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FEC FORM 3

REPORT OF RECEIPTS AND DISBURSEMENTS

FORM 3		For		rized Com	nittee			Office Use C	only	
NAME OF COMMITTEE (in	full)	TYPE OR	PRINT ▼		ample: If typin er the lines.	g, type	12FE4M5			
DELANEY VIC	TORY F	FUND								1
ADDRESS (number and	d street)	PO BOX	70835							
Check if diff	ferent									
than previou reported. (A		BETHES	DA				MD L	20813		
2. FEC IDENTIFIC	ATION N	UMBER ▼		CITY			STATE A		CODE	
C C0053166	55	-	3.	IS THIS	× NEW		AMENI		STATE ▼ DI	
				REPORT	(N)	OR	(A)		MD	06
4. TYPE OF REF	PORT (Ch	oose One)								
(a) Quarterly Re		,	(b)	12-Day PRE-	Election Repo	ort for the:				
April 15	Ouartarly I	Report (Q1)			Primary (12P))	General (12G)	Runoff	(12R)
					Convention (12C)	Special (1	12S)		
X July 15	Quarterly F	Report (Q2)			M M /	D D /	V V V V		n the	
October	15 Quarte	rly Report (0	23)	Election on					tate of	
January	31 Year-Er	nd Report (Y	E) (c)	30-Day POS	r -Election Rep	port for the:				
					General (30G	i)	Runoff (3	0R)	Specia	ıl (30S)
Termina	tion Report	(TER)		Election on	M M /	D D /	Y Y Y Y		n the state of	
			<u> </u>							
5. Covering Period	0.	M / D 01		y y y 2013	through	M M M 06	/ D D /	y y y 2013	Y	
I certify that I have e.	xamined th	nis Report a	nd to the b	est of my kn	owledge and i	belief it is tru	ie, correct an	d complete.		
Type or Print Name of	of Treasure	r Justin S	chall							
Signature of Treasure	er <u>Just</u>	in Schall			[Electronically l	Filed] D	ate 07	/ 31	/ Y Y 20	13 Y
NOTE: Submission of	false, erron	eous, or inc	omplete info	rmation may s	subject the per	son signing t	his Report to t	he penalties	of 2 U.S.C.	§437g.
Office Use									ORM 3	- }
Only								(Revise	d 02/2003)	

SUMMARY PAGE

of Receipts and Disbursements

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FEC Form 3 (Revised 02/2003)

Write or Type Committee Name

DELANEY VICTORY FUND

01 06 30 2013 01 2013 Report Covering the Period: From: To: **COLUMN B COLUMN A** This Period **Election Cycle-to-Date** Net Contributions (other than loans) **Total Contributions** (a) 0.00 189351.00 (other than loans) (from Line 11(e)) (b) Total Contribution Refunds 0.00 0.00 (from Line 20(d)) (c) Net Contributions (other than loans) 0.00 189351.00 (subtract Line 6(b) from Line 6(a)) Net Operating Expenditures (a) Total Operating Expenditures 1379.50 31842.12 (from Line 17) (b) Total Offsets to Operating 0.00 0.00 Expenditures (from Line 14)..... (c) Net Operating Expenditures 1379.50 31842.12 (subtract Line 7(b) from Line 7(a)) Cash on Hand at Close of 403.97 Reporting Period (from Line 27)..... Debts and Obligations Owed TO the Committee (Itemize all on 0.00 Schedule C and/or Schedule D) 10. Debts and Obligations Owed BY the Committee (Itemize all on 0.00 Schedule C and/or Schedule D).....

For further information contact:

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

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

DETAILED SUMMARY PAGE

of Receipts

PAGE 3/6

FEC Form 3 (Revised 12/2003)

Write or Type Committee Name

DELANEY VICTORY FUND

Report Covering the Period: From: 01 01 2013 To: May 7 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)	0.00	174250.00			
	(ii) Unitemized	0.00	101.00			
	(iii) TOTAL of contributions from individuals	0.00	174351.00			
(b) Political Party Committees	0.00	0.00			
(c) Other Political Committees (such as PACs)	0.00	15000.00			
`	d) The Candidatee) TOTAL CONTRIBUTIONS	0.00	0.00			
	(other than loans) (add Lines 11(a)(iii), (b), (c), and (d))	0.00	189351.00			
	FRANSFERS FROM OTHER AUTHORIZED COMMITTEES	0.00	1878.83			
3. L	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			
	DFFSETS TO OPERATING					
	EXPENDITURES Refunds, Rebates, etc.)	0.00	0.00			
5. OTHER RECEIPTS (Dividends, Interest, etc.)		0.00	0.00			
1	TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) Carry Total to Line 24, page 4)	0.00	191229.83			

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3 (Revised 02/2003)

ırsements

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	II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date				
17.	OPERATING EXPENDITURES	1379.50	31842.12				
18.	TRANSFERS TO OTHER AUTHORIZED COMMITTEES	2000.00	140781.24				
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	0.00	0.00				
	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)	3379.50	172623.36				
	III. CASH SU	JMMARY					
23.	CASH ON HAND AT BEGINNING OF REPO	RTING PERIOD	3783.47				
24	TOTAL RECEIPTS THIS PERIOD (from Line	16, page 3)	0.00				
25.	SUBTOTAL (add Line 23 and Line 24)		3783.47				
26.	TOTAL DISBURSEMENTS THIS PERIOD (fro	om Line 22)	3379.50				
27.	CASH ON HAND AT CLOSE OF REPORTIN (subtract Line 26 from Line 25)	IG PERIOD	403.97				

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

	FOR LINE NUMBER:				PAGE	5	OF	6
Use separate schedule(s)	(check on							
for each category of the Detailed Summary Page	X	17		18		19a		19k
Detailed Suffillary Fage		20a		20b		20c		21

	Botanoa Garrina	,		2	20a	20b	20	0c	21				
	y information copied from such Reports and Statements may not be sold or for commercial purposes, other than using the name and address of any po												
\rangle	NAME OF COMMITTEE (In Full) DELANEY VICTORY FUND												
۸.	Full Name (Last, First, Middle Initial) CFO - Compliance			Date o	_	ursement	Y	- Y - Y	_				
Mailing Address 1 Park Row						02 06 2013							
	City State Zip Code Providence RI 02903		A	moun	t of Ea	ich Disbu			-				
	Purpose of Disbursement Compliance Consulting		Tra	1292.50 Transaction ID : SB17.4373									
	Candidate Name	Category/ Type											
	Office Sought: House Senate President Disbursement For: Primary Other (specify) State: Disbursement For: Other (specify)												
3.	Full Name (Last, First, Middle Initial)		100	Date o		ursement	YYY	YYY	7				
	Mailing Address		L										
	City State Zip Code	A	Amount of Each Disbursement this Period										
	Purpose of Disbursement		յ Լ	-			-	-					
	Candidate Name	Category/ Type											
	Office Sought: House												
_	Full Name (Last, First, Middle Initial)		D	Date o	f Disbu	ırsement							
С.	Mailing Address		- [M M	/	D D /	YY	YY					
	City State Zip Code		А	moun	t of Ea	ch Disbu	rsement	this Pe	eriod				
	Purpose of Disbursement		ا [ر	_	. ,		,						
	Candidate Name	Category/ Type											
	Office Sought: House												
s	UBTOTAL of Disbursements This Page (optional)				. ,		,	1292.5	0				
	OTAL This Period (last page this line number only)						,	1292.5	0				

SCHEDULE B (FEC Form 3) TEMIZED DISBURSEMENTS	Use separate sched for each category of Detailed Summary I	dule(s) (cl	DR LINE NUMBER: PAGE 6 OF 6 heck only one) 17
Any information copied from such Reports and Statements or for commercial purposes, other than using the name ar NAME OF COMMITTEE (In Full) DELANEY VICTORY FUND			
Full Name (Last, First, Middle Initial) A. FRIENDS OF JOHN DELANEY Mailing Address PO BOX 60320			Date of Disbursement M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City State POTOMAC MD Purpose of Disbursement Transfer to Affiliate	Zip Code 20859		Amount of Each Disbursement this Period 2000.00
Candidate Name Office Sought: House Disbursement Senate Prima		Category/ Type	Transaction ID : SB18.4370
State: MD District: 06 Full Name (Last, First, Middle Initial)	r (specify)		Date of Disbursement
Mailing Address City State	Zip Code		M M / D D / Y Y Y
Purpose of Disbursement	Zip Code		Amount of Each Disbursement this Period
Office Sought: House Senate President Disbursement Prim. Othe		Category/ Type	
State: District: Full Name (Last, First, Middle Initial) C.			Date of Disbursement
Mailing Address City State	Zip Code		Amount of Each Disbursement this Period
Purpose of Disbursement Candidate Name	Category/ Type	, ,	
Office Sought: House Disbursement Senate Prim. President Othe			

State:

District:

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

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

2000.00

2000.00