

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT Example: If typing, type over the lines. LCV Victory Fund

ADDRESS (number and street) 1920 L St NW Ste 800 Washington DC 20036

2. FEC IDENTIFICATION NUMBER C00486845 3. IS THIS REPORT NEW (N) OR AMENDED (A)

4. TYPE OF REPORT (Choose One) (a) Quarterly Reports: April 15, July 15, October 15, January 31, July 31 Mid-Year Report, Termination Report. (b) Monthly Report Due On: Feb 20, Mar 20, Apr 20, May 20, Jun 20, Jul 20, Aug 20, Sep 20, Oct 20, Nov 20, Dec 20, Jan 31. (c) 12-Day PRE-Election Report for the: Primary, General, Runoff, Convention, Special. (d) 30-Day POST-Election Report for the: General, Runoff, Special.

5. Covering Period 05 / 01 / 2014 through 05 / 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 Patrick Collins

Signature of Treasurer Patrick Collins [Electronically Filed] Date 06 / 18 / 2014

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 Only table with 8 columns and 1 row. FEC FORM 3X Rev. 12/2004

**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"/>	<input type="text" value="418795.56"/>	<input type="text" value="418795.56"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="931639.01"/>	
(c) Total Receipts (from Line 19) .....	<input type="text" value="97979.18"/>	<input type="text" value="877178.77"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<input type="text" value="1029618.19"/>	<input type="text" value="1295974.33"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="6003.01"/>	<input type="text" value="272359.15"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="1023615.18"/>	<input type="text" value="1023615.18"/>
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<input type="text" value="587.60"/>	

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

Write or Type Committee Name

**LCV Victory Fund**

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

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).....	90485.00	849485.00
(ii) Unitemized .....	7460.00	27552.00
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	97945.00	877037.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) .....	97945.00	877037.00
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.).....	34.18	141.77
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))..... ▶	97979.18	877178.77
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	97979.18	877178.77

**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
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 .....	5426.28	15820.18
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	5426.28	15820.18
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditures (use Schedule E) .....	576.73	256538.97
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 .....	0.00	0.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements .....	0.00	0.00
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) 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)) ..	6003.01	272359.15
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	6003.01	272359.15

**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) .....	97945.00	877037.00
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	97945.00	877037.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	5426.28	15820.18
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	5426.28	15820.18

**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 18
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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. Edith Borie**

Mailing Address Friedrich-Naumann Str. 109

City Karlsruhe, Germany	State ZZ	Zip Code 76187
----------------------------	-------------	-------------------

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 ▼  
750.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 05 / 01 / 2014  
**Transaction ID : A39B29F919C5F496F85C**

Amount of Each Receipt this Period  
150.00

Full Name (Last, First, Middle Initial)  
**B. Harry Dalton**

Mailing Address 131 E Main St

City Rock Hill	State SC	Zip Code 29730-4539
-------------------	-------------	------------------------

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 ▼  
500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 05 / 23 / 2014  
**Transaction ID : A94798A28B292486880C**

Amount of Each Receipt this Period  
500.00

Full Name (Last, First, Middle Initial)  
**C. Sarah Faulkner**

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 ▼  
500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 05 / 17 / 2014  
**Transaction ID : A852949D40F394B95B8B**

Amount of Each Receipt this Period  
100.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	750.00
<b>TOTAL</b> 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 18
	<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. Robert Gilbert**

Mailing Address 112 Briar Ln

City Newark State DE Zip Code 19711-3104

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

Name of Employer University Of Delaware Occupation Professor Emeritus

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **210.00**

Date of Receipt **05 / 31 / 2014**

**Transaction ID : AF998DCEF10E04CA68CE**

Amount of Each Receipt this Period **35.00**

Full Name (Last, First, Middle Initial)  
**B. Paul Guyre**

Mailing Address PO Box 141

City Lyme State NH Zip Code 03768-0141

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

Name of Employer Dartmouth College Occupation Professor Of Physiology

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1000.00**

Date of Receipt **05 / 19 / 2014**

**Transaction ID : AC29AE08AB3DF4DCE826**

Amount of Each Receipt this Period **1000.00**

Full Name (Last, First, Middle Initial)  
**C. Nancy Hamill Winter**

Mailing Address 5229 S Massbach Rd

City Stockton State IL Zip Code 61085-9348

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

Name of Employer Big Sky Farm Occupation Farm Manager

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **10000.00**

Date of Receipt **05 / 13 / 2014**

**Transaction ID : A3D2BCDE877B2439093F**

Amount of Each Receipt this Period **10000.00**

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>11035.00</b>
<b>TOTAL</b> 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 18
	<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. 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-Employed Occupation Musician

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 03 / 2014  
**Transaction ID : AF3AF6316E6DB4679AAA**

Amount of Each Receipt this Period 50.00

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

Mailing Address 405 W 23rd St Apt 7B

City New York State NY Zip Code 10011-1460

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

Name of Employer Self-Employed Occupation Singer

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 23 / 2014  
**Transaction ID : A95E7C14F320A4607ABC**

Amount of Each Receipt this Period 50.00

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

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 ▼ 500.00

Date of Receipt 05 / 28 / 2014  
**Transaction ID : AADFCC643731B46DFA83**

Amount of Each Receipt this Period 100.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 200.00

**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 9 OF 18
	<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. Roger Hoverman**

Mailing Address 686 W Aspen Dr

City Kanab State UT Zip Code 84741-6198

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 ▼  
250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 05 / 23 / 2014  
**Transaction ID : AF32198DB685145C590E**

Amount of Each Receipt this Period  
50.00

Full Name (Last, First, Middle Initial)  
**B. Jerry Kickenson**

Mailing Address 1701 Ladd St

City Silver Spring State MD Zip Code 20902-3522

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

Name of Employer Swift Occupation Software Engineer

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 05 / 22 / 2014  
**Transaction ID : A562220D3813E49CBA76**

Amount of Each Receipt this Period  
1000.00

Full Name (Last, First, Middle Initial)  
**C. Mr. Henry Lord**

Mailing Address 313 Audubon Ct

City New Haven State CT Zip Code 06510-1203

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

Name of Employer Self Occupation Investor

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  
 05 / 06 / 2014  
**Transaction ID : A9826EA67B11349B2828**

Amount of Each Receipt this Period  
5000.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 6050.00

**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 18
	<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. Joe Metz**

Mailing Address 635 Teresa St

City State Zip Code  
Martinez CA 94553-3231

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

Name of Employer Occupation  
Metz Construction & Electric Construction

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
05 / 13 / 2014  
**Transaction ID : A973AFB39151F4918A37**

Amount of Each Receipt this Period  
50.00

Full Name (Last, First, Middle Initial)  
**B. Kenneth Mountcastle**

Mailing Address 37 Oenoke Ln

City State Zip Code  
New Canaan CT 06840-4516

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 ▼  
1000.00

Date of Receipt  
05 / 16 / 2014  
**Transaction ID : AB3578B5749D74B319AC**

Amount of Each Receipt this Period  
1000.00

Full Name (Last, First, Middle Initial)  
**C. benjamin oko**

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 ▼  
250.00

Date of Receipt  
05 / 21 / 2014  
**Transaction ID : A994CC0576D424575A9B**

Amount of Each Receipt this Period  
50.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 1100.00

**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 18
	<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. Elizabeth Postell**

Mailing Address 425 Davis St Unit 909

City Evanston State IL Zip Code 60201-4825

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 ▼ **350.00**

Date of Receipt  
**05 / 31 / 2014**

**Transaction ID : ACEA57115546D4690B11**

Amount of Each Receipt this Period  
**50.00**

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

Mailing Address 211 McClees Rd

City Red Bank State NJ Zip Code 07701-6337

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

Name of Employer Two River Theater Occupation Executive Producer

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **50000.00**

Date of Receipt  
**05 / 21 / 2014**

**Transaction ID : A8899670BEE8A49E48DA**

Amount of Each Receipt this Period  
**50000.00**

Full Name (Last, First, Middle Initial)  
**c. Mr. Alan Sieroty**

Mailing Address 6022 Wilshire Blvd Ste 201 Ste 201

City Los Angeles State CA Zip Code 90036-3616

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

Name of Employer Self-Employed Occupation Real Estate Management

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **250.00**

Date of Receipt  
**05 / 13 / 2014**

**Transaction ID : A586B9294BA924FE2A2E**

Amount of Each Receipt this Period  
**250.00**

**SUBTOTAL** of Receipts This Page (optional)..... **50300.00**

**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 12 OF 18  
(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. Bruce Smart**

Mailing Address 20561 Trappe Rd

City Upperville    State VA    Zip Code 20184-3021

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 ▼  
1000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 05 / 22 / 2014  
**Transaction ID : AB8CD464CD3E6458AB4E**

Amount of Each Receipt this Period  
1000.00

Full Name (Last, First, Middle Initial)  
**B. CHARLES TURK**

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-Employed    Occupation Psychiatrist

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 05 / 22 / 2014  
**Transaction ID : AE271D0AB47F34543B51**

Amount of Each Receipt this Period  
50.00

Full Name (Last, First, Middle Initial)  
**C. John Weeden**

Mailing Address 76 Calhoun Ter

City San Francisco    State CA    Zip Code 94133-3506

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 ▼  
20000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 05 / 01 / 2014  
**Transaction ID : A39AFD7F152DB4501BA9**

Amount of Each Receipt this Period  
20000.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	21050.00
<b>TOTAL</b> This Period (last page this line number only).....▶	90485.00

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

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

FOR LINE NUMBER: PAGE 13 OF 18  
(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. Suntrust Bank**  
 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 ▼  
 141.77

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 31 / 2014  
**Transaction ID : A0E29D8B8DD3A46A2BB/**  
 Amount of Each Receipt this Period  
 34.18  
 Interest

Full Name (Last, First, Middle Initial)  
**B.**  
 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 / D D / Y Y Y Y Y Y  
 Amount of Each Receipt this Period

Full Name (Last, First, Middle Initial)  
**C.**  
 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 / D D / Y Y Y Y Y Y  
 Amount of Each Receipt this Period

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 34.18  
**TOTAL** This Period (last page this line number only)..... ▶ 34.18

**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

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. 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  
05 / 19 / 2014

Transaction ID : **B93DFE5CC63C242688AC**

Amount of Each Disbursement this Period

1444.92

Full Name (Last, First, Middle Initial)

**B. League of Conservation Voters, Inc.**

Mailing Address 1920 L St NW  
Ste 800

City Washington State DC Zip Code 20036-5045

Purpose of Disbursement  
Staff and Email 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  
05 / 29 / 2014

Transaction ID : **B06BD10D6E56945FE9F9**

Amount of Each Disbursement this Period

177.87

Full Name (Last, First, Middle Initial)

**C. League of Conservation Voters, Inc.**

Mailing Address 1920 L St NW  
Ste 800

City Washington State DC Zip Code 20036-5045

Purpose of Disbursement  
Staff and Email 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  
05 / 29 / 2014

Transaction ID : **BA6453228A72341B688D**

Amount of Each Disbursement this Period

173.46

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

1796.25

**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 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  
Staff and Email 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  
05 / 29 / 2014

Transaction ID : **B61AC67F4D66F4CE5827**

Amount of Each Disbursement this Period

176.38

Full Name (Last, First, Middle Initial)

**B. Sir Speedy**

Mailing Address 2001 L St NW

City Washington State DC Zip Code 20036-4905

Purpose of Disbursement  
Printing

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  
05 / 08 / 2014

Transaction ID : **B06603B4D0D694455B2C**

Amount of Each Disbursement this Period

2804.82

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 M / D D D / Y Y Y Y Y Y  
05 / 20 / 2014

Transaction ID : **B3023125895C940A4866**

Amount of Each Disbursement this Period

41.90

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

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

3023.10

**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. 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

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 05 / 20 / 2014

Transaction ID : **BD946A092C2CA40D1A89**

Amount of Each Disbursement this Period: 554.94

Category/Type

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 Fees

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 05 / 31 / 2014

Transaction ID : **B39400B88C58F4BC49A4**

Amount of Each Disbursement this Period: 51.99

Category/Type

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement

Amount of Each Disbursement this Period

Category/Type

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	606.93
<b>TOTAL</b> This Period (last page this line number only).....▶	5426.28



**SCHEDULE D (FEC Form 3X)**

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

(Use separate schedule(s) for each numbered line)	PAGE 17 OF 18
	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 <b>League of Conservation Voters, Inc.</b>	Nature of Debt (Purpose): Postage
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="0.00"/>	<b>Transaction ID : DAC1BB156C7DD4C50B3D</b>	
Amount Incurred This Period <input type="text" value="587.60"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="587.60"/>

B. 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"/>
---	---	---	---

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) <b>SUBTOTALS</b> This Period This Page (optional)..... ▶	<input type="text" value="587.60"/>
2) <b>TOTALS</b> This Period (last page this line number only)..... ▶	<input type="text" value="587.60"/>
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only) ..... ▶	<input type="text" value="0.00"/>
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) ▶	<input type="text" value="587.60"/>

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) <b>LCV Victory Fund</b>		FEC IDENTIFICATION NUMBER <b>C C00486845</b>
--	--	---

Check if  24-hour report  48-hour report  New report  Amends report filed on  /  /

Full Name of Payee <b>League of Conservation Voters, Inc.</b>		Date of Public Distribution/Dissemination <input type="text"/> / <input type="text"/> / <input type="text"/>
Mailing Address 1920 L St NW Ste 800		Amount <input type="text"/>
City Washington	State DC	Zip Code 20036-5045
Purpose of Expenditure Staff and Email for Online Message		Transaction ID : <b>E00BDD9B60A6A4562B75</b>
Category/Type <input type="text"/>		Date of Disbursement or Obligation <input type="text"/> / <input type="text"/> / <input type="text"/>
Name of Federal Candidate Cory Gardner	<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <b>CO</b>
Calendar Year-To-Date Per Election for Office Sought	<input type="text"/>	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶ _____
		<input type="text"/> 413.21

Full Name of Payee <b>League of Conservation Voters, Inc.</b>		Date of Public Distribution/Dissemination <input type="text"/> / <input type="text"/> / <input type="text"/>
Mailing Address 1920 L St NW Ste 800		Amount <input type="text"/>
City Washington	State DC	Zip Code 20036-5045
Purpose of Expenditure Staff and Email for Online Message		Transaction ID : <b>E9F01EBE594DD4985A8C</b>
Category/Type <input type="text"/>		Date of Disbursement or Obligation <input type="text"/> / <input type="text"/> / <input type="text"/>
Name of Federal Candidate Cory Gardner	<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <b>CO</b>
Calendar Year-To-Date Per Election for Office Sought	<input type="text"/>	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶ _____
		<input type="text"/> 920.11

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures.....▶	<input type="text"/> 576.73
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures.....▶	<input type="text"/>
(c) <b>TOTAL</b> Independent Expenditures.....▶	<input type="text"/> 576.73

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Signature Patrick Collins [Electronically Filed] Date  /  /