

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. 12FE4M5 CONSERVATIVE VICTORY FUND

ADDRESS (number and street) 801 NORTH PITT STREET SUITE 115 ALEXANDRIA VA 22314-1783

2. FEC IDENTIFICATION NUMBER C C00009704 3. IS THIS REPORT NEW (N) OR AMENDED (A)

4. TYPE OF REPORT (Choose One) (a) Quarterly Reports: April 15, July 15, October 15, January 31, July 31 Mid-Year, Termination Report. (b) Monthly Report Due On: Feb 20, Mar 20, Apr 20, May 20, Jun 20, Jul 20, Aug 20, Sep 20, Oct 20, Nov 20, Dec 20, Jan 31. (c) 12-Day PRE-Election Report for the: Primary, General, Runoff, Convention, Special. (d) 30-Day POST-Election Report for the: General, Runoff, Special.

5. Covering Period 10 / 01 / 2013 through 10 / 31 / 2013

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 Mr. Thomas S. Winter

Signature of Treasurer Mr. Thomas S. Winter [Electronically Filed] Date 11 / 15 / 2013

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

**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name

**CONSERVATIVE VICTORY FUND**

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="2013"/>		42648.25
(b) Cash on Hand at Beginning of Reporting Period.....	35792.95	
(c) Total Receipts (from Line 19) .....	2550.39	42500.94
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	38343.34	85149.19
7. Total Disbursements (from Line 31).....	4274.14	51079.99
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	34069.20	34069.20
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	

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

Write or Type Committee Name

**CONSERVATIVE VICTORY FUND**

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).....	1600.00	16125.00
(ii) Unitemized .....	950.00	21337.00
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	2550.00	37462.00
(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) .....	2550.00	37462.00
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	369.87
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.39	4669.07
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))..... ▶	2550.39	42500.94
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	2550.39	42500.94

**DETAILED SUMMARY PAGE**

of Disbursements

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 .....	3041.24	42538.63
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	3041.24	42538.63
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	1232.90	8541.36
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)) ..	4274.14	51079.99
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	4274.14	51079.99

**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) .....	2550.00	37462.00
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	2550.00	37462.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	3041.24	42538.63
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	369.87
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	3041.24	42168.76

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: F3XN  
Transaction ID :

None of the Schedule B expenditures were for public communications or voter drive activity.

Form/Schedule:  
Transaction ID:

**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 17
	<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	<input type="checkbox"/> 17

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

**A. SGM. William J. Durr Ret.**

Full Name (Last, First, Middle Initial)  
Mailing Address 752 Golden Hill Road

City Cornwallville State NY Zip Code 12418-1207

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 ▼ 300.00

Date of Receipt  
10 / 09 / 2013  
**Transaction ID : SA11AI.8039**

Amount of Each Receipt this Period  
50.00

**B. Dr. Dudley D. Jones M.D.**

Full Name (Last, First, Middle Initial)  
Mailing Address 300 N. Creekwood Drive

City Mansfield State TX Zip Code 76063

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

Name of Employer Ameripath, Inc. Occupation Pathologist

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
10 / 16 / 2013  
**Transaction ID : SA11AI.8042**

Amount of Each Receipt this Period  
100.00

**C. Ms. Helen L. Marshall**

Full Name (Last, First, Middle Initial)  
Mailing Address 827 Susan Avenue

City Woodstock State VA Zip Code 22664-1133

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 ▼ 700.00

Date of Receipt  
10 / 23 / 2013  
**Transaction ID : SA11AI.8044**

Amount of Each Receipt this Period  
100.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 250.00

**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: PAGE 8 OF 17  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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

**A. Mr. John Rhoad**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1037 Glenn Avenue  
 City Washington C. House State OH Zip Code 43160-2604  
 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 ▼ 400.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 31 / 2013  
**Transaction ID : SA11AI.8050**  
 Amount of Each Receipt this Period  
 200.00

**B. Mr. John B. Valerius**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1909 Canterbury St.  
 City Irving State TX Zip Code 75062-3551  
 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 ▼ 580.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 23 / 2013  
**Transaction ID : SA11AI.8055**  
 Amount of Each Receipt this Period  
 100.00

**C. Mr. Dale M. Walsh**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 106 Swede Canyon  
 City Boerne State TX Zip Code 78006  
 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 ▼ 300.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 31 / 2013  
**Transaction ID : SA11AI.8056**  
 Amount of Each Receipt this Period  
 300.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 600.00  
**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: PAGE 9 OF 17  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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

**A. Mr. & Mrs. John F. Woodhouse**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 650 Ramblewood Road  
 City Houston State TX Zip Code 77079-6905  
 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 ▼ 500.00

Date of Receipt 10 / 18 / 2013  
**Transaction ID : SA11AI.8058**  
 Amount of Each Receipt this Period 500.00

**B. Mr. Lock R. Young**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1383 Worth Court, N.E.  
 City Palm Bay State FL Zip Code 32905  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Self Occupation Consultant  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 10 / 21 / 2013  
**Transaction ID : SA11AI.8059**  
 Amount of Each Receipt this Period 250.00

**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  
 Amount of Each Receipt this Period

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	750.00
<b>TOTAL</b> This Period (last page this line number only).....▶	1600.00

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

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

FOR LINE NUMBER: PAGE 10 OF 17  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

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

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

Mailing Address P.O. Box 622227

City Orlando State FL Zip Code 32862-2227

FEC ID number of contributing federal political committee.

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt  
 /  /   
**Transaction ID : SA17.8080**

Amount of Each Receipt this Period

Interest

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

Mailing Address

City State Zip Code

FEC ID number of contributing federal political committee.

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt  
 /  /

Amount of Each Receipt this Period

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

Mailing Address

City State Zip Code

FEC ID number of contributing federal political committee.

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt  
 /  /

Amount of Each Receipt this Period

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<input type="text" value="0.39"/>
<b>TOTAL</b> This Period (last page this line number only).....▶	<input type="text" value="0.39"/>

**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)  
**CONSERVATIVE VICTORY FUND**

Full Name (Last, First, Middle Initial)

**A. CitiBusiness Card**

Mailing Address P.O. Box 182564

City Columbus State OH Zip Code 43218-2564

Purpose of Disbursement  
Postage for PAC operation

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
10 / 07 / 2013

**Transaction ID : SB21B.8060**

Amount of Each Disbursement this Period

96.60

Full Name (Last, First, Middle Initial)

**B. CitiBusiness Card**

Mailing Address P.O. Box 182564

City Columbus State OH Zip Code 43218-2564

Purpose of Disbursement  
Printing letterhead and envelopes

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
10 / 07 / 2013

**Transaction ID : SB21B.8061**

Amount of Each Disbursement this Period

305.64

Full Name (Last, First, Middle Initial)

**C. Comcast Communications**

Mailing Address PO Box 3005

City Southeastern State PA Zip Code 19398-3005

Purpose of Disbursement  
Internet and telephone service

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
10 / 14 / 2013

**Transaction ID : SB21B.8062**

Amount of Each Disbursement this Period

54.95

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

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

457.19

**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)  
**CONSERVATIVE VICTORY FUND**

Full Name (Last, First, Middle Initial)

**A. Comptroller of Maryland**

Mailing Address P.O. Box 17132

City Baltimore State MD Zip Code 21297-0175

Purpose of Disbursement  
Withholding Tax

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
10 / 07 / 2013

**Transaction ID : SB21B.8063**

Amount of Each Disbursement this Period

60.48

Full Name (Last, First, Middle Initial)

**B. DOES**

Mailing Address P.O. Box 96664

City Washington State DC Zip Code 20090-6664

Purpose of Disbursement  
Unemployment tax

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
10 / 25 / 2013

**Transaction ID : SB21B.8064**

Amount of Each Disbursement this Period

60.33

Full Name (Last, First, Middle Initial)

**C. National Caregiving Foundation**

Mailing Address 801 North Pitt Street  
Suite 117

City Alexandria State VA Zip Code 22314

Purpose of Disbursement  
Rent

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
10 / 01 / 2013

**Transaction ID : SB21B.8065**

Amount of Each Disbursement this Period

550.00

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

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

670.81

**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)  
**CONSERVATIVE VICTORY FUND**

Full Name (Last, First, Middle Initial)

**A. PAC Faxes (In House)**

Mailing Address P.O. Box 15245

City Washington State DC Zip Code 20003

Purpose of Disbursement  
In-Kind Duffy for Congress

Candidate Name  
**SEAN DUFFY**

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

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			25			2013			

Transaction ID : **SB21B.8076**

Amount of Each Disbursement this Period

-368.10
---------

Full Name (Last, First, Middle Initial)

**B. PAC Faxes (In House)**

Mailing Address P.O. Box 15245

City Washington State DC Zip Code 20003

Purpose of Disbursement  
In-Kind Walorski for Congress

Candidate Name  
**JACKIE (SWIHART) WALORSKI**

Office Sought:  House  Senate  President  
State: IN District: 02

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			31			2013			

Transaction ID : **SB21B.8078**

Amount of Each Disbursement this Period

-364.80
---------

Full Name (Last, First, Middle Initial)

**C. Pearson & Pipkin, Inc.**

Mailing Address 1101 Pennsylvania Ave., S.E.  
Suite 201

City Washington State DC Zip Code 20003

Purpose of Disbursement  
Voided check dated 4/29/2013 (Destroyed in fire.)

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			07			2013			

Transaction ID : **SB21B.8066**

Amount of Each Disbursement this Period

-2940.73
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**SUBTOTAL** of Disbursements This Page (optional)..... ▶

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

-3673.63
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**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)  
**CONSERVATIVE VICTORY FUND**

Full Name (Last, First, Middle Initial)

**A. Pearson & Pipkin, Inc.**

Mailing Address 1101 Pennsylvania Ave., S.E.  
Suite 201

City Washington State DC Zip Code 20003

Purpose of Disbursement  
Consulting fee and expenses

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
10 / 07 / 2013

Transaction ID : **SB21B.8067**

Amount of Each Disbursement this Period

2940.73

Full Name (Last, First, Middle Initial)

**B. Dr. Trevor K. Smith**

Mailing Address 3652 Lightner Court

City Waldorf State MD Zip Code 20602

Purpose of Disbursement  
Payroll

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
10 / 02 / 2013

Transaction ID : **SB21B.8068**

Amount of Each Disbursement this Period

142.51

Full Name (Last, First, Middle Initial)

**C. Dr. Trevor K. Smith**

Mailing Address 3652 Lightner Court

City Waldorf State MD Zip Code 20602

Purpose of Disbursement  
Payroll

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
10 / 16 / 2013

Transaction ID : **SB21B.8069**

Amount of Each Disbursement this Period

158.38

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

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

3241.62

**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)  
**CONSERVATIVE VICTORY FUND**

Full Name (Last, First, Middle Initial)

**A. Dr. Trevor K. Smith**

Mailing Address 3652 Lightner Court

City Waldorf State MD Zip Code 20602

Purpose of Disbursement  
Payroll

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			30			2013			

**Transaction ID : SB21B.8070**

Amount of Each Disbursement this Period

172.20
--------

Full Name (Last, First, Middle Initial)

**B. SunTrust Bank**

Mailing Address P.O. Box 622227

City Orlando State FL Zip Code 32862-2227

Purpose of Disbursement  
Bank Fee

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			21			2013			

**Transaction ID : SB21B.8081**

Amount of Each Disbursement this Period

29.84
-------

Full Name (Last, First, Middle Initial)

**C. United States Treasury**

Mailing Address Internal Revenue Service  
P.O. Box 804522

City Cincinnati State OH Zip Code 45280-4522

Purpose of Disbursement  
Payroll tax

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			07			2013			

**Transaction ID : SB21B.8071**

Amount of Each Disbursement this Period

824.62
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**SUBTOTAL** of Disbursements This Page (optional)..... ▶

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

1026.66
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**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)  
**CONSERVATIVE VICTORY FUND**

Full Name (Last, First, Middle Initial)

**A. Mrs. Dawne Winter**

Mailing Address 16 Fourth St., S.E.

City Washington State DC Zip Code 20003

Purpose of Disbursement  
Payroll

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		02		2013

**Transaction ID : SB21B.8072**

Amount of Each Disbursement this Period

439.53
--------

Full Name (Last, First, Middle Initial)

**B. Mrs. Dawne Winter**

Mailing Address 16 Fourth St., S.E.

City Washington State DC Zip Code 20003

Purpose of Disbursement  
Payroll

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		16		2013

**Transaction ID : SB21B.8073**

Amount of Each Disbursement this Period

439.53
--------

Full Name (Last, First, Middle Initial)

**C. Mrs. Dawne Winter**

Mailing Address 16 Fourth St., S.E.

City Washington State DC Zip Code 20003

Purpose of Disbursement  
Payroll

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		30		2013

**Transaction ID : SB21B.8074**

Amount of Each Disbursement this Period

439.53
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**SUBTOTAL** of Disbursements This Page (optional)..... ▶

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

1318.59
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3041.24
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**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)  
**CONSERVATIVE VICTORY FUND**

Full Name (Last, First, Middle Initial)

**A. FRIENDS OF JIM INHOFE COMMITTEE**

Mailing Address PO BOX 13300

City OKLAHOMA CITY State OK Zip Code 73113

Purpose of Disbursement  
Contribution

Candidate Name  
**JAMES M INHOFE**

Office Sought:  House  Senate  President  
State: OK District: 00

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		14		2013

**Transaction ID : SB23.8075**

Amount of Each Disbursement this Period

500.00
--------

Full Name (Last, First, Middle Initial)

**B. PAC Faxes (In House)**

Mailing Address P.O. Box 15245

City Washington State DC Zip Code 20003

Purpose of Disbursement  
In-kind contribution: faxes

Candidate Name  
**SEAN DUFFY**

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

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		25		2013

**Transaction ID : SB23.8077**

Amount of Each Disbursement this Period

368.10
--------

Full Name (Last, First, Middle Initial)

**C. PAC Faxes (In House)**

Mailing Address P.O. Box 15245

City Washington State DC Zip Code 20003

Purpose of Disbursement  
In-kind contribution: faxes

Candidate Name  
**JACKIE (SWIHART) WALORSKI**

Office Sought:  House  Senate  President  
State: IN District: 02

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		31		2013

**Transaction ID : SB23.8079**

Amount of Each Disbursement this Period

364.80
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**SUBTOTAL** of Disbursements This Page (optional)..... ▶

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

1232.90
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1232.90
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