

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

MEYERS, VICTOR S

ADDRESS (number and street)

34900 EASTVIEW RD

Check if different than previously reported. (ACC)

TRINIDAD

CO

81082

2. FEC IDENTIFICATION NUMBER ▼

C C00547661

CITY ▲

STATE ▲

ZIP CODE ▲

STATE ▼ DISTRICT

3. IS THIS REPORT

NEW (N)

OR

AMENDED (A)

CO

04

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
11 / 04 / 2014

DD / YYYY

YYYY

in the State of

CO

(c) 30-Day POST-Election Report for the:

General (30G)

Runoff (30R)

Special (30S)

Election on

MM / DD / YYYY

DD / YYYY

YYYY

in the State of

5. Covering Period

MM / DD / YYYY
10 / 01 / 2014

DD / YYYY

YYYY

through

MM / DD / YYYY
10 / 15 / 2014

DD / YYYY

YYYY

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 Dianne E Bailey

Signature of Treasurer Dianne E Bailey

[Electronically Filed]

Date

MM / DD / YYYY
10 / 20 / 2014

DD / YYYY

YYYY

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

Office Use Only

FEC FORM 3
(Revised 02/2003)

SUMMARY PAGE
of Receipts and Disbursements

Write or Type Committee Name
MEYERS, VICTOR S

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))....	8629.85	72014.03
(b) Total Contribution Refunds (from Line 20(d))	0.00	20.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	8629.85	71994.03
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	7963.45	60118.35
(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)).....	7963.45	60118.35
8. Cash on Hand at Close of Reporting Period (from Line 27).....	11880.68	
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).....	5.00	

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 12/2003)

Write or Type Committee Name

MEYERS, VICTOR S

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).....	1694.85	23806.02
(ii) Unitemized.....	1935.00	24268.01
(iii) TOTAL of contributions from individuals ▶	3629.85	48074.03
(b) Political Party Committees.....	0.00	2500.00
(c) Other Political Committees (such as PACs).....	5000.00	21400.00
(d) The Candidate.....	0.00	40.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	8629.85	72014.03
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES	0.00	0.00
13. LOANS:		
(a) Made or Guaranteed by the Candidate.....	0.00	25.00
(b) All Other Loans.....	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	0.00	25.00
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.)	0.00	0.00
15. OTHER RECEIPTS (Dividends, Interest, etc.)	0.00	0.00
16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶	8629.85	72039.03

DETAILED SUMMARY PAGE
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	7963.45	60118.35
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	20.00
(b) Of All Other Loans	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	20.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees	0.00	20.00
(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 20(a), (b), and (c)).....	0.00	20.00
21. OTHER DISBURSEMENTS	0.00	0.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ►	7963.45	60158.35

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	11214.28
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	8629.85
25. SUBTOTAL (add Line 23 and Line 24).....	19844.13
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	7963.45
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	11880.68

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

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)
MEYERS, VICTOR S

A. Full Name (Last, First, Middle Initial)
Terrence Cannon

Mailing Address 739 N Faver Dr

City State Zip Code
Castle Rock CO 80109

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

Name of Employer Occupation
None Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1378.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 06 / 2014

Transaction ID : SA11AI.6306

Amount of Each Receipt this Period
150.00

Check 2630

B. Full Name (Last, First, Middle Initial)
Terrence Cannon

Mailing Address 739 N Faver Dr

City State Zip Code
Castle Rock CO 80109

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

Name of Employer Occupation
None Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1447.85

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 08 / 2014

Transaction ID : SA11AI.6369

Amount of Each Receipt this Period
69.85

In-kind - Postage Stamps for Thank you cards

C. Full Name (Last, First, Middle Initial)
Terrence Cannon

Mailing Address 739 N Faver Dr

City State Zip Code
Castle Rock CO 80109

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

Name of Employer Occupation
None Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1547.85

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 14 / 2014

Transaction ID : SA11AI.6368

Amount of Each Receipt this Period
100.00

AB

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

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

319.85

**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 6 OF 17
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
MEYERS, VICTOR S

A. Full Name (Last, First, Middle Initial)
Charles M Fry

Mailing Address 6530 N Hillside Way

City Parker State CO Zip Code 80134-6323

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

Name of Employer None Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 10 / 2014

Transaction ID : SA11AI.6333

Amount of Each Receipt this Period
 250.00

Check 3823

B. Full Name (Last, First, Middle Initial)
Patricia A Garver

Mailing Address 17999 County Road W #T.5

City Fort Morgan State CO Zip Code 80701

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

Name of Employer None Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 08 / 2014

Transaction ID : SA11AI.6316

Amount of Each Receipt this Period
 200.00

Check 3333

C. Full Name (Last, First, Middle Initial)
Rollie Heath

Mailing Address 2455 Vassar Dr

City Boulder State CO Zip Code 80305

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

Name of Employer State of Colorado Occupation State Senator

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 05 / 2014

Transaction ID : SA11AI.6327

Amount of Each Receipt this Period
 200.00

AB 3000182655

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

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

650.00

**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 7 OF 17
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
MEYERS, VICTOR S

A. Full Name (Last, First, Middle Initial)
Marilyn Hughes

Mailing Address 1126 4th Ave

City Longmont State CO Zip Code 80501

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

Name of Employer Retired Occupation Teacher

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1876.08

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 08 / 2014

Transaction ID : SA11AI.6371

Amount of Each Receipt this Period
125.00
 In-kind - Octoberfest Booth - Longmont

B. Full Name (Last, First, Middle Initial)
Marilyn Hughes

Mailing Address 1126 4th Ave

City Longmont State CO Zip Code 80501

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

Name of Employer Retired Occupation Teacher

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2076.08

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 10 / 2014

Transaction ID : SA11AI.6376

Amount of Each Receipt this Period
200.00
 In-kind - Boulder Dems Voter Guide

C. Full Name (Last, First, Middle Initial)
Sharon Malloy

Mailing Address 2113 Rangeview Ln

City Longmont State CO Zip Code 80501

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

Name of Employer None Occupation Retired Teacher

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
310.00

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 06 / 2014

Transaction ID : SA11AI.6311

Amount of Each Receipt this Period
25.00
 Check 1460

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

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

350.00

**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 8 OF 17
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
MEYERS, VICTOR S

A. Full Name (Last, First, Middle Initial)
Eric (Ric) Rogers

Mailing Address 610 54th Ave

City State Zip Code
Greeley CO 80634

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

Name of Employer Occupation
None Retired Educator

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
200.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 06 / 2014

Transaction ID : SA11AI.6314

Amount of Each Receipt this Period
50.00

Check 6552

B. Full Name (Last, First, Middle Initial)
Van Sauve

Mailing Address 4322 Vindale Ln

City State Zip Code
Byers CO 80103-8589

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

Name of Employer Occupation
None Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 08 / 2014

Transaction ID : SA11AI.6337

Amount of Each Receipt this Period
25.00

NB

C. Full Name (Last, First, Middle Initial)
Jeri Shepherd

Mailing Address 1713 Fairacre Rd

City State Zip Code
Greeley CO 80631

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

Name of Employer Occupation
Self-Employed Attorney

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
465.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 03 / 2014

Transaction ID : SA11AI.6295

Amount of Each Receipt this Period
50.00

Check 13053

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

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

125.00

**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 9 OF 17
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
MEYERS, VICTOR S

A. Full Name (Last, First, Middle Initial)
Janet Rivera Switzer

Mailing Address 8957 Grand Ave

City Beulah State CO Zip Code 81023

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

Name of Employer Self-Employed Occupation Etsy Shop

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **350.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
10 / 02 / 2014

Transaction ID : SA11Al.6302

Amount of Each Receipt this Period
250.00

NB

B. 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 M / D D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

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

Amount of Each Receipt this Period

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

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

250.00

1694.85

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

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NAME OF COMMITTEE (In Full)
MEYERS, VICTOR S

A. Full Name (Last, First, Middle Initial)
United Food and Commercial Workers International Union

Mailing Address 1775 K Street N. W.

City Washington State DC Zip Code 20006-1598

FEC ID number of contributing federal political committee. **C** C00002766

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
10000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y Y
10		14		2014

Transaction ID : SA11C.6378

Amount of Each Receipt this Period
5000.00

Check

B. 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 M	/	D D D	/	Y Y Y Y Y Y Y
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Amount of Each Receipt this Period

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 M	/	D D D	/	Y Y Y Y Y Y Y
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Amount of Each Receipt this Period

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

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

5000.00

5000.00

**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 11 OF 17			
	<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)
MEYERS, VICTOR S

Full Name (Last, First, Middle Initial) A. ActBlue		Date of Disbursement
Mailing Address 366 Summer St		M M / D D / Y Y Y Y 10 / 01 / 2014
City Sommerville	State MA	Zip Code 02144
Purpose of Disbursement ActBlue Fee	003	
Candidate Name MEYERS, VICTOR S		Category/ Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: CO District: 04		
		Amount of Each Disbursement this Period 14.33 Transaction ID : SB17.6461

Full Name (Last, First, Middle Initial) B. ActBlue		Date of Disbursement
Mailing Address 366 Summer St		M M / D D / Y Y Y Y 10 / 06 / 2014
City Sommerville	State MA	Zip Code 02144
Purpose of Disbursement ActBlue Fee	003	
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		
		Amount of Each Disbursement this Period 8.12 Transaction ID : SB17.6463

Full Name (Last, First, Middle Initial) c. ActBlue		Date of Disbursement
Mailing Address 366 Summer St		M M / D D / Y Y Y Y 10 / 08 / 2014
City Sommerville	State MA	Zip Code 02144
Purpose of Disbursement ActBlue Fee	003	
Candidate Name MEYERS, VICTOR S		Category/ Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: CO District: 04		
		Amount of Each Disbursement this Period 11.67 Transaction ID : SB17.6465

SUBTOTAL of Disbursements This Page (optional).....	34.12
TOTAL 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 12 OF 17	
	<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)
MEYERS, VICTOR S

Full Name (Last, First, Middle Initial) A. C & D Printing		Date of Disbursement M M / D D / Y Y Y Y 10 / 07 / 2014
Mailing Address 5351 Tennyson St Unit 1-C		Amount of Each Disbursement this Period 196.80 Transaction ID : SB17.6422
City Denver State CO Zip Code 80212	Purpose of Disbursement 250 BREs 003 Category/Type	
Candidate Name MEYERS, VICTOR S	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CO District: 04	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		

Full Name (Last, First, Middle Initial) B. Terrence Cannon		Date of Disbursement M M / D D / Y Y Y Y 10 / 08 / 2014
Mailing Address 739 N Faver Dr		Amount of Each Disbursement this Period 69.85 Transaction ID : SB17.6370
City Castle Rock State CO Zip Code 80109	Purpose of Disbursement In-kind - Postage Stamps for Thank you cards 003 Category/Type	
Candidate Name MEYERS, VICTOR S	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CO District: 04	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		

Full Name (Last, First, Middle Initial) C. COLORADO DEMOCRATIC PARTY		Date of Disbursement M M / D D / Y Y Y Y 10 / 08 / 2014
Mailing Address 789 SHERMAN STREET, SUITE 110		Amount of Each Disbursement this Period 5000.00 Transaction ID : SB17.6460
City DENVER State CO Zip Code 80203	Purpose of Disbursement Coordinated Campaign 001 Category/Type	
Candidate Name MEYERS, VICTOR S	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CO District: 04	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		

SUBTOTAL of Disbursements This Page (optional).....	5266.65
TOTAL 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 13 OF 17			
	<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)
MEYERS, VICTOR S

Full Name (Last, First, Middle Initial) A. Food Plaza - Rocky Ford		Date of Disbursement M M / D D / Y Y Y Y 10 / 14 / 2014
Mailing Address 1207 Elm St		Amount of Each Disbursement this Period 45.52 Transaction ID : SB17.6436
City Rocky Ford	State CO Zip Code 81067	
Purpose of Disbursement Transportation - Fuel	Category/Type 002	
Candidate Name MEYERS, VICTOR S	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: CO District: 04	

Full Name (Last, First, Middle Initial) B. Marilyn Hughes		Date of Disbursement M M / D D / Y Y Y Y 10 / 08 / 2014
Mailing Address 1126 4th Ave		Amount of Each Disbursement this Period 125.00 Transaction ID : SB17.6372
City Longmont	State CO Zip Code 80501	
Purpose of Disbursement In-kind - Octoberfest Booth - Longmont	Category/Type 007	
Candidate Name MEYERS, VICTOR S	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: CO District: 04	

Full Name (Last, First, Middle Initial) c. Marilyn Hughes		Date of Disbursement M M / D D / Y Y Y Y 10 / 10 / 2014
Mailing Address 1126 4th Ave		Amount of Each Disbursement this Period 200.00 Transaction ID : SB17.6377
City Longmont	State CO Zip Code 80501	
Purpose of Disbursement In-kind - Boulder Dems Voter Guide	Category/Type 004	
Candidate Name MEYERS, VICTOR S	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: CO District: 04	

SUBTOTAL of Disbursements This Page (optional).....	370.52
TOTAL 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 14 OF 17			
	<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)
MEYERS, VICTOR S

Full Name (Last, First, Middle Initial) A. Colin Kraus		Date of Disbursement M M / D D / Y Y Y Y 10 / 01 / 2014
Mailing Address 1612 S Josephine St		Amount of Each Disbursement this Period 600.00 Transaction ID : SB17.6388
City Denver State CO Zip Code 80201	Purpose of Disbursement Salary for September 001 Category/Type	
Candidate Name MEYERS, VICTOR S	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CO District: 04	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		

Full Name (Last, First, Middle Initial) B. Jeff Kraus		Date of Disbursement M M / D D / Y Y Y Y 10 / 01 / 2014
Mailing Address 1612 S Josephine St		Amount of Each Disbursement this Period 600.00 Transaction ID : SB17.6389
City Denver State CO Zip Code 80210	Purpose of Disbursement Salary for September 001 Category/Type	
Candidate Name MEYERS, VICTOR S	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CO District: 04	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		

Full Name (Last, First, Middle Initial) C. OOMA Inc		Date of Disbursement M M / D D / Y Y Y Y 10 / 03 / 2014
Mailing Address 1880 Embarcadero Dr		Amount of Each Disbursement this Period 15.94 Transaction ID : SB17.6403
City Palo Alto State CA Zip Code 94303	Purpose of Disbursement Internet 001 Category/Type	
Candidate Name MEYERS, VICTOR S	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CO District: 04	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		

SUBTOTAL of Disbursements This Page (optional).....	1215.94
TOTAL 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 15 OF 17			
	<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)
MEYERS, VICTOR S

Full Name (Last, First, Middle Initial) A. PayPal		Date of Disbursement M M / D D / Y Y Y Y 10 / 03 / 2014
Mailing Address 2211 North First Steet		Amount of Each Disbursement this Period 13.40 Transaction ID : SB17.6462
City San Jose State CA Zip Code 95131	Purpose of Disbursement PayPal Fee 003 Category/Type	
Candidate Name MEYERS, VICTOR S	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General Other (specify)	
State: CO District: 04		

Full Name (Last, First, Middle Initial) B. PayPal		Date of Disbursement M M / D D / Y Y Y Y 10 / 06 / 2014
Mailing Address 2211 North First Steet		Amount of Each Disbursement this Period 12.37 Transaction ID : SB17.6464
City San Jose State CA Zip Code 95131	Purpose of Disbursement PayPal Fee 003 Category/Type	
Candidate Name MEYERS, VICTOR S	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General Other (specify)	
State: CO District: 04		

Full Name (Last, First, Middle Initial) c. PayPal		Date of Disbursement M M / D D / Y Y Y Y 10 / 13 / 2014
Mailing Address 2211 North First Steet		Amount of Each Disbursement this Period 8.76 Transaction ID : SB17.6466
City San Jose State CA Zip Code 95131	Purpose of Disbursement PayPal Fee 003 Category/Type	
Candidate Name MEYERS, VICTOR S	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General Other (specify)	
State: CO District: 04		

SUBTOTAL of Disbursements This Page (optional).....	34.53
TOTAL 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 16 OF 17		
	<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)
MEYERS, VICTOR S

Full Name (Last, First, Middle Initial) A. TLC Real Estate		Date of Disbursement M M / D D / Y Y Y Y 10 / 02 / 2014
Mailing Address 404 East Main Street		Amount of Each Disbursement this Period 250.00 Transaction ID : SB17.6395
City Trinidad	State CO	
Zip Code 80182	Purpose of Disbursement Trinidad Office - Rent	Category/ Type 001
Candidate Name MEYERS, VICTOR S	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: CO District: 04	

Full Name (Last, First, Middle Initial) B.		Date of Disbursement M M / D D / Y Y Y Y
Mailing Address		Amount of Each Disbursement this Period
City	State	
Zip Code	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)	State: District:	

Full Name (Last, First, Middle Initial) C.		Date of Disbursement M M / D D / Y Y Y Y
Mailing Address		Amount of Each Disbursement this Period
City	State	
Zip Code	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)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	250.00
TOTAL This Period (last page this line number only).....	7171.76

SCHEDULE C (FEC Form 3)
LOANS

NAME OF COMMITTEE (In Full) **MEYERS, VICTOR S** Transaction ID : **SC/10.5501**

LOAN SOURCE Full Name (Last, First, Middle Initial) MEYERS, VICTOR S	Election: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address 34900 EASTVIEW RD	

City	State	ZIP Code
TRINIDAD	CO	81082

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
25.00	20.00	5.00

TERMS

Date Incurred	Date Due	Interest Rate	Secured:
07 / 01 / 2013	12/31/2014	0.00 % (apr)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []

SUBTOTALS This Period This Page (optional).....	5.00
TOTALS This Period (last page in this line only).....	5.00

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.