

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS For Other Than An Authorized Committee

SECRETARY OF THE SENATE 14 APR 15 PM 3:28 Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT Example: If typing, type over the lines. 10,000 Lakes Victory 2014

ADDRESS (number and street) 120 Maryland Ave NE Washington DC 20002

2. FEC IDENTIFICATION NUMBER C00555748 3. IS THIS REPORT NEW (N) OR AMENDED (A)

4. TYPE OF REPORT (Choose One) (a) Quarterly Reports: April 15 Quarterly Report (Q1) (b) Monthly Report Due On: Feb 20 (M2) May 20 (M5) Aug 20 (M8) Nov 20 (M11) (c) 12-Day PRE-Election Report for the: Primary (12P) General (12G) Runoff (12R) (d) 30-Day POST-Election Report for the: General (30G) Runoff (30R) Special (30S)

5. Covering Period 01 / 28 / 2014 through 03 / 31 / 2014

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 Angelique Harris

Signature of Treasurer [Handwritten Signature] Date 04 / 15 / 2014

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

14020211810

**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

10,000 Lakes Victory 2014

Report Covering the Period:

From:  /  /

To:  /  /

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1,	0.00	0.00
(b) Cash on Hand at Beginning of Reporting Period...	0.00	
(c) Total Receipts (from Line 19) ..	36500.02	36500.02
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)...	36500.02	36500.02
7. Total Disbursements (from Line 31)...	34689.47	34689.47
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))...	1810.55	1810.55
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

14020211811

**DETAILED SUMMARY PAGE**  
of Receipts

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

10,000 Lakes Victory 2014

Report Covering the Period:

From:

MM / DD / YYYY  
01 / 28 / 2014

To:

MM / DD / YYYY  
03 / 31 / 2014

**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)...

36500.00

36500.00

(ii) Unitemized ....

0.02

0.02

(iii) TOTAL (add

Lines 11(a)(i) and (ii) ...

36500.02

36500.02

(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) ..

36500.02

36500.02

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))...

36500.02

36500.02

20. Total Federal Receipts (subtract Line 18(c) from Line 19) ...

36500.02

36500.02

14020211812

**DETAILED SUMMARY PAGE**  
of Disbursements

<b>II. Disbursements</b>		<b>COLUMN A</b> Total This Period	<b>COLUMN B</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 .....		5389.47	5389.47
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) ..	▶	5389.47	5389.47
22. Transfers to Affiliated/Other Party Committees.....		28500.00	28500.00
23. Contributions to Federal Candidates/Committees and Other Political Committees....		0.00	0.00
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 ..		800.00	800.00
(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))...	▶	800.00	800.00
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)) ..		34689.47	34689.47
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31)...	▶	34689.47	34689.47

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**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) .....	36500.02	36500.02
34. Total Contribution Refunds (from Line 28(d)) .....	800.00	800.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	35700.02	35700.02
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .. ...▶	5389.47	5389.47
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .. ...▶	5389.47	5389.47

14020211814

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

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

FOR LINE NUMBER: PAGE 6 OF 17

(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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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)  
**10,000 Lakes Victory 2014**

**A. Waverly D. Crenshaw Jr.**  
Full Name (Last, First, Middle Initial)  
Mailing Address 895 Oak Valley Ln  
City Nashville State TN Zip Code 37220  
FEC ID number of contributing federal political committee.   
Name of Employer Waller Lansden Dortch & Davis, LLP Occupation Partner  
Receipt For:  
 Primary  General  
 Other (specify) ▼  
Aggregate Year-to-Date ▼

Date of Receipt  
 /  /   
Transaction ID : SA11AI-3  
Amount of Each Receipt this Period

**B. Callie Khouri**  
Full Name (Last, First, Middle Initial)  
Mailing Address PO Box 7309  
City Santa Monica State CA Zip Code 90406  
FEC ID number of contributing federal political committee.   
Name of Employer Self Occupation Writer  
Receipt For:  
 Primary  General  
 Other (specify) ▼  
Aggregate Year-to-Date ▼

Date of Receipt  
 /  /   
Transaction ID : SA11AI-4  
Amount of Each Receipt this Period

**C. James G. Stranch III**  
Full Name (Last, First, Middle Initial)  
Mailing Address 8060 Poplar Creek Rd  
City Nashville State TN Zip Code 37221  
FEC ID number of contributing federal political committee.   
Name of Employer Branstetter Stranch & Jennings, PLLC Occupation Attorney  
Receipt For:  
 Primary  General  
 Other (specify) ▼  
Aggregate Year-to-Date ▼

Date of Receipt  
 /  /   
Transaction ID : SA11AI-5  
Amount of Each Receipt this Period

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

14020211815

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

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

FOR LINE NUMBER: PAGE 7 OF 17  
(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)  
**10,000 Lakes Victory 2014**

**A. Wallace Dietz**  
Full Name (Last, First, Middle Initial)  
Mailing Address 150 3rd Ave S  
City Nashville State TN Zip Code 37201  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Bass, Berry & Sims PLC Occupation Attorney  
Receipt For:  Primary  General  Other (specify)   
Aggregate Year-to-Date **10200.00**  
Date of Receipt **02 / 19 / 2014**  
Transaction ID : SA11AI-12  
Amount of Each Receipt this Period **10200.00**

**B. John Reed**  
Full Name (Last, First, Middle Initial)  
Mailing Address 613 Lynwood Blvd  
City Nashville State TN Zip Code 37205  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Bass, Berry & Sims PLC Occupation Attorney  
Receipt For:  Primary  General  Other (specify)   
Aggregate Year-to-Date **500.00**  
Date of Receipt **02 / 10 / 2014**  
Transaction ID : SA11AI-13  
Amount of Each Receipt this Period **500.00**  
Earmarked Contribution: See Below.

**C. ActBlue PAC**  
Full Name (Last, First, Middle Initial)  
Mailing Address P.O. Box 441146  
City Somerville State MA Zip Code 02238  
FEC ID number of contributing federal political committee. **C** C00401224  
Name of Employer Occupation  
Receipt For:  Primary  General  Other (specify)   
Aggregate Year-to-Date **5700.00**  
Date of Receipt **02 / 26 / 2014**  
Transaction ID : SA11AI-13-10000  
Amount of Each Receipt this Period **500.00**  
[MEMO ITEM]  
Note: Above Contribution earmarked through this organization

**SUBTOTAL** of Receipts This Page (optional)..... **10700.00**  
**TOTAL** This Period (last page this line number only).....

14020211816

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

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

FOR LINE NUMBER: PAGE 8 OF 17  
(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)  
**10,000 Lakes Victory 2014**

**A. William Freeman**  
Full Name (Last, First, Middle Initial)  
Mailing Address 6114 Hillsboro Pike  
City Nashville State TN Zip Code 37215-5006  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Freeman Webb Companies Occupation Real Estate  
Receipt For:  
 Primary  General  
 Other (specify) ▼  
Aggregate Year-to-Date ▼  
5200.00

Date of Receipt  
MM / DD / YYYY  
03 / 26 / 2014  
Transaction ID : SA11AI-20  
Amount of Each Receipt this Period  
5200.00  
Earmarked Contribution: See Below.

**B. ActBlue PAC**  
Full Name (Last, First, Middle Initial)  
Mailing Address P.O. Box 441146  
City Somerville State MA Zip Code 02144  
FEC ID number of contributing federal political committee. **C** C00401224  
Name of Employer Occupation  
Receipt For:  
 Primary  General  
 Other (specify) ▼  
Aggregate Year-to-Date ▼  
5700.00

Date of Receipt  
MM / DD / YYYY  
03 / 31 / 2014  
Transaction ID : SA11AI-20-10000  
Amount of Each Receipt this Period  
5200.00  
[MEMO ITEM]  
Note: Above Contribution earmarked through this organization

**C.**  
Full Name (Last, First, Middle Initial)  
Mailing Address  
City State Zip Code  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Occupation  
Receipt For:  
 Primary  General  
 Other (specify) ▼  
Aggregate Year-to-Date ▼

Date of Receipt  
MM / DD / YYYY  
Amount of Each Receipt this Period

**SUBTOTAL** of Receipts This Page (optional).....▶ 5200.00  
**TOTAL** This Period (last page this line number only).....▶ 36500.00

14020211817



**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 9 OF 17
	<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)  
**10,000 Lakes Victory 2014**

Full Name (Last, First, Middle Initial)		Date of Disbursement	
<b>A. Bank of America</b>		MM / DD / YYYY 02 / 13 / 2014	
Mailing Address PO Box 15290		Transaction ID : SB21B-15	
City	State	Zip Code	Amount of Each Disbursement this Period
Wilmington	DE	19850-5290	
Purpose of Disbursement Bank Charges		Category/ Type	48.00
Candidate Name			
Office Sought:	Disbursement For:		
<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State:	District:		

Full Name (Last, First, Middle Initial)		Date of Disbursement	
<b>B. Bank of America</b>		MM / DD / YYYY 02 / 13 / 2014	
Mailing Address PO Box 15290		Transaction ID : SB21B-16	
City	State	Zip Code	Amount of Each Disbursement this Period
Wilmington	DE	19850-5290	
Purpose of Disbursement Bank Charges		Category/ Type	33.00
Candidate Name			
Office Sought:	Disbursement For:		
<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State:	District:		

Full Name (Last, First, Middle Initial)		Date of Disbursement	
<b>C. Bank of America</b>		MM / DD / YYYY 02 / 18 / 2014	
Mailing Address PO Box 830175		Transaction ID : SB21B-17	
City	State	Zip Code	Amount of Each Disbursement this Period
Dallas	TX	75283	
Purpose of Disbursement Bank Charges		Category/ Type	25.00
Candidate Name			
Office Sought:	Disbursement For:		
<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State:	District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	106.00
<b>TOTAL</b> This Period (last page this line number only)...	

14020211818

**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 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)  
10,000 Lakes Victory 2014

Full Name (Last, First, Middle Initial)

**A. ActBlue Technical Services**

Mailing Address 366 Summer St

City Somerville State MA Zip Code 02144

Purpose of Disbursement  
Credit Card Processing Fees

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement

MM	DD	YYYY
02	26	2014

Transaction ID : SB21B-14

Amount of Each Disbursement this Period

19.75
-------

**B. Direct Connect**

Mailing Address 3901 Centerview Dr Suite W

City Chantilly State VA Zip Code 20151

Purpose of Disbursement  
Credit Card Processing Fees

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement

MM	DD	YYYY
03	03	2014

Transaction ID : SB21B-26

Amount of Each Disbursement this Period

839.51
--------

**C. Direct Connect**

Mailing Address 3901 Centerview Dr Suite W

City Chantilly State VA Zip Code 20151

Purpose of Disbursement  
Credit Card Processing Fees

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement

MM	DD	YYYY
03	03	2014

Transaction ID : SB21B-27

Amount of Each Disbursement this Period

2.00
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SUBTOTAL of Disbursements This Page (optional).....▶

861.26
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TOTAL This Period (last page this line number only).....▶

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14020211819

**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 11 OF 17
	<input checked="" type="checkbox"/> 21b 27	<input type="checkbox"/> 22 28a	<input type="checkbox"/> 23 28b	<input type="checkbox"/> 24 28c	<input type="checkbox"/> 25 29	<input type="checkbox"/> 26 30b	

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NAME OF COMMITTEE (In Full)  
**10,000 Lakes Victory 2014**

Full Name (Last, First, Middle Initial)		Date of Disbursement	
<b>A. Direct Connect</b>		MM / DD / YYYY 03 / 03 / 2014	
Mailing Address 3901 Centerview Dr Suite W		Transaction ID : SB21B-28	
City Chantilly	State VA	Zip Code 20151	Amount of Each Disbursement this Period
Purpose of Disbursement Credit Card Processing Fees	Category/Type		0.15
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial)		Date of Disbursement	
<b>B. Bank of America</b>		MM / DD / YYYY 03 / 17 / 2014	
Mailing Address PO Box 15290		Transaction ID : SB21B-28	
City Wilmington	State DE	Zip Code 19850-5290	Amount of Each Disbursement this Period
Purpose of Disbursement Bank Charges	Category/Type		44.84
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial)		Date of Disbursement	
<b>C. Bank of America</b>		MM / DD / YYYY 03 / 19 / 2014	
Mailing Address PO Box 15731		Transaction ID : SB21B-18	
City Wilmington	State DE	Zip Code 19886	Amount of Each Disbursement this Period
Purpose of Disbursement Credit Card Payment	Category/Type		4128.13
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		See Attached Memo Entry

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	4173.12
<b>TOTAL</b> This Period (last page this line number)...	

14020211820

**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 12 OF 17			
	<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)  
**10,000 Lakes Victory 2014**

Full Name (Last, First, Middle Initial) <b>A. Hotwire, Inc.</b>		Date of Disbursement MM / DD / YYYY 02 / 04 / 2014
Mailing Address 655 Montgomery St Suite 600		Transaction ID : SB21B-18-10000
City San Francisco	State CA	
Zip Code 94111	Purpose of Disbursement Travel Expenses	Amount of Each Disbursement this Period 130.77
Candidate Name	Category/ Type	[MEMO ITEM] Memo Entry
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Southwest Airlines</b>		Date of Disbursement MM / DD / YYYY 02 / 05 / 2014
Mailing Address 2702 Love Field Dr		Transaction ID : SB21B-18-20000
City Dallas	State TX	
Zip Code 75235	Purpose of Disbursement Travel Expenses	Amount of Each Disbursement this Period 364.50
Candidate Name	Category/ Type	[MEMO ITEM] Memo Entry
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. Valentino's Ristorante</b>		Date of Disbursement MM / DD / YYYY 02 / 17 / 2014
Mailing Address 1907 West End Ave		Transaction ID : SB21B-18-30000
City Nashville	State TN	
Zip Code 37203	Purpose of Disbursement Catering/Facilities/ Event Costs	Amount of Each Disbursement this Period 1725.18
Candidate Name	Category/ Type	[MEMO ITEM] Memo Entry
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....▶	0.00
TOTAL This Period (last page this line number)...	

14020211821

**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 13 OF 17	
	<input checked="" type="checkbox"/> 21b 27	<input type="checkbox"/> 22 28a	<input type="checkbox"/> 23 28b	<input type="checkbox"/> 24 28c	<input type="checkbox"/> 25 29	<input type="checkbox"/> 26 30b		

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NAME OF COMMITTEE (In Full)  
**10,000 Lakes Victory 2014**

Full Name (Last, First, Middle Initial) <b>A. American Airlines</b>		Date of Disbursement MM / DD / YYYY 02 / 17 / 2014	
Mailing Address 4333 Amon Carter Blvd		Transaction ID : SB21B-18-40000	
City Fort Worth	State TX	Zip Code 76155	Amount of Each Disbursement this Period 650.00
Purpose of Disbursement Travel Expenses	Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type	[MEMO ITEM] Memo Entry
State: _____	District: _____		

Full Name (Last, First, Middle Initial) <b>B. American Airlines</b>		Date of Disbursement MM / DD / YYYY 02 / 17 / 2014	
Mailing Address 4333 Amon Carter Blvd		Transaction ID : SB21B-18-50000	
City Fort Worth	State TX	Zip Code 76155	Amount of Each Disbursement this Period 399.50
Purpose of Disbursement Travel Expenses	Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type	[MEMO ITEM] Memo Entry
State: _____	District: _____		

Full Name (Last, First, Middle Initial) <b>C. MAPCO Express, Inc.</b>		Date of Disbursement MM / DD / YYYY 02 / 18 / 2014	
Mailing Address 7102 Commerce Way		Transaction ID : SB21B-18-60000	
City Brentwood	State TN	Zip Code 37027	Amount of Each Disbursement this Period 6.45
Purpose of Disbursement Travel Expenses	Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type	[MEMO ITEM] Memo Entry
State: _____	District: _____		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	0.00
<b>TOTAL</b> This Period (last page this line number only)...	

14020211822

**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 14 OF 17
	<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)  
**10,000 Lakes Victory 2014**

Full Name (Last, First, Middle Initial) <b>A. Hutton Hotel</b>		Date of Disbursement	
Mailing Address 1808 West End Ave		MM / DD / YYYY 02 / 19 / 2014	
City Nashville	State TN	Zip Code 37203	Transaction ID : SB21B-18-70000
Purpose of Disbursement Travel Expenses	Candidate Name		Amount of Each Disbursement this Period 5.46
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		[MEMO ITEM] Memo Entry
State: District:	Category/ Type		

Full Name (Last, First, Middle Initial) <b>B. Hutton Hotel</b>		Date of Disbursement	
Mailing Address 1808 West End Ave		MM / DD / YYYY 02 / 19 / 2014	
City Nashville	State TN	Zip Code 37203	Transaction ID : SB21B-18-80000
Purpose of Disbursement Travel Expenses	Candidate Name		Amount of Each Disbursement this Period 267.01
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		[MEMO ITEM] Memo Entry
State: District:	Category/ Type		

Full Name (Last, First, Middle Initial) <b>C. Carey International Inc.</b>		Date of Disbursement	
Mailing Address 5300 Spectrum Dr Suite D		MM / DD / YYYY 02 / 20 / 2014	
City Frederick	State MD	Zip Code 21703	Transaction ID : SB21B-18-90000
Purpose of Disbursement Travel Expenses	Candidate Name		Amount of Each Disbursement this Period 579.26
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		[MEMO ITEM] Memo Entry
State: District:	Category/ Type		

SUBTOTAL of Disbursements This Page (optional).....▶	0.00
TOTAL This Period (last page this line number only).....▶	

14020211823

**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 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)  
10,000 Lakes Victory 2014

Full Name (Last, First, Middle Initial)

**A. EAN Services LLC Servicing Alamo Rent a Car**

Mailing Address PO Box 198154

Date of Disbursement

MM	DD	YYYY
03	20	2014

City Atlanta State GA Zip Code 30384-8154

Transaction ID : SB21B-19

Purpose of Disbursement  
Travel Expenses

Amount of Each Disbursement this Period

Amount	43.69
--------	-------

Candidate Name

Category/ Type
-------------------

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

Full Name (Last, First, Middle Initial)

**B. ActBlue Technical Services**

Mailing Address 366 Summer St

Date of Disbursement

MM	DD	YYYY
03	31	2014

City Somerville State MA Zip Code 02144

Transaction ID : SB21B-21

Purpose of Disbursement  
Credit Card Processing Fees

Amount of Each Disbursement this Period

Amount	205.40
--------	--------

Candidate Name

Category/ Type
-------------------

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

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

Date of Disbursement

MM	DD	YYYY

City State Zip Code

Amount of Each Disbursement this Period

Amount	
--------	--

Purpose of Disbursement

Category/ Type
-------------------

Candidate Name

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

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

Amount	249.09
--------	--------

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

Amount	5389.47
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14020211824

**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 16 OF 17
	<input type="checkbox"/> 21b	<input checked="" 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)  
**10,000 Lakes Victory 2014**

Full Name (Last, First, Middle Initial) <b>A. Democratic Senatorial Campaign Committee</b>		Date of Disbursement MM / DD / YYYY 03 / 31 / 2014
Mailing Address 120 Maryland Ave NE		Transaction ID : SB22-24
City Washington	State DC	
Zip Code 20002	Purpose of Disbursement Transfer	Amount of Each Disbursement this Period 7500.00
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: _____	District: _____	

Full Name (Last, First, Middle Initial) <b>B. Al Franken for Senate 2014</b>		Date of Disbursement MM / DD / YYYY 03 / 31 / 2014
Mailing Address PO Box 583144		Transaction ID : SB22-25
City Minneapolis	State MN	
Zip Code 55458	Purpose of Disbursement Transfer	Amount of Each Disbursement this Period 21000.00
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: _____	District: _____	

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

SUBTOTAL of Disbursements This Page (optional).....	28500.00
TOTAL This Period (last page this line number only).....	28500.00

14020211825



**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 17 OF 17
	<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	
	<input checked="" 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)  
**10,000 Lakes Victory 2014**

Full Name (Last, First, Middle Initial) <b>A. William Freeman</b>		Date of Disbursement MM / DD / YYYY 03 / 31 / 2014
Mailing Address 6114 Hillsboro Pike		Transaction ID : SB28A-23
City Nashville	State TN	
Purpose of Disbursement Contribution Refund		Amount of Each Disbursement this Period 800.00
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type
State: District:		

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

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

SUBTOTAL of Disbursements This Page (optional).....▶	800.00
TOTAL This Period (last page this line number only)...▶	800.00

14020211826

NANCY ERICKSON  
SECRETARY

DANA K. McCALLUM  
SUPERINTENDENT  
HART SENATE OFFICE BUILDING  
SUITE 232  
WASHINGTON, DC 20510-7111  
PHONE (202) 224-0322

United States Senate  
OFFICE OF THE SECRETARY  
OFFICE OF PUBLIC RECORDS

THE PRECEDING DOCUMENT WAS:

HAND DELIVERED 4-15-14  
Date of Receipt

USPS FIRST CLASS MAIL \_\_\_\_\_  
Postmark

USPS REGISTERED/CERTIFIED \_\_\_\_\_  
Postmark

USPS PRIORITY MAIL \_\_\_\_\_  
Postmark

DELIVERY CONFIRMATION OR SIGNATURE CONFIRMATION LABEL

USPS EXPRESS MAIL \_\_\_\_\_  
Postmark

OVERNIGHT DELIVERY SERVICE:

	SHIPPING DATE	NEXT BUSINESS DAY DELIVERY
FEDERAL EXPRESS	_____	<input type="checkbox"/>
UPS	_____	<input type="checkbox"/>
DHL	_____	<input type="checkbox"/>
AIRBORNE EXPRESS	_____	<input type="checkbox"/>

RECEIVED FROM FEDERAL ELECTION COMMISSION \_\_\_\_\_  
Date of Receipt

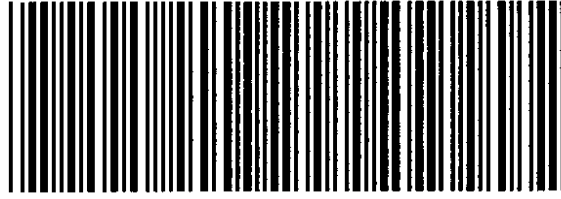
POSTMARK ILLEGIBLE  NO POSTMARK

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

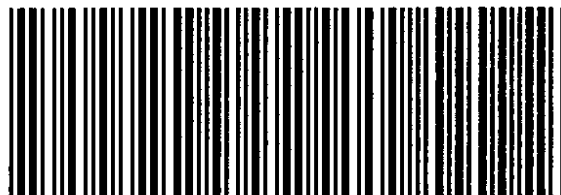
OTHER \_\_\_\_\_  
Date of Receipt or Postmark

PREPARER DH DATE PREPARED 4-15-14

14020211827



SEN PATCH



SEN PATCH

14020211828