

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

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

SVB Financial Group PAC

ADDRESS (number and street)

Check if different than previously reported. (ACC)

2. **FEC IDENTIFICATION NUMBER ▼** **CITY ▲** **STATE ▲** **ZIP CODE ▲**

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 Year-End Report (YE)
 - July 31 Mid-Year Report (Non-election Year Only) (MY)
 - Termination Report (TER)

- (b) Monthly Report Due On:
- | | | | |
|--------------------------------------|--------------------------------------|---|--|
| <input type="checkbox"/> Feb 20 (M2) | <input type="checkbox"/> May 20 (M5) | <input type="checkbox"/> Aug 20 (M8) | <input type="checkbox"/> Nov 20 (M11) (Non-Election Year Only) |
| <input type="checkbox"/> Mar 20 (M3) | <input type="checkbox"/> Jun 20 (M6) | <input checked="" type="checkbox"/> Sep 20 (M9) | <input type="checkbox"/> Dec 20 (M12) (Non-Election Year Only) |
| <input type="checkbox"/> Apr 20 (M4) | <input type="checkbox"/> Jul 20 (M7) | <input type="checkbox"/> Oct 20 (M10) | <input type="checkbox"/> Jan 31 (YE) |

- (c) 12-Day **PRE-Election** Report for the:
- | | | |
|---|--|---------------------------------------|
| <input type="checkbox"/> Primary (12P) | <input type="checkbox"/> General (12G) | <input type="checkbox"/> Runoff (12R) |
| <input type="checkbox"/> Convention (12C) | <input type="checkbox"/> Special (12S) | |

Election on / / in the State of

- (d) 30-Day **POST-Election** Report for the:
- | | | |
|--|---------------------------------------|--|
| <input type="checkbox"/> General (30G) | <input type="checkbox"/> Runoff (30R) | <input type="checkbox"/> Special (30S) |
|--|---------------------------------------|--|

Election on / / in the State of

5. Covering Period / / through / /

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 Rebecca Olson

Signature of Treasurer Rebecca Olson [Electronically Filed] Date / /

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								
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**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

SVB Financial Group PAC

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

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2014"/>		29867.70
(b) Cash on Hand at Beginning of Reporting Period.....	40617.70	
(c) Total Receipts (from Line 19)	2380.00	24630.00
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	42997.70	54497.70
7. Total Disbursements (from Line 31).....	2965.19	14465.19
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	40032.51	40032.51
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)	0.00	

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. 06/2004)

Write or Type Committee Name

SVB Financial Group PAC

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

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	2310.00	22020.00
(ii) Unitemized	70.00	2610.00
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	2380.00	24630.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	2380.00	24630.00
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	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 Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))..... ▶	2380.00	24630.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	2380.00	24630.00

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures	0.00	0.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	0.00	0.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	2965.19	14465.19
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements	0.00	0.00
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	2965.19	14465.19
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	2965.19	14465.19

DETAILED SUMMARY PAGE
of Disbursements

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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)	2380.00	24630.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	2380.00	24630.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	0.00	0.00
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	0.00	0.00

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 6 OF 10
<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

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)
SVB Financial Group PAC

Full Name (Last, First, Middle Initial) A. Julie Haga		Date of Receipt MM / DD / YYYY 08 / 01 / 2014 Transaction ID : 11AI-638
Mailing Address 3003 Tasman Dr		Amount of Each Receipt this Period 50.00
City Santa Clara	State CA	Zip Code 95054
FEC ID number of contributing federal political committee. C		
Name of Employer SVB Financial Group	Occupation Director, IT	
Receipt For: 2014 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) <input type="checkbox"/> Calendar Year	Aggregate Year-to-Date ▼ 400.00	

Full Name (Last, First, Middle Initial) B. Julie Haga		Date of Receipt MM / DD / YYYY 08 / 19 / 2014 Transaction ID : 11AI-647
Mailing Address 3003 Tasman Dr		Amount of Each Receipt this Period 50.00
City Santa Clara	State CA	Zip Code 95054
FEC ID number of contributing federal political committee. C		
Name of Employer SVB Financial Group	Occupation Director, IT	
Receipt For: 2014 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) <input type="checkbox"/> Calendar Year	Aggregate Year-to-Date ▼ 400.00	

Full Name (Last, First, Middle Initial) C. Michael Lempres		Date of Receipt MM / DD / YYYY 08 / 01 / 2014 Transaction ID : 11AI-639
Mailing Address 4641 Clark PI NW		Amount of Each Receipt this Period 40.00
City Washington	State DC	Zip Code 20007
FEC ID number of contributing federal political committee. C		
Name of Employer SVB Financial Group	Occupation Assistant General Counsel	
Receipt For: 2014 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) <input type="checkbox"/> Calendar Year	Aggregate Year-to-Date ▼ 640.00	

SUBTOTAL of Receipts This Page (optional).....▶	140.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 7 OF 10
<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)
SVB Financial Group PAC

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

Mailing Address 4641 Clark PI NW

City Washington State DC Zip Code 20007

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

Name of Employer SVB Financial Group Occupation Assistant General Counsel

Receipt For: 2014
 Primary General
 Other (specify) Calendar Year

Aggregate Year-to-Date **640.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 19 / 2014

Transaction ID : 11AI-648

Amount of Each Receipt this Period
 40.00

B. Christie Ma
Full Name (Last, First, Middle Initial)

Mailing Address 3003 Tasman Dr

City Santa Clara State CA Zip Code 95054

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

Name of Employer SVB Financial Group Occupation Attorney

Receipt For: 2014
 Primary General
 Other (specify) Calendar Year

Aggregate Year-to-Date **320.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 01 / 2014

Transaction ID : 11AI-640

Amount of Each Receipt this Period
 20.00

c. Christie Ma
Full Name (Last, First, Middle Initial)

Mailing Address 3003 Tasman Dr

City Santa Clara State CA Zip Code 95054

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

Name of Employer SVB Financial Group Occupation Attorney

Receipt For: 2014
 Primary General
 Other (specify) Calendar Year

Aggregate Year-to-Date **320.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 19 / 2014

Transaction ID : 11AI-649

Amount of Each Receipt this Period
 20.00

SUBTOTAL of Receipts This Page (optional)..... **80.00**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 OF 10
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
SVB Financial Group PAC

A. Mark Maclennan
Full Name (Last, First, Middle Initial)

Mailing Address 3005 Tasman Dr

City Santa Clara State CA Zip Code 95054

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

Name of Employer SVB Financial Group Occupation Managing Director

Receipt For: 2014
 Primary General
 Other (specify) Calendar Year

Aggregate Year-to-Date **400.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 01 / 2014

Transaction ID : 11AI-642

Amount of Each Receipt this Period
 25.00

B. Mark Maclennan
Full Name (Last, First, Middle Initial)

Mailing Address 3005 Tasman Dr

City Santa Clara State CA Zip Code 95054

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

Name of Employer SVB Financial Group Occupation Managing Director

Receipt For: 2014
 Primary General
 Other (specify) Calendar Year

Aggregate Year-to-Date **400.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 19 / 2014

Transaction ID : 11AI-650

Amount of Each Receipt this Period
 25.00

C. Joseph W Morgan
Full Name (Last, First, Middle Initial)

Mailing Address 3766 Deer Trail Ct

City Danville State CA Zip Code 94506

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

Name of Employer SVB Financial Group Occupation Chief Investment Officer

Receipt For: 2014
 Primary General
 Other (specify) Calendar Year

Aggregate Year-to-Date **1500.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 01 / 2014

Transaction ID : 11AI-636

Amount of Each Receipt this Period
 1500.00

SUBTOTAL of Receipts This Page (optional)..... **1550.00**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 9 OF 10
<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)
SVB Financial Group PAC

Full Name (Last, First, Middle Initial) A. John G Riley		Date of Receipt MM / DD / YYYY 08 / 01 / 2014 Transaction ID : 11AI-637
Mailing Address 5131 Durango Ct		Amount of Each Receipt this Period 500.00
City San Jose	State CA	Zip Code 95118
FEC ID number of contributing federal political committee. C		
Name of Employer SVB Financial Group	Occupation Head of Credit Review	
Receipt For: 2014 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) <input type="checkbox"/> Calendar Year	Aggregate Year-to-Date ▼ 500.00	

Full Name (Last, First, Middle Initial) B. Robert Vogelsang		Date of Receipt MM / DD / YYYY 08 / 01 / 2014 Transaction ID : 11AI-646
Mailing Address 3005 Tasman Dr		Amount of Each Receipt this Period 20.00
City Santa Clara	State CA	Zip Code 95054
FEC ID number of contributing federal political committee. C		
Name of Employer SVB Financial Group	Occupation Senior Advisor	
Receipt For: 2014 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) <input type="checkbox"/> Calendar Year	Aggregate Year-to-Date ▼ 320.00	

Full Name (Last, First, Middle Initial) C. Robert Vogelsang		Date of Receipt MM / DD / YYYY 08 / 19 / 2014 Transaction ID : 11AI-654
Mailing Address 3005 Tasman Dr		Amount of Each Receipt this Period 20.00
City Santa Clara	State CA	Zip Code 95054
FEC ID number of contributing federal political committee. C		
Name of Employer SVB Financial Group	Occupation Senior Advisor	
Receipt For: 2014 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) <input type="checkbox"/> Calendar Year	Aggregate Year-to-Date ▼ 320.00	

SUBTOTAL of Receipts This Page (optional).....	540.00
TOTAL This Period (last page this line number only).....	2310.00

**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)

<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)
SVB Financial Group PAC

Full Name (Last, First, Middle Initial)

A. Moran for Kansas

Mailing Address PO Box 1151

City Hays State KS Zip Code 67601

Purpose of Disbursement
Political Contribution

011

Candidate Name
Jerry Moran

Category/
Type

Office Sought: House
 Senate
 President
State: KS District:

Disbursement For: 2014
 Primary General
 Other (specify) ▼

Date of Disbursement

M M / D D / Y Y Y Y Y Y
08 / 29 / 2014

Transaction ID : 23-61

Amount of Each Disbursement this Period

2000.00

Full Name (Last, First, Middle Initial)

B. Silicon Valley Bank

Mailing Address 3005 Tasman Drive

City Santa Clara State CA Zip Code 95054

Purpose of Disbursement
Inkind Contribution

011

Candidate Name
Pat Meehan

Category/
Type

Office Sought: House
 Senate
 President
State: PA District: 07

Disbursement For: 2014
 Primary General
 Other (specify) ▼

Date of Disbursement

M M / D D / Y Y Y Y Y Y
08 / 12 / 2014

Transaction ID : 23-62

Amount of Each Disbursement this Period

965.19

Inkind Contribution: Fundraising Event

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

M M / D D / Y Y Y Y Y Y

Amount of Each Disbursement this Period

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

2965.19

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

2965.19