Candidate Name  City MashingTon Disbursement TRANSFER  Candidate Name  Category Office Sought: House Disbursement State: District:  City State Disbursement TRANSFER  Candidate Name  Category Office Sought: House Disbursement Transaction ID : SB22.4107  Amount of Each Disbursement Transaction ID : SB22.4107  Amount of Each Disbursement Transaction ID : SB22.4109  Amount of Each Disbursement Transaction ID : SB22.4109  Transaction ID : SB22.4109  Amount of Each Disbursement Transaction ID : SB2.4109  Transaction ID : SB2.4107  Transaction ID : SB2.4109  Transaction ID : SB2.4109	$ \; angle$ MASSACHUSETTS VICTORY CO	MMITTEE					
A. MASSACHUSETTS REPUBLICAN PARTY  Mailing Address 85 MERRIMAC ST. SUITE 400  City BOSTON MA 02114  Purpose of Disbursement TRANSFER  Candidate Name  City Manual Clast, First, Middle Initial) City Malling Address Candidate Name  City MashingTon Disbursement TRANSFER  Candidate Name  Category Office Sought: House Disbursement State: District:  City State Disbursement TRANSFER  Candidate Name  Category Office Sought: House Disbursement Transaction ID : SB22.4107  Amount of Each Disbursement Transaction ID : SB22.4107  Amount of Each Disbursement Transaction ID : SB22.4109  Amount of Each Disbursement Transaction ID : SB22.4109  Transaction ID : SB22.4109  Amount of Each Disbursement Transaction ID : SB2.4109  Transaction ID : SB2.4107  Transaction ID : SB2.4109  Transaction ID : SB2.4109	Full Name (Last First Middle Initial)						
Mailing Address 85 MERRIMAC ST.  SUITE 400  City State Zip Code BOSTON MA 02114  Purpose of Disbursement TRANSFER  Candidate Name  City Mashing Address  City State  City State  City State  Disbursement For: Senate President City State  City State  City State  Disbursement Candidate Name  Category/ Transaction ID : SB22.4107  Amount of Each Disbursement this Period  Transaction ID : SB22.4107  Amount of Each Disbursement  Transaction ID : SB22.4107  Amount of Each Disbursement  Transaction ID : SB22.4109  Transaction ID : SB22.4109  Amount of Each Disbursement this Period  Category/ Type  Category/ Category/ Category/ Type  Category/ Category/ Type  Category/ Category/ Category/ Type  Condidate Name  Category/ Category/ Category/ Category/ Category/ Category/ Category/ Type  Category/ Ca		,					
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City BOSTON MA 02114  Purpose of Disbursement TRANSFER Candidate Name  Office Sought:    House		09 30 2013					
BOSTON Purpose of Disbursement TRANSFER Candidate Name  Office Sought: House President Other (specify) ▼  Full Name (Last, First, Middle Initial) State: Disbursement TRANSFER  Category/ Type  Office Sought: House President Other (specify) ▼  Date of Disbursement this Period  Transaction ID: SB22.4107  Amount of Each Disbursement this Period  Transaction ID: SB22.4109  Amount of Each Disbursement  Transaction ID: SB22.4109  Transaction ID: SB22.4109  Amount of Each Disbursement  Transaction ID: SB22.4109  Amount of Each Disbursement this Period  Office Sought: House Disbursement For: Senate Primary General Other (specify) ▼  Date of Disbursement this Period  Transaction ID: SB22.4109  Amount of Each Disbursement this Period  Disbursement For: Senate Primary General Other (specify) ▼  Date of Disbursement  Category/ Type  Office Sought: House Senate Primary General Other (specify) ▼  State: District: District: District: Primary General Other (specify) ▼  SUBTOTAL of Disbursements This Page (optional)	-	State Zip Code					
TRANSER Candidate Name  Category/ Type  Office Sought:		•		Transaction ID : SI	322.4107		
Candidate Name  Category/ Type  Office Sought: House President President State: District:  Full Name (Last, First, Middle Initial)  REPUBLICAN NATIONAL COMMITTEE  Mailing Address 310 FIRST STREET SE  City State Zip Code WASHINGTON DC 20003  Purpose of Disbursement TRANSFER  Candidate Name  Category/ Type  Office Sought: House Disbursement For: Senate President State: District:  Full Name (Last, First, Middle Initial)  Category/ Type  Date of Disbursement this Period  Amount of Each Disbursement this Period  Category/ Type  Office Sought: House Disbursement For: Category/ Type  Office Sought: House Disbursement For: Senate President State: District:  Candidate Name  Category/ Type  Office Sought: House Disbursement For: Senate President Senate President Senate President Other (specify) ▼  State: District: Primary General Primary General Other (specify) ▼  State: District: Primary General Other (specify) ▼  Subtotal of Disbursement this Period  Category/ Type  Office Sought: House Disbursement For: Senate President Other (specify) ▼  Subtotal of Disbursement This Page (optional)		Г					
Office Sought: House Senate President State: Disbursement For: Senate President Other (specify)      State				Amount of Each Dis	oursement this Period		
Office Sought:	Candidate Name				7210.00		
State: District: Other (specify) ▼  Full Name (Last, First, Middle Initial)  B. REPUBLICAN NATIONAL COMMITTEE  Mailing Address 310 FIRST STREET SE  City State Zip Code WASHINGTON DC 20003  Purpose of Disbursement TRANSFER  Candidate Name Clast, First, Middle Initial)  C. Category/ Type  City State Zip Code  President Other (specify) ▼  Date of Disbursement  Transaction ID : SB22.4109  Amount of Each Disbursement this Period  Category/ Type  City State Zip Code  Purpose of Disbursement  Candidate Name Clast, First, Middle Initial)  C. Category/ Type  Office Sought: House Disbursement  Candidate Name Category/ Type  Office Sought: House Disbursement For:  Senate Primary General	Office Sought: House Disbursem	nent For:	.,,,,,				
State: District:  Full Name (Last, First, Middle Initial)  B. REPUBLICAN NATIONAL COMMITTEE  Mailing Address 310 FIRST STREET SE  City State Zip Code DC 20003  Purpose of Disbursement TRANSFER  Candidate Name  Office Sought: House Prisident Other (specify) Type  Category/ State: District:  Full Name (Last, First, Middle Initial)  C.  Mailing Address  City State Zip Code Purpose of Disbursement For: Senate Primary General Other (specify) Amount of Each Disbursement  Category/ Type  Date of Disbursement this Period  Amount of Each Disbursement  Category/ Type  Office Sought: House Senate Primary General Other (specify) Amount of Each Disbursement  Category/ Type  Office Sought: House Senate Primary General Other (specify) Amount of Each Disbursement this Period  Category/ Type  Office Sought: House Senate Primary General Other (specify) Amount of Each Disbursement this Period  Category/ Type  Office Sought: House Senate Primary General Other (specify) Amount of Each Disbursement this Period  Category/ Type  Office Sought: House Senate Primary General Other (specify) Amount of Each Disbursement this Period  Category/ Type  Office Sought: House Senate Primary General Other (specify) Amount of Each Disbursement this Period  Category/ Type  Office Sought: House Senate Primary General Other (specify) Amount of Each Disbursement this Period  Category/ Type  Office Sought: House Senate Primary General Other (specify) Amount of Each Disbursement this Period							
Full Name (Last, First, Middle Initial)  B. REPUBLICAN NATIONAL COMMITTEE  Mailing Address 310 FIRST STREET SE  City		Other (specify) ▼					
B. REPUBLICAN NATIONAL COMMITTEE  Mailing Address 310 FIRST STREET SE  City State Zip Code WASHINGTON DC 20003  Purpose of Disbursement TRANSFER  Candidate Name  Category/ Type  Turnsaction ID: SB22.4109  Amount of Each Disbursement this Period  Category/ Type  City State Zip Code President Other (specify) ▼  Disbursement For: Senate Primary General Category/ Type  City State Zip Code  Purpose of Disbursement  Candidate Name  Category/ Type  Disbursement  Amount of Each Disbursement this Period  Category/ Type  Category/ Type  Category/ Type  Office Sought: House Disbursement For: Senate Primary General Other (specify) ▼  State: District:  Substract  State: District:  Substract  State: District:  Substract  Category/ Type  Disbursement  Category/ Type  Category/ Type  Amount of Each Disbursement this Period  Category/ Type  28840.00							
Mailing Address 310 FIRST STREET SE  City WASHINGTON DC 20003  Purpose of Disbursement TRANSFER  Candidate Name  Disbursement For: Senate President Other (specify) ▼  Category/ Type  Disbursement For: State: District:  Full Name (Last, First, Middle Initial)  Candidate Name  Category/ Type  Amount of Each Disbursement this Period  Amount of Each Disbursement this Period  Category/ Type  Categor		•					
City State Zip Code WASHINGTON DC 20003  Purpose of Disbursement TRANSFER  Candidate Name  Candidate Name  Disbursement For: Senate Primary General Candidate Name  City State Zip Code  Purpose of Disbursement  Candidate Name  City State Zip Code  Purpose of Disbursement  Candidate Name  City State Zip Code  Purpose of Disbursement  Candidate Name  Category/ Type  Date of Disbursement  Amount of Each Disbursement  Amount of Each Disbursement  Category/ Type  Amount of Each Disbursement  Category/ Type  Office Sought: House Senate Primary General Other (specify) ▼  State: District:  Substortal of Disbursements This Page (optional)							
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