

**FEC FORM 3**

**REPORT OF RECEIPTS AND DISBURSEMENTS**  
For An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) **TYPE OR PRINT** Example: If typing, type over the lines. 12FE4M5  
STABENOW VICTORY FUND

ADDRESS (number and street) PO BOX 4462  
EAST LANSING MI 48826  
CITY STATE ZIP CODE

2. **FEC IDENTIFICATION NUMBER** C C00495580  
3. IS THIS REPORT  NEW (N) OR  AMENDED (A)  
STATE DISTRICT MI

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)  
 Termination Report (TER)

(b) 12-Day **PRE**-Election Report for the:  
 Primary (12P)  General (12G)  Runoff (12R)  
 Convention (12C)  Special (12S)  
Election on MM/DD/YYYY in the State of  
(c) 30-Day **POST**-Election Report for the:  
 General (30G)  Runoff (30R)  Special (30S)  
Election on MM/DD/YYYY in the State of

5. Covering Period MM/01 / DD/01 / YYYY 2017 through MM/03 / DD/31 / YYYY 2017

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 Bergman, Cheryl, , ,  
Signature of Treasurer Bergman, Cheryl, , , [Electronically Filed] Date MM/04 / DD/14 / YYYY 2017

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 52 U.S.C. §30109.

**SUMMARY PAGE**  
of Receipts and Disbursements

FEC Form 3 (Revised 05/2016)

Write or Type Committee Name  
**STABENOW VICTORY FUND**

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

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e))....	5400.00	527235.00
(b) Total Contribution Refunds (from Line 20(d)) .....	0.00	27000.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	5400.00	500235.00
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17) .....	10651.98	30927.15
(b) Total Offsets to Operating Expenditures (from Line 14).....	0.00	0.00
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	10651.98	30927.15
8. Cash on Hand at Close of Reporting Period (from Line 27).....	52045.24	
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	

**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 3 (Revised 05/2016)

Write or Type Committee Name

**STABENOW VICTORY FUND**

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

I. RECEIPTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
11. CONTRIBUTIONS (other than loans) FROM:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	5400.00	522600.00
(ii) Unitemized.....	0.00	635.00
(iii) TOTAL of contributions from individuals ▶	5400.00	523235.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	4000.00
(d) The Candidate.....	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	5400.00	527235.00
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES.....		
	0.00	0.00
13. LOANS:		
(a) Made or Guaranteed by the Candidate.....	0.00	0.00
(b) All Other Loans.....	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	0.00	0.00
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.).....		
	0.00	0.00
15. OTHER RECEIPTS (Dividends, Interest, etc.).....		
	5.21	8.57
16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶		
	5405.21	527243.57

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3 (Revised 05/2016)

PAGE 4 / 10

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	10651.98	30927.15
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES .....	51452.32	442098.24
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	0.00
(b) Of All Other Loans .....	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	26000.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	1000.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	0.00	27000.00
21. OTHER DISBURSEMENTS .....	0.00	0.00
22. <b>TOTAL DISBURSEMENTS</b> (add Lines 17, 18, 19(c), 20(d), and 21) ►	62104.30	500025.39

**III. CASH SUMMARY**

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	108744.33
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	5405.21
25. SUBTOTAL (add Line 23 and Line 24).....	114149.54
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	62104.30
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	52045.24

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 5 OF 10	
	<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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)  
**STABENOW VICTORY FUND**

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

Mailing Address PO Box 441146

City Somerville	State MA	Zip Code 02144
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FEC ID number of contributing federal political committee. **C** C00401224

Name of Employer	Occupation
------------------	------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt  

M M / D D / Y Y Y Y Y Y
03 / 31 / 2017

**Transaction ID : SA11AI.5520**

Amount of Each Receipt this Period  

5400.00
---------

Memo Item  
Russell Currey

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

Mailing Address 971 Oakdale Rd

City Atlanta	State GA	Zip Code 30307
-----------------	-------------	-------------------

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

Name of Employer Boxwood Capital LLC	Occupation President
---	-------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 5400.00

Date of Receipt  

M M / D D / Y Y Y Y Y Y
03 / 25 / 2017

**Transaction ID : SA11AI.5517**

Amount of Each Receipt this Period  

5400.00
---------

Memo Item

**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) ▼

Election Cycle-to-Date ▼

Date of Receipt  

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

Amount of Each Receipt this Period  

--

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶	5400.00
<b>TOTAL</b> This Period (last page this line number only)..... ▶	5400.00

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

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"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**STABENOW VICTORY FUND**

Full Name (Last, First, Middle Initial) <b>A. ActBlue Technical Services</b>			Date of Disbursement M M / D D / Y Y Y Y 03 / 31 / 2017	
Mailing Address 366 Summer St			FEC Identification Number C	
City Somerville	State MA	Zip Code 02144	Amount of Each Disbursement this Period 213.30	
Purpose of Disbursement Processing Fee		Category/ Type	Transaction ID : SB17.5549	
Candidate Name		<input type="checkbox"/> Memo Item		
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. Cardosi, Joe, , ,</b>			Date of Disbursement M M / D D / Y Y Y Y 01 / 03 / 2017	
Mailing Address 4078 Mattson Pl			FEC Identification Number C	
City Bainbridge Isalnd	State WA	Zip Code 98110	Amount of Each Disbursement this Period 3411.92	
Purpose of Disbursement Event Staff		Category/ Type	Transaction ID : SB17.5529	
Candidate Name		<input checked="" type="checkbox"/> Memo Item		
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. Delta Air</b>			Date of Disbursement M M / D D / Y Y Y Y 01 / 03 / 2017	
Mailing Address PO Box 20706			FEC Identification Number C	
City Atlanta	State GA	Zip Code 30320	Amount of Each Disbursement this Period 4912.40	
Purpose of Disbursement Airfare		Category/ Type	Transaction ID : SB17.5527	
Candidate Name		<input checked="" type="checkbox"/> Memo Item		
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:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	213.30
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

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"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**STABENOW VICTORY FUND**

Full Name (Last, First, Middle Initial) <b>A. First Financial Bank</b>			Date of Disbursement M M / D D / Y Y Y Y 02 / 06 / 2017		
Mailing Address PO Box 42070			FEC Identification Number C		
City Middletown	State OH	Zip Code 45042	Amount of Each Disbursement this Period 187.00		
Purpose of Disbursement Event Ticket		Category/ Type	Transaction ID : SB17.5537		
Candidate Name		<input type="checkbox"/> Memo Item			
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. K Ocean Girl Inc</b>			Date of Disbursement M M / D D / Y Y Y Y 01 / 03 / 2017		
Mailing Address 16000 Ventura Blvd Ste 600			FEC Identification Number C		
City Encino	State CA	Zip Code 91436	Amount of Each Disbursement this Period 1257.52		
Purpose of Disbursement Lodging		Category/ Type	Transaction ID : SB17.5522		
Candidate Name		<input type="checkbox"/> Memo Item			
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. K Ocean Girl Inc</b>			Date of Disbursement M M / D D / Y Y Y Y 01 / 03 / 2017		
Mailing Address 16000 Ventura Blvd Ste 600			FEC Identification Number C		
City Encino	State CA	Zip Code 91436	Amount of Each Disbursement this Period 4912.40		
Purpose of Disbursement Airfare		Category/ Type	Transaction ID : SB17.5526		
Candidate Name		<input type="checkbox"/> Memo Item			
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:					

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	6356.92
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

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"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**STABENOW VICTORY FUND**

Full Name (Last, First, Middle Initial) <b>A. K Ocean Girl Inc</b>			Date of Disbursement M M / D D / Y Y Y Y 01 / 03 / 2017	
Mailing Address 16000 Ventura Blvd Ste 600			FEC Identification Number C	
City Encino	State CA	Zip Code 91436	Amount of Each Disbursement this Period 3411.92	
Purpose of Disbursement Event Staff		Category/Type	Transaction ID : SB17.5528	
Candidate Name		Memo Item <input type="checkbox"/>		
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. Michaels</b>			Date of Disbursement M M / D D / Y Y Y Y 02 / 06 / 2017	
Mailing Address 540 Frandor Ave			FEC Identification Number C	
City Lansing	State MI	Zip Code 48912	Amount of Each Disbursement this Period 103.87	
Purpose of Disbursement Event Supplies		Category/Type	Transaction ID : SB17.5534	
Candidate Name		Memo Item <input checked="" type="checkbox"/>		
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. Perkins Coie</b>			Date of Disbursement M M / D D / Y Y Y Y 02 / 28 / 2017	
Mailing Address 1201 3rd Ave #40			FEC Identification Number C	
City Seattle	State WA	Zip Code 98101	Amount of Each Disbursement this Period 275.00	
Purpose of Disbursement Legal Services		Category/Type	Transaction ID : SB17.5546	
Candidate Name		Memo Item <input type="checkbox"/>		
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:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	3686.92
<b>TOTAL</b> This Period (last page this line number only).....▶	



**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

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"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**STABENOW VICTORY FUND**

Full Name (Last, First, Middle Initial) <b>A. Perkins Coie</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 21 / 2017
Mailing Address 1201 3rd Ave #40		FEC Identification Number C
City Seattle	State WA	Zip Code 98101
Purpose of Disbursement Legal Services		Amount of Each Disbursement this Period 150.00
Candidate Name		Transaction ID : SB17.5548
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) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) <b>B. The Westin Book Cadillac</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 03 / 2017
Mailing Address 1114 Washington Blvd		FEC Identification Number C
City Detroit	State MI	Zip Code 48226
Purpose of Disbursement Lodging		Amount of Each Disbursement this Period 1257.52
Candidate Name		Transaction ID : SB17.5524
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) ▼	<input checked="" type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) <b>C. Wharton Center for Performing Arts</b>		Date of Disbursement M M / D D / Y Y Y Y 02 / 06 / 2017
Mailing Address 750 E Shaw Ln		FEC Identification Number C
City East Lansing	State MI	Zip Code 48824
Purpose of Disbursement Event Ticket		Amount of Each Disbursement this Period 187.00
Candidate Name		Transaction ID : SB17.5545
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) ▼	<input checked="" type="checkbox"/> Memo Item
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	150.00
<b>TOTAL</b> This Period (last page this line number only).....▶	10407.14

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 10 OF 10	
	<input type="checkbox"/> 17 20a	<input checked="" type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**STABENOW VICTORY FUND**

Full Name (Last, First, Middle Initial) <b>A. Great Lakes PAC</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 09 / 2017
Mailing Address 700 13TH STREET, NW SUITE 600		FEC Identification Number C C00375584
City WASHINGTON	State DC	Zip Code 20005
Purpose of Disbursement Transfer		Amount of Each Disbursement this Period 51452.32
Candidate Name		Transaction ID : SB18.5550
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) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) <b>B.</b>		Date of Disbursement M M / D D / Y Y Y Y
Mailing Address		FEC Identification Number C
City	State	Zip Code
Purpose of Disbursement		Amount of Each Disbursement this Period
Candidate Name		<input type="checkbox"/> Memo Item
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 M M / D D / Y Y Y Y
Mailing Address		FEC Identification Number C
City	State	Zip Code
Purpose of Disbursement		Amount of Each Disbursement this Period
Candidate Name		<input type="checkbox"/> Memo Item
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:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	51452.32
<b>TOTAL</b> This Period (last page this line number only).....▶	51452.32