

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 MASSACHUSETTS VICTORY COMMITTEE

ADDRESS (number and street) 310 FIRST STREET, SE WASHINGTON DC 20003 Check if different than previously reported. (ACC)

2. FEC IDENTIFICATION NUMBER C C00549782 3. IS THIS REPORT NEW (N) OR AMENDED (A) [X] NEW (N) [] AMENDED (A)

4. TYPE OF REPORT (Choose One) (a) Quarterly Reports: April 15, July 15, October 15, January 31 Year-End Report (YE) [X] July 31 Mid-Year Report (Non-election Year Only) (MY) Termination Report (TER) (b) Monthly Report Due On: Feb 20 (M2), Mar 20 (M3), Apr 20 (M4), May 20 (M5), Jun 20 (M6), Jul 20 (M7), Aug 20 (M8), Sep 20 (M9), Oct 20 (M10), Nov 20 (M11) (Non-Election Year Only), Dec 20 (M12) (Non-Election Year Only), Jan 31 (YE) (c) 12-Day PRE-Election Report for the: Primary (12P), General (12G), Runoff (12R), Convention (12C), Special (12S) Election on [] / [] / [] in the State of [] (d) 30-Day POST-Election Report for the: General (30G), Runoff (30R), Special (30S) Election on [] / [] / [] in the State of []

5. Covering Period 10 / 01 / 2013 through 12 / 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 BRADLEY T. CRATE

Signature of Treasurer BRADLEY T. CRATE [Electronically Filed] Date 01 / 20 / 2014

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

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Page 2

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="2013"/>	<input type="text" value="0.00"/>	<input type="text" value="0.00"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="21145.00"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="202334.00"/>	<input type="text" value="252334.00"/>
(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="223479.00"/>	<input type="text" value="252334.00"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="189070.26"/>	<input type="text" value="217925.26"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="34408.74"/>	<input type="text" value="34408.74"/>
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

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name

MASSACHUSETTS VICTORY COMMITTEE

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).....	202300.00	252300.00
(ii) Unitemized	34.00	34.00
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	202334.00	252334.00
(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)	202334.00	252334.00
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))..... ▶	202334.00	252334.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	202334.00	252334.00

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	19494.39	19509.39
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	19494.39	19509.39
22. Transfers to Affiliated/Other Party Committees.....	169575.87	198415.87
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)) ..	189070.26	217925.26
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	189070.26	217925.26

DETAILED SUMMARY PAGE
of Disbursements

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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)	202334.00	252334.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	202334.00	252334.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	19494.39	19509.39
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	19494.39	19509.39

**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 19
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

Full Name (Last, First, Middle Initial) A. DAVID J BREAZZANO		Date of Receipt
Mailing Address 193 DUTTON ROAD		<input type="text" value="10"/> / <input type="text" value="29"/> / <input type="text" value="2013"/>
City	State	Zip Code
SUDBURY	MA	01776
FEC ID number of contributing federal political committee.		Transaction ID : SA11AI.4124
<input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="42400.00"/>
Name of Employer	Occupation	
DDJ CAPITAL MANAGEMENT, LLC	INVESTMENTS	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="42400.00"/>	

Full Name (Last, First, Middle Initial) B. ALEXANDRA DRANE		Date of Receipt
Mailing Address 75 SYLVAN STREET		<input type="text" value="12"/> / <input type="text" value="26"/> / <input type="text" value="2013"/>
City	State	Zip Code
DANVERS	MA	01923
FEC ID number of contributing federal political committee.		Transaction ID : SA11AI.4149
<input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="10000.00"/>
Name of Employer	Occupation	
ELIZA CORPORATION	FOUNDER/CHAIR	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="10000.00"/>	

Full Name (Last, First, Middle Initial) C. DOUGLAS DRANE		Date of Receipt
Mailing Address 3 HEDGE LANE		<input type="text" value="12"/> / <input type="text" value="26"/> / <input type="text" value="2013"/>
City	State	Zip Code
AUSTIN	TX	78746
FEC ID number of contributing federal political committee.		Transaction ID : SA11AI.4151
<input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="10000.00"/>
Name of Employer	Occupation	
ENTREPRENEUR	ENTREPRENEUR	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="10000.00"/>	

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="62400.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

**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 19
	<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. MICHAEL EWALD
Full Name (Last, First, Middle Initial)

Mailing Address 4 WOODCHESTER ROAD

City WELLESLEY State MA Zip Code 02481

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

Name of Employer BAIN CAPITAL, LLC Occupation 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
 11 / 26 / 2013

Transaction ID : SA11AI.4136

Amount of Each Receipt this Period
5000.00

B. DAVID P FIALKOW
Full Name (Last, First, Middle Initial)

Mailing Address 20 UNIVERSITY ROAD
UNIT 450

City CAMBRIDGE State MA Zip Code 02138

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

Name of Employer GENERAL CATALYST PARTNERS Occupation VENTURE CAPITAL

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
24500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 16 / 2013

Transaction ID : SA11AI.4116

Amount of Each Receipt this Period
24500.00

C. HENRY HELGESON
Full Name (Last, First, Middle Initial)

Mailing Address 171 COMMONWEALTH AVE

City BOSTON State MA Zip Code 02116

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

Name of Employer MERCHANT WAREHOUSE Occupation 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
 12 / 31 / 2013

Transaction ID : SA11AI.4153

Amount of Each Receipt this Period
5000.00

SUBTOTAL of Receipts This Page (optional).....▶	34500.00
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 8 OF 19
	<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. E. BYRON HENSLEY JR.
Full Name (Last, First, Middle Initial)

Mailing Address 95 HOLLY ROAD

City MARION	State MA	Zip Code 02738
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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 ▼
5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	19	/	2013

Transaction ID : SA11AI.4130

Amount of Each Receipt this Period
5000.00

B. ANIL KOTTOOR
Full Name (Last, First, Middle Initial)

Mailing Address 1600 GULF BLVD

City CLEARWATER	State FL	Zip Code 33767
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FEC ID number of contributing federal political committee. **C**

Name of Employer MEDHOK, INC.	Occupation 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
12	/	25	/	2013

Transaction ID : SA11AI.4147

Amount of Each Receipt this Period
5000.00

C. JOAN B. LITLE
Full Name (Last, First, Middle Initial)

Mailing Address 900 CHELMSFORD STREET

City LOWELL	State MA	Zip Code 01851
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FEC ID number of contributing federal political committee. **C**

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
7600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	19	/	2013

Transaction ID : SA11AI.4145

Amount of Each Receipt this Period
7600.00

SUBTOTAL of Receipts This Page (optional).....▶	17600.00
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 9 OF 19
	<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. THOMAS J LITTLE
Full Name (Last, First, Middle Initial)

Mailing Address 900 CHELMSFORD STREET

City State Zip Code
LOWELL MA 01851

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

Name of Employer Occupation
LITTLE AND CO. MANAGER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
34800.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
12 / 18 / 2013

Transaction ID : SA11AI.4143

Amount of Each Receipt this Period
34800.00

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

Mailing Address 5221 S. NICKEL STREET

City State Zip Code
TAMPA FL 33611

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

Name of Employer Occupation
RETIRED TEACHER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
9500.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
10 / 16 / 2013

Transaction ID : SA11AI.4118

Amount of Each Receipt this Period
9500.00

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

Mailing Address 5221 S. NICKEL STREET

City State Zip Code
TAMPA FL 33611

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

Name of Employer Occupation
THIRD GENERATION CONSULTANTS, LLC EXECUTIVE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
9500.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
10 / 16 / 2013

Transaction ID : SA11AI.4120

Amount of Each Receipt this Period
9500.00

SUBTOTAL of Receipts This Page (optional).....▶	53800.00
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 10 OF 19
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
MASSACHUSETTS VICTORY COMMITTEE

A. JOHN J MORIARTY
Full Name (Last, First, Middle Initial)

Mailing Address 25 PROSPECT STREET

City WINCHESTER State MA Zip Code 01890

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

Name of Employer JOHN MORIARTY & ASSOCIATES Occupation BUILDER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 9500.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 10 / 31 / 2013

Transaction ID : SA11AI.4126

Amount of Each Receipt this Period
 9500.00

B. PAUL PETRACCA
Full Name (Last, First, Middle Initial)

Mailing Address 8 LYMAN STREET SUITE 204

City WESTBOROUGH State MA Zip Code 01581

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

Name of Employer PEMCO MANAGEMENT LLC Occupation FINANCE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 11 / 14 / 2013

Transaction ID : SA11AI.4128

Amount of Each Receipt this Period
 5000.00

C. 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 ▼ 5000.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 11 / 19 / 2013

Transaction ID : SA11AI.4132

Amount of Each Receipt this Period
 5000.00

SUBTOTAL of Receipts This Page (optional).....▶	19500.00
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 11 OF 19
(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. SCOTT A SCHOEN

Mailing Address 535 BOYLSTON STREET
NINTH FLOOR

City BOSTON State MA Zip Code 02116

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

Name of Employer BAYLON CAPITAL MANAGEMENT, LLC Occupation INVESTMENT MANAGEMENT

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
9500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 16 / 2013
Transaction ID : SA11AI.4122

Amount of Each Receipt this Period
9500.00

Full Name (Last, First, Middle Initial)
B. NICK VARANO

Mailing Address 7 FREEMAN STREET

City LYNNFIELD State MA Zip Code 01940

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

Name of Employer THE VARANO GROUP Occupation OWNER AND 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
 12 / 13 / 2013
Transaction ID : SA11AI.4141

Amount of Each Receipt this Period
5000.00

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

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

Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional).....▶	14500.00
TOTAL This Period (last page this line number only).....▶	202300.00

**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. AUTHORIZE.NET CORPORATION

Mailing Address 808 EAST UTAH VALLEY DRIVE

City AMERICAN FORK State UT Zip Code 84003

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

M M / D D / Y Y Y Y Y
10 / 28 / 2013

Transaction ID : SB21B.4158

Amount of Each Disbursement this Period

1392.00

Full Name (Last, First, Middle Initial)

B. BJ'S WHOLESALE CLUB, INC.

Mailing Address 25 RESEARCH DRIVE

City WESTBOROUGH State MA Zip Code 01581

Purpose of Disbursement
OFFICE SUPPLIES

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
11 / 25 / 2013

Transaction ID : SB21B.4162

Amount of Each Disbursement this Period

572.18

Full Name (Last, First, Middle Initial)

C. FOGO DE CHAO

Mailing Address 14881 QUORUM DRIVE
UNIT 750

City DALLAS State TX Zip Code 75254

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

M M / D D / Y Y Y Y Y
11 / 25 / 2013

Transaction ID : SB21B.4178

Amount of Each Disbursement this Period

350.40

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

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

2314.58

**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. MADAKET CONSULTING, LLC

Mailing Address 100 TRADE CENTER
SUITE G700

City WOBURN State MA Zip Code 01801

Purpose of Disbursement
FUNDRAISING CONSULTING

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
11 / 20 / 2013

Transaction ID : SB21B.4191

Amount of Each Disbursement this Period

8112.00

Full Name (Last, First, Middle Initial)

B. NEPTUNE OYSTER

Mailing Address 63 SALEM STREET

City BOSTON State MA Zip Code 02113

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
11 / 22 / 2013

Transaction ID : SB21B.4198

Amount of Each Disbursement this Period

300.49

Full Name (Last, First, Middle Initial)

C. RED CURVE SOLUTIONS

Mailing Address 138 CONANT STREET
FIRST FLOOR

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
10 / 17 / 2013

Transaction ID : SB21B.4200

Amount of Each Disbursement this Period

750.00

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

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

9162.49

**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 138 CONANT STREET
FIRST FLOOR

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

/ /

Transaction ID : SB21B.4201

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

B. SMITH & WOLLENSKY

Mailing Address 101 ARLINGTON ST

City BOSTON State MA Zip Code 02116

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

/ /

Transaction ID : SB21B.4209

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

C. STAPLES

Mailing Address 390 WEST STREET

City MANSFIELD State MA Zip Code 02048

Purpose of Disbursement
OFFICE SUPPLIES

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : SB21B.4211

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. STAPLES

Mailing Address 390 WEST STREET

City MANSFIELD State MA Zip Code 02048

Purpose of Disbursement
OFFICE SUPPLIES

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y
12 / 16 / 2013

Transaction ID : SB21B.4212

Amount of Each Disbursement this Period

197.58

Full Name (Last, First, Middle Initial)

B. STAPLES

Mailing Address 390 WEST STREET

City MANSFIELD State MA Zip Code 02048

Purpose of Disbursement
OFFICE SUPPLIES

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y
12 / 17 / 2013

Transaction ID : SB21B.4213

Amount of Each Disbursement this Period

174.73

Full Name (Last, First, Middle Initial)

C. STAPLES

Mailing Address 390 WEST STREET

City MANSFIELD State MA Zip Code 02048

Purpose of Disbursement
OFFICE SUPPLIES

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y
12 / 26 / 2013

Transaction ID : SB21B.4214

Amount of Each Disbursement this Period

104.11

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

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

476.42

**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. US AIRWAYS

Mailing Address LOGAL INTERNATIONAL AIRPORT #62

City EAST BOSTON State MA Zip Code 02128

Purpose of Disbursement
TRAVEL: AIR

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
10 / 22 / 2013

Transaction ID : SB21B.4220

Amount of Each Disbursement this Period

537.80

Category/
Type

Full Name (Last, First, Middle Initial)

B. USPS

Mailing Address 47 HARVARD AVE

City BOSTON State MA Zip Code 02134

Purpose of Disbursement
POSTAGE

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
12 / 16 / 2013

Transaction ID : SB21B.4222

Amount of Each Disbursement this Period

460.00

Category/
Type

Full Name (Last, First, Middle Initial)

C. MICHAEL VALLARELLI

Mailing Address 34 EDGEHILL ROAD

City ARLINGTON State MA Zip Code 02474

Purpose of Disbursement
FUNDRAISING CONSULTING

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
12 / 31 / 2013

Transaction ID : SB21B.4196

Amount of Each Disbursement this Period

2500.00

Category/
Type

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

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

3497.80

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. WINSTON FLOWERS

Mailing Address 160 SOUTHAMPTON ST

City BOSTON State MA Zip Code 02118

Purpose of Disbursement
FLORAL EXPENSE

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
12 / 20 / 2013

Transaction ID : SB21B.4226

Amount of Each Disbursement this Period

251.56

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

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

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

251.56

18327.96

**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 ST.
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

/ /

Transaction ID : SB22.4192

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

B. MASSACHUSETTS REPUBLICAN PARTY

Mailing Address 85 MERRIMAC ST.
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

/ /

Transaction ID : SB22.4193

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

C. MASSACHUSETTS REPUBLICAN PARTY

Mailing Address 85 MERRIMAC ST.
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

/ /

Transaction ID : SB22.4194

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 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

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
10 / 31 / 2013

Transaction ID : **SB22.4202**

Amount of Each Disbursement this Period

60148.25

Category/
Type

Full Name (Last, First, Middle Initial)

B. 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

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
12 / 04 / 2013

Transaction ID : **SB22.4203**

Amount of Each Disbursement this Period

13449.93

Category/
Type

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

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
12 / 31 / 2013

Transaction ID : **SB22.4204**

Amount of Each Disbursement this Period

23714.83

Category/
Type

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

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

97313.01

169575.87