

FEC FORM 3

REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) **USE FEC MAILING LABEL OR TYPE OR PRINT** Example: If typing, type over the lines
VIRGINIA FRESHMEN VICTORY FUND

ADDRESS (number and street) 1050 17th St NW Ste 590
 Check if different than previously reported. (ACC)
WASHINGTON DC 20036

2. **FEC IDENTIFICATION NUMBER** C00466177
CITY **STATE** **ZIP CODE** **STATE** **DISTRICT**
3. IS THIS REPORT NEW (N) OR AMENDED (A)
VA 11

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 [] [] [] in the State of []

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

- General (30G) Runoff (30R) Special (30S)
- Election on [] [] [] in the State of []

5. Covering Period 10 01 2009 through 12 31 2009

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 Janica Kyriacopoulos

Signature of Treasurer Electronically Filed by Janica Kyriacopoulos Date 01 29 2010

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

FEC Form 3 (Revised 02/2003)

Write or Type Committee Name

VIRGINIA FRESHMEN VICTORY FUND

Report Covering the Period: From:

| | |
|---|---|
| M | M |
| 1 | 0 |

| | |
|---|---|
| D | D |
| 0 | 1 |

| | | | |
|---|---|---|---|
| Y | Y | Y | Y |
| 2 | 0 | 0 | 9 |

 To:

| | |
|---|---|
| M | M |
| 1 | 2 |

| | |
|---|---|
| D | D |
| 3 | 1 |

| | | | |
|---|---|---|---|
| Y | Y | Y | Y |
| 2 | 0 | 0 | 9 |

| | 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))..... | 20225.00 | 216725.00 |
| (b) Total Contribution Refunds (from Line 20(d))..... | 0.00 | 0.00 |
| (c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a))..... | 20225.00 | 216725.00 |
| 7. Net Operating Expenditures | | |
| (a) Total Operating Expenditures (from Line 17)..... | 3215.43 | 19450.24 |
| (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))..... | 3215.43 | 19450.24 |
| 8. Cash on Hand at Close of Reporting Period (from Line 27)..... | 19774.76 | |
| 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)..... | 0.00 | |

For further information contact:

Federal Election Commission
999 E Street, NW
Washington, DC 20463
Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3 (Revised 12/2003)

Write or Type Committee Name
VIRGINIA FRESHMEN VICTORY FUND

Report Covering the Period: From:

| | |
|---|---|
| M | M |
| 1 | 0 |

| | |
|---|---|
| D | D |
| 0 | 1 |

| | | | |
|---|---|---|---|
| Y | Y | Y | Y |
| 2 | 0 | 0 | 9 |

 To:

| | |
|---|---|
| M | M |
| 1 | 2 |

| | |
|---|---|
| D | D |
| 3 | 1 |

| | | | |
|---|---|---|---|
| Y | Y | Y | Y |
| 2 | 0 | 0 | 9 |

| 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 | 20200.00 | 216500.00 |
| (i) Itemized (use Schedule A)..... | 25.00 | 225.00 |
| (ii) Unitemized..... | 20225.00 | 216725.00 |
| (iii) TOTAL of contributions from individuals..... ▶ | 0.00 | 0.00 |
| (b) Political Party Committees..... | 0.00 | 0.00 |
| (c) Other Political Committees (such as PACS)..... | 0.00 | 0.00 |
| (d) The Candidate..... | 0.00 | 0.00 |
| (e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d)) | 20225.00 | 216725.00 |
| 12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES..... | 0.00 | 0.00 |
| 13. LOANS | | |
| (a) Made or Guaranteed by the Candidate..... | 0.00 | 0.00 |
| (b) All Other Loans..... | 0.00 | 0.00 |
| (c) TOTAL LOANS (add Lines 13(a) and (b))..... | 0.00 | 0.00 |
| 14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.)..... | 0.00 | 0.00 |
| 15. OTHER RECEIPTS (Dividends, Interest, etc.)..... | 0.00 | 0.00 |
| 16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶ | 20225.00 | 216725.00 |

DETAILED SUMMARY PAGE
of Disbursements

| II. DISBURSEMENTS | COLUMN A Total This Period | COLUMN B Election Cycle-to-Date |
|--|---------------------------------------|--|
| 17. OPERATING EXPENDITURES..... | 3215.43 | 19450.24 |
| 18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES..... | 0.00 | 177500.00 |
| 19. LOAN REPAYMENTS: | | |
| (a) Of Loans Made or Guaranteed by the Candidate..... | 0.00 | 0.00 |
| (b) Of all Other Loans..... | 0.00 | 0.00 |
| (c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b))..... | 0.00 | 0.00 |
| 20. REFUNDS OF CONTRIBUTIONS TO: | | |
| (a) Individuals/Persons Other Than Political Committees..... | 0.00 | 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 20(a), (b), and (c))..... | 0.00 | 0.00 |
| 21. OTHER DISBURSEMENTS..... | 0.00 | 0.00 |
| 22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ▶ | 3215.43 | 196950.24 |

III. CASH SUMMARY

| | |
|---|----------|
| 23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD..... | 2765.19 |
| 24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page3)..... | 20225.00 |
| 25. SUBTOTAL (add Line 23 and Line 24)..... | 22990.19 |
| 26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22)..... | 3215.43 |
| 27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25)..... | 19774.76 |

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 / 9 |
| | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
| | <input type="checkbox"/> 12 | <input type="checkbox"/> 13a |
| | <input type="checkbox"/> 11c | <input type="checkbox"/> 11d |
| | <input type="checkbox"/> 13b | <input type="checkbox"/> 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)
VIRGINIA FRESHMEN VICTORY FUND

| | | |
|-----------|--|---|
| A. | Full Name (Last, First, Middle Initial) Leonard Bennett | Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 1 5 / 2 0 0 9 |
| | Mailing Address 111 Gallop Place | Transaction ID: SA11AI.4290 |
| | City State Zip Code Newport News VA 23608 | Amount of Each Receipt this Period 7200.00 |
| | FEC ID number of contributing federal political committee. C | Contribution earmarked via Act Blue |
| | Name of Employer Consumer Litigation Associates Occupation Attorney Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 7200.00 | |

| | | |
|-----------|---|---|
| B. | Full Name (Last, First, Middle Initial) ActBlue | Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 0 8 / 2 0 0 9 |
| | Mailing Address P.O. Box 382110 | Transaction ID: SA11AI.4290.0 |
| | City State Zip Code Cambridge MA 02238 | Amount of Each Receipt this Period 7200.00 |
| | FEC ID number of contributing federal political committee. C | Contribution earmarked via Act Blue |
| | Name of Employer Occupation Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 63600.00 | [MEMO ITEM] |

| | | |
|-----------|---|---|
| C. | Full Name (Last, First, Middle Initial) Robert Mills | Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 0 8 / 2 0 0 9 |
| | Mailing Address 160 W Brambleton Avenue | Transaction ID: SA11AI.4285 |
| | City State Zip Code Norfolk VA 23510 | Amount of Each Receipt this Period 1000.00 |
| | FEC ID number of contributing federal political committee. C | Contribution earmarked via ActBlue |
| | Name of Employer Ruttermills LLP Occupation Attorney Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 1000.00 | |

| | |
|--|----------------|
| SUBTOTAL of Receipts This Page (optional) | 8200.00 |
| TOTAL This Period (last page this line number only) | |

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 6 / 9
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
VIRGINIA FRESHMEN VICTORY FUND

A. Full Name (Last, First, Middle Initial)
ActBlue
Mailing Address P.O. Box 382110
City State Zip Code
Cambridge MA 02238
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
Receipt For: Primary General Other (specify) ▼
Election Cycle-to-Date ▼ 56400.00
Date of Receipt: 10 / 08 / 2009
Transaction ID: SA11AI.4285.0
Amount of Each Receipt this Period: 1000.00
Contribution via Act Blue
[MEMO ITEM]

B. Full Name (Last, First, Middle Initial)
Drina Northam
Mailing Address 111 Gallop Place
City State Zip Code
Newport News VA 23608
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
Riverside Medical Center Physician
Receipt For: Primary General Other (specify) ▼
Election Cycle-to-Date ▼ 7200.00
Date of Receipt: 10 / 15 / 2009
Transaction ID: SA11AI.4291
Amount of Each Receipt this Period: 7200.00
Contribution earmarked via Act Blue

C. Full Name (Last, First, Middle Initial)
ActBlue
Mailing Address P.O. Box 382110
City State Zip Code
Cambridge MA 02238
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
Receipt For: Primary General Other (specify) ▼
Election Cycle-to-Date ▼ 70800.00
Date of Receipt: 10 / 08 / 2009
Transaction ID: SA11AI.4291.0
Amount of Each Receipt this Period: 7200.00
Contribution earmarked via Act Blue
[MEMO ITEM]

SUBTOTAL of Receipts This Page (optional) ▶ 7200.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

| | | |
|---|--|------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: PAGE 7 / 9 | |
| | (check only one) | |
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c |
| <input type="checkbox"/> 12 | <input type="checkbox"/> 13a | <input type="checkbox"/> 13b |
| <input type="checkbox"/> 14 | <input type="checkbox"/> 15 | |

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NAME OF COMMITTEE (In Full)
VIRGINIA FRESHMEN VICTORY FUND

| | | | | |
|---|---|-------------------------------------|--|------------------------------------|
| A. | Full Name (Last, First, Middle Initial) Sheri L Orlowitz | | Date of Receipt | |
| | Mailing Address 2028 Allen Place NW | | M M / D D / Y Y Y Y 1 0 / 0 6 / 2 0 0 9 | |
| | City | State | Zip Code | Transaction ID: SA11AI.4283 |
| | Washington | DC | 20009 | |
| | FEC ID number of contributing federal political committee. | | Amount of Each Receipt this Period | |
| | C | | 4800.00 | |
| Name of Employer Shan Industries | | Occupation Executive | | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | Election Cycle-to-Date ▼ 4800.00 | | |

| | |
|--|----------|
| SUBTOTAL of Receipts This Page (optional) | 4800.00 |
| TOTAL This Period (last page this line number only) | 20200.00 |

**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)

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

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NAME OF COMMITTEE (In Full)
VIRGINIA FRESHMEN VICTORY FUND

| | | | |
|-----------|--|---|---|
| A. | Full Name (Last, First, Middle Initial) ActBlue Technical Services <hr/> Mailing Address 14 Arrow St <hr/> City Cambridge State MA Zip Code 02138 <hr/> Purpose of Disbursement Credit card processing fee Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Transaction ID: SB17.4287 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 0 8 / 2 0 0 9 | Amount of Each Disbursement this Period 39.50 |
| B. | Full Name (Last, First, Middle Initial) ActBlue Technical Services <hr/> Mailing Address 14 Arrow St <hr/> City Cambridge State MA Zip Code 02138 <hr/> Purpose of Disbursement Credit card processing fee Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Transaction ID: SB17.4294 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 5 / 2 0 0 9 | Amount of Each Disbursement this Period 568.80 |
| C. | Full Name (Last, First, Middle Initial) Design Cuisine <hr/> Mailing Address 2659 S. Shirlington Rd. <hr/> City Arlington State VA Zip Code 22206 <hr/> Purpose of Disbursement Catering Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Transaction ID: SB17.4295 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 0 5 / 2 0 0 9 | Amount of Each Disbursement this Period 2160.67 |

| | |
|--|----------------|
| SUBTOTAL of Disbursements This Page (optional) | 2768.97 |
| 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 9 / 9

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

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NAME OF COMMITTEE (In Full)
VIRGINIA FRESHMEN VICTORY FUND

A.

Full Name (Last, First, Middle Initial)
Perkins Coie

Mailing Address 1201 Third Avenue, Suite 4800

City State Zip Code
Seattle WA 20005

Purpose of Disbursement
Legal fees

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB17.4288

Date of Disbursement

/ /

Amount of Each Disbursement this Period

361.50

SUBTOTAL of Disbursements This Page (optional)

361.50

TOTAL This Period (last page this line number only)

3130.47