

FEC FORM 3

REPORT OF RECEIPTS AND DISBURSEMENTS For An Authorized Committee

RECEIVED. SECRETARY OF THE SENATE 13 APR 11 PM 2:07

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

12FE4M5

Alaska-Arkansas Senate Victory Fund

ADDRESS (number and street)

600 Pennsylvania Ave SE

Suite 210

Check if different than previously reported. (ACC)

Washington

DC

20003

2. FEC IDENTIFICATION NUMBER

C00541813

3. IS THIS REPORT NEW (N) OR AMENDED (A) CITY STATE ZIP CODE STATE DISTRICT

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:

- April 15 Quarterly Report (Q1)
July 15 Quarterly Report (Q2)
October 15 Quarterly Report (Q3)
January 31 Year-End Report (YE)
Termination Report (TER)

(b) 12-Day PRE-Election Report for the:

- Primary (12P) General (12G) Runoff (12R)
Convention (12C) Special (12S)

Election on MM/DD/YYYY in the State of

(c) 30-Day POST-Election Report for the:

- General (30G) Runoff (30R) Special (30S)

Election on MM/DD/YYYY in the State of

5. Covering Period

MM/DD/YYYY through MM/DD/YYYY

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

Type or Print Name of Treasurer Judith Zamore

Signature of Treasurer

Judith Zamore (handwritten signature)

Date

MM/DD/YYYY 04/11/2013

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

FEC FORM 3 (Revised 02/2003)

13020154634

**SUMMARY PAGE**

FEC Form 3 (Revised 02/2003)

of Receipts and Disbursements

PAGE 2 / 10

Write or Type Committee Name

**Alaska-Arkansas Senate Victory Fund**

Report Covering the Period: From:

M M	D D	Y Y Y Y
01	01	2013

To:

M M	D D	Y Y Y Y
03	31	2013

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
<b>6. Net Contributions (other than loans)</b>		
(a) Total Contributions (other than loans) (from Line 11(e)) ....	21000.00	21000.00
(b) Total Contribution Refunds (from Line 20(d)) .....	0.00	0.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)) .....	21000.00	21000.00
<b>7. Net Operating Expenditures</b>		
(a) Total Operating Expenditures (from Line 17) .....	669.97	669.97
(b) Total Offsets to Operating Expenditures (from Line 14) .....	0.00	0.00
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)) .....	669.97	669.97
<b>8. Cash on Hand at Close of Reporting Period (from Line 27) .....</b>	20330.03	
<b>9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D) .....</b>	0.00	
<b>10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D) .....</b>	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

13020154635

**DETAILED SUMMARY PAGE**  
of Receipts

FEC Form 3 (Revised 12/2003)

PAGE 3 / 10

Write or Type Committee Name

**Alaska-Arkansas Senate Victory Fund**

Report Covering the Period: From:

MM / DD / YYYY  
01 / 01 / 2013

To:

MM / DD / YYYY  
03 / 31 / 2013

**I. RECEIPTS**

**COLUMN A**  
Total This Period

**COLUMN B**  
Election Cycle-to-Date

11. CONTRIBUTIONS (other than loans) FROM:

(a) Individuals/Persons Other Than Political Committees

(i) Itemized (use Schedule A).....

21000.00

21000.00

(ii) Unitemized.....

0.00

0.00

(iii) TOTAL of contributions from individuals ▶

21000.00

21000.00

(b) Political Party Committees.....

0.00

0.00

(c) Other Political Committees (such as PACs).....

0.00

0.00

(d) The Candidate.....

0.00

0.00

(e) TOTAL CONTRIBUTIONS

(other than loans)  
(add Lines 11(a)(iii), (b), (c), and (d))..

21000.00

21000.00

12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES.....

0.00

0.00

13. LOANS:

(a) Made or Guaranteed by the Candidate.....

0.00

0.00

(b) All Other Loans.....

0.00

0.00

(c) TOTAL LOANS

(add Lines 13(a) and (b)).....

0.00

0.00

14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.).....

0.00

0.00

15. OTHER RECEIPTS

(Dividends, Interest, etc.).....

0.00

0.00

16. TOTAL RECEIPTS (add Lines

11(e), 12, 13(c), 14, and 15)  
(Carry Total to Line 24, page 4)..... ▶

21000.00

21000.00

13020154636

**DETAILED SUMMARY PAGE**  
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	669.97	669.97
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES .....	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	0.00
(b) Of All Other Loans .....	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	0.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	0.00	0.00
21. OTHER DISBURSEMENTS .....	0.00	0.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ▶	669.97	669.97

**III. CASH SUMMARY**

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	0.00
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	21000.00
25. SUBTOTAL (add Line 23 and Line 24).....	21000.00
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	669.97
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	20330.03

13020154637

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

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

FOR LINE NUMBER: PAGE 5 OF 10  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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

NAME OF COMMITTEE (In Full)  
**Alaska-Arkansas Senate Victory Fund**

**A.** Full Name (Last, First, Middle Initial)  
**Michael A. Book**

Mailing Address **530 Fifth Ave**  
**11th Fl**

City **New York** State **NY** Zip Code **10036**

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

Name of Employer **Lenox Advisors** Occupation **Managing Partner**

Receipt For:  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **2000.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**03 / 25 / 2013**

Transaction ID : **SA11AI.4127**

Amount of Each Receipt this Period  
**2000.00**

**B.** Full Name (Last, First, Middle Initial)  
**Andrew Brincefield**

Mailing Address **8904 Magnolia Heights Ct**

City **Charlotte** State **NC** Zip Code **28270**

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

Name of Employer **Guardian** Occupation **Financial Advisor**

Receipt For:  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **2000.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**03 / 15 / 2013**

Transaction ID : **SA11AI.4113**

Amount of Each Receipt this Period  
**2000.00**

Earmarked through Actblue

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

Mailing Address **1700 Stone Church St**

City **Virginia Beach** State **VA** Zip Code **23455**

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

Name of Employer **Self** Occupation **Financial Advisor**

Receipt For:  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **2000.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**03 / 21 / 2013**

Transaction ID : **SA11AI.4119**

Amount of Each Receipt this Period  
**2000.00**

Earmarked through Actblue

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

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

**6000.00**

13020154638



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 10
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 12	<input type="checkbox"/> 11b <input type="checkbox"/> 13a
	<input type="checkbox"/> 11d <input type="checkbox"/> 14	<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)  
**Alaska-Arkansas Senate Victory Fund**

Full Name (Last, First, Middle Initial) <b>Gregory L. Olsen</b>		Date of Receipt MM / DD / YYYY 03 / 19 / 2013
Mailing Address 1438 Third Ave Apt 27E		Transaction ID : SA11AI.4115
City New York	State NY	Zip Code 10028
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 2000.00	
Name of Employer Lenox Advisors	Occupation Insurance	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2000.00	

Full Name (Last, First, Middle Initial) <b>Richard Pope</b>		Date of Receipt MM / DD / YYYY 03 / 21 / 2013
Mailing Address 22 Brycewood Dr		Transaction ID : SA11AI.4123
City Dix Hills	State NY	Zip Code 11746
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 1000.00	
Name of Employer Guardian	Occupation Sales	Earmarked through Actblue
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1000.00	

Full Name (Last, First, Middle Initial) <b>Mark Roellig</b>		Date of Receipt MM / DD / YYYY 03 / 25 / 2013
Mailing Address 11 Cobtail Way		Transaction ID : SA11AI.4125
City Simsbury	State CT	Zip Code 06070
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 1000.00	
Name of Employer Massachusetts Mutual Life Insurance	Occupation Executive	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1000.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	4000.00
<b>TOTAL</b> This Period (last page this line number only).....	

1320154640

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 8 OF 10
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b
<input type="checkbox"/> 14	<input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Alaska-Arkansas Senate Victory Fund**

**A.** Full Name (Last, First, Middle Initial)  
**David Shulman**

Mailing Address 1000 Corporate Dr  
Ste 700

City Ft Lauderdale State FL Zip Code 33334

FEC ID number of contributing federal political committee.

Name of Employer DBS Financial Group Occupation Insurance Management

Receipt For:  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
MM / DD / YYYY  
03 / 21 / 2013

Transaction ID : SA11AI.4117

Amount of Each Receipt this Period

Earmarked through Actblue

**B.** Full Name (Last, First, Middle Initial)  
**Rick Van Benschoter**

Mailing Address 875 Fifth Ave  
Apt 3A

City New York State NY Zip Code 10065

FEC ID number of contributing federal political committee.

Name of Employer Lenox Advisors Occupation Financial Advisor

Receipt For:  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
MM / DD / YYYY  
03 / 04 / 2013

Transaction ID : SA11AI.4107

Amount of Each Receipt this Period

Earmarked through Actblue

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

Mailing Address

City State Zip Code

FEC ID number of contributing federal political committee.

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
MM / DD / YYYY

Amount of Each Receipt this Period

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

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

13020154641



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

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

FOR LINE NUMBER: PAGE 9 OF 10  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
**Alaska-Arkansas Senate Victory Fund**

Full Name (Last, First, Middle Initial)  
**ACTBLUE**

Mailing Address P.O. BOX 382110

City State Zip Code  
CAMBRIDGE MA 02238

FEC ID number of contributing federal political committee. **C** C00401224

Name of Employer Occupation

Receipt For:  Primary  General  Other (specify)  
Election Cycle-to-Date

Date of Receipt  
MM / DD / YYYY  
03 / 04 / 2013

Transaction ID : SA11C.4129

Amount of Each Receipt this Period  
5000.00

Contributions earmarked through ActBlue; not a contribution  
**[MEMO ITEM]**

Full Name (Last, First, Middle Initial)  
**ACTBLUE**

Mailing Address P.O. BOX 382110

City State Zip Code  
CAMBRIDGE MA 02238

FEC ID number of contributing federal political committee. **C** C00401224

Name of Employer Occupation

Receipt For:  Primary  General  Other (specify)  
Election Cycle-to-Date

Date of Receipt  
MM / DD / YYYY  
03 / 15 / 2013

Transaction ID : SA11C.4130

Amount of Each Receipt this Period  
2000.00

Contributions earmarked through ActBlue; not a contribution  
**[MEMO ITEM]**

Full Name (Last, First, Middle Initial)  
**ACTBLUE**

Mailing Address P.O. BOX 382110

City State Zip Code  
CAMBRIDGE MA 02238

FEC ID number of contributing federal political committee. **C** C00401224

Name of Employer Occupation

Receipt For:  Primary  General  Other (specify)  
Election Cycle-to-Date

Date of Receipt  
MM / DD / YYYY  
03 / 21 / 2013

Transaction ID : SA11C.4131

Amount of Each Receipt this Period  
6500.00

Contributions earmarked through ActBlue; not a contribution  
**[MEMO ITEM]**

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

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

0.00  
0.00

13020154642

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 OF 10			
	<input checked="" type="checkbox"/> 17 <input type="checkbox"/> 20a	<input type="checkbox"/> 18 <input type="checkbox"/> 20b	<input type="checkbox"/> 19a <input type="checkbox"/> 20c	<input type="checkbox"/> 19b <input type="checkbox"/> 21	

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NAME OF COMMITTEE (In Full)  
**Alaska-Arkansas Senate Victory Fund**

Full Name (Last, First, Middle Initial) <b>A. ActBlue Technical Services</b>		Date of Disbursement MM / DD / YYYY 03 / 10 / 2013	
Mailing Address 14 Arrow St		Amount of Each Disbursement this Period 79.00	
City Cambridge	State MA	Zip Code 02138	Transaction ID : SB17.4135
Purpose of Disbursement Merchant Fees	Category/Type		
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		

Full Name (Last, First, Middle Initial) <b>B. ActBlue Technical Services</b>		Date of Disbursement MM / DD / YYYY 03 / 17 / 2013	
Mailing Address 14 Arrow St		Amount of Each Disbursement this Period 256.75	
City Cambridge	State MA	Zip Code 02138	Transaction ID : SB17.4136
Purpose of Disbursement Merchant Fees	Category/Type		
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		

Full Name (Last, First, Middle Initial) <b>C.</b>		Date of Disbursement MM / DD / YYYY	
Mailing Address		Amount of Each Disbursement this Period	
City	State	Zip Code	
Purpose of Disbursement	Category/Type		
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		

SUBTOTAL of Disbursements This Page (optional).....	335.75
TOTAL This Period (last page this line number only).....	335.75

13020154643

# United States Senate

OFFICE OF THE SECRETARY

OFFICE OF PUBLIC RECORDS

THE PRECEDING DOCUMENT WAS:

HAND DELIVERED

4/11/13  
Date of Receipt

USPS FIRST CLASS MAIL

Postmark

USPS REGISTERED/CERTIFIED

Postmark

USPS PRIORITY MAIL

Postmark

DELIVERY CONFIRMATION OR SIGNATURE CONFIRMATION LABEL

USPS EXPRESS MAIL

Postmark

OVERNIGHT DELIVERY SERVICE:

SHIPPING DATE

NEXT BUSINESS DAY DELIVERY

FEDERAL EXPRESS

\_\_\_\_\_

UPS

\_\_\_\_\_

DHL

\_\_\_\_\_

AIRBORNE EXPRESS

\_\_\_\_\_

RECEIVED FROM FEDERAL ELECTION COMMISSION

\_\_\_\_\_  
Date of Receipt

POSTMARK ILLEGIBLE

NO POSTMARK

FAX

\_\_\_\_\_  
Date of Receipt

OTHER

\_\_\_\_\_  
Date of Receipt or Postmark

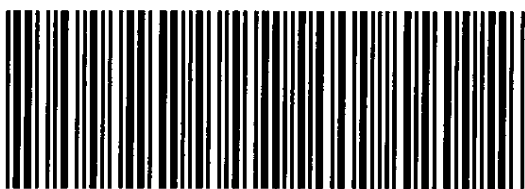
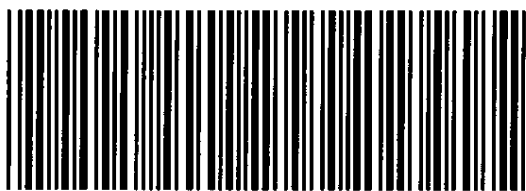
PREPARER

MN

DATE PREPARED

4/11/13

13020154644



13020154645