REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee
(Summary Page)

RECEIVED
FEDERAL ELECTION
COMMISSION MAIL ROOM
DEC 3 5 09 PM '98

USE FEC MAILING LABEL OR TYPE OR PRINT

1. NAME OF COMMITTEE (in full)
Citizens United Political Victory Fund

ADDRESS (number and street) ☐ Check if different than previously reported
4101 Chain Bridge Road, Suite 312

CITY, STATE and ZIP CODE
Fairfax, VA 22030

2. FEC IDENTIFICATION NUMBER
C002955727

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

4. TYPE OF REPORT

(a) ☐ April 15 Quarterly Report
☐ July 15 Quarterly Report
☐ October 15 Quarterly Report
☐ January 31 Year End Report
☐ July 31 Mid Year Report (Non-election Year Only)
☐ Termination Report

Monthly Report Due On:
☐ February 20 ☐ June 20 ☐ October 20
☐ March 20 ☐ July 20 ☐ November 20
☐ April 20 ☐ August 20 ☐ December 20
☐ May 20 ☐ September 20 ☐ January 31

☐ 12-Day Pre-Election Report for the _____ (Type of Election)
election on _____ in the State of _____

☒ 30-Day Post-Election Report following the General Election
on 11/2/98 in the State of _____

(b) Is this Report an Amendment? ☐ YES ☒ NO

SUMMARY	COLUMN A This Period	COLUMN B Calendar Year-to-Date
5. Covering Period 10/15/98 through 11/23/98		
6. (a) Cash on Hand January 1, 19 98		$ 5,929.57
(b) Cash on Hand at Beginning of Reporting Period	$ 5,290.73	
(c) Total Receipts (from Line 19)	$ 5,369.00	$ 16,508.00
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	$ 10,659.73	$ 22,437.57
7. Total Disbursements (from Line 30)	$ 5,925.00	$ 17,702.84
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	$ 4,734.73	$ 4,734.73
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)	$ 800.00	

For further information contact:
Federal Election Commission
999 E Street, NW
Washington, DC 20463
Toll Free 800-424-9530
Local 202-694-1100

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
Kevin Allen

Signature of Treasurer
Kevin Allen

Date
12/03/98

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

FEC FORM 3X
(revised 9/93)

FEA464

DETAILED SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS
PAGE 2, FEC FORM 3X

(revised 1/1/91)

NAME OF COMMITTEE: Citizens United Political Victory Fund

REPORT COVERING PERIOD FROM 10/15/98 TO 11/23/98

	COLUMN A Total This Period	COLUMN B Calendar Year	
I. Receipts			
11. Contributions (other than loans) From:			
a. Individual/Persons Other Than Political Committees			
i. Itemized (use Schedule A)	$1,450.00	$3,950.00	11(a)(i)
ii. Unitemized	$3,919.00	$12,558.00	11(a)(ii)
iii. Total (add i and ii) ➤	$5,369.00	$16,508.00	11(a)(iii)
b. Political Party Committees	0.00	0.00	11(b)
c. Other Political Committees (such as PACs)	0.00	0.00	11(c)
d. Total Contributions (add a iii, b and c) ➤	$5,369.00	$16,508.00	11(d)
12. Transfers From Affiliated/Other Party Committees	0.00	0.00	12
13. All Loans Received	0.00	0.00	13
14. Loan Repayments Received	0.00	0.00	14
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.)	0.00	0.00	15
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees	0.00	0.00	16
17. Other Federal Receipts (Dividends, Interest, etc.)	0.00	0.00	17
18. Transfers from Nonfederal Account for Joint Activity	0.00	0.00	18
19. Total Receipts (add 11d, 12, 13, 14, 15, 16, 17, and 18) ➤	$5,369.00	$16,508.00	19
20. Total Federal Receipts (subtract line 18 from line 19) ➤	$5,369.00	$16,508.00	20
II. Disbursements			
21. Operating Expenditures:			
a. Shared Federal/Non-Federal Activity (from Schedule H4)			
i. Federal Share	0.00	0.00	21(a)(i)
ii. Non-Federal Share	0.00	0.00	21(a)(ii)
b. Other Federal Operating Expenditures	0.00	$4,827.84	21(b)
c. Total Operating Expenditures (add a i, a ii, and b) ➤	0.00	$4,827.84	21(c)
22. Transfers to Affiliated/Other Party Committees	0.00	0.00	22
23. Contributions to Federal Candidates/Committees and Other Political Committees	$2,500.00	$8,500.00	23
24. Independent Expenditures (use Schedule E)	800.00	800.00	24
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F)	0.00	0.00	25
26. Loan Repayments Made	0.00	0.00	26
27. Loans Made	0.00	0.00	27
28. Refunds of Contributions To:			
a. Individuals/Persons Other Than Political Committees	25.00	25.00	28(a)
b. Political Party Committees	0.00	0.00	28(b)
c. Other Political Committees (such as PACs)	0.00	0.00	28(c)
d. Total Contribution Refunds (add a, b and c) ➤	25.00	25.00	28(d)
29. Other Disbursements	$2,600.00	$3,550.00	29
30. Total Disbursements (add 21c, 22, 23, 24, 25, 26, 27, 28d, and 29) ➤	$5,925.00	$17,702.84	30
31. Total Federal Disbursements (subtract line 21 a ii from line 30) ➤	$5,925.00	$17,702.84	31
III. Net Contributions/Operating Expenditures			
32. Total Contributions (other than loans)(from line 11d)	$5,639.00	$16,508.00	32
33. Total Contribution Refunds (from line 28d)	25.00	25.00	33
34. Net Contributions (other than loans)(subtract line 33 from 32)	$5,514.00	$16,483.00	34
35. Total Federal Operating Expenditures (add 21 a i and 21 b) ➤	0.00	$4,827.84	35
36. Offsets to Operating Expenditures (from line 15)	0.00	0.00	36
37. Net Operating Expenditures (subtract line 36 from 35) ➤	0.00	$4,827.84	37

FE7/N047

SCHEDULE A **ITEMIZED RECEIPTS**

Itemized Contributions

Use separate schedule(s) for each category of the Detailed Summary Page	PAGE 1 OF 1
	FOR LINE NUMBER 11.a.i.

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)

Citizens United Political Victory Fund

Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
A. Mr. Shipley A. Bayless P.O. Box 97 Corona Del Mar, CA 92625-0097 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Name of Employer: None Occupation: Retired Aggregate Year-to-Date: $250.00	10/19/98	$250.00
B. Susan W. Dulin 2405 County Road 501 Bayfield, CO 81122 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Name of Employer: None Occupation: None Aggregate Year-to-Date: $750.00	10/23/98	$500.00
C. Mrs. Willard V. Bennett 1132 Marine Way W Apt. E4R North palm Beach, FL 33406-3631 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Name of Employer: Information requested Occupation: N/A Aggregate Year-to-Date: $200.00	10/23/98	$200.00
D. Mrs. Janet Hill 8415 Fredericksburg Road, Apt. 506 San Antonio, TX 78229 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Name of Employer: None Occupation: Retired Aggregate Year-to-Date: $500.00	10/27/98	$500.00
E. Full Name, Mailing Address and ZIP Code Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Name of Employer Occupation Aggregate Year-to-Date: $	Date (month, day, year)	Amount of Each Receipt this Period
F. Full Name, Mailing Address and ZIP Code Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Name of Employer Occupation Aggregate Year-to-Date: $	Date (month, day, year)	Amount of Each Receipt this Period
G. Full Name, Mailing Address and ZIP Code Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Name of Employer Occupation Aggregate Year-to-Date: $	Date (month, day, year)	Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional)	$1,450.00
TOTAL This Period (last page this line number only)	$1,450.00

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Use separate schedule(s) for each category of the Detailed Summary Page	PAGE 1 OF 1
	FOR LINE NUMBER 28.a.

SCHEDULE B **ITEMIZED DISBURSEMENTS**

Refund of Contributions to Individuals

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)

Citizens United Political Victory Fund

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Ann M. Rusch 1717 Homewood Bovd., Apt. 241 Del Ray Beach, FL 33445	Returned Check Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	10/26/98	$25.00
B. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
C. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
D. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
E. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
F. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
G. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
I. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period

SUBTOTAL of Disbursements This Page (optional)	$25.00
TOTAL This Period (last page this line number only)	$25.00

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Use separate schedule(s) for each category of the Detailed Summary Page	PAGE 1 OF 1
	FOR LINE NUMBER 23

SCHEDULE B **ITEMIZED DISBURSEMENTS**

Contributions to Federal Candidates

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)
Citizens United Political Victory Fund

Full Name, Mailing Address and ZIP Code	Purpose of Disbursement / Disbursement for	Date (month, day, year)	Amount of Each Disbursement This Period
Molly Bordonaro for Congress 5319 S.W. Westgate Dr., Suite 22 Portland, OR 97221	U.S. House (OR-01) Disbursement for: [ ] Primary [X] General [ ] Other (specify)	10/23/98	$500.00
Neumann of u.S. Senate P.O. Box 2830 Janesville, WI 53546	U.S. Senate (WI) Disbursement for: [ ] Primary [X] General [ ] Other (specify)	10/23/98	$1,000.00
Doman for Congress P.O. Box 3260 Garden Grove, CA 92642-3260	U.S. House (CA-46) Disbursement for: [ ] Primary [X] General [ ] Other (specify)	10/23/98	$500.00
Paul Ryan for Congress 31 West Milwaukee Street Janesville, WI 53545	U.S. House (WI-01) Disbursement for: [ ] Primary [X] General [ ] Other (specify)	10/23/98	$250.00
McManus for Congress P.O. Box 2032 Traverse City, MI 49685	U.S. House (MI-01) Disbursement for: [ ] Primary [X] General [ ] Other (specify)	10/23/98	$250.00
	Purpose of Disbursement Disbursement for: [ ] Primary [ ] General [ ] Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
	Purpose of Disbursement Disbursement for: [ ] Primary [ ] General [ ] Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
	Purpose of Disbursement Disbursement for: [ ] Primary [ ] General [ ] Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
	Purpose of Disbursement Disbursement for: [ ] Primary [ ] General [ ] Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period

SUBTOTAL of Disbursements This Page (optional) $2,500.00

TOTAL This Period (last page this line number only) $2,500.00

FEM400

SCHEDULE B **ITEMIZED DISBURSEMENTS**

Other Disbursements

Use separate schedule(s) for each category of the Detailed Summary Page	PAGE 1 OF 1
	FOR LINE NUMBER 28

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)
Citizens United Political Victory Fund

A. Full Name, Mailing Address and ZIP Code Sauerbrey Campaign Committee 8600 LaSalle Road Baltimore, MD 21286	Purpose of Disbursement Candidate for MD Governor Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 10/23/98	Amount of Each Disbursement This Period $1,000.00
B. Full Name, Mailing Address and ZIP Code Committee to Stop Infanticide 19030 Lenton Place, S.E, Suite 601 Monroe, WA 98272	Purpose of Disbursement Wash. State Initiative #694 Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 10/23/98	Amount of Each Disbursement This Period $1,000.00
C. Full Name, Mailing Address and ZIP Code Plesky for State Representative 8907 118th Street East Puyallup, WA 98373	Purpose of Disbursement Wash. Sate Leg. Dist. 25 Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 10/23/98	Amount of Each Disbursement This Period $250.00
D. Full Name, Mailing Address and ZIP Code Sherstad for State Representative 14428 90th Ct., N.E. Bothell, WA 98011	Purpose of Disbursement Wash. State Leg. Dist. 1 Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 10/23/98	Amount of Each Disbursement This Period $250.00
E. Full Name, Mailing Address and ZIP Code Citizens United Political Victory Fund 4101 Chain Bridge Road, Suite 312 Fairfax, VA 22030	Purpose of Disbursement Transfer to State Fund Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 10/16/98	Amount of Each Disbursement This Period $100.00
F. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
G. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
I. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period

SUBTOTAL of Disbursements This Page (optional)	$2,600.00
TOTAL This Period (last page this line number only)	$2,600.00

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SCHEDULE D
(Revised 3/80)

DEBTS AND OBLIGATIONS
Excluding Loans

Page 1 of 1 for
LINE NUMBER ___
(Use separate schedules for each numbered line)

Name of Committee (in Full)	Outstanding Balance Beginning This Period	Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
Citizens United Political Victory Fund				
A. Full Name, Mailing Address and ZIP Code of Debtor or Creditor David N. Bossie 13900 Old Columbia Pike Silver Spring, MD 20904	0.00	$800.00	0.00	$800.00
Nature of Debt (Purpose): Independ. Expend. (See Schedule E)				
B. Full Name, Mailing Address and ZIP Code of Debtor or Creditor				
Nature of Debt (Purpose):				
C. Full Name, Mailing Address and ZIP Code of Debtor or Creditor				
Nature of Debt (Purpose):				
D. Full Name, Mailing Address and ZIP Code of Debtor or Creditor				
Nature of Debt (Purpose):				
E. Full Name, Mailing Address and ZIP Code of Debtor or Creditor				
Nature of Debt (Purpose):				
F. Full Name, Mailing Address and ZIP Code of Debtor or Creditor				
Nature of Debt (Purpose):				

1) SUBTOTALS This Period This Page (optional)	$800.00
2) TOTALS This Period (last page in this line only)	$800.00
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only)	0.00
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	$800.00

FE6A/084

SCHEDULE E

ITEMIZED INDEPENDENT EXPENDITURES

(See Reverse Side for Instructions)

Page 1 of 1 Pages

Name of Committee (in Full): Citizens United Political Victory Fund

C002955727

Full Name, Mailing Address & ZIP Code of Each Payee	Purpose of Expenditure	Date (month, day, year)	Amount	Name of Federal Candidate supported or opposed by the expenditure & office sought
David N. Bossie 13900 Old Columbia Pike Silver Spring, MD 20904	Printing of Flyer	10/30/98	$800.00	Rep. Vince Snowbarger KS-03 ☒ Support ☐ Oppose
				☐ Support ☐ Oppose
				☐ Support ☐ Oppose
				☐ Support ☐ Oppose
				☐ Support ☐ Oppose
				☐ Support ☐ Oppose

(a) SUBTOTAL of Itemized Independent Expenditures ..... $ 800.00

(b) SUBTOTAL of Unitemized Independent Expenditures ..... $ 0.00

(c) TOTAL Independent Expenditures ..... $ $800.00

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, concert with, or at the request or suggestion of any candidate or any authorized committee or agent of such candidate or authorized committee. Furthermore, these expenditures did not involve the financing of dissemination, distribution, or republication in whole or in part of any campaign materials prepared by the candidate, his campaign committee, or their agent.

Subscribed and sworn to before me this 3 day of Dec, 19 98

My Commission expires: 8-31-00

Deanna G Walker
NOTARY PUBLIC

Kevin Allen
Signature

12/3/98
Date

FE8AN06A

Federal Election Commission

ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS

The Commission has added this page to the end of this filing to indicate how it was received.

☑	Hand Delivered	Date of Receipt 12/3/98
☐	First Class Mail	POSTMARKED
☐	Registered/Certified Mail	POSTMARKED
☐	No Postmark	
☐	Postmark Illegible	
☐	Received from the House office of Records and Registration	Date of Receipt
☐	Received from the Senate Office of Public Records	Date of Receipt
☐	Other (Specify):	Postmarked _____ and/or Date of Receipt
☐	Electronic Filing	

PREPARER

12/4/98
DATE PREPARED

(4/98)