

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name

MASSACHUSETTS VICTORY COMMITTEE

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="2015"/>	<input type="text" value="59960.52"/>	<input type="text" value="59960.52"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="59960.52"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="340350.00"/>	<input type="text" value="340350.00"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<input type="text" value="400310.52"/>	<input type="text" value="400310.52"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="319456.85"/>	<input type="text" value="319456.85"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="80853.67"/>	<input type="text" value="80853.67"/>
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="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

MASSACHUSETTS VICTORY COMMITTEE

Report Covering the Period: From: 01 / 01 / 2015 To: 03 / 31 / 2015

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).....	338700.00	338700.00
(ii) Unitemized	150.00	150.00
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	338850.00	338850.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	1500.00	1500.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	340350.00	340350.00
▶		
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))..... ▶	340350.00	340350.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	340350.00	340350.00

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures	22117.07	22117.07
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	22117.07	22117.07
22. Transfers to Affiliated/Other Party Committees.....	297339.78	297339.78
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	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)) ..	319456.85	319456.85
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	319456.85	319456.85

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)	340350.00	340350.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	340350.00	340350.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	22117.07	22117.07
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	22117.07	22117.07

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 OF 24
	<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	

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)
MASSACHUSETTS VICTORY COMMITTEE

A. MR. WILLIAM F ACHTMAYER
 Full Name (Last, First, Middle Initial)
 Mailing Address 50 ROWES WHARF
 City BOSTON State MA Zip Code 02110
 FEC ID number of contributing federal political committee. **C**
 Name of Employer THE PARTHENON GROUP Occupation CHAIRMAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 10000.00

Date of Receipt 03 / 04 / 2015
Transaction ID : SA11AI.5328
 Amount of Each Receipt this Period 10000.00

B. DAVID BARLOW
 Full Name (Last, First, Middle Initial)
 Mailing Address 640 LEWIS WHARF
 City BOSTON State MA Zip Code 02110
 FEC ID number of contributing federal political committee. **C**
 Name of Employer BLAKE DIAMOND CAPITAL Occupation BIO PHARMACEUTICALS
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 03 / 26 / 2015
Transaction ID : SA11AI.5351
 Amount of Each Receipt this Period 5000.00

C. ROBERT BRAIT
 Full Name (Last, First, Middle Initial)
 Mailing Address 181 HILLCREST RD
 City MARSHFIELD State MA Zip Code 02050
 FEC ID number of contributing federal political committee. **C**
 Name of Employer BRAIT BUILDERS CORPORATION Occupation GENERAL CONTRACTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 10000.00

Date of Receipt 02 / 13 / 2015
Transaction ID : SA11AI.5348
 Amount of Each Receipt this Period 10000.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 25000.00
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 24
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
MASSACHUSETTS VICTORY COMMITTEE

A. DAVID J BREAZZANO
Full Name (Last, First, Middle Initial)

Mailing Address 193 DUTTON ROAD

City SUDBURY State MA Zip Code 01776

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

Name of Employer DDJ CAPITAL MANAGEMENT, LLC Occupation INVESTMENTS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 43400.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 16 / 2015

Transaction ID : SA11AI.5331

Amount of Each Receipt this Period
 43400.00

B. CHARLES CLOUGH, JR.
Full Name (Last, First, Middle Initial)

Mailing Address 649 SUDBURY ROAD

City CONCORD State MA Zip Code 01742-4309

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

Name of Employer CLOUGH CAPITAL PARTNERS LP Occupation CHAIRMAN & CEO

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 26 / 2015

Transaction ID : SA11AI.5353

Amount of Each Receipt this Period
 1000.00

C. MR. CHRISTOPHER W. COLLINS
Full Name (Last, First, Middle Initial)

Mailing Address 72 HARBOR ST.

City MANCHESTER State MA Zip Code 01944

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

Name of Employer FIRST ATLANTIC CAPITAL, LLC Occupation REAL ESTATE INVESTMENT

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 2500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 04 / 2015

Transaction ID : SA11AI.5323

Amount of Each Receipt this Period
 2500.00

SUBTOTAL of Receipts This Page (optional).....▶	46900.00
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 24
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
MASSACHUSETTS VICTORY COMMITTEE

Full Name (Last, First, Middle Initial)
A. MR. THOMAS J DESIMONE

Mailing Address P.O. BOX 406

City State Zip Code
SWAMPSCOTT MA 01907-3406

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

Name of Employer Occupation
WS ASSET MANAGEMENT, INC. REAL ESTATE DEVELOPER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 04 / 2015
Transaction ID : SA11AI.5327

Amount of Each Receipt this Period
1000.00

Full Name (Last, First, Middle Initial)
B. MR. GEORGE P. DHIONIS

Mailing Address 3 FLINT ST.

City State Zip Code
MARBLEHEAD MA 01945

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

Name of Employer Occupation
ESPED CEO

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 04 / 2015
Transaction ID : SA11AI.5325

Amount of Each Receipt this Period
5000.00

Full Name (Last, First, Middle Initial)
C. MR. STEVEN DODGE

Mailing Address 110 KAULA LANE

City State Zip Code
BONITA SPRINGS FL 34134

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

Name of Employer Occupation
SELF EMPLOYED REAL ESTATE DEVELOPER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
20000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 19 / 2015
Transaction ID : SA11AI.5338

Amount of Each Receipt this Period
20000.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 26000.00

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 24
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
MASSACHUSETTS VICTORY COMMITTEE

A. MR. EDMOND J. ENGLISH
 Full Name (Last, First, Middle Initial)
 Mailing Address 150 BEACON STREET
 City BOSTON State MA Zip Code 02116-2023
 FEC ID number of contributing federal political committee. **C**
 Name of Employer BOBS DISCOUNT FURNITURE Occupation RETAIL EXECUTIVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 42400.00

Date of Receipt 02 / 25 / 2015
Transaction ID : SA11AI.5318
 Amount of Each Receipt this Period 42400.00

B. JOHN F. FISH
 Full Name (Last, First, Middle Initial)
 Mailing Address 776 BOYLSTON STREET
 City BOSTON State MA Zip Code 02119
 FEC ID number of contributing federal political committee. **C**
 Name of Employer SUFFOLK CONSTRUCTION CO. Occupation CHAIRMAN & CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2500.00

Date of Receipt 03 / 16 / 2015
Transaction ID : SA11AI.5333
 Amount of Each Receipt this Period 2500.00

C. E. BYRON HENSLEY JR.
 Full Name (Last, First, Middle Initial)
 Mailing Address 95 HOLLY ROAD
 City MARION State MA Zip Code 02738
 FEC ID number of contributing federal political committee. **C**
 Name of Employer SENIORLINK, INC. Occupation MANAGER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 7500.00

Date of Receipt 02 / 17 / 2015
Transaction ID : SA11AI.5314
 Amount of Each Receipt this Period 7500.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 52400.00
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 10 OF 24
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
MASSACHUSETTS VICTORY COMMITTEE

A. WILLIAM K. HOSKINS
 Full Name (Last, First, Middle Initial)
 Mailing Address 27 HARVEST CIRCLE
 City State Zip Code
 LINCOLN MA 01775
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 HOSKINS & ASSOCIATES EXECUTIVE
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 5000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 27 / 2015
Transaction ID : SA11AI.5319
 Amount of Each Receipt this Period
 5000.00

B. ROBERT KARGMAN
 Full Name (Last, First, Middle Initial)
 Mailing Address 151 TREMONT ST
 City State Zip Code
 BOSTON MA 02111
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 BOSTON LAND CO. CEO
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 5000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 25 / 2015
Transaction ID : SA11AI.5355
 Amount of Each Receipt this Period
 5000.00

C. TOM KERSHAW
 Full Name (Last, First, Middle Initial)
 Mailing Address 84 BEACON STREET
 City State Zip Code
 BOSTON MA 02108
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 HAMPSHIRE HOUSE CORPORATION BUSINESS OWNER
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 10000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 02 / 2015
Transaction ID : SA11AI.5321
 Amount of Each Receipt this Period
 10000.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 20000.00
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 OF 24
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
MASSACHUSETTS VICTORY COMMITTEE

Full Name (Last, First, Middle Initial)
A. WILLIAM LYONS

Mailing Address 5221 S. NICKEL STREET

City TAMPA State FL Zip Code 33611

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

Name of Employer THIRD GENERATION CONSULTANTS, LLC Occupation EXECUTIVE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
10000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 13 / 2015
Transaction ID : SA11AI.5349

Amount of Each Receipt this Period
 10000.00

Full Name (Last, First, Middle Initial)
B. MR. ROBERT ALLEN MAGINN JR.

Mailing Address 171 MARSH STREET

City BELMONT State MA Zip Code 02178

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

Name of Employer JENZABAR, INC. Occupation PRESIDENT

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
20000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 17 / 2015
Transaction ID : SA11AI.5310

Amount of Each Receipt this Period
 20000.00

Full Name (Last, First, Middle Initial)
C. MR. JAMES MCMANUS

Mailing Address 88 CHESTNUT STREET

City WESTON State MA Zip Code 02493

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

Name of Employer SELF Occupation COMMERCIAL REAL ESTTATE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
15000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 26 / 2015
Transaction ID : SA11AI.5340

Amount of Each Receipt this Period
 15000.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 45000.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 OF 24
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
MASSACHUSETTS VICTORY COMMITTEE

A. A. PETER MONACO JR.
Full Name (Last, First, Middle Initial)

Mailing Address 311 MARLBOROUGH STREET

City	State	Zip Code
BOSTON	MA	02116

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

Name of Employer	Occupation
RAPTOR GROUP	MANAGING DIRECTOR

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
15000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	02	/	2015

Transaction ID : SA11AI.5320

Amount of Each Receipt this Period
15000.00

B. MR. JAMES F MOONEY III
Full Name (Last, First, Middle Initial)

Mailing Address 171 EDMUNDS ROAD

City	State	Zip Code
WELLESLEY	MA	02481

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

Name of Employer	Occupation
THE BAUPOST GROUP	INVESTOR

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	19	/	2015

Transaction ID : SA11AI.5334

Amount of Each Receipt this Period
5000.00

C. MR. FREDERICK MUZI
Full Name (Last, First, Middle Initial)

Mailing Address 10 POWISSET ST

City	State	Zip Code
DOVER	MA	02030

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

Name of Employer	Occupation
RETIRED	RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
15000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	25	/	2015

Transaction ID : SA11AI.5316

Amount of Each Receipt this Period
15000.00

SUBTOTAL of Receipts This Page (optional).....	35000.00
TOTAL This Period (last page this line number only).....	

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 OF 24
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		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
MASSACHUSETTS VICTORY COMMITTEE

A. MR. DANIEL QUIRK
Full Name (Last, First, Middle Initial)

Mailing Address 50 BEACON STREET

City CHESTNUT HILL State MA Zip Code 02467

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

Name of Employer QUIRK AUTO Occupation AUTO DEALER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
15000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 23 / 2015

Transaction ID : SA11AI.5315

Amount of Each Receipt this Period
 15000.00

B. THOMAS P RILEY
Full Name (Last, First, Middle Initial)

Mailing Address 221 COLUMBUS AVENUE APARTMENT 203

City BOSTON State MA Zip Code 02116

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

Name of Employer SENIORLINK, INC. Occupation MANAGER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
7500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 17 / 2015

Transaction ID : SA11AI.5311

Amount of Each Receipt this Period
 7500.00

C. MR. MARK SHAUGHNESSY
Full Name (Last, First, Middle Initial)

Mailing Address 76 HAWKTREE DR

City WESTWOOD State MA Zip Code 02090

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

Name of Employer BOYLE, SHAUGHNESSY & CAMPO, PC Occupation ATTORNEY

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
15000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 13 / 2015

Transaction ID : SA11AI.5330

Amount of Each Receipt this Period
 15000.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 37500.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 14 OF 24
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
MASSACHUSETTS VICTORY COMMITTEE

A. MR. ROBERT K SHERIDAN
 Full Name (Last, First, Middle Initial)
 Mailing Address 16 CAMELOT DRIVE
 City HINGHAM State MA Zip Code 02043
 FEC ID number of contributing federal political committee. **C**
 Name of Employer THE SAVINGS BANK LIFE INSURANCE Occupation PRESIDENT EMERITUS
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 26 / 2015
Transaction ID : SA11AI.5342
 Amount of Each Receipt this Period
 2500.00

B. MR. WILLIAM C VAN FAASEN
 Full Name (Last, First, Middle Initial)
 Mailing Address 12 PROCTOR STREET
 City MANCHESTER State MA Zip Code 01944
 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 ▼ 5000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 19 / 2015
Transaction ID : SA11AI.5336
 Amount of Each Receipt this Period
 5000.00

C. ADAM J. WEINER
 Full Name (Last, First, Middle Initial)
 Mailing Address 300 BOYLSTON STREET UNIT NO. 502
 City BOSTON State MA Zip Code 02116
 FEC ID number of contributing federal political committee. **C**
 Name of Employer WEINER VENTURES Occupation REAL ESTATE DEVELOPER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 43400.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 17 / 2015
Transaction ID : SA11AI.5313
 Amount of Each Receipt this Period
 43400.00

SUBTOTAL of Receipts This Page (optional).....▶	50900.00
TOTAL This Period (last page this line number only).....▶	338700.00

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

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

FOR LINE NUMBER: PAGE 15 OF 24
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
MASSACHUSETTS VICTORY COMMITTEE

A. MORPHOTRUST USA INC. PAC
 Full Name (Last, First, Middle Initial)
 Mailing Address 1235 SOUTH CLARK STREET
 SUITE 700
 City ARLINGTON State VA Zip Code 22202
 FEC ID number of contributing federal political committee. **C** C00437491
 Name of Employer Occupation
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 1500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 31 / 2015
Transaction ID : SA11C.5346
 Amount of Each Receipt this Period
 1500.00

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) ▼
 Aggregate Year-to-Date ▼

Date of Receipt
 M M / 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) ▼
 Aggregate Year-to-Date ▼

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

SUBTOTAL of Receipts This Page (optional).....▶	1500.00
TOTAL This Period (last page this line number only).....▶	1500.00

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

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

FOR LINE NUMBER:
(check only one)

<input 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)
MASSACHUSETTS VICTORY COMMITTEE

Full Name (Last, First, Middle Initial)

A. ALDEN & HARLOW

Mailing Address 40 BRATTLE STREET

City CAMBRIDGE State MA Zip Code 02138

Purpose of Disbursement
MEETING EXPENSE: MEALS

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
03 / 04 / 2015

Transaction ID : SB21B.5357

Amount of Each Disbursement this Period

256.54

Full Name (Last, First, Middle Initial)

B. APEX

Mailing Address 500 CUMMINGS CENTER
SUITE 4400

City BEVERLY State MA Zip Code 01915

Purpose of Disbursement
MERCHANT FEES

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
03 / 09 / 2015

Transaction ID : SB21B.5360

Amount of Each Disbursement this Period

800.00

Full Name (Last, First, Middle Initial)

C. DEL FRISCO'S STEAKHOUSE

Mailing Address 250 NORTHERN AVE

City BOSTON State MA Zip Code 02210

Purpose of Disbursement
MEETING EXPENSE: MEALS

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
03 / 06 / 2015

Transaction ID : SB21B.5373

Amount of Each Disbursement this Period

483.66

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

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

1540.20

**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)
MASSACHUSETTS VICTORY COMMITTEE

Full Name (Last, First, Middle Initial)

A. DROPBOX, INC.

Mailing Address 185 BERRY ST
400

City SAN FRANCISCO State CA Zip Code 94107

Purpose of Disbursement
FILE STORAGE

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : SB21B.5375

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

B. DROPBOX, INC.

Mailing Address 185 BERRY ST
400

City SAN FRANCISCO State CA Zip Code 94107

Purpose of Disbursement
FILE STORAGE

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : SB21B.5376

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

C. FOUR SEASONS

Mailing Address 200 BOYLSTON STREET

City BOSTON State MA Zip Code 02116

Purpose of Disbursement
PARKING SERVICES

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : SB21B.5384

Amount of Each Disbursement this Period

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

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

**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)
MASSACHUSETTS VICTORY COMMITTEE

Full Name (Last, First, Middle Initial)

A. FOUR SEASONS

Mailing Address 200 BOYLSTON STREET

City BOSTON State MA Zip Code 02116

Purpose of Disbursement
PARKING SERVICES

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
03 / 30 / 2015

Transaction ID : SB21B.5385

Amount of Each Disbursement this Period

95.00

Full Name (Last, First, Middle Initial)

B. SARAH HUNT

Mailing Address 412 HALE STREET
PO BOX 227

City PRIDES CROSSING State MA Zip Code 01965

Purpose of Disbursement
REIMBURSEMENT - SEE MEMO ENTRIES

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
03 / 09 / 2015

Transaction ID : SB21B.5407

Amount of Each Disbursement this Period

320.61

Full Name (Last, First, Middle Initial)

C. LAZ PARKING, INC.

Mailing Address 15 LEWIS STREET

City HARTFORD State CT Zip Code 06103

Purpose of Disbursement
HUNT REIMBURSEMENT - TRAVEL: PARKING

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
02 / 25 / 2015

Transaction ID : SB21B.5435

Amount of Each Disbursement this Period

43.00

[MEMO ITEM]

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

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

415.61

**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)
MASSACHUSETTS VICTORY COMMITTEE

Full Name (Last, First, Middle Initial)

A. RED CURVE SOLUTIONS

Mailing Address 500 CUMMINGS CENTER
SUITE 4400

City BEVERLY State MA Zip Code 01915

Purpose of Disbursement
COMPLIANCE CONSULTING

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
03 / 09 / 2015

Transaction ID : SB21B.5402

Amount of Each Disbursement this Period

9000.00

Full Name (Last, First, Middle Initial)

B. RITA'S CATERING

Mailing Address 1935 REVERE BEACH PARKWAY

City EVERETT State MA Zip Code 02149

Purpose of Disbursement
CATERING SERVICES

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
03 / 20 / 2015

Transaction ID : SB21B.5405

Amount of Each Disbursement this Period

3831.44

Full Name (Last, First, Middle Initial)

C. SEAPORT HOTEL

Mailing Address 1 SEAPORT LANE

City BOSTON State MA Zip Code 02210

Purpose of Disbursement
FACILITY RENTAL/CATERING SERVICES

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
03 / 30 / 2015

Transaction ID : SB21B.5408

Amount of Each Disbursement this Period

2000.00

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

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

14831.44

**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)
MASSACHUSETTS VICTORY COMMITTEE

Full Name (Last, First, Middle Initial)

A. SHELL

Mailing Address P.O. BOX 2463

City HOUSTON State TX Zip Code 77252

Purpose of Disbursement
TRAVEL: FUEL

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
03 / 23 / 2015

Transaction ID : SB21B.5412

Amount of Each Disbursement this Period

60.31

Full Name (Last, First, Middle Initial)

B. SHELL

Mailing Address P.O. BOX 2463

City HOUSTON State TX Zip Code 77252

Purpose of Disbursement
TRAVEL: FUEL

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
03 / 26 / 2015

Transaction ID : SB21B.5413

Amount of Each Disbursement this Period

71.73

Full Name (Last, First, Middle Initial)

C. SHELL

Mailing Address P.O. BOX 2463

City HOUSTON State TX Zip Code 77252

Purpose of Disbursement
TRAVEL: FUEL

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
03 / 31 / 2015

Transaction ID : SB21B.5414

Amount of Each Disbursement this Period

43.93

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

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

175.97

**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)
MASSACHUSETTS VICTORY COMMITTEE

Full Name (Last, First, Middle Initial)

A. THE OCEANAIRE SEAFOOD ROOM

Mailing Address 40 COURT STREET

City BOSTON State MA Zip Code 02108

Purpose of Disbursement
MEETING EXPENSE: MEALS

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
03 / 23 / 2015

Transaction ID : SB21B.5424

Amount of Each Disbursement this Period

231.26

Full Name (Last, First, Middle Initial)

B. THE WINE CAVE

Mailing Address 75 CANAL STREET

City BOSTON State MA Zip Code 02114

Purpose of Disbursement
HUNT REIMBURSEMENT - MEETING EXPENSE: MEALS

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
02 / 26 / 2015

Transaction ID : SB21B.5434

Amount of Each Disbursement this Period

219.90

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. VERIZON WIRELESS

Mailing Address 15505 SAND CANYON AVENUE

City IRVINE State CA Zip Code 92618

Purpose of Disbursement
MOBILE PHONE EXPENSE

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
01 / 06 / 2015

Transaction ID : SB21B.5427

Amount of Each Disbursement this Period

752.72

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

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

983.98

**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)
MASSACHUSETTS VICTORY COMMITTEE

Full Name (Last, First, Middle Initial)

A. VERIZON WIRELESS

Mailing Address 15505 SAND CANYON AVENUE

City IRVINE State CA Zip Code 92618

Purpose of Disbursement
MOBILE PHONE EXPENSE

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
02 / 23 / 2015

Transaction ID : SB21B.5428

Amount of Each Disbursement this Period

660.59

Full Name (Last, First, Middle Initial)

B. VERIZON WIRELESS

Mailing Address 15505 SAND CANYON AVENUE

City IRVINE State CA Zip Code 92618

Purpose of Disbursement
MOBILE PHONE EXPENSE

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
03 / 27 / 2015

Transaction ID : SB21B.5429

Amount of Each Disbursement this Period

435.66

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City State Zip Code

Purpose of Disbursement

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

Amount of Each Disbursement this Period

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

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

1096.25

19459.45

**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 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)
MASSACHUSETTS VICTORY COMMITTEE

Full Name (Last, First, Middle Initial)

A. MASSACHUSETTS REPUBLICAN PARTY

Mailing Address 85 MERRIMAC STREET
SUITE 400

City BOSTON State MA Zip Code 02114

Purpose of Disbursement
TRANSFER

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /
02 / 20 / 2015

Transaction ID : SB22.5390

Amount of Each Disbursement this Period

76596.43

Full Name (Last, First, Middle Initial)

B. MASSACHUSETTS REPUBLICAN PARTY

Mailing Address 85 MERRIMAC STREET
SUITE 400

City BOSTON State MA Zip Code 02114

Purpose of Disbursement
TRANSFER

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /
03 / 23 / 2015

Transaction ID : SB22.5391

Amount of Each Disbursement this Period

86097.83

Full Name (Last, First, Middle Initial)

C. REPUBLICAN NATIONAL COMMITTEE

Mailing Address 310 FIRST STREET, SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement
TRANSFER

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /
02 / 20 / 2015

Transaction ID : SB22.5403

Amount of Each Disbursement this Period

38952.65

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

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

201646.91

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 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)
MASSACHUSETTS VICTORY COMMITTEE

Full Name (Last, First, Middle Initial)

A. REPUBLICAN NATIONAL COMMITTEE

Mailing Address 310 FIRST STREET, SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement
TRANSFER

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	3		2	3		2	0	1	5		

Transaction ID : SB22.5404

Amount of Each Disbursement this Period

9	5	6	9	2	.	8	7
---	---	---	---	---	---	---	---

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

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

Amount of Each Disbursement this Period

--	--	--	--	--	--	--	--

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

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

Amount of Each Disbursement this Period

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

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

9	5	6	9	2	.	8	7
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2	9	7	3	3	9	.	7	8
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