

**FEC  
FORM 3X****REPORT OF RECEIPTS  
AND DISBURSEMENTS**  
For Other Than An Authorized Committee

Office Use Only

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

CITIZENS UNITED POLITICAL VICTORY FUND

ADDRESS (number and street)

1006 PENNSYLVANIA AVE SE

☐Check if different  
than previously  
reported. (ACC)

WASHINGTON

DC

20003

2. **FEC IDENTIFICATION NUMBER**

CITY

STATE

ZIP CODE

C00295527

3. IS THIS  
REPORT☐NEW  
(N)**OR**☒AMENDED  
(A)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  
Quarterly Report(YE)☐July 31 Mid-Year  
Report(Non-election  
Year Only) (MY)☐Termination Report  
(TER)(b) Monthly  
Report  
Due On:☐

Feb 20 (M2)

☐

May 20 (M5)

☐

Aug 20 (M8)

☐Nov 20 (M11)  
(Non-Election  
Year Only)☐

Mar 20 (M3)

☐

Jun 20 (M6)

☐

Sep 20 (M9)

☐Dec 20 (M12)  
(Non-Election  
Year Only)☒

Apr 20 (M4)

☐

Jul 20 (M7)

☐

Oct 20 (M10)

☐

Jan 31 (YE)

(c) 12-Day  
**PRE**-Election  
Report for the:☐

Primary (12P)

☐

General (12G)

☐

Runoff (12R)

☐

Convention (12C)

☐

Special (12G)

Election on

in the  
State of(d) 30-Day  
**Post**-Election  
Report for the:☐

General (30G)

☐

Runoff (30R)

☐

Special (30S)

Election on

in the  
State of

5. Covering Period

03

01

2007

through

03

31

2007

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

Electronically Filed by Kevin Allen

Date

05

17

2007

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 3X**  
(Rev. 02/2003)

# SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name  
CITIZENS UNITED POLITICAL VICTORY FUND

Report Covering the Period: From: 

M	M
0	3

D	D
0	1

Y	Y	Y	Y
2	0	0	7

 To: 

M	M
0	3

D	D
3	1

Y	Y	Y	Y
2	0	0	7

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1		121278.33
(b) Cash on Hand at Beginning of Reporting Period .....	270552.69	
(c) Total Receipts (from Line 19) .....	129772.00	509825.50
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	400324.69	631103.83
7. Total Disbursements (from Line 31) .....	61291.54	292070.68
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	339033.15	339033.15
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) .....	3681.65	

☒ 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**

FEC Form 3X (Rev. 02/2003)

Page 3

Write or Type Committee Name

CITIZENS UNITED POLITICAL VICTORY FUND

Report Covering the Period:

From:

M	M	D	D	Y	Y	Y	Y
0	3	0	1	2	0	0	7

To:

M	M	D	D	Y	Y	Y	Y
0	3	3	1	2	0	0	7

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	12314.00	76084.00
(i) Itemized (use Schedule A) .....		
(ii) Unitemized .....	117458.00	433741.50
(iii) TOTAL (add Lines 11(a)(i) and (ii) ..... ➤	129772.00	509825.50
(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) ..... ➤	129772.00	509825.50
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.) .....	0.00	0.00
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 Transfer (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)) .....	129772.00	509825.50
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	129772.00	509825.50

**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) Shared Federal/Non-Federal Activity (from Schedule H4)		0.00	0.00
(i) Federal Share.....			
(ii) Non-Federal Share.....		0.00	0.00
(b) Other Federal Operating Expenditures.....		56203.99	236983.13
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b)).....		56203.99	236983.13
22. Transfers to Affiliated/Other Party Committees.....		0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....		4861.55	4861.55
24. Independent Expenditure (use Schedule E) .....		211.00	211.00
25. Coordinated Expenditures Made by Party Committees (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 .....		15.00	15.00
(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)) .....		15.00	15.00
29. Other Disbursements.....		0.00	50000.00
30. Federal Election Activity (2 U.S.C 431(20))			
(a) Shared 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))..		61291.54	292070.68
32. Total Federal Disbursements (subtract Line 21(a)(ii) from Line 30(a)(ii) from Line 31).....		61291.54	292070.68

**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) .....	129772.00	509825.50
34. Total Contribution Refunds (from Line 28(d)) .....	15.00	15.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	129757.00	509810.50
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	56203.99	236983.13
37. Offsets to Operating Expenditures (from Line 15, page 3) .....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	56203.99	236983.13

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**Use separate schedule(s)  
or each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

CITIZENS UNITED POLITICAL VICTORY FUND

<b>A.</b> Full Name (Last, First, Middle Initial) Mrs. Dolores Anderson Mailing Address 202 Scarborough Dr City Greer State SC Zip Code 29650 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 300.00		Date of Receipt M M / D D / Y Y Y Y Y 0 3 / 0 8 / 2 0 0 7 <b>Transaction ID:</b> SA11A1.109839 Amount of Each Receipt this Period 300.00
<b>B.</b> Full Name (Last, First, Middle Initial) Ms. Dora Anderson Mailing Address 44063 S El Macero Dr City El Macero State CA Zip Code 95618 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 230.00		Date of Receipt M M / D D / Y Y Y Y Y 0 3 / 0 5 / 2 0 0 7 <b>Transaction ID:</b> SA11A1.107860 Amount of Each Receipt this Period 10.00
<b>C.</b> Full Name (Last, First, Middle Initial) Mrs. Dorothy Atkinson Mailing Address 1 Marlborough Rd City Shalimar State FL Zip Code 32579 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 300.00		Date of Receipt M M / D D / Y Y Y Y Y 0 3 / 0 8 / 2 0 0 7 <b>Transaction ID:</b> SA11A1.110302 Amount of Each Receipt this Period 300.00

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

610.00

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

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

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

FOR LINE NUMBER:  
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

CITIZENS UNITED POLITICAL VICTORY FUND

<b>A.</b> Full Name (Last, First, Middle Initial) Mr. Thomas Barrow			Date of Receipt MM / DD / YYYY 03 / 13 / 2007	
Mailing Address 911 Briar Ridge Dr			<b>Transaction ID:</b> SA11A1.112117	
City	State	Zip Code	Amount of Each Receipt this Period 500.00	
Houston	TX	77057		
FEC ID number of contributing federal political committee. C				
Name of Employer Requested		Occupation		
		Geologist		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 500.00		
<b>B.</b> Full Name (Last, First, Middle Initial) Mrs. Elsie Beekley			Date of Receipt MM / DD / YYYY 03 / 06 / 2007	
Mailing Address 600 Pontius Rd			<b>Transaction ID:</b> SA11A1.108199	
City	State	Zip Code	Amount of Each Receipt this Period 200.00	
Cincinnati	OH	45233		
FEC ID number of contributing federal political committee. C				
Name of Employer Retired		Occupation		
		Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 420.00		
<b>C.</b> Full Name (Last, First, Middle Initial) Mr. Ron Betts			Date of Receipt MM / DD / YYYY 03 / 15 / 2007	
Mailing Address 832 Langwell Rd			<b>Transaction ID:</b> SA11A1.112917	
City	State	Zip Code	Amount of Each Receipt this Period 100.00	
Bronson	MI	49028		
FEC ID number of contributing federal political committee. C				
Name of Employer Requested		Occupation		
		Sales		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 220.00		

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

800.00

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

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

Use separate schedule(s)  
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

CITIZENS UNITED POLITICAL VICTORY FUND

Full Name (Last, First, Middle Initial)

A. Mrs. Eva Blight

Mailing Address 11354 Runnells Dr

City State Zip Code  
 Clio MI 48420

FEC ID number of contributing federal political committee.

C

Name of Employer  
RetiredOccupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

335.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 0 3 / 0 8 / 2 0 0 7

Transaction ID: SA11A1.109280

Amount of Each Receipt this Period

15.00

Full Name (Last, First, Middle Initial)

B. Ms. Ann P Boland

Mailing Address 925 Delaware Ave  
Apt 5b

City State Zip Code  
 Buffalo NY 14209

FEC ID number of contributing federal political committee.

C

Name of Employer  
RequestedOccupation  
Requested

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1020.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 0 3 / 0 5 / 2 0 0 7

Transaction ID: SA11A1.107966

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

C. Mr Michael Boland

Mailing Address 27 Lindbergh Pkwy

City State Zip Code  
 Waldwick NJ 07463

FEC ID number of contributing federal political committee.

C

Name of Employer  
RequestedOccupation  
Requested

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 0 3 / 0 8 / 2 0 0 7

Transaction ID: SA11A1.110068

Amount of Each Receipt this Period

100.00

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

615.00

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



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

Use separate schedule(s)  
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(check only one)

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NAME OF COMMITTEE (In Full)

CITIZENS UNITED POLITICAL VICTORY FUND

<b>A.</b> Full Name (Last, First, Middle Initial) Mrs. Emily Bourne Mailing Address 8 Wildhorse Ln City State Zip Code Rllng Hls Est CA 90274 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00		Date of Receipt M M / D D / Y Y Y Y Y 0 3 / 0 8 / 2 0 0 7 <b>Transaction ID:</b> SA11A1.109693 Amount of Each Receipt this Period 250.00
<b>B.</b> Full Name (Last, First, Middle Initial) Henry Buhl Mailing Address 114 Greene St FI 5 City State Zip Code New York NY 10012 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Requested Occupation Requested Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 535.00		Date of Receipt M M / D D / Y Y Y Y Y 0 3 / 0 5 / 2 0 0 7 <b>Transaction ID:</b> SA11A1.107881 Amount of Each Receipt this Period 15.00
<b>C.</b> Full Name (Last, First, Middle Initial) Clyde Christy Mailing Address 103 Carol Dr City State Zip Code Saxonburg PA 16056 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Requested Occupation Requested Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 400.00		Date of Receipt M M / D D / Y Y Y Y Y 0 3 / 0 1 / 2 0 0 7 <b>Transaction ID:</b> SA11A1.106928 Amount of Each Receipt this Period 15.00

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

280.00

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

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

Use separate schedule(s)  
or each category of the  
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

CITIZENS UNITED POLITICAL VICTORY FUND

Full Name (Last, First, Middle Initial)

A. Mrs. Judy Davis

Mailing Address 2727 Miller Landing Rd

City State Zip Code  
 Tallahassee FL 32312

FEC ID number of contributing federal political committee.

C

Name of Employer Requested

Occupation Requested

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 0 3 / 0 8 / 2 0 0 7

Transaction ID: SA11A1.110111

Amount of Each Receipt this Period

450.00

Full Name (Last, First, Middle Initial)

B. Mr. Gerald Frye

Mailing Address 940 Madera Cir

City State Zip Code  
 Elm Grove WI 53122

FEC ID number of contributing federal political committee.

C

Name of Employer

Occupation Volunteer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 0 3 / 1 3 / 2 0 0 7

Transaction ID: SA11A1.112111

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

C. Mrs. Henry Gardiner

Mailing Address Hc 1 Box 290  
Gardiner Angus Ranch

City State Zip Code  
 Ashland KS 67831

FEC ID number of contributing federal political committee.

C

Name of Employer Requested

Occupation Requested

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 0 3 / 0 8 / 2 0 0 7

Transaction ID: SA11A1.109861

Amount of Each Receipt this Period

300.00

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

1250.00

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

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

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER: PAGE 11 / 35

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

CITIZENS UNITED POLITICAL VICTORY FUND

Full Name (Last, First, Middle Initial)

**A.** Mrs. Mary Gill

Mailing Address 1204 Lytle Way Cir

City State Zip Code  
 Abilene TX 79602

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Occupation  
Homemaker

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 0 3 / 0 7 / 2 0 0 7

Transaction ID: SA11A1.108969

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

**B.** Richard Goldner

Mailing Address 14613 Waterfront Rd

City State Zip Code  
 Edmond OK 73013

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 ▼

235.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 0 3 / 3 0 / 2 0 0 7

Transaction ID: SA11A1.118062

Amount of Each Receipt this Period

15.00

Full Name (Last, First, Middle Initial)

**C.** Mrs. Helen Gray

Mailing Address 10 Lakeside Park

City State Zip Code  
 Dallas TX 75225

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 0 3 / 0 9 / 2 0 0 7

Transaction ID: SA11A1.110558

Amount of Each Receipt this Period

200.00

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

315.00

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

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

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

FOR LINE NUMBER: PAGE 12 / 35

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

CITIZENS UNITED POLITICAL VICTORY FUND

Full Name (Last, First, Middle Initial)

A. Mrs. Doris Hamilton

Mailing Address 1300 Ne 16th Ave  
Apt 1122

City State Zip Code  
Portland OR 97232

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 ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y  
0 3 / 0 9 / 2 0 0 7

Transaction ID: SA11A1.110379

Amount of Each Receipt this Period

10.00

Full Name (Last, First, Middle Initial)

B. Mr. Olof Hogrelius

Mailing Address 2674 County Road 335

City State Zip Code  
Pagosa Springs CO 81147

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Requested

Occupation  
Requested

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

255.00

Date of Receipt

M M / D D / Y Y Y Y  
0 3 / 2 2 / 2 0 0 7

Transaction ID: SA11A1.115477

Amount of Each Receipt this Period

15.00

Full Name (Last, First, Middle Initial)

C. Mrs. Beverly Hornby

Mailing Address 324 El Modena Ave

City State Zip Code  
Newport Beach CA 92663

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 ▼

315.00

Date of Receipt

M M / D D / Y Y Y Y  
0 3 / 0 5 / 2 0 0 7

Transaction ID: SA11A1.107251

Amount of Each Receipt this Period

15.00

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

40.00

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

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

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

FOR LINE NUMBER: PAGE 13 / 35

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

CITIZENS UNITED POLITICAL VICTORY FUND

Full Name (Last, First, Middle Initial)

**A.** Mrs. Beverly Hornby

Mailing Address 324 El Modena Ave

City State Zip Code  
 Newport Beach CA 92663

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 ▼

325.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 3 / 1 2 / 2 0 0 7

Transaction ID: SA11A1.110651

Amount of Each Receipt this Period

10.00

Full Name (Last, First, Middle Initial)

**B.** Mrs. Pat Irving

Mailing Address 15615 Oakridge Ct

City State Zip Code  
 Morgan Hill CA 95037

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Requested

Occupation  
Requested

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 3 / 0 8 / 2 0 0 7

Transaction ID: SA11A1.109849

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

**C.** Lorena M. Jaeb

Mailing Address P.O. Box 428

City State Zip Code  
 Mango FL 33550

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
N/A

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 3 / 0 8 / 2 0 0 7

Transaction ID: SA11A1.109726

Amount of Each Receipt this Period

1000.00

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

1260.00

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

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

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

FOR LINE NUMBER: PAGE 14 / 35

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

CITIZENS UNITED POLITICAL VICTORY FUND

<b>A.</b> Full Name (Last, First, Middle Initial) Katherine Jeffrey Mailing Address 703 Friends Ln City State Zip Code Granville OH 43023 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Requested Occupation Requested Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 455.00		Date of Receipt M M / D D / Y Y Y Y Y 0 3 / 1 9 / 2 0 0 7 <b>Transaction ID:</b> SA11A1.113395 Amount of Each Receipt this Period 15.00
<b>B.</b> Full Name (Last, First, Middle Initial) Mr. & Mrs. Ernest & Janet King Mailing Address 10506 Kismet Ave N City State Zip Code Stillwater MN 55082 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Requested Occupation Requested Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 220.00		Date of Receipt M M / D D / Y Y Y Y Y 0 3 / 1 5 / 2 0 0 7 <b>Transaction ID:</b> SA11A1.112789 Amount of Each Receipt this Period 100.00
<b>C.</b> Full Name (Last, First, Middle Initial) Marjorie Lawson Mailing Address 3061 Brookwood Dr City State Zip Code Edgewood KY 41017 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer None Occupation Homemaker Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 335.00		Date of Receipt M M / D D / Y Y Y Y Y 0 3 / 0 9 / 2 0 0 7 <b>Transaction ID:</b> SA11A1.110429 Amount of Each Receipt this Period 15.00

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

130.00

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

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 15 / 35

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

CITIZENS UNITED POLITICAL VICTORY FUND

<b>A.</b> Full Name (Last, First, Middle Initial) Marjorie Lawson Mailing Address 3061 Brookwood Dr City Edgewood State KY Zip Code 41017 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer None Occupation Homemaker Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 355.00		Date of Receipt M M / D D / Y Y Y Y Y 0 3 / 1 5 / 2 0 0 7 <b>Transaction ID:</b> SA11A1.112523 Amount of Each Receipt this Period 20.00
<b>B.</b> Full Name (Last, First, Middle Initial) Mr. Frank Liggett Mailing Address Po Box 2189 City Davis State CA Zip Code 95617 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Requested Occupation Requested Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 350.00		Date of Receipt M M / D D / Y Y Y Y Y 0 3 / 0 8 / 2 0 0 7 <b>Transaction ID:</b> SA11A1.110211 Amount of Each Receipt this Period 350.00
<b>C.</b> Full Name (Last, First, Middle Initial) Mrs. Lesley Linstead Mailing Address 23871 Willows Dr Apt 135 Apt 135 City Laguna Hills State CA Zip Code 92653 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Requested Occupation Librarian Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00		Date of Receipt M M / D D / Y Y Y Y Y 0 3 / 1 3 / 2 0 0 7 <b>Transaction ID:</b> SA11A1.111591 Amount of Each Receipt this Period 250.00
<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶		620.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶		

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

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

FOR LINE NUMBER: PAGE 16 / 35

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

CITIZENS UNITED POLITICAL VICTORY FUND

<b>A.</b> Full Name (Last, First, Middle Initial) Mary Meltzer Mailing Address 14 Edgecomb Rd City Binghamton State NY Zip Code 13905 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Requested Occupation Requested Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1000.00		Date of Receipt M M / D D / Y Y Y Y Y 0 3 / 2 6 / 2 0 0 7 <b>Transaction ID:</b> SA11A1.116949 Amount of Each Receipt this Period 500.00
<b>B.</b> Full Name (Last, First, Middle Initial) Mr. Billy Millis Mailing Address 2502 Barkwood Dr City Austin State TX Zip Code 78748 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 220.00		Date of Receipt M M / D D / Y Y Y Y Y 0 3 / 1 5 / 2 0 0 7 <b>Transaction ID:</b> SA11A1.112950 Amount of Each Receipt this Period 100.00
<b>C.</b> Full Name (Last, First, Middle Initial) Mrs. Carol Morrell Mailing Address 21505 H75 Rd City Delta State CO Zip Code 81416 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Requested Occupation Requested Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 330.00		Date of Receipt M M / D D / Y Y Y Y Y 0 3 / 0 5 / 2 0 0 7 <b>Transaction ID:</b> SA11A1.107218 Amount of Each Receipt this Period 10.00

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

610.00

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



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

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

FOR LINE NUMBER: PAGE 17 / 35

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

CITIZENS UNITED POLITICAL VICTORY FUND

<b>A.</b> Full Name (Last, First, Middle Initial) Mr. John Mueller Mailing Address 11949 N 80th PI City State Zip Code Scottsdale AZ 85260 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Requested Occupation Requested Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 440.00			Date of Receipt M M / D D / Y Y Y Y 0 3 / 1 9 / 2 0 0 7 <b>Transaction ID:</b> SA11A1.114032 Amount of Each Receipt this Period 20.00
<b>B.</b> Full Name (Last, First, Middle Initial) Mr. Randall Mullin Mailing Address 806 Hummingbird Ct City State Zip Code Geneseo IL 61254 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Requested Occupation Requested Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 220.00			Date of Receipt M M / D D / Y Y Y Y 0 3 / 0 9 / 2 0 0 7 <b>Transaction ID:</b> SA11A1.110548 Amount of Each Receipt this Period 100.00
<b>C.</b> Full Name (Last, First, Middle Initial) Mr. Daniel Nicholas Mailing Address 2618 Harlem Blvd City State Zip Code Rockford IL 61103 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Requested Occupation Requested Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00			Date of Receipt M M / D D / Y Y Y Y 0 3 / 2 7 / 2 0 0 7 <b>Transaction ID:</b> SA11A1.117273 Amount of Each Receipt this Period 250.00

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

**370.00**

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

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

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

FOR LINE NUMBER: PAGE 18 / 35

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

CITIZENS UNITED POLITICAL VICTORY FUND

Full Name (Last, First, Middle Initial)

A. Mrs. Mary Nushawg

Mailing Address 25 Seneca Rd

City

Sea Ranch Lakes

State

FL

Zip Code

33308

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 ▼

1040.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 3 0 / 2 0 0 7

Transaction ID: SA11A1.118090

Amount of Each Receipt this Period

20.00

Full Name (Last, First, Middle Initial)

B. Mrs. Mary Parker

Mailing Address 1055 Forest Hill Ave Se  
Apt 170

City

Grand Rapids

State

MI

Zip Code

49546

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 ▼

315.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 0 5 / 2 0 0 7

Transaction ID: SA11A1.107891

Amount of Each Receipt this Period

15.00

Full Name (Last, First, Middle Initial)

C. Mrs. Ann Pless

Mailing Address 2106 Maiden Ln

City

Wenatchee

State

WA

Zip Code

98801

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 2 7 / 2 0 0 7

Transaction ID: SA11A1.117269

Amount of Each Receipt this Period

104.00

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

139.00

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

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

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

FOR LINE NUMBER: PAGE 19 / 35

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

CITIZENS UNITED POLITICAL VICTORY FUND

<b>A.</b> Full Name (Last, First, Middle Initial) Kay Poitras Mailing Address 27 B Moore Rd City State Zip Code Haines City FL 33844 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Requested Occupation Requested Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1020.00		Date of Receipt M M / D D / Y Y Y Y Y 0 3 / 2 2 / 2 0 0 7 <b>Transaction ID:</b> SA11A1.114977 Amount of Each Receipt this Period 500.00
<b>B.</b> Full Name (Last, First, Middle Initial) Kay Poitras Mailing Address 27 B Moore Rd City State Zip Code Haines City FL 33844 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Requested Occupation Requested Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1035.00		Date of Receipt M M / D D / Y Y Y Y Y 0 3 / 2 3 / 2 0 0 7 <b>Transaction ID:</b> SA11A1.116009 Amount of Each Receipt this Period 15.00
<b>C.</b> Full Name (Last, First, Middle Initial) Mr. Joseph Pool Mailing Address 701 S Taylor St Ste 300 City State Zip Code Amarillo TX 79101 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Requested Occupation Requested Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 500.00		Date of Receipt M M / D D / Y Y Y Y Y 0 3 / 2 9 / 2 0 0 7 <b>Transaction ID:</b> SA11A1.117879 Amount of Each Receipt this Period 500.00

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

1015.00

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

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

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

FOR LINE NUMBER: PAGE 20 / 35

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

CITIZENS UNITED POLITICAL VICTORY FUND

<b>A.</b> Full Name (Last, First, Middle Initial) Mr. Robert Prior		Date of Receipt M M / D D / Y Y Y Y Y 0 3 / 2 6 / 2 0 0 7
Mailing Address 1525 Bridgeton Dr		<b>Transaction ID:</b> SA11A1.116915
City Columbus	State OH	Zip Code 43220
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Retired Aggregate Year-to-Date ▼ 500.00	

<b>B.</b> Full Name (Last, First, Middle Initial) Beverly Razook		Date of Receipt M M / D D / Y Y Y Y Y 0 3 / 1 2 / 2 0 0 7
Mailing Address 5150 E Copa De Oro Dr		<b>Transaction ID:</b> SA11A1.111046
City Anaheim	State CA	Zip Code 92807
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 15.00
Name of Employer Requested Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Requested Aggregate Year-to-Date ▼ 1035.00	

<b>C.</b> Full Name (Last, First, Middle Initial) Beverly Razook		Date of Receipt M M / D D / Y Y Y Y Y 0 3 / 2 2 / 2 0 0 7
Mailing Address 5150 E Copa De Oro Dr		<b>Transaction ID:</b> SA11A1.115599
City Anaheim	State CA	Zip Code 92807
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 15.00
Name of Employer Requested Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Requested Aggregate Year-to-Date ▼ 1050.00	

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

530.00

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

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

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

FOR LINE NUMBER: PAGE 21 / 35

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

CITIZENS UNITED POLITICAL VICTORY FUND

<b>A.</b> Full Name (Last, First, Middle Initial) Dr. Marvin Shew Mailing Address Po Box 400 City State Zip Code Seelyville IN 47878 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Requested Occupation Veterinarian Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 340.00			Date of Receipt M M / D D / Y Y Y Y Y 0 3 / 2 1 / 2 0 0 7 <b>Transaction ID:</b> SA11A1.114650 Amount of Each Receipt this Period 20.00
<b>B.</b> Full Name (Last, First, Middle Initial) Mr. David Shoemaker, Jr. Mailing Address 792 Farmington Ave City State Zip Code Farmington CT 06032 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1200.00			Date of Receipt M M / D D / Y Y Y Y Y 0 3 / 1 3 / 2 0 0 7 <b>Transaction ID:</b> SA11A1.111769 Amount of Each Receipt this Period 1200.00
<b>C.</b> Full Name (Last, First, Middle Initial) Mrs. Barbara Slaughter Mailing Address Rr 1 Box 363 City State Zip Code Graham TX 76450 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation S&w Enterprises Inc Owner Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 220.00			Date of Receipt M M / D D / Y Y Y Y Y 0 3 / 1 2 / 2 0 0 7 <b>Transaction ID:</b> SA11A1.110630 Amount of Each Receipt this Period 100.00

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

1320.00

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

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 22 / 35

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

CITIZENS UNITED POLITICAL VICTORY FUND

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

Mr. James Snyder

Mailing Address 100 Snyder Dr

City	State	Zip Code
Sutherland	NE	69165

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
SelfOccupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3		1	4		2	0	0	7

Transaction ID: SA11A1.112178

Amount of Each Receipt this Period

100.00

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

Mrs. Janet Stanton

Mailing Address 4503 Sunset Dr

City	State	Zip Code
Vero Beach	FL	32963

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RetiredOccupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

420.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3		0	8		2	0	0	7

Transaction ID: SA11A1.110286

Amount of Each Receipt this Period

200.00

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

Ada A Strassenburgh

Mailing Address PO Box 608

City	State	Zip Code
Ocean View	NJ	08230

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RetiredOccupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1015.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3		0	5		2	0	0	7

Transaction ID: SA11A1.107839

Amount of Each Receipt this Period

15.00

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

315.00

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

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 23 / 35

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

CITIZENS UNITED POLITICAL VICTORY FUND

<b>A.</b> Full Name (Last, First, Middle Initial) Ms. Pamela Strickland Mailing Address Po Box 7517 City State Zip Code Chestnut Mountain GA 30502 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Retired Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1020.00		Date of Receipt M M / D D / Y Y Y Y Y 0 3 / 2 6 / 2 0 0 7 <b>Transaction ID:</b> SA11A1.116829 Amount of Each Receipt this Period 500.00
<b>B.</b> Full Name (Last, First, Middle Initial) Nancy Thiele Mailing Address 710 Long Hill Ave City State Zip Code Shelton CT 06484 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer None Occupation Homemaker Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 235.00		Date of Receipt M M / D D / Y Y Y Y Y 0 3 / 0 5 / 2 0 0 7 <b>Transaction ID:</b> SA11A1.107838 Amount of Each Receipt this Period 15.00
<b>C.</b> Full Name (Last, First, Middle Initial) James Walker Mailing Address 13206 Halls Hill Pike City State Zip Code Milton TN 37118 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Murfreesboro City School Occupation Maintenance Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 235.00		Date of Receipt M M / D D / Y Y Y Y Y 0 3 / 1 6 / 2 0 0 7 <b>Transaction ID:</b> SA11A1.113087 Amount of Each Receipt this Period 15.00

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

530.00

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

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

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

FOR LINE NUMBER: PAGE 24 / 35

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

CITIZENS UNITED POLITICAL VICTORY FUND

**A.** Full Name (Last, First, Middle Initial)  
Mrs. Myra Ward  
Mailing Address 900 Brookside Dr

City State Zip Code  
Enid OK 73703

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self-Employed

Occupation  
Owner

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y  
0 3 / 2 7 / 2 0 0 7

Transaction ID: SA11A1.117285

Amount of Each Receipt this Period

300.00

**B.** Full Name (Last, First, Middle Initial)  
Ms. Debbie Welch  
Mailing Address 124 Misty Morning Dr

City State Zip Code  
Choctaw OK 73020

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self Employed

Occupation  
Requested

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y  
0 3 / 2 9 / 2 0 0 7

Transaction ID: SA11A1.117868

Amount of Each Receipt this Period

300.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. Hal White  
Mailing Address 1471 Millers Mill Rd

City State Zip Code  
Stockbridge GA 30281

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Requested

Occupation  
Requested

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y  
0 3 / 1 3 / 2 0 0 7

Transaction ID: SA11A1.112121

Amount of Each Receipt this Period

300.00

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

900.00

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



**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 25 / 35

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

CITIZENS UNITED POLITICAL VICTORY FUND

<b>A.</b> Full Name (Last, First, Middle Initial) Marion Williamson Mailing Address 1628 Fm 369 S City Iowa Park State TX Zip Code 76367 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Requested Occupation Owner Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 535.00		Date of Receipt <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>1</td><td>3</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table> Transaction ID: SA11A1.111343 Amount of Each Receipt this Period <table border="1"> <tr> <td colspan="10">15.00</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		1	3		2	0	0	7	15.00									
M	M	/	D	D	/	Y	Y	Y	Y																							
0	3		1	3		2	0	0	7																							
15.00																																
<b>B.</b> Full Name (Last, First, Middle Initial) Mr. Jahleel Woodbridge Mailing Address 30 Eagle Vly City Hot Springs State SD Zip Code 57747 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer None Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 220.00		Date of Receipt <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>0</td><td>6</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table> Transaction ID: SA11A1.108263 Amount of Each Receipt this Period <table border="1"> <tr> <td colspan="10">100.00</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		0	6		2	0	0	7	100.00									
M	M	/	D	D	/	Y	Y	Y	Y																							
0	3		0	6		2	0	0	7																							
100.00																																
<b>C.</b> Full Name (Last, First, Middle Initial) Mr. Robert Wynne Mailing Address 5703 Fenway City Midland State TX Zip Code 79707 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00		Date of Receipt <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>2</td><td>0</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table> Transaction ID: SA11A1.114190 Amount of Each Receipt this Period <table border="1"> <tr> <td colspan="10">250.00</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		2	0		2	0	0	7	250.00									
M	M	/	D	D	/	Y	Y	Y	Y																							
0	3		2	0		2	0	0	7																							
250.00																																

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

365.00

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

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

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

FOR LINE NUMBER: PAGE 26 / 35

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

CITIZENS UNITED POLITICAL VICTORY FUND

**A.** Full Name (Last, First, Middle Initial)  
Mr. John Zartman

Mailing Address 2701 Regency Oaks Blvd  
Apt N414

City State Zip Code  
Clearwater FL 33759

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
None

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y  
0 3 / 2 6 / 2 0 0 7

Transaction ID: SA11A1.117051

Amount of Each Receipt this Period

300.00

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

300.00

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

12314.00

# **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)

PAGE 27 / 35

<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)

CITIZENS UNITED POLITICAL VICTORY FUND

Full Name (Last, First, Middle Initial)

## **A. Bank of America**

Mailing Address P.O. Box 25118

City  
Tampa

State  
FL

Zip Code  
33622-5118

Purpose of Disbursement  
Merchant Services Fees

Candidate Name

001

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.118358

Date of Disbursement

03 / 02 / 2007

Amount of Each Disbursement this Period

160.00

Full Name (Last, First, Middle Initial)

## **B. Discover Network**

Mailing Address P.O. Box 52145

City  
Phoenix

State  
AZ

Zip Code  
85072

Purpose of Disbursement  
Merchant Services Fees

Candidate Name

001

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.106717

Date of Disbursement

03 / 02 / 2007

Amount of Each Disbursement this Period

365.75

Full Name (Last, First, Middle Initial)

## **C. Discover Network**

Mailing Address P.O. Box 52145

City  
Phoenix

State  
AZ

Zip Code  
85072

Purpose of Disbursement  
Merchant Services Fees

Candidate Name

001

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.118359

Date of Disbursement

03 / 02 / 2007

Amount of Each Disbursement this Period

20.00

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

545.75

**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)

PAGE 28 / 35

<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)

CITIZENS UNITED POLITICAL VICTORY FUND

Full Name (Last, First, Middle Initial)

## **A. Discover Network**

Mailing Address P.O. Box 52145

City  
Phoenix

State  
AZ

Zip Code  
85072

Purpose of Disbursement  
Merchant Services Fees

Candidate Name

001

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.106720

Date of Disbursement

03 / 13 / 2007

Amount of Each Disbursement this Period

50.00

Full Name (Last, First, Middle Initial)

## **B. InfoCision Management Services, Inc.**

Mailing Address 325 Springside Drive

City  
Akron

State  
OH

Zip Code  
44333

Purpose of Disbursement  
Telemarketing Fees

Candidate Name

001

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.106725

Date of Disbursement

03 / 22 / 2007

Amount of Each Disbursement this Period

43680.95

Full Name (Last, First, Middle Initial)

## **C. JP Morgan Chase Bank**

Mailing Address P.O. Box 260180

City  
Baton Rouge

State  
LA

Zip Code  
70826

Purpose of Disbursement  
Merchant Services Fees

Candidate Name

001

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.106716

Date of Disbursement

03 / 02 / 2007

Amount of Each Disbursement this Period

4634.95

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

48365.90

**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)

PAGE 29 / 35

<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)

CITIZENS UNITED POLITICAL VICTORY FUND

Full Name (Last, First, Middle Initial)

**A.** JP Morgan Chase Bank

Mailing Address P.O. Box 260180

City Baton Rouge State LA Zip Code 70826

Purpose of Disbursement  
Merchant Services Fees

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.106718

Date of Disbursement

03 / 02 / 2007

Amount of Each Disbursement this Period

310.52

Full Name (Last, First, Middle Initial)

**B.** JP Morgan Chase Bank

Mailing Address P.O. Box 260180

City Baton Rouge State LA Zip Code 70826

Purpose of Disbursement  
Merchant Services Fees

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.106719

Date of Disbursement

03 / 02 / 2007

Amount of Each Disbursement this Period

177.62

Full Name (Last, First, Middle Initial)

**C.** JP Morgan Chase Bank

Mailing Address P.O. Box 260180

City Baton Rouge State LA Zip Code 70826

Purpose of Disbursement  
Misc. Bank Fees

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.106722

Date of Disbursement

03 / 08 / 2007

Amount of Each Disbursement this Period

1787.00

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

2275.14

**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)

PAGE 30 / 35

<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)

CITIZENS UNITED POLITICAL VICTORY FUND

Full Name (Last, First, Middle Initial)

**A.** JP Morgan Chase Bank

Mailing Address P.O. Box 260180

City State Zip Code  
Baton Rouge LA 70826

Purpose of Disbursement

Misc. Bank Fees

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.106723

Date of Disbursement

03 / 15 / 2007

Amount of Each Disbursement this Period

855.17

Full Name (Last, First, Middle Initial)

**B.** JP Morgan Chase Bank

Mailing Address P.O. Box 260180

City State Zip Code  
Baton Rouge LA 70826

Purpose of Disbursement

Misc. Bank Fees

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.106724

Date of Disbursement

03 / 22 / 2007

Amount of Each Disbursement this Period

50.00

Full Name (Last, First, Middle Initial)

**C.** JP Morgan Chase Bank

Mailing Address P.O. Box 260180

City State Zip Code  
Baton Rouge LA 70826

Purpose of Disbursement

Merchant Services Fees

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.106721

Date of Disbursement

03 / 27 / 2007

Amount of Each Disbursement this Period

50.00

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

955.17

**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)

PAGE 31 / 35

<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)

CITIZENS UNITED POLITICAL VICTORY FUND

Full Name (Last, First, Middle Initial)

**A.** Lagana Printing

Mailing Address 513 C Street, NE

City  
Washington

State  
DC

Zip Code  
20002

Purpose of Disbursement  
Printing (letterhead, envelopes & signs)

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State:

District:

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.106735

Date of Disbursement

MM / DD / YYYY  
03 / 29 / 2007

Amount of Each Disbursement this Period

4042.03

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

4042.03

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

56183.99

# **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)

PAGE 32 / 35

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)

CITIZENS UNITED POLITICAL VICTORY FUND

Full Name (Last, First, Middle Initial)

**A. HSP Direct**

Mailing Address 13755 Sunrise Valley Drive

City Herndon State VA Zip Code 20171

Purpose of Disbursement  
(In-Kind) Meet & Greet Reception

Candidate Name  
SAMUEL DALE BROWBACK

007  
Category/  
Type

Office Sought: ☐ House ☐ Senate ☒ President  
State: District: 00  
Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB23.106740

Date of Disbursement

03 / 29 / 2007

Amount of Each Disbursement this Period

3861.55

Full Name (Last, First, Middle Initial)

**B. MUSGRAVE FOR CONGRESS**

Mailing Address 118 West Charlotte Street

City Johnstown State CO Zip Code 80534

Purpose of Disbursement  
Contribution to U.S. House Candidate

Candidate Name  
MARILYN N MUSGRAVE

011  
Category/  
Type

Office Sought: ☒ House ☐ Senate ☐ President  
State: CO District: 04  
Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB23.118346

Date of Disbursement

03 / 30 / 2007

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

**C. Omni Shoreham Hotel**

Mailing Address 2500 Calvert Street, NW

City Washington State DC Zip Code 20008

Purpose of Disbursement  
In-Kind (Reception)(See Sch. D)

Candidate Name  
Mike Huckabee

007  
Category/  
Type

Office Sought: ☐ House ☐ Senate ☒ President  
State: District:  
Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB23.129792

Date of Disbursement

03 / 02 / 2007

Amount of Each Disbursement this Period

1180.85

[MEMO ITEM]

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

4861.55

**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 PageFOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)

CITIZENS UNITED POLITICAL VICTORY FUND

Full Name (Last, First, Middle Initial)

**A.** Omni Shoreham Hotel

Mailing Address 2500 Calvert Street, NW

City  
WashingtonState  
DCZip Code  
20008Purpose of Disbursement  
In-Kind (Reception)(See Sch. D)Candidate Name  
Duncan Hunter007  
Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☒ PresidentDisbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB23.129791

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		2	0		2	0	0	7

Amount of Each Disbursement this Period

778.80

**[MEMO ITEM]**

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

0.00

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

4861.55

**SCHEDULE D (FEC Form 3X)****DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate  
schedule(s)  
for each  
numbered line)

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FOR LINE NUMBER:  
(check only one)☐ 9  
☒ 10

NAME OF COMMITTEE (In Full)

CITIZENS UNITED POLITICAL VICTORY FUND

**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
Lagana PrintingNature of Debt (Purpose):  
Printing (John McCain Dos-  
ier)(See Sch E)

Mailing Address 513 C Street, NE

City State ZIP Code  
Washington DC 20002

Outstanding Balance Beginning This Period

0.00

Transaction ID: SD10.106746

Amount Incurred This Period

1722.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

1722.00

**B.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
Omni Shoreham HotelNature of Debt (Purpose):  
Reception (Duncan Hunter)-  
(See Sch B)

Mailing Address 2500 Calvert Street, NW

City State ZIP Code  
Washington DC 20008

Outstanding Balance Beginning This Period

0.00

Transaction ID: SD10.118344

Amount Incurred This Period

778.80

Payment This Period

0.00

Outstanding Balance at Close of This Period

778.80

**C.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
Omni Shoreham HotelNature of Debt (Purpose):  
Reception (Mike Huckabee)-  
(See Sch B)

Mailing Address 2500 Calvert Street, NW

City State ZIP Code  
Washington DC 20008

Outstanding Balance Beginning This Period

0.00

Transaction ID: SD10.118345

Amount Incurred This Period

1180.85

Payment This Period

0.00

Outstanding Balance at Close of This Period

1180.85

**1) SUBTOTALS** This Period This Page (optional).....

3681.65

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

3681.65

**3) TOTALS OUTSTANDING LOANS** from Schedule C (last page only).....**4) ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

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

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FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) CITIZENS UNITED POLITICAL VICTORY FUND		FEC IDENTIFICATION NUMBER <b>C</b> C00295527	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee Lagana Printing		Date <div style="display: flex; justify-content: space-between;"> <div>M M / D D / Y Y Y Y 0 3 / 0 2 / 2 0 0 7</div> </div>	
Mailing Address 513 C Street, NE		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">1722.00</div>	
City Washington	State DC	Zip Code 20002	
Purpose of Expenditure Printing (Candidate Dossier)(See Sch. D)		Category/ Type <div style="border: 1px solid black; padding: 2px; text-align: center;">006</div>	
Name of Federal Candidate supported or Opposed by expenditure: JOHN S MCCAIN		Transaction ID: SE24.129789 Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: 00 <input checked="" type="checkbox"/> Presidential	
		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2008 <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought		<div style="border: 1px solid black; padding: 2px; text-align: right;">0.00</div> <b>[MEMO ITEM]</b>	

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures .....	<div style="border: 1px solid black; padding: 2px;">0.00</div>
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures .....	<div style="border: 1px solid black; padding: 2px;">211.00</div>
(c) <b>TOTAL</b> Independent Expenditures .....	<div style="border: 1px solid black; padding: 2px;">211.00</div>
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 _____	Date <div style="display: flex; justify-content: space-between;"> <div>M M / D D / Y Y Y Y 0 5 / 1 7 / 2 0 0 7</div> </div>