

**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

LCV Victory Fund

ADDRESS (number and street)

1920 L St NW Ste 800

☐ Check if different
than previously
reported. (ACC)

Washington

DC

20036

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C C00486845

3. IS THIS
REPORT☒NEW
(N)

OR

☐AMENDED
(A)

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)☐ July 31 Mid-Year
Report (Non-election
Year Only) (MY)☐ Termination Report
(TER)(b) Monthly
Report
Due On:☐ Feb 20 (M2)☐ May 20 (M5)☐ Aug 20 (M8)☐ Nov 20 (M11)
(Non-Election
Year Only)☐ Mar 20 (M3)☐ Jun 20 (M6)☐ Sep 20 (M9)☐ Dec 20 (M12)
(Non-Election
Year Only)☐ Apr 20 (M4)☐ Jul 20 (M7)☐ Oct 20 (M10)☐ Jan 31 (YE)

(c) 12-Day

PRE-Election

Report for the:

☐

Primary (12P)

☒

General (12G)

☐

Runoff (12R)

☐

Convention (12C)

☐

Special (12S)

Election on

11

04

2014

in the
State of

DC

(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

2014

through

10

15

2014

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 Patrick Collins

Signature of Treasurer

Patrick Collins

[Electronically Filed]

Date

10

23

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.

Office
Use
Only**FEC FORM 3X**
Rev. 12/2004

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

LCV Victory Fund

Report Covering the Period:

From:

 M M / D D / Y Y Y Y Y
 10 / 01 / 2014

To:

 M M / D D / Y Y Y Y Y
 10 / 15 / 2014

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, 2014		418795.56
(b) Cash on Hand at Beginning of Reporting Period.....	3813152.69	
(c) Total Receipts (from Line 19)	2714405.17	8313555.23
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	6527557.86	8732350.79
7. Total Disbursements (from Line 31)	1104175.77	3308968.70
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	5423382.09	5423382.09
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)	411746.19	



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)

Page 3

Write or Type Committee Name

LCV Victory Fund

Report Covering the Period:

From:

M M	/	D D	/	Y Y Y Y
10		01		2014

To:

M M	/	D D	/	Y Y Y Y
10		15		2014

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).....

2462865.00

6269458.33

(ii) Unitemized

55540.17

171979.02

(iii) TOTAL (add

Lines 11(a)(i) and (ii)..... ►

2518405.17

6441437.35

(b) Political Party Committees

0.00

0.00

(c) Other Political Committees

(such as PACs).....

196000.00

1871500.00

(d) Total Contributions (add Lines

11(a)(iii), (b), and (c)) (Carry

Totals to Line 33, page 5) ►

2714405.17

8312937.35

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

617.88

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))..... ►

2714405.17

8313555.23

20. Total Federal Receipts

(subtract Line 18(c) from Line 19) ►

2714405.17

8313555.23

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	8592.96	80223.71
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	8592.96	80223.71
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	490000.00	790000.00
24. Independent Expenditures (use Schedule E)	605552.81	2438457.04
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	30.00	30.00
(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)).....	30.00	30.00
29. Other Disbursements	0.00	257.95
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)) ..	1104175.77	3308968.70
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	1104175.77	3308968.70

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)	2714405.17	8312937.35
34. Total Contribution Refunds (from Line 28(d))	30.00	30.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	2714375.17	8312907.35
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) ►	8592.96	80223.71
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) ►	8592.96	80223.71

: 97 `A-G79 @G B9CI G`H9LH`F9 @H98 `HC`5 `F9DCFHŽG7 <98I @`CF`+H9A-N5HCB
.

Form/Schedule: F3XN
Transaction ID :

Some earmarked contributions received in the previous reporting period were disbursed the first week of this reporting period. Therefore, those earmarked receipts were reported on the previous report, while the disbursements will appear on this report.

Form/Schedule:
Transaction ID:

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

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

FOR LINE NUMBER:
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

LCV Victory Fund

Full Name (Last, First, Middle Initial)

A. Jerome Adler

Mailing Address 134 6th Ave

City

Brooklyn

State

NY

Zip Code

11217-3518

FEC ID number of contributing
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

10 / 03 / 2014

Transaction ID : A1C8BBEEACD924E6991E

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

B. Clifford Anderson

Mailing Address 1408 La Sierra Dr

City

Sacramento

State

CA

Zip Code

95864-3035

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 ▼

250.00

Date of Receipt

10 / 01 / 2014

Transaction ID : A4604F4AD9B6D4D5091A

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

C. Kai Anderson

Mailing Address 733 10th St NW Ste 400
 Ste 400

City

Washington

State

DC

Zip Code

20001-4886

FEC ID number of contributing
federal political committee.

C

Name of Employer

Cassidy & Associates

Occupation

Co-Chairman

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

10 / 01 / 2014

Transaction ID : AD128A3C48B6A4021A76

Amount of Each Receipt this Period

500.00

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

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

1250.00

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

Use separate schedule(s)
for each category of the
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FOR LINE NUMBER:
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NAME OF COMMITTEE (In Full)

LCV Victory Fund

Full Name (Last, First, Middle Initial)

A. John Arnsparger

Mailing Address 2606 Coastal Oak Dr

City

Houston

State

TX

Zip Code

77059-6448

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 ▼

350.00

Date of Receipt

10 / 06 / 2014

Transaction ID : A30D391AD973F447AAA4

Amount of Each Receipt this Period

35.00

Full Name (Last, First, Middle Initial)

B. Donald Ayer

Mailing Address PO Box 736

City

Delton

State

MI

Zip Code

49046-0736

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 ▼

1000.00

Date of Receipt

10 / 03 / 2014

Transaction ID : AB207A387F6804F7C969

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

C. Ms. Louise Baum

Mailing Address 54 San Marcos Road West

City

Santa Fe

State

NM

Zip Code

87508-6684

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self

Occupation

Artist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

10 / 15 / 2014

Transaction ID : A0B644BAD81544346824

Amount of Each Receipt this Period

1000.00

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

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

2035.00

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

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

LCV Victory Fund

Full Name (Last, First, Middle Initial)

A. Reinier Beeuwkes

Mailing Address 1360 Monument St

City State Zip Code
Concord MA 01742-5322

FEC ID number of contributing
federal political committee.

C

Name of Employer

ISCHEMIX

Occupation

President & Chairman

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

20000.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 06 / 2014

Transaction ID : A9087AFCE79534B1EBCB

Amount of Each Receipt this Period

20000.00

Full Name (Last, First, Middle Initial)

B. Joshua Bekenstein

Mailing Address 52 High Rock Rd

City State Zip Code
Wayland MA 01778-3608

FEC ID number of contributing
federal political committee.

C

Name of Employer

Bain Capital

Occupation

Investor

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500000.00

Date of Receipt

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

Transaction ID : A8E124FD50541484185C

Amount of Each Receipt this Period

500000.00

Full Name (Last, First, Middle Initial)

C. Howard Birnbaum

Mailing Address 36 Central St

City State Zip Code
Auburndale MA 02466-2409

FEC ID number of contributing
federal political committee.

C

Name of Employer

Analysis Group, Inc.

Occupation

Principal

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 09 / 2014

Transaction ID : AFB9CF2A89C44468EA65

Amount of Each Receipt this Period

250.00

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

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

520250.00

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

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

LCV Victory Fund

Full Name (Last, First, Middle Initial)

A. Michael Bloomberg

Mailing Address 17 E 79th St

City

New York

State

NY

Zip Code

10075-0101

FEC ID number of contributing
federal political committee.

C

Name of Employer

Bloomberg, Inc.

Occupation

executive

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

200000.00

Date of Receipt

10 / 09 / 2014

Transaction ID : A3D96BBF408FE48AC82A

Amount of Each Receipt this Period

200000.00

Full Name (Last, First, Middle Initial)

B. Mrs. Walter Brissenden

Mailing Address 1400 S Bates Ave

City

Springfield

State

IL

Zip Code

62704-3346

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 ▼

2500.00

Date of Receipt

10 / 07 / 2014

Transaction ID : AA16658E20EF549B9BEF

Amount of Each Receipt this Period

2500.00

Full Name (Last, First, Middle Initial)

C. Donald Brister

Mailing Address 69 Highland Ave

City

Binghamton

State

NY

Zip Code

13905-4124

FEC ID number of contributing
federal political committee.

C

Name of Employer

State University Of New York

Occupation

Librarian

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

10 / 02 / 2014

Transaction ID : AEBA1C8C5D0E644D496E

Amount of Each Receipt this Period

250.00

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

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

202750.00

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

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

LCV Victory Fund

Full Name (Last, First, Middle Initial)

A. Nancy Burnett

Mailing Address 17 Meadow Pl

City State Zip Code
Carmel Valley CA 93924-9453

FEC ID number of contributing federal political committee.

C

Name of Employer

Retired

Occupation

Photographer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 15 2014

Transaction ID : ABF286E54FA0F4C10A10

Amount of Each Receipt this Period

5000.00

Full Name (Last, First, Middle Initial)

B. Andrew Canada

Mailing Address 4024 Carrington Ln

City State Zip Code
Efland NC 27243-9624

FEC ID number of contributing federal political committee.

C

Name of Employer

GLOBALRx

Occupation

Pharmacist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 15 2014

Transaction ID : AD51986F61D7D4F888B6

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

C. Andrew Chalnack

Mailing Address 10 Pine Ter E

City State Zip Code
Short Hills NJ 07078-2521

FEC ID number of contributing federal political committee.

C

Name of Employer

JP Morgan

Occupation

Finance

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 15 2014

Transaction ID : AA548E623C8BF439E911

Amount of Each Receipt this Period

500.00

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

6000.00

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

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

Use separate schedule(s)
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FOR LINE NUMBER: PAGE 12 OF 82
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

LCV Victory Fund

Full Name (Last, First, Middle Initial)

A. Elizabeth Colton

Mailing Address 1848 Pine St

City State Zip Code
 San Francisco CA 94109-4422

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 ▼

450.00

Date of Receipt

10 / 12 / 2014

Transaction ID : AD5366C06D18F4FE5BA1

Amount of Each Receipt this Period

450.00

Full Name (Last, First, Middle Initial)

B. Doug Cook

Mailing Address 613 Tremont St Apt 1
 Apt 1

City State Zip Code
 Boston MA 02118-1614

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self

Occupation

Engineer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

10 / 02 / 2014

Transaction ID : A40DE7373CC1B4E97A05

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

C. P. Benjamin Duke

Mailing Address 34A Yellow Cote Rd

City State Zip Code
 Oyster Bay NY 11771-4111

FEC ID number of contributing
federal political committee.

C

Name of Employer

Covington & Burling LLP

Occupation

Partner

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

10 / 12 / 2014

Transaction ID : A18DD9BF8B0844D9F8BA

Amount of Each Receipt this Period

250.00

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

1200.00

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)

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

LCV Victory Fund

Full Name (Last, First, Middle Initial)

A. Ann Dunlap

Mailing Address 2710 Veranda Rd NW

City

Albuquerque

State

NM

Zip Code

87107-2941

FEC ID number of contributing
federal political committee.

C

Name of Employer

Hacienda Antigua B&B

Occupation

Owner

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

500.00

Date of Receipt

10 / 14 / 2014

Transaction ID : A28D30BD7B1B4484DBE5

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

B. Tessa Flores

Mailing Address 154 Compton Rd

City

Ithaca

State

NY

Zip Code

14850-9455

FEC ID number of contributing
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

500.00

Date of Receipt

10 / 04 / 2014

Transaction ID : A9F27FBF4EA454625833

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

C. Sara Foszcz

Mailing Address 7301 W Burgett Rd

City

Richmond

State

IL

Zip Code

60071-9787

FEC ID number of contributing
federal political committee.

C

Name of Employer

Not Employed

Occupation

Volunteer

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

500.00

Date of Receipt

10 / 07 / 2014

Transaction ID : AF5FEBECE1EF54D11B3B

Amount of Each Receipt this Period

500.00

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

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

1500.00

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

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

LCV Victory Fund

Full Name (Last, First, Middle Initial)

A. Jonathan D Franklin

Mailing Address 520 Ridgeway Dr

City

Bellingham

State

WA

Zip Code

98225-6422

FEC ID number of contributing
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

10 / 07 / 2014

Transaction ID : A1AA0F871CF3A4EFBBA0

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

B. Naomi Franklin

Mailing Address 1411 Utah St Apt 4
Apt 4

City

Salt Lake City

State

UT

Zip Code

84104-3415

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 ▼

10000.00

Date of Receipt

10 / 15 / 2014

Transaction ID : A4C05A3D637DE4EBFBCE

Amount of Each Receipt this Period

7000.00

Full Name (Last, First, Middle Initial)

C. Charles Fry

Mailing Address 6530 Hillside Way

City

Parker

State

CO

Zip Code

80134-6323

FEC ID number of contributing
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

10 / 02 / 2014

Transaction ID : A2C61C45F33924E8DB7A

Amount of Each Receipt this Period

100.00

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

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

7600.00

SCHEDULE A (FEC Form 3X)

ITEMIZED RECEIPTS

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

LCV Victory Fund

Full Name (Last, First, Middle Initial)

A. Edward Golden

Mailing Address 1616 Sea Bell Cir

City State Zip Code
Corona Del Mar CA 92625-1247

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Self

Web Publisher

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 04 / 2014

Transaction ID : A43E1EF7215824DB599E

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

B. Mitch Golden

Mailing Address 220 W 98th St

City State Zip Code
New York NY 10025-5661

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Noodle Partners

CTO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 01 / 2014

Transaction ID : A19F0DAF0FE4E4522906

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

C. Robert Goldsburly

Mailing Address 249 E Summit Ave

City State Zip Code
San Antonio TX 78212-3026

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 ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 04 / 2014

Transaction ID : A72B428C8500B4CB0828

Amount of Each Receipt this Period

1000.00

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

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

1750.00

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

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

LCV Victory Fund

Full Name (Last, First, Middle Initial)

A. Sally Goodwin

Mailing Address 3677 Woodland Hall Ln

City State Zip Code
 Clinton WA 98236-8628

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self

Occupation

Physician

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

10 / 10 / 2014

Transaction ID : A77CCA6CD849A4FE78A2

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

B. Robert Grantham

Mailing Address 71 Mount Vernon St

City State Zip Code
 Boston MA 02108-1330

FEC ID number of contributing
federal political committee.

C

Name of Employer

Grantham, Mayo, Van Otterloo & Co. LLC

Occupation

Co-founder, Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1650000.00

Date of Receipt

10 / 10 / 2014

Transaction ID : AE612E48396CE4C17B28

Amount of Each Receipt this Period

1650000.00

Full Name (Last, First, Middle Initial)

C. Tom Grundy

Mailing Address 222 Sacramento St Apt B

City State Zip Code
 Nevada City CA 95959-2650

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self

Occupation

Engineer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

10 / 02 / 2014

Transaction ID : A00211BCC34E1419DBA0

Amount of Each Receipt this Period

100.00

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

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

1650600.00

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

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NAME OF COMMITTEE (In Full)

LCV Victory Fund

Full Name (Last, First, Middle Initial)

A. Mr. John Guffey

Mailing Address 388 Calle Colina

City

Santa Fe

State

NM

Zip Code

87501-1018

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self

Occupation

Consultant

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 07 / 2014

Transaction ID : AE4C6025862B9439F9BC

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

B. Daniel Harris

Mailing Address 2838 Meadowwood Dr

City

Toledo

State

OH

Zip Code

43606-3067

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self

Occupation

Musician

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 03 / 2014

Transaction ID : ADD9633A4EE564E4592A

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

C. Lee Hinerfeld

Mailing Address 275 Michelle Ln Apt 205

City

Groton

State

CT

Zip Code

06340-4243

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self-Employed

Occupation

Veterinarian

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 08 / 2014

Transaction ID : ACE57505970744B409A1

Amount of Each Receipt this Period

400.00

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

950.00

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

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

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NAME OF COMMITTEE (In Full)

LCV Victory Fund

Full Name (Last, First, Middle Initial)

A. Barbara Hirth

Mailing Address 16555 E Hialeah Dr

City

Centennial

State

CO

Zip Code

80015-4115

FEC ID number of contributing
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

10 / 02 / 2014

Transaction ID : A0E57FF0D7FF34A05A0F

Amount of Each Receipt this Period

300.00

Full Name (Last, First, Middle Initial)

B. Randall Holley

Mailing Address 13430 Middle Delaware Rd

City

Henderson

State

KY

Zip Code

42420-9548

FEC ID number of contributing
federal political committee.

C

Name of Employer

Dupont Pioneer

Occupation

Plant Geneticist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

10 / 11 / 2014

Transaction ID : A00363A4C578E484FA50

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

C. Elizabeth Holsten

Mailing Address 912 Coker Dr

City

Chapel Hill

State

NC

Zip Code

27517-4406

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 ▼

240.00

Date of Receipt

10 / 02 / 2014

Transaction ID : A28985D5B8FE746499E3

Amount of Each Receipt this Period

25.00

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

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

825.00

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

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NAME OF COMMITTEE (In Full)

LCV Victory Fund

Full Name (Last, First, Middle Initial)

A. Winnie Holzman

Mailing Address 4420 N Clybourn Ave

City

Burbank

State

CA

Zip Code

91505-4005

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self-Employed

Occupation

writer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

10 / 02 / 2014

Transaction ID : AF93C75E606F94E2693B

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

B. Neele Johnston

Mailing Address 25 Froude Cir
MR

City

Cabin John

State

MD

Zip Code

20818-1805

FEC ID number of contributing
federal political committee.

C

Name of Employer

Intelligence, Inc.

Occupation

computer software consultant

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

10 / 13 / 2014

Transaction ID : AD614BD1BB23B4844B02

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

C. John Langmore

Mailing Address 14095 Island Lake Rd

City

Chelsea

State

MI

Zip Code

48118-9579

FEC ID number of contributing
federal political committee.

C

Name of Employer

Rubicon Genomics

Occupation

executive

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

10 / 09 / 2014

Transaction ID : A5D2C7EBD2A9C4AF192B

Amount of Each Receipt this Period

500.00

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

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

2000.00

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

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NAME OF COMMITTEE (In Full)

LCV Victory Fund

Full Name (Last, First, Middle Initial)

A. Marc Lavine

Mailing Address 976 Belmont Ter Unit 9
Unit 9

City State Zip Code
Sunnyvale CA 94086-4893

FEC ID number of contributing
federal political committee.

C

Name of Employer

Brocade Communications Systems, Inc.

Occupation

Software Engineer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 15 / 2014

Transaction ID : AB0F549BEC2494E62801

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

B. David Leithauser

Mailing Address 3624 Royal Fern Cir

City State Zip Code
Deland FL 32724-1223

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self

Occupation

Software Developer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1050.00

Date of Receipt

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

Transaction ID : AE1919AB683CE4220A8E

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

C. James Lenfestey

Mailing Address 1833 Girard Ave S

City State Zip Code
Minneapolis MN 55403-2944

FEC ID number of contributing
federal political committee.

C

Name of Employer

Turning 40 Productions

Occupation

writer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

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

Transaction ID : AAB02678D2C924812A4F

Amount of Each Receipt this Period

1000.00

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

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

2250.00

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

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NAME OF COMMITTEE (In Full)

LCV Victory Fund

Full Name (Last, First, Middle Initial)

A. Jeffrey Liebman

Mailing Address 14 Tall Oaks Dr

City

Summit

State

NJ

Zip Code

07901-4134

FEC ID number of contributing
federal political committee.

C

Name of Employer

Eisai Inc.

Occupation

Medical Writer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

10 / 07 / 2014

Transaction ID : A4ED88F9A06BE40DF999

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

B. Mr. Henry Lord

Mailing Address 313 Audubon Ct

City

New Haven

State

CT

Zip Code

06510-1203

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self

Occupation

Investor

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

25500.00

Date of Receipt

10 / 07 / 2014

Transaction ID : ABDC564E1FD274FADB50

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

C. Walter MacGinitie

Mailing Address PO Box 1789

City

Friday Harbor

State

WA

Zip Code

98250-1789

FEC ID number of contributing
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

10 / 03 / 2014

Transaction ID : A97418E8BBC344463B19

Amount of Each Receipt this Period

500.00

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

1500.00

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

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

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NAME OF COMMITTEE (In Full)

LCV Victory Fund

Full Name (Last, First, Middle Initial)

A. James Maddy

Mailing Address PO Box 1167

City

Shepherdstown

State

WV

Zip Code

25443-1167

FEC ID number of contributing
federal political committee.

C

Name of Employer

Association Of Zoos & Aquarium

Occupation

President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 02 / 2014

Transaction ID : A3ED1C784540743AE838

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

B. Melinda Moffitt

Mailing Address 2710 Veranda Rd NW

City

Albuquerque

State

NM

Zip Code

87107-2941

FEC ID number of contributing
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

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

Transaction ID : AF8B973BC765B43BAA53

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

C. Richard Moss

Mailing Address 6020 Plateau Dr

City

Felton

State

CA

Zip Code

95018-9286

FEC ID number of contributing
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 09 / 2014

Transaction ID : AE8D3C7979F394CD381F

Amount of Each Receipt this Period

500.00

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

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

1500.00

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

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NAME OF COMMITTEE (In Full)

LCV Victory Fund

Full Name (Last, First, Middle Initial)

A. Robert Musil

Mailing Address 8600 Irvington Ave

City
Bethesda

State
MD

Zip Code
20817-3604

FEC ID number of contributing
federal political committee.

C

Name of Employer

Rachel Carson Council

Occupation

Environmental CEO/author

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

850.00

Date of Receipt

10 / 07 / 2014

Transaction ID : A1E4EEDF1A7FE467A98B

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

B. Virginia Naylor

Mailing Address 1114 S Clinton St

City
Baltimore

State
MD

Zip Code
21224-5005

FEC ID number of contributing
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

10 / 09 / 2014

Transaction ID : A933F94166B454757AE2

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

C. ariel nessel

Mailing Address 4419 Buena Vista St Apt 13

City
Dallas

State
TX

Zip Code
75205-4152

FEC ID number of contributing
federal political committee.

C

Name of Employer

ATN Consulting, Inc

Occupation

Owner

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

10 / 01 / 2014

Transaction ID : AB7264D6BB5634545B60

Amount of Each Receipt this Period

1000.00

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

1750.00

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

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

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NAME OF COMMITTEE (In Full)

LCV Victory Fund

Full Name (Last, First, Middle Initial)

A. Eleanor Neumaier

Mailing Address 235 Main St Apt 318

City

Venice

State

CA

Zip Code

90291-5223

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 ▼

250.00

Date of Receipt

10 / 07 / 2014

Transaction ID : A0DEB2824F1F74B91BDE

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

B. Ms. Linda Nicholes

Mailing Address 6261 E Fox Glen Dr

City

Anaheim

State

CA

Zip Code

92807-4070

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 ▼

1000.00

Date of Receipt

10 / 15 / 2014

Transaction ID : AE27034497E8F42D7905

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

C. David Olds

Mailing Address 108 E 96Th St Apt 6F

City

New York

State

NY

Zip Code

10128-6219

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self

Occupation

MD

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

10 / 02 / 2014

Transaction ID : A03BBE22B78E64D7FB4D

Amount of Each Receipt this Period

250.00

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

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

1500.00

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

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

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

LCV Victory Fund

Full Name (Last, First, Middle Initial)

A. Anne Peretz

Mailing Address 39 Fayerweather St

City State Zip Code
 Cambridge MA 02138-3329

FEC ID number of contributing
federal political committee.

C

Name of Employer

The Parenting Journey

Occupation

Program designer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

10 / 02 / 2014

Transaction ID : A9A65360F356B4BCBA5D

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

B. Henry Pugh

Mailing Address 201 W Tazewell St

City State Zip Code
 Norfolk VA 23510-1315

FEC ID number of contributing
federal political committee.

C

Name of Employer

None

Occupation

Fine Art Painter

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

265.00

Date of Receipt

10 / 06 / 2014

Transaction ID : ACFE9E7A110BD41DFA52

Amount of Each Receipt this Period

265.00

Full Name (Last, First, Middle Initial)

C. Michael Replogle

Mailing Address 6408 Ruffin Rd

City State Zip Code
 Chevy Chase MD 20815-5323

FEC ID number of contributing
federal political committee.

C

Name of Employer

Institute for Transportation and Devel

Occupation

Civil Engineer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

10 / 02 / 2014

Transaction ID : A0110784DD8D242A2A14

Amount of Each Receipt this Period

2000.00

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

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

2765.00

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

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

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

LCV Victory Fund

Full Name (Last, First, Middle Initial)

A. Jack Rickly

Mailing Address 69 Howard St

City State Zip Code
Dumont NJ 07628-3124

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 ▼

215.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 13 / 2014

Transaction ID : AD0F2C7122ECE4A9E87B

Amount of Each Receipt this Period

40.00

Full Name (Last, First, Middle Initial)

B. Marie Ridder

Mailing Address 1219 Crest Ln

City State Zip Code
Mc Lean VA 22101-1837

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self

Occupation

housewife

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 08 / 2014

Transaction ID : A1F1199235ACB40DE9E4

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

C. Robert Ridgely

Mailing Address PO Box 58

City State Zip Code
North Sandwich NH 03259-0058

FEC ID number of contributing
federal political committee.

C

Name of Employer

World Land Trust-US

Occupation

Conservationist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 08 / 2014

Transaction ID : A1EE54F50DD2A4C61B40

Amount of Each Receipt this Period

300.00

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

840.00

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

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

LCV Victory Fund

Full Name (Last, First, Middle Initial)

A. James Rion

Mailing Address 2720 Atlantic Ave

City State Zip Code
 Sullivans Island SC 29482-9658

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self-Employed

Occupation

Investor

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y
 10 / 07 / 2014

Transaction ID : AC04A89A23DAF4418AAF

Amount of Each Receipt this Period

5000.00

Full Name (Last, First, Middle Initial)

B. Nancy Ritzenthaler

Mailing Address 1401 Sunset Ave SW

City State Zip Code
 Seattle WA 98116-1646

FEC ID number of contributing
federal political committee.

C

Name of Employer

Ritzmark Holdings

Occupation

President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

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

Transaction ID : A4CBA3F3740D44D6B870

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

c. Craig Rodby

Mailing Address 31 Colonel Winstead Dr

City State Zip Code
 Brentwood TN 37027-8937

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 ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
 10 / 04 / 2014

Transaction ID : AE7BCD2ED9DA14B1BA83

Amount of Each Receipt this Period

250.00

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

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

6250.00

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

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NAME OF COMMITTEE (In Full)

LCV Victory Fund

Full Name (Last, First, Middle Initial)

A. James Rosenfeld

Mailing Address PO Box 1195

City

Ketchum

State

ID

Zip Code

83340-1195

FEC ID number of contributing
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

10 / 05 / 2014

Transaction ID : A00292CB028E2410387E

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

B. Ms. Marjorie Roswell

Mailing Address 10 E Baltimore St Ste 1111

City

Baltimore

State

MD

Zip Code

21202-1620

FEC ID number of contributing
federal political committee.

C

Name of Employer

Roswell Infographics

Occupation

Web Developer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

30000.00

Date of Receipt

10 / 14 / 2014

Transaction ID : AFE564803F71B41708ED

Amount of Each Receipt this Period

30000.00

Full Name (Last, First, Middle Initial)

C. Roy Ruhnke

Mailing Address 1518 S 18th St

City

Saint Joseph

State

MO

Zip Code

64507-1317

FEC ID number of contributing
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

10 / 15 / 2014

Transaction ID : AD4DA9C06B8A84D51B7E

Amount of Each Receipt this Period

400.00

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

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

30900.00

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

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

LCV Victory Fund

Full Name (Last, First, Middle Initial)

A. Elizabeth Smith

Mailing Address 2225 Lewis St

City

Lakewood

State

CO

Zip Code

80215-1336

FEC ID number of contributing
federal political committee.

C

Name of Employer

Pinnacol Assurance

Occupation

ATTORNEY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

475.00

Date of Receipt

10 / 07 / 2014

Transaction ID : AC5EB83C36BA2435FB43

Amount of Each Receipt this Period

475.00

Full Name (Last, First, Middle Initial)

B. Philippa Strahm

Mailing Address 1632 Corte Via
Apt C17

City

Los Altos

State

CA

Zip Code

94024-5927

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 ▼

2150.00

Date of Receipt

10 / 11 / 2014

Transaction ID : ABE3EA0A22B0646CCBEC

Amount of Each Receipt this Period

1150.00

Full Name (Last, First, Middle Initial)

C. Arthur Strauss

Mailing Address 8 Blanchard

City

Irvine

State

CA

Zip Code

92603-3455

FEC ID number of contributing
federal political committee.

C

Name of Employer

Retired

Occupation

Physician

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

10 / 10 / 2014

Transaction ID : A08DF4BB9C01A46EC8CE

Amount of Each Receipt this Period

250.00

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

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

1875.00

SCHEDULE A (FEC Form 3X)

ITEMIZED RECEIPTS

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

LCV Victory Fund

Full Name (Last, First, Middle Initial)

A. Deborah Taylor

Mailing Address 317 W 87th St Apt 8b

City
New York

State Zip Code
NY 10024-2657

FEC ID number of contributing
federal political committee.

C

Name of Employer

Retired

Occupation

Architect/Energy consultant

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

10 / 15 / 2014

Transaction ID : AC0DF72F41FF14732BD1

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

B. Jason Titus

Mailing Address 360 Bryant Ct

City
Palo Alto

State Zip Code
CA 94301-1453

FEC ID number of contributing
federal political committee.

C

Name of Employer

Yahoo!

Occupation

Software Development

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

10 / 03 / 2014

Transaction ID : ACECD9CEEDF4F4C88B2E

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

C. Elizabeth Trawick

Mailing Address 6813 County Road 69

City
Skipperville

State Zip Code
AL 36374-6933

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self

Occupation

Psychiatrist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

10 / 15 / 2014

Transaction ID : AED1EFBBAE63F4635AEA

Amount of Each Receipt this Period

1000.00

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

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

2250.00

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

Use separate schedule(s)
for each category of the
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NAME OF COMMITTEE (In Full)

LCV Victory Fund

Full Name (Last, First, Middle Initial)

A. Katy VanDusen

Mailing Address 320 Lakeside Dr

City

Birmingham

State

MI

Zip Code

48009-1369

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self

Occupation

facilitator of positive change

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

10 / 02 / 2014

Transaction ID : A8D895EBD54DD4D10992

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

B. Francis Varga

Mailing Address 3001 W Oakhaven Ln

City

Springfield

State

MO

Zip Code

65810-1948

FEC ID number of contributing
federal political committee.

C

Name of Employer

Mercy Clinic Pathology

Occupation

Physician

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

10 / 02 / 2014

Transaction ID : A5B754A9635DB4B31954

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

C. Joanne Witty

Mailing Address 77 Columbia Hts

City

Brooklyn

State

NY

Zip Code

11201-1305

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self

Occupation

Lawyer/Civic Volunteer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

10000.00

Date of Receipt

10 / 06 / 2014

Transaction ID : A01DA7267DEBB4624AA4

Amount of Each Receipt this Period

10000.00

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

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

10750.00

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

Use separate schedule(s)
for each category of the
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NAME OF COMMITTEE (In Full)

LCV Victory Fund

Full Name (Last, First, Middle Initial)

A. Bonnie Yelverton

Mailing Address 7234 Annapolis Way

City

Fontana

State

CA

Zip Code

92336-0856

FEC ID number of contributing
federal political committee.

C

Name of Employer

None

Occupation

science and math teacher

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 02 / 2014

Transaction ID : AFD08C577C79B4EE0A17

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

Date of Receipt

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

Amount of Each Receipt this Period

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

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)..... ►

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

25.00

2462865.00

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

Use separate schedule(s)
for each category of the
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NAME OF COMMITTEE (In Full)

LCV Victory Fund

Full Name (Last, First, Middle Initial)

A. AMALGAMATED BANK PAC

Mailing Address 275 SEVENTH AVENUE

City

New York

State

NY

Zip Code

10001-6708

FEC ID number of contributing
federal political committee.

C

C00379693

Name of Employer

Occupation

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

500.00

Date of Receipt

10 / 07 / 2014

Transaction ID : ACA29FF97A7A24BEE959

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

B. America Votes Action Fund

Mailing Address 1155 Connecticut Ave, NW
Suite 600

City

Washington

State

DC

Zip Code

20036-4324

FEC ID number of contributing
federal political committee.

C

C00492520

Name of Employer

Occupation

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

50000.00

Date of Receipt

10 / 09 / 2014

Transaction ID : AFD2C36B121044D49EF

Amount of Each Receipt this Period

50000.00

Full Name (Last, First, Middle Initial)

C. Friends Of The Earth Action PAC

Mailing Address 1100 15TH STREET, NW11TH FLOOR

City

Washington

State

DC

Zip Code

20005-1707

FEC ID number of contributing
federal political committee.

C

C00141044

Name of Employer

Occupation

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

500.00

Date of Receipt

10 / 02 / 2014

Transaction ID : ABDE32B6026024946B8F

Amount of Each Receipt this Period

500.00

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

51000.00

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

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

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

LCV Victory Fund

Full Name (Last, First, Middle Initial)

A. NEXTGEN CLIMATE ACTION COMMITTEE

Mailing Address 700 13TH STREET, NW
 SUITE 600

City State Zip Code
 WASHINGTON DC 20005

FEC ID number of contributing
federal political committee.

C C00547349

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

0.00

Date of Receipt

10 / **02** / **2014**

Transaction ID : A1F261CC0D5264FFCB0E

Amount of Each Receipt this Period

145000.00

ERMK: Conservation Voters of Michigan PAC - Federal Account

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City State Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

Amount of Each Receipt this Period

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

Amount of Each Receipt this Period

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

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

145000.00

196000.00

<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

LCV Victory Fund

457.59

456.27

422.22

1336.08

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<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)

LCV Victory Fund

Full Name (Last, First, Middle Initial)

A. League of Conservation Voters, Inc.Mailing Address 1920 L St NW
Ste 800

City Washington State DC Zip Code 20036-5045

Purpose of Disbursement
Webpage Hosting

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

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

Transaction ID : B482BF7F143F64F979E3

Amount of Each Disbursement this Period

237.54

Full Name (Last, First, Middle Initial)

B. League of Conservation Voters, Inc.Mailing Address 1920 L St NW
Ste 800

City Washington State DC Zip Code 20036-5045

Purpose of Disbursement
Admin and Compliance Support

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		15		2014

Transaction ID : BA24C25DE06794E968ED

Amount of Each Disbursement this Period

1444.92

Full Name (Last, First, Middle Initial)

C. League of Conservation Voters, Inc.Mailing Address 1920 L St NW
Ste 800

City Washington State DC Zip Code 20036-5045

Purpose of Disbursement
Staff and Email for Fundraising Appeal

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		15		2014

Transaction ID : B121A71EB1A724B4B88B

Amount of Each Disbursement this Period

59.87

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

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

1742.33

--

<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

LCV Victory Fund

Category/
Type

479.57

State: District:

Category/
Type

424.81

State: District:

Category/
Type

Age Group	Number of People
0-14	100
15-24	90
25-34	80
35-44	70
45-54	60
55-64	50
65-74	60
75-84	40
85-94	30
95-104	20

State: District:

1034.38

<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

LCV Victory Fund

A. Suntrust Bank

Mailing Address PO Box 622227

City	State	Zip Code
Orlando	FL	32862-2227

[illegible]

Candidate Name

Office Sought:	<input type="checkbox"/>	House
	<input type="checkbox"/>	Senate
	<input type="checkbox"/>	President
State:	District:	

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

Transaction ID : BC54CC40C36C348D5966

Amount of Each Disbursement this Period

4303.86

B. Suntrust Bank

Mailing Address PO Box 622227

City	State	Zip Code
Orlando	FL	32862-2227

[illegible]

Candidate Name

Office Sought:	<input type="checkbox"/>	House
	<input type="checkbox"/>	Senate
	<input type="checkbox"/>	President
State:	District:	

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Date of Disbursement

Transaction ID : B2F667956D6EA44AE8A7

Amount of Each Disbursement this Period

176.31

C.

Full Name (Last, First, Middle Initial)

Mailing Address

City	State	Zip Code
------	-------	----------

Purpose of Disbursement

Candidate Name

Office Sought:	<input type="checkbox"/>	House
	<input type="checkbox"/>	Senate
	<input type="checkbox"/>	President
State:	District:	

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Date of Disbursement

Amount of Each Disbursement this Period

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

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

4480.17

8592.96

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 39 OF 82

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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)

LCV Victory Fund

Full Name (Last, First, Middle Initial)

A. Conservation Voters of Michigan PAC - Federal Account

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		02		2014

Mailing Address 3029 Miller Road

City	State	Zip Code
Ann Arbor	MI	48103

Purpose of Disbursement
ERMK: NextGen Climate Action Committee

Candidate Name

Category/
Type

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2014
<input type="checkbox"/> Primary <input type="checkbox"/> General
<input checked="" type="checkbox"/> Other (specify) ▼
Other0

State: District:

Transaction ID : B8C658D7276FC43E1842

Amount of Each Disbursement this Period

300000.00

ERMK: NextGen Climate Action Committee.
Transmitted by committee check

Full Name (Last, First, Middle Initial)

B. Conservation Voters of Michigan PAC - Federal Account

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		06		2014

Mailing Address 3029 Miller Road

City	State	Zip Code
Ann Arbor	MI	48103

Purpose of Disbursement
ERMK: NextGen Climate Action Committee

Candidate Name

Category/
Type

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2014
<input type="checkbox"/> Primary <input type="checkbox"/> General
<input checked="" type="checkbox"/> Other (specify) ▼
Other0

State: District:

Transaction ID : BBFE1E891A25F4A54B24

Amount of Each Disbursement this Period

145000.00

ERMK: NextGen Climate Action Committee.
Transmitted by committee check

Full Name (Last, First, Middle Initial)

C. WIN MINNESOTA FEDERAL PAC

Date of Disbursement

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

Mailing Address 1600 UNIVERSITY AVE W SUITE 401C

City	State	Zip Code
SAINT PAUL	MN	55104

Purpose of Disbursement
Contribution to Committee

Candidate Name

Category/
Type

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2014
<input type="checkbox"/> Primary <input type="checkbox"/> General
<input checked="" type="checkbox"/> Other (specify) ▼
Other2014

State: District:

Transaction ID : B6307E23B84C7473D966

Amount of Each Disbursement this Period

45000.00

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

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

490000.00

490000.00

	21b		22		23		24		25		26
	27	X	28a		28b		28c		29		30b

LCV Victory Fund

A. meir strahilevitz

Date of Disbursement

Three digital displays are shown side-by-side. The first display shows '10' with two small squares above it labeled 'M'. The second display shows '07' with two small squares above it labeled 'D'. The third display shows '2014' with four small squares above it labeled 'Y'. The displays are separated by slashes.

Transaction ID : BC454CE92D15B448DB20

Category/
Type

Disbursement For:

☐ Primary ☐ General

☐ Other (specify) ▼

Amount of Each Disbursement this Period



30.00

B.

Date of Disbursement

Purpose of Disbursement

Candidate Name

Office Sought:	<input type="checkbox"/>	House
	<input type="checkbox"/>	Senate
	<input type="checkbox"/>	President

Disbursement For:

☐ Primary ☐ General

☐ Other (specify) ▼

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

C.

Date of Disbursement

City	State	Zip Code
------	-------	----------

Purpose of Disbursement	
1	2
3	4
5	6
7	8
9	10
11	12
13	14
15	16
17	18
19	20
21	22
23	24
25	26
27	28
29	30
31	32
33	34
35	36
37	38
39	40
41	42
43	44
45	46
47	48
49	50
51	52
53	54
55	56
57	58
59	60
61	62
63	64
65	66
67	68
69	70
71	72
73	74
75	76
77	78
79	80
81	82
83	84
85	86
87	88
89	90
91	92
93	94
95	96
97	98
99	100

Candidate Name

Office Sought:	<input type="checkbox"/>	House
	<input type="checkbox"/>	Senate
	<input type="checkbox"/>	President

Disbursement For:

☐ Primary ☐ General

☐ Other (specify) ▼

Amount of Each Disbursement this Period

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

30.00

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

30.00

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 41 OF 82

FOR LINE NUMBER:
(check only one)☐ 9
☒ 10

NAME OF COMMITTEE (In Full)

LCV Victory Fund

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

League of Conservation Voters, Inc.

Nature of Debt (Purpose):
Staff Time for Mail CopyMailing Address 1920 L St NW
Ste 800City State Zip Code
Washington DC 20036-5045

Outstanding Balance Beginning This Period

35.69

Transaction ID : DE90E9DAD3C2F48FE8DE

Amount Incurred This Period

0.00

Payment This Period

35.69

Outstanding Balance at Close of This Period

0.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

League of Conservation Voters, Inc.

Nature of Debt (Purpose):
Staff Time for Mail CopyMailing Address 1920 L St NW
Ste 800City State Zip Code
Washington DC 20036-5045

Outstanding Balance Beginning This Period

35.69

Transaction ID : DC71CD23336F04B6EB9A

Amount Incurred This Period

0.00

Payment This Period

35.69

Outstanding Balance at Close of This Period

0.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

League of Conservation Voters, Inc.

Nature of Debt (Purpose):
PostageMailing Address 1920 L St NW
Ste 800City State Zip Code
Washington DC 20036-5045

Outstanding Balance Beginning This Period

146.60

Transaction ID : DB250EAC7FE684E7EA37

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

146.60

1) SUBTOTALS This Period This Page (optional)..... ►

146.60

2) TOTALS This Period (last page this line number only)..... ►

3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) ►

4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ►

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 42 OF 82

FOR LINE NUMBER:
(check only one)
☐ 9
☒ 10

NAME OF COMMITTEE (In Full)

LCV Victory Fund

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

League of Conservation Voters, Inc.

Nature of Debt (Purpose):
Staff Time for Mail CopyMailing Address 1920 L St NW
Ste 800City State Zip Code
Washington DC 20036-5045

Outstanding Balance Beginning This Period

35.69

Transaction ID : D8462FDF90A704CC3B39

Amount Incurred This Period

0.00

Payment This Period

35.69

Outstanding Balance at Close of This Period

0.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

League of Conservation Voters, Inc.

Nature of Debt (Purpose):
PostageMailing Address 1920 L St NW
Ste 800City State Zip Code
Washington DC 20036-5045

Outstanding Balance Beginning This Period

146.60

Transaction ID : D21BA887007E74A73851

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

146.60

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

League of Conservation Voters, Inc.

Nature of Debt (Purpose):
Staff Time for Mail CopyMailing Address 1920 L St NW
Ste 800City State Zip Code
Washington DC 20036-5045

Outstanding Balance Beginning This Period

152.10

Transaction ID : D198B04FA24E0487F964

Amount Incurred This Period

0.00

Payment This Period

152.10

Outstanding Balance at Close of This Period

0.00

1) SUBTOTALS This Period This Page (optional)..... ►

146.60

2) TOTALS This Period (last page this line number only)..... ►

3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) ►

4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ►

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 43 OF 82

FOR LINE NUMBER:
(check only one)
☐ 9
☒ 10

NAME OF COMMITTEE (In Full)

LCV Victory Fund

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

League of Conservation Voters, Inc.

Nature of Debt (Purpose):
PostageMailing Address 1920 L St NW
Ste 800City State Zip Code
Washington DC 20036-5045

Outstanding Balance Beginning This Period

146.60

Transaction ID : D27333011E65249CA9B0

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

146.60

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

League of Conservation Voters, Inc.

Nature of Debt (Purpose):
PostageMailing Address 1920 L St NW
Ste 800City State Zip Code
Washington DC 20036-5045

Outstanding Balance Beginning This Period

146.60

Transaction ID : DBA216015F1C44018828

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

146.60

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

League of Conservation Voters, Inc.

Nature of Debt (Purpose):
Staff Time for Mail CopyMailing Address 1920 L St NW
Ste 800City State Zip Code
Washington DC 20036-5045

Outstanding Balance Beginning This Period

35.69

Transaction ID : DD98D9DFAA6E448849A3

Amount Incurred This Period

0.00

Payment This Period

35.69

Outstanding Balance at Close of This Period

0.00

1) SUBTOTALS This Period This Page (optional)..... ►

293.20

2) TOTALS This Period (last page this line number only)..... ►

3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) ►

4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ►

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 44 OF 82

FOR LINE NUMBER:
(check only one)
☐ 9
☒ 10

NAME OF COMMITTEE (In Full)

LCV Victory Fund

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

League of Conservation Voters, Inc.

Nature of Debt (Purpose):
Staff Time for Mail CopyMailing Address 1920 L St NW
Ste 800City State Zip Code
Washington DC 20036-5045

Outstanding Balance Beginning This Period

35.69

Transaction ID : D707685C9CAC043A6B52

Amount Incurred This Period

0.00

Payment This Period

35.69

Outstanding Balance at Close of This Period

0.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

League of Conservation Voters, Inc.

Nature of Debt (Purpose):
PostageMailing Address 1920 L St NW
Ste 800City State Zip Code
Washington DC 20036-5045

Outstanding Balance Beginning This Period

146.60

Transaction ID : D0BE30B6862824E63B36

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

146.60

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

League of Conservation Voters, Inc.

Nature of Debt (Purpose):
Staff and Email for Online MessageMailing Address 1920 L St NW
Ste 800City State Zip Code
Washington DC 20036-5045

Outstanding Balance Beginning This Period

152.10

Transaction ID : D028B9D970E784B2AADB

Amount Incurred This Period

0.00

Payment This Period

152.10

Outstanding Balance at Close of This Period

0.00

1) SUBTOTALS This Period This Page (optional)..... ►

146.60

2) TOTALS This Period (last page this line number only)..... ►

3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) ►

4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ►

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 45 OF 82

FOR LINE NUMBER:
(check only one)
☐ 9
☒ 10

NAME OF COMMITTEE (In Full)

LCV Victory Fund

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

League of Conservation Voters, Inc.

Nature of Debt (Purpose):

Staff and Email for Online Message

Mailing Address 1920 L St NW
Ste 800City State Zip Code
Washington DC 20036-5045

Outstanding Balance Beginning This Period

152.10

Transaction ID : DD82F6E96CF734D3D959

Amount Incurred This Period

0.00

Payment This Period

152.10

Outstanding Balance at Close of This Period

0.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

League of Conservation Voters, Inc.

Nature of Debt (Purpose):

Staff and Email for Online Message

Mailing Address 1920 L St NW
Ste 800City State Zip Code
Washington DC 20036-5045

Outstanding Balance Beginning This Period

152.10

Transaction ID : DA37E5C6996924249B44

Amount Incurred This Period

0.00

Payment This Period

152.10

Outstanding Balance at Close of This Period

0.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

League of Conservation Voters, Inc.

Nature of Debt (Purpose):

Staff and Email for Online Message

Mailing Address 1920 L St NW
Ste 800City State Zip Code
Washington DC 20036-5045

Outstanding Balance Beginning This Period

152.10

Transaction ID : DFCF4911625AF4246A65

Amount Incurred This Period

0.00

Payment This Period

152.10

Outstanding Balance at Close of This Period

0.00

1) SUBTOTALS This Period This Page (optional)..... ►

0.00

2) TOTALS This Period (last page this line number only)..... ►

3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) ►

4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ►

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 46 OF 82

FOR LINE NUMBER:
(check only one)☐ 9
☒ 10

NAME OF COMMITTEE (In Full)

LCV Victory Fund

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

League of Conservation Voters, Inc.

Nature of Debt (Purpose):
Staff Time for Mail CopyMailing Address 1920 L St NW
Ste 800City State Zip Code
Washington DC 20036-5045

Outstanding Balance Beginning This Period

0.00

Transaction ID : D7AC060B356174EE38E6

Amount Incurred This Period

23.80

Payment This Period

0.00

Outstanding Balance at Close of This Period

23.80

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

League of Conservation Voters, Inc.

Nature of Debt (Purpose):
Staff Time for Mail CopyMailing Address 1920 L St NW
Ste 800City State Zip Code
Washington DC 20036-5045

Outstanding Balance Beginning This Period

0.00

Transaction ID : D42CFB28C248D436B896

Amount Incurred This Period

23.80

Payment This Period

0.00

Outstanding Balance at Close of This Period

23.80

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

League of Conservation Voters, Inc.

Nature of Debt (Purpose):
PostageMailing Address 1920 L St NW
Ste 800City State Zip Code
Washington DC 20036-5045

Outstanding Balance Beginning This Period

0.00

Transaction ID : D4441333DD14540B9B9F

Amount Incurred This Period

57.98

Payment This Period

0.00

Outstanding Balance at Close of This Period

57.98

1) SUBTOTALS This Period This Page (optional)..... ►

105.58

2) TOTALS This Period (last page this line number only)..... ►

3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) ►

4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ►

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 47 OF 82

FOR LINE NUMBER:
(check only one)
☐ 9
☒ 10

NAME OF COMMITTEE (In Full)

LCV Victory Fund

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

League of Conservation Voters, Inc.

Nature of Debt (Purpose):
PostageMailing Address 1920 L St NW
Ste 800City State Zip Code
Washington DC 20036-5045

Outstanding Balance Beginning This Period

0.00

Transaction ID : D2AFF0EDFFE0D4DC8B48

Amount Incurred This Period

57.99

Payment This Period

0.00

Outstanding Balance at Close of This Period

57.99

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

League of Conservation Voters, Inc.

Nature of Debt (Purpose):
PostageMailing Address 1920 L St NW
Ste 800City State Zip Code
Washington DC 20036-5045

Outstanding Balance Beginning This Period

0.00

Transaction ID : DC6BFEA1DE47642B4928

Amount Incurred This Period

57.98

Payment This Period

0.00

Outstanding Balance at Close of This Period

57.98

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

League of Conservation Voters, Inc.

Nature of Debt (Purpose):
PostageMailing Address 1920 L St NW
Ste 800City State Zip Code
Washington DC 20036-5045

Outstanding Balance Beginning This Period

0.00

Transaction ID : D9EAEB1225F4B4004A15

Amount Incurred This Period

57.99

Payment This Period

0.00

Outstanding Balance at Close of This Period

57.99

1) **SUBTOTALS** This Period This Page (optional)..... ►

173.96

2) **TOTALS** This Period (last page this line number only)..... ►3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only) ►4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ►

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 48 OF 82

FOR LINE NUMBER:
(check only one)
☐ 9
☒ 10

NAME OF COMMITTEE (In Full)

LCV Victory Fund

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

League of Conservation Voters, Inc.

Nature of Debt (Purpose):
PostageMailing Address 1920 L St NW
Ste 800City State Zip Code
Washington DC 20036-5045

Outstanding Balance Beginning This Period

0.00

Transaction ID : D225A770722924B11AA7

Amount Incurred This Period

57.98

Payment This Period

0.00

Outstanding Balance at Close of This Period

57.98

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

League of Conservation Voters, Inc.

Nature of Debt (Purpose):
Staff Time for Mail CopyMailing Address 1920 L St NW
Ste 800City State Zip Code
Washington DC 20036-5045

Outstanding Balance Beginning This Period

0.00

Transaction ID : DDE88585A4EB043CAB5C

Amount Incurred This Period

23.80

Payment This Period

0.00

Outstanding Balance at Close of This Period

23.80

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

League of Conservation Voters, Inc.

Nature of Debt (Purpose):
Staff Time for Mail CopyMailing Address 1920 L St NW
Ste 800City State Zip Code
Washington DC 20036-5045

Outstanding Balance Beginning This Period

0.00

Transaction ID : D61499A655D2145F5B00

Amount Incurred This Period

23.80

Payment This Period

0.00

Outstanding Balance at Close of This Period

23.80

1) SUBTOTALS This Period This Page (optional)..... ►

105.58

2) TOTALS This Period (last page this line number only)..... ►

3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) ►

4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ►

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 49 OF 82

FOR LINE NUMBER:
(check only one)
☐ 9
☒ 10

NAME OF COMMITTEE (In Full)

LCV Victory Fund

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

League of Conservation Voters, Inc.

Nature of Debt (Purpose):
Staff Time for Mail CopyMailing Address 1920 L St NW
Ste 800City State Zip Code
Washington DC 20036-5045

Outstanding Balance Beginning This Period

0.00

Transaction ID : D92915A7A977544BD93C

Amount Incurred This Period

23.80

Payment This Period

0.00

Outstanding Balance at Close of This Period

23.80

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

League of Conservation Voters, Inc.

Nature of Debt (Purpose):
Staff Time for Field CanvassMailing Address 1920 L St NW
Ste 800City State Zip Code
Washington DC 20036-5045

Outstanding Balance Beginning This Period

0.00

Transaction ID : D59D5737883A14DFAA44

Amount Incurred This Period

2676.13

Payment This Period

0.00

Outstanding Balance at Close of This Period

2676.13

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

AMM Political Strategies

Nature of Debt (Purpose):
Phone Calls

Mailing Address 507 N. Sylvania Ave

City State Zip Code
Ft Worth TX 76111-2317

Outstanding Balance Beginning This Period

0.00

Transaction ID : DF90C5508061746D6A41

Amount Incurred This Period

33465.69

Payment This Period

0.00

Outstanding Balance at Close of This Period

33465.69

1) SUBTOTALS This Period This Page (optional)..... ►

36165.62

2) TOTALS This Period (last page this line number only)..... ►

3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) ►

4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ►

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 50 OF 82

FOR LINE NUMBER:
(check only one)
☐ 9
☒ 10

NAME OF COMMITTEE (In Full)

LCV Victory Fund

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Global Strategy Group, LLC

Nature of Debt (Purpose):
PollingMailing Address 895 Broadway
5th FloorCity State Zip Code
New York NY 10003-1226

Outstanding Balance Beginning This Period

24800.00

Transaction ID : D77808998825740A0BE5

Amount Incurred This Period

0.00

Payment This Period

24800.00

Outstanding Balance at Close of This Period

0.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Mack-Sumner Communications, LLC

Nature of Debt (Purpose):
DoorhangersMailing Address 2001 N Beauregard St
Ste 420City State Zip Code
Alexandria VA 22311-1750

Outstanding Balance Beginning This Period

0.00

Transaction ID : DB8CA6FDFD8C3433BAA2

Amount Incurred This Period

17488.86

Payment This Period

0.00

Outstanding Balance at Close of This Period

17488.86

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Mack-Sumner Communications, LLC

Nature of Debt (Purpose):
Pledge CardsMailing Address 2001 N Beauregard St
Ste 420City State Zip Code
Alexandria VA 22311-1750

Outstanding Balance Beginning This Period

0.00

Transaction ID : D23B6C18C19AE4F36BAA

Amount Incurred This Period

3835.55

Payment This Period

0.00

Outstanding Balance at Close of This Period

3835.55

1) **SUBTOTALS** This Period This Page (optional)..... ►

21324.41

2) **TOTALS** This Period (last page this line number only)..... ►3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only) ►4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ►

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 51 OF 82

FOR LINE NUMBER:
(check only one)☐ 9
☒ 10

NAME OF COMMITTEE (In Full)

LCV Victory Fund

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Mack-Sumner Communications, LLCNature of Debt (Purpose):
T-ShirtsMailing Address 2001 N Beauregard St
Ste 420City State Zip Code
Alexandria VA 22311-1750

Outstanding Balance Beginning This Period

0.00

Transaction ID : DB041E03CFA1C437782B

Amount Incurred This Period

787.10

Payment This Period

0.00

Outstanding Balance at Close of This Period

787.10

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Mack-Sumner Communications, LLCNature of Debt (Purpose):
StickersMailing Address 2001 N Beauregard St
Ste 420City State Zip Code
Alexandria VA 22311-1750

Outstanding Balance Beginning This Period

0.00

Transaction ID : D03BBD0221CFC453B937

Amount Incurred This Period

529.25

Payment This Period

0.00

Outstanding Balance at Close of This Period

529.25

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

MosaicNature of Debt (Purpose):
PrintingMailing Address 1920 L St NW
Street LevelCity State Zip Code
Washington DC 20036-5004

Outstanding Balance Beginning This Period

0.00

Transaction ID : DE52994994ECE4E10BBC

Amount Incurred This Period

190.81

Payment This Period

0.00

Outstanding Balance at Close of This Period

190.81

1) **SUBTOTALS** This Period This Page (optional)..... ►

1507.16

2) **TOTALS** This Period (last page this line number only)..... ►3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only) ►4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ►

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 52 OF 82

FOR LINE NUMBER:
(check only one)☐ 9
☒ 10

NAME OF COMMITTEE (In Full)

LCV Victory Fund

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Mosaic

Nature of Debt (Purpose):
PrintingMailing Address 1920 L St NW
Street LevelCity State Zip Code
Washington DC 20036-5004

Outstanding Balance Beginning This Period

0.00

Transaction ID : D7CAD67A5A57B4B9283E

Amount Incurred This Period

190.81

Payment This Period

0.00

Outstanding Balance at Close of This Period

190.81

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Mosaic

Nature of Debt (Purpose):
PrintingMailing Address 1920 L St NW
Street LevelCity State Zip Code
Washington DC 20036-5004

Outstanding Balance Beginning This Period

0.00

Transaction ID : D15FD80F87C034F269ED

Amount Incurred This Period

190.80

Payment This Period

0.00

Outstanding Balance at Close of This Period

190.80

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Mosaic

Nature of Debt (Purpose):
PrintingMailing Address 1920 L St NW
Street LevelCity State Zip Code
Washington DC 20036-5004

Outstanding Balance Beginning This Period

0.00

Transaction ID : D757F00F226564B26BEB

Amount Incurred This Period

190.80

Payment This Period

0.00

Outstanding Balance at Close of This Period

190.80

1) SUBTOTALS This Period This Page (optional)..... ►

572.41

2) TOTALS This Period (last page this line number only)..... ►

3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) ►

4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ►

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 53 OF 82

FOR LINE NUMBER:
(check only one)
☐ 9
☒ 10

NAME OF COMMITTEE (In Full)

LCV Victory Fund

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Mosaic

Nature of Debt (Purpose):
PrintingMailing Address 1920 L St NW
Street LevelCity State Zip Code
Washington DC 20036-5004

Outstanding Balance Beginning This Period

0.00

Transaction ID : D26A35606602B4B758E6

Amount Incurred This Period

190.81

Payment This Period

0.00

Outstanding Balance at Close of This Period

190.81

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Matt Pahler

Nature of Debt (Purpose):
Design

Mailing Address 3803 SE Cesar E Chavez Blvd #1

City State Zip Code
Portland OR 97202-1706

Outstanding Balance Beginning This Period

0.00

Transaction ID : DEEFDB4FEF64A499796D

Amount Incurred This Period

145.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

145.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Matt Pahler

Nature of Debt (Purpose):
Design

Mailing Address 3803 SE Cesar E Chavez Blvd #1

City State Zip Code
Portland OR 97202-1706

Outstanding Balance Beginning This Period

0.00

Transaction ID : D97756BDB279344FF9B2

Amount Incurred This Period

145.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

145.00

1) SUBTOTALS This Period This Page (optional)..... ►

480.81

2) TOTALS This Period (last page this line number only)..... ►

3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) ►

4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ►

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 54 OF 82

FOR LINE NUMBER:
(check only one)
☐ 9
☒ 10

NAME OF COMMITTEE (In Full)

LCV Victory Fund

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Matt Pahler

Nature of Debt (Purpose):
Design

Mailing Address 3803 SE Cesar E Chavez Blvd #1

City State

Zip Code

Portland

OR

97202-1706

Outstanding Balance Beginning This Period

0.00

Transaction ID : D904E4B59C79F4779BA9

Amount Incurred This Period

145.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

145.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Matt Pahler

Nature of Debt (Purpose):
Design

Mailing Address 3803 SE Cesar E Chavez Blvd #1

City State

Zip Code

Portland

OR

97202-1706

Outstanding Balance Beginning This Period

0.00

Transaction ID : DBE3ADD68ED80426A940

Amount Incurred This Period

145.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

145.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Matt Pahler

Nature of Debt (Purpose):
Design

Mailing Address 3803 SE Cesar E Chavez Blvd #1

City

State

Zip Code

Portland

OR

97202-1706

Outstanding Balance Beginning This Period

0.00

Transaction ID : D24DE9ECECE204272BD7

Amount Incurred This Period

145.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

145.00

1) SUBTOTALS This Period This Page (optional)..... ►

435.00

2) TOTALS This Period (last page this line number only)..... ►

3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) ►

4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ►

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 55 OF 82

FOR LINE NUMBER:
(check only one)
☐ 9
☒ 10

NAME OF COMMITTEE (In Full)

LCV Victory Fund

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Sir Speedy

Nature of Debt (Purpose):
Printing

Mailing Address 2001 L St NW

City State

Zip Code

Washington

DC

20036-4905

Outstanding Balance Beginning This Period

0.00

Transaction ID : D37CFFA8B3B2245CDA30

Amount Incurred This Period

28.53

Payment This Period

0.00

Outstanding Balance at Close of This Period

28.53

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Sir Speedy

Nature of Debt (Purpose):
Printing

Mailing Address 2001 L St NW

City State

Zip Code

Washington

DC

20036-4905

Outstanding Balance Beginning This Period

0.00

Transaction ID : D89936F19A3C34FF9833

Amount Incurred This Period

28.54

Payment This Period

0.00

Outstanding Balance at Close of This Period

28.54

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Sir Speedy

Nature of Debt (Purpose):
Printing

Mailing Address 2001 L St NW

City

State

Zip Code

Washington

DC

20036-4905

Outstanding Balance Beginning This Period

0.00

Transaction ID : D3410DB6531574EFC817

Amount Incurred This Period

28.53

Payment This Period

0.00

Outstanding Balance at Close of This Period

28.53

1) SUBTOTALS This Period This Page (optional)..... ►

85.60

2) TOTALS This Period (last page this line number only)..... ►

3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) ►

4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ►

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 56 OF 82

FOR LINE NUMBER:
(check only one)☐ 9
☒ 10

NAME OF COMMITTEE (In Full)

LCV Victory Fund

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Sir Speedy

Nature of Debt (Purpose):
Printing

Mailing Address 2001 L St NW

City State

Zip Code

Washington

DC

20036-4905

Outstanding Balance Beginning This Period

0.00

Transaction ID : D16119DDB04AA4C36BC7

Amount Incurred This Period

28.53

Payment This Period

0.00

Outstanding Balance at Close of This Period

28.53

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Sir Speedy

Nature of Debt (Purpose):
Printing

Mailing Address 2001 L St NW

City State

Zip Code

Washington

DC

20036-4905

Outstanding Balance Beginning This Period

0.00

Transaction ID : D64EF44F3A43F415D866

Amount Incurred This Period

28.53

Payment This Period

0.00

Outstanding Balance at Close of This Period

28.53

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Stones' Phones, Inc.

Nature of Debt (Purpose):
ESTIMATE: Phone CallsMailing Address 41-750 Las Palmas Drive
Ste E-3

City

State

Zip Code

Rancho Mirage

CA

92270-4678

Outstanding Balance Beginning This Period

0.00

Transaction ID : DA63605B57A444778B95

Amount Incurred This Period

350000.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

350000.00

1) SUBTOTALS This Period This Page (optional)..... ►

350057.06

2) TOTALS This Period (last page this line number only)..... ►

3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) ►

4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ►

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 57 OF 82

FOR LINE NUMBER:
(check only one)
☐ 9
☒ 10

NAME OF COMMITTEE (In Full)

LCV Victory Fund

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

The Strategy Group, Inc

Nature of Debt (Purpose):
MailersMailing Address 1603 Orrington Ave
Ste 1730City State Zip Code
Evanston IL 60201-5017

Outstanding Balance Beginning This Period

173856.57

Transaction ID : DD23141B5B67F4B02A09

Amount Incurred This Period

0.00

Payment This Period

173856.57

Outstanding Balance at Close of This Period

0.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Nature of Debt (Purpose):

Mailing Address

City State Zip Code

Outstanding Balance Beginning This Period

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Nature of Debt (Purpose):

Mailing Address

City State Zip Code

Outstanding Balance Beginning This Period

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period

1) SUBTOTALS This Period This Page (optional)..... ►

0.00

2) TOTALS This Period (last page this line number only)..... ►

411746.19

3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) ►

0.00

4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ►

411746.19

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 58 OF 82
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) LCV Victory Fund		FEC IDENTIFICATION NUMBER ▼ C C00486845
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on		MM / DD / YYYY

Full Name of Payee Matt Pahler [MEMO ITEM]		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 14 / 2014	
Mailing Address 3803 SE Cesar E Chavez Blvd #1		Amount 145.00	
City Portland	State OR	Zip Code 97202-1706	Transaction ID : EEEAEDFCF595E4F92ABE
Purpose of Expenditure Design	Category/Type	Date of Disbursement or Obligation MM / DD / YYYY	
Name of Federal Candidate Sen. Mark E Udall		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: CO
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶	

Full Name of Payee Matt Pahler [MEMO ITEM]		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 14 / 2014	
Mailing Address 3803 SE Cesar E Chavez Blvd #1		Amount 145.00	
City Portland	State OR	Zip Code 97202-1706	Transaction ID : E6FFB241DCC1F48CEAE
Purpose of Expenditure Design (Previously rptd estimate of \$170 to Chapman Cubine Adams + Hussey on 10/20 24 hr rpt)	Category/Type	Date of Disbursement or Obligation MM / DD / YYYY	
Name of Federal Candidate Gary Peters		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: MI
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶	

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	0.00
(b) SUBTOTAL of Unitemized Independent Expenditures.....▶	
(c) TOTAL Independent Expenditures.....▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Patrick Collins

[Electronically Filed]

Date

MM / DD / YYYY
10 / 23 / 2014

Signature

Full Name of Payee Matt Pahler [MEMO ITEM]		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 14 / 2014	
Mailing Address 3803 SE Cesar E Chavez Blvd #1		Amount 145.00	
City Portland	State OR	Zip Code 97202-1706	Transaction ID : E4FA1D7746A0D479CAA1 Date of Disbursement or Obligation MM / DD / YYYY
Purpose of Expenditure Design		Category/ Type	
Name of Federal Candidate Mark Begich		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President District: _____ State: AK
Calendar Year-To-Date Per Election for Office Sought		793.72	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ►

(a) SUBTOTAL of Itemized Independent Expenditures.....	0.00
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures.....	

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 60 OF 82
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) LCV Victory Fund			FEC IDENTIFICATION NUMBER ▼ C C00486845		
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on M M M / D D D / Y Y Y Y Y Y					
Full Name of Payee Matt Pahler [MEMO ITEM]			Date of Public Distribution/Dissemination 10 / 14 / 2014		
Mailing Address 3803 SE Cesar E Chavez Blvd #1			Amount 145.00		
City Portland	State OR	Zip Code 97202-1706	Transaction ID : EDCFDCAFAAB654455A0 Date of Disbursement or Obligation M M M / D D D / Y Y Y Y Y Y		
Purpose of Expenditure Design		Category/ Type 			
Name of Federal Candidate Bruce L Braley		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <u>IA</u>		
Calendar Year-To-Date Per Election for Office Sought		1667.93	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶ _____		
Full Name of Payee AMM Political Strategies [MEMO ITEM]			Date of Public Distribution/Dissemination 10 / 09 / 2014		
Mailing Address 507 N. Sylvania Ave			Amount 33465.69		
City Ft Worth	State TX	Zip Code 76111-2317	Transaction ID : EEE0D2B57F4FB4085B76 Date of Disbursement or Obligation M M M / D D D / Y Y Y Y Y Y		
Purpose of Expenditure Phone Calls (Previously reported as estimate of \$38,000 on 10/10/14 48 hour report)		Category/ Type 			
Name of Federal Candidate Sen. Kay R Hagan		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <u>NC</u>		
Calendar Year-To-Date Per Election for Office Sought		1445381.32	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶ _____		
(a) SUBTOTAL of Itemized Independent Expenditures..... ▶			0.00		
(b) SUBTOTAL of Unitemized Independent Expenditures ▶			 		
(c) TOTAL Independent Expenditures..... ▶			 		
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature <i>Patrick Collins</i>		[Electronically Filed]		Date 10 / 23 / 2014	

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURESPAGE 61 OF 82
FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) LCV Victory Fund			FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;">C C00486845</div>		
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">M M M / D D D / Y Y Y Y Y Y</div>					
Full Name of Payee Global Strategy Group, LLC			Date of Public Distribution/Dissemination <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">09 / 30 / 2014</div>		
Mailing Address 895 Broadway 5th Floor			Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">24800.00</div>		
City New York		State NY	Zip Code 10003-1226		Transaction ID : E54B75BB93AF44A40872
Purpose of Expenditure Polling		Category/ Type <div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>		Date of Disbursement or Obligation <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">10 / 02 / 2014</div>	
Name of Federal Candidate Sen. Kay R Hagan			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose		Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <u>NC</u>
Calendar Year-To-Date Per Election for Office Sought			<div style="border: 1px solid black; padding: 2px; display: inline-block;">1406415.63</div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶ _____
Full Name of Payee League of Conservation Voters, Inc.			Date of Public Distribution/Dissemination <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">10 / 11 / 2014</div>		
Mailing Address 1920 L St NW Ste 800			Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">152.43</div>		
City Washington		State DC	Zip Code 20036-5045		Transaction ID : E96651935C37B45B0AF3
Purpose of Expenditure Staff and Email for Online Message		Category/ Type <div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>		Date of Disbursement or Obligation <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">10 / 15 / 2014</div>	
Name of Federal Candidate Jeanne Shaheen			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose		Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <u>NH</u>
Calendar Year-To-Date Per Election for Office Sought			<div style="border: 1px solid black; padding: 2px; display: inline-block;">1494.74</div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶ _____
(a) SUBTOTAL of Itemized Independent Expenditures..... ▶			<div style="border: 1px solid black; padding: 2px; display: inline-block;">24952.43</div>		
(b) SUBTOTAL of Unitemized Independent Expenditures ▶			<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>		
(c) TOTAL Independent Expenditures..... ▶			<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>		
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature <i>Patrick Collins</i>			Date <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">10 / 23 / 2014</div> <div style="text-align: center;">[Electronically Filed]</div>		

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 62 OF 82
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) LCV Victory Fund			FEC IDENTIFICATION NUMBER ▼ C C00486845		
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on M M M / D D D / Y Y Y Y Y Y					
Full Name of Payee League of Conservation Voters, Inc.			Date of Public Distribution/Dissemination 10 / 11 / 2014		
Mailing Address 1920 L St NW Ste 800			Amount 152.43		
City Washington		State DC	Zip Code 20036-5045		Transaction ID : E7C19E8F2AB6C4924BAC
Purpose of Expenditure Staff and Email for Online Message		Category/Type 		Date of Disbursement or Obligation 10 / 15 / 2014	
Name of Federal Candidate Sen. Mark E Udall			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/> State: <u>CO</u>		
Calendar Year-To-Date Per Election for Office Sought 1727.22			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶ _____		
Full Name of Payee League of Conservation Voters, Inc.			Date of Public Distribution/Dissemination 10 / 11 / 2014		
Mailing Address 1920 L St NW Ste 800			Amount 152.43		
City Washington		State DC	Zip Code 20036-5045		Transaction ID : ED392C2000B6B4080BFC
Purpose of Expenditure Staff and Email for Online Message		Category/Type 		Date of Disbursement or Obligation 10 / 15 / 2014	
Name of Federal Candidate Sen. Kay R Hagan			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/> State: <u>NC</u>		
Calendar Year-To-Date Per Election for Office Sought 1445533.75			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶ _____		
(a) SUBTOTAL of Itemized Independent Expenditures..... ▶			304.86		
(b) SUBTOTAL of Unitemized Independent Expenditures ▶					
(c) TOTAL Independent Expenditures..... ▶					
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature <i>Patrick Collins</i>			Date 10 / 23 / 2014 <div style="text-align: center;">[Electronically Filed]</div>		

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 63 OF 82
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) LCV Victory Fund			FEC IDENTIFICATION NUMBER ▼ C C00486845		
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">M M M</div> / <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">D D D</div> / <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">Y Y Y Y Y Y</div>					
Full Name of Payee League of Conservation Voters, Inc. [MEMO ITEM]			Date of Public Distribution/Dissemination <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">10</div> / <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">14</div> / <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">2014</div>		
Mailing Address 1920 L St NW Ste 800			Amount <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">57.98</div>		
City Washington		State DC	Zip Code 20036-5045		
Purpose of Expenditure Postage (Previously reported as \$150.00 on 10/19/14 48 Hour Report))		Category/Type <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;"></div>		Transaction ID : EC53254736EF845459D6 Date of Disbursement or Obligation <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">M M M</div> / <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">D D D</div> / <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">Y Y Y Y Y Y</div>	
Name of Federal Candidate Gary Peters			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose		Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <u>MI</u>
Calendar Year-To-Date Per Election for Office Sought			<div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">1693.39</div> Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶ _____		
Full Name of Payee League of Conservation Voters, Inc. [MEMO ITEM]			Date of Public Distribution/Dissemination <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">10</div> / <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">14</div> / <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">2014</div>		
Mailing Address 1920 L St NW Ste 800			Amount <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">57.98</div>		
City Washington		State DC	Zip Code 20036-5045		
Purpose of Expenditure Postage		Category/Type <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;"></div>		Transaction ID : EE7666B227CFE4E09AEB Date of Disbursement or Obligation <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">M M M</div> / <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">D D D</div> / <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">Y Y Y Y Y Y</div>	
Name of Federal Candidate Sen. Mark E Udall			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose		Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <u>CO</u>
Calendar Year-To-Date Per Election for Office Sought			<div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">352173.34</div> Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶ _____		
(a) SUBTOTAL of Itemized Independent Expenditures..... ▶			<div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">0.00</div>		
(b) SUBTOTAL of Unitemized Independent Expenditures ▶			<div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;"></div>		
(c) TOTAL Independent Expenditures..... ▶			<div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;"></div>		
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature <i>Patrick Collins</i>			Date <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">10</div> / <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">23</div> / <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">2014</div> <div style="text-align: center;">[Electronically Filed]</div>		

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURESPAGE 64 OF 82
FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) LCV Victory Fund	FEC IDENTIFICATION NUMBER ▼ C C00486845
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on M M / D D / Y Y Y Y Y Y	

Full Name of Payee League of Conservation Voters, Inc. [MEMO ITEM]			Date of Public Distribution/Dissemination 10 / 14 / 2014	
Mailing Address 1920 L St NW Ste 800			Amount 23.80	
City Washington	State DC	Zip Code 20036-5045	Transaction ID : E66ED35AF4D504DEA848	
Purpose of Expenditure Staff Time for Mail Copy		Category/ Type 	Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y	
Name of Federal Candidate Jeanne Shaheen		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: NH	
Calendar Year-To-Date Per Election for Office Sought		1940.86	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶ _____	

Full Name of Payee League of Conservation Voters, Inc. [MEMO ITEM]			Date of Public Distribution/Dissemination 10 / 14 / 2014	
Mailing Address 1920 L St NW Ste 800			Amount 23.80	
City Washington	State DC	Zip Code 20036-5045	Transaction ID : E8222315CD66D4B3DAA4	
Purpose of Expenditure Staff Time for Mail Copy		Category/ Type 	Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y	
Name of Federal Candidate Sen. Mark E Udall		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: CO	
Calendar Year-To-Date Per Election for Office Sought		352173.34	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶ _____	

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	0.00
(b) SUBTOTAL of Unitemized Independent Expenditures ▶	
(c) TOTAL Independent Expenditures..... ▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Patrick Collins

[Electronically Filed]

Date

10 / 23 / 2014

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURESPAGE 65 OF 82
FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) LCV Victory Fund			FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;">C C00486845</div>		
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <div style="display: inline-block; border-bottom: 1px solid black; width: 40px; text-align: center;">M M</div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 40px; text-align: center;">D D</div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 80px; text-align: center;">Y Y Y Y Y Y</div>					
Full Name of Payee League of Conservation Voters, Inc. [MEMO ITEM]			Date of Public Distribution/Dissemination <div style="display: inline-block; border-bottom: 1px solid black; width: 40px; text-align: center;">10</div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 40px; text-align: center;">14</div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 80px; text-align: center;">2014</div>		
Mailing Address 1920 L St NW Ste 800			Amount <div style="border-bottom: 1px solid black; width: 100%; text-align: right;">57.99</div>		
City Washington		State DC	Zip Code 20036-5045		Transaction ID : E2BB9940009DB4077884
Purpose of Expenditure Postage		Category/ Type <div style="border-bottom: 1px solid black; width: 60px;"></div>		Date of Disbursement or Obligation <div style="display: inline-block; border-bottom: 1px solid black; width: 40px; text-align: center;">M M</div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 40px; text-align: center;">D D</div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 80px; text-align: center;">Y Y Y Y Y Y</div>	
Name of Federal Candidate Mark Begich			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose		Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <u>AK</u>
Calendar Year-To-Date Per Election for Office Sought			<div style="border-bottom: 1px solid black; width: 100%; text-align: right;">793.72</div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶ _____
Full Name of Payee League of Conservation Voters, Inc. [MEMO ITEM]			Date of Public Distribution/Dissemination <div style="display: inline-block; border-bottom: 1px solid black; width: 40px; text-align: center;">10</div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 40px; text-align: center;">14</div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 80px; text-align: center;">2014</div>		
Mailing Address 1920 L St NW Ste 800			Amount <div style="border-bottom: 1px solid black; width: 100%; text-align: right;">57.98</div>		
City Washington		State DC	Zip Code 20036-5045		Transaction ID : E1D69EDAA5B094639AA5
Purpose of Expenditure Postage		Category/ Type <div style="border-bottom: 1px solid black; width: 60px;"></div>		Date of Disbursement or Obligation <div style="display: inline-block; border-bottom: 1px solid black; width: 40px; text-align: center;">M M</div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 40px; text-align: center;">D D</div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 80px; text-align: center;">Y Y Y Y Y Y</div>	
Name of Federal Candidate Jeanne Shaheen			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose		Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <u>NH</u>
Calendar Year-To-Date Per Election for Office Sought			<div style="border-bottom: 1px solid black; width: 100%; text-align: right;">1940.86</div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶ _____
(a) SUBTOTAL of Itemized Independent Expenditures..... ▶					<div style="border-bottom: 1px solid black; width: 100%; text-align: right;">0.00</div>
(b) SUBTOTAL of Unitemized Independent Expenditures ▶					<div style="border-bottom: 1px solid black; width: 100%;"></div>
(c) TOTAL Independent Expenditures..... ▶					<div style="border-bottom: 1px solid black; width: 100%;"></div>
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature <i>Patrick Collins</i>			Date <div style="display: inline-block; border-bottom: 1px solid black; width: 40px; text-align: center;">10</div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 40px; text-align: center;">23</div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 80px; text-align: center;">2014</div>		
[Electronically Filed]					

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURESPAGE 66 OF 82
FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) LCV Victory Fund		FEC IDENTIFICATION NUMBER ▼ C C00486845	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on		M M M / D D D / Y Y Y Y Y Y	
Full Name of Payee League of Conservation Voters, Inc. [MEMO ITEM]		Date of Public Distribution/Dissemination M M M / D D D / Y Y Y Y Y Y 10 14 2014	
Mailing Address 1920 L St NW Ste 800		Amount 23.80	
City Washington	State DC	Zip Code 20036-5045	Transaction ID : E4104A18DA369485F8D2
Purpose of Expenditure Staff Time for Mail Copy		Category/ Type	Date of Disbursement or Obligation M M M / D D D / Y Y Y Y Y Y
Name of Federal Candidate Bruce L Braley		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: IA
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶	
Full Name of Payee League of Conservation Voters, Inc. [MEMO ITEM]		Date of Public Distribution/Dissemination M M M / D D D / Y Y Y Y Y Y 10 14 2014	
Mailing Address 1920 L St NW Ste 800		Amount 23.80	
City Washington	State DC	Zip Code 20036-5045	Transaction ID : E9947398DF4F0489C9EC
Purpose of Expenditure Staff Time for Mail Copy		Category/ Type	Date of Disbursement or Obligation M M M / D D D / Y Y Y Y Y Y
Name of Federal Candidate Mark Begich		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: AK
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶	
(a) SUBTOTAL of Itemized Independent Expenditures..... ▶		0.00	
(b) SUBTOTAL of Unitemized Independent Expenditures ▶			
(c) TOTAL Independent Expenditures..... ▶			
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
Signature <i>Patrick Collins</i>		Date M M M / D D D / Y Y Y Y Y Y 10 23 2014	
		[Electronically Filed]	

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

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 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) LCV Victory Fund		FEC IDENTIFICATION NUMBER ▼ C C00486845	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on		<div style="display: flex; justify-content: space-between;"> <div>MM / DD / YYYY</div> <div>MM / DD / YYYY</div> <div>MM / DD / YYYY</div> </div>	

Full Name of Payee League of Conservation Voters, Inc. [MEMO ITEM]		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 14 / 2014	
Mailing Address 1920 L St NW Ste 800		Amount 23.80	
City Washington	State DC	Zip Code 20036-5045	Transaction ID : E76DA77C3D3FD4992A7B
Purpose of Expenditure Staff Time for Mail Copy (Previously reported as \$25.00 on 10/19/14 48 Hour Report)		Category/Type	Date of Disbursement or Obligation MM / DD / YYYY
Name of Federal Candidate Gary Peters		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: MI
Calendar Year-To-Date Per Election for Office Sought 1693.39		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶ _____	

Full Name of Payee League of Conservation Voters, Inc. [MEMO ITEM]		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 14 / 2014	
Mailing Address 1920 L St NW Ste 800		Amount 57.99	
City Washington	State DC	Zip Code 20036-5045	Transaction ID : E2E7BAD12A3254880974
Purpose of Expenditure Postage		Category/Type	Date of Disbursement or Obligation MM / DD / YYYY
Name of Federal Candidate Bruce L Braley		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: IA
Calendar Year-To-Date Per Election for Office Sought 1667.93		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶ _____	

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	0.00
(b) SUBTOTAL of Unitemized Independent Expenditures ▶	
(c) TOTAL Independent Expenditures..... ▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Patrick Collins
 Signature

[Electronically Filed]

Date **10 / 23 / 2014**

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

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 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) LCV Victory Fund			FEC IDENTIFICATION NUMBER ▼ C C00486845		
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">M M M / D D D / Y Y Y Y Y Y</div>					
Full Name of Payee League of Conservation Voters, Inc.			Date of Public Distribution/Dissemination <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">09 / 19 / 2014</div>		
Mailing Address 1920 L St NW Ste 800			Amount <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">152.10</div>		
City Washington		State DC	Zip Code 20036-5045		Transaction ID : E6044030DF73146989CC
Purpose of Expenditure Staff and Email for Online Message		Category/Type <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;"></div>		Date of Disbursement or Obligation <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">10 / 15 / 2014</div>	
Name of Federal Candidate Sen. Mark E Udall			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President State: CO		
Calendar Year-To-Date Per Election for Office Sought <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">752173.34</div>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶ _____		
Full Name of Payee League of Conservation Voters, Inc.			Date of Public Distribution/Dissemination <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">09 / 19 / 2014</div>		
Mailing Address 1920 L St NW Ste 800			Amount <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">152.10</div>		
City Washington		State DC	Zip Code 20036-5045		Transaction ID : E9BDE19CF5E71494490E
Purpose of Expenditure Staff and Email for Online Message		Category/Type <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;"></div>		Date of Disbursement or Obligation <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">10 / 15 / 2014</div>	
Name of Federal Candidate Thom R Tillis			<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President State: NC		
Calendar Year-To-Date Per Election for Office Sought <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">1470850.64</div>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶ _____		
(a) SUBTOTAL of Itemized Independent Expenditures..... ▶			<div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">304.20</div>		
(b) SUBTOTAL of Unitemized Independent Expenditures ▶			<div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;"></div>		
(c) TOTAL Independent Expenditures..... ▶			<div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;"></div>		
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature <i>Patrick Collins</i>			Date <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">10 / 23 / 2014</div>		

[Electronically Filed]

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

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 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) LCV Victory Fund			FEC IDENTIFICATION NUMBER ▼ C C00486845		
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on M M / D D / Y Y Y Y Y Y					
Full Name of Payee League of Conservation Voters, Inc.			Date of Public Distribution/Dissemination 09 / 19 / 2014		
Mailing Address 1920 L St NW Ste 800			Amount 152.10		
City Washington		State DC	Zip Code 20036-5045		Transaction ID : E5B40D2F405284F9AA1B
Purpose of Expenditure Staff and Email for Online Message		Category/ Type 		Date of Disbursement or Obligation 10 / 15 / 2014	
Name of Federal Candidate Terri Lynn Land			<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose		Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: MI
Calendar Year-To-Date Per Election for Office Sought 1693.39			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶ _____		
Full Name of Payee League of Conservation Voters, Inc.			Date of Public Distribution/Dissemination 09 / 19 / 2014		
Mailing Address 1920 L St NW Ste 800			Amount 152.10		
City Washington		State DC	Zip Code 20036-5045		Transaction ID : E143189227CB04C60877
Purpose of Expenditure Staff and Email for Online Message		Category/ Type 		Date of Disbursement or Obligation 10 / 15 / 2014	
Name of Federal Candidate Scott Brown			<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose		Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: NH
Calendar Year-To-Date Per Election for Office Sought 1940.86			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶ _____		
(a) SUBTOTAL of Itemized Independent Expenditures..... ▶			304.20		
(b) SUBTOTAL of Unitemized Independent Expenditures ▶					
(c) TOTAL Independent Expenditures..... ▶					
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature <i>Patrick Collins</i>			Date 10 / 23 / 2014		
[Electronically Filed]					

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

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 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) LCV Victory Fund			FEC IDENTIFICATION NUMBER ▼ C C00486845		
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on M M M / D D D / Y Y Y Y Y Y					
Full Name of Payee League of Conservation Voters, Inc.			Date of Public Distribution/Dissemination 09 / 10 / 2014		
Mailing Address 1920 L St NW Ste 800			Amount 35.69		
City Washington		State DC	Zip Code 20036-5045		Transaction ID : E58A154DE9D3345B7B63
Purpose of Expenditure Staff Time for Mail Copy		Category/ Type 		Date of Disbursement or Obligation 10 / 15 / 2014	
Name of Federal Candidate Sen. Mark E Udall			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose		Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <u>CO</u>
Calendar Year-To-Date Per Election for Office Sought 752173.34			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶ _____		
Full Name of Payee League of Conservation Voters, Inc.			Date of Public Distribution/Dissemination 09 / 10 / 2014		
Mailing Address 1920 L St NW Ste 800			Amount 35.69		
City Washington		State DC	Zip Code 20036-5045		Transaction ID : E19C533752CEE4B9CB4E
Purpose of Expenditure Staff Time for Mail Copy		Category/ Type 		Date of Disbursement or Obligation 10 / 15 / 2014	
Name of Federal Candidate Bruce L Braley			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose		Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <u>IA</u>
Calendar Year-To-Date Per Election for Office Sought 1667.93			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶ _____		
(a) SUBTOTAL of Itemized Independent Expenditures..... ▶			71.38		
(b) SUBTOTAL of Unitemized Independent Expenditures ▶					
(c) TOTAL Independent Expenditures..... ▶					
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature <i>Patrick Collins</i>			Date 10 / 23 / 2014		
[Electronically Filed]					

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURESPAGE 71 OF 82
FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) LCV Victory Fund		FEC IDENTIFICATION NUMBER ▼ C C00486845	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on		M M M / D D D / Y Y Y Y Y Y	
Full Name of Payee League of Conservation Voters, Inc. [MEMO ITEM]		Date of Public Distribution/Dissemination M M M / D D D / Y Y Y Y Y Y 10 / 15 / 2014	
Mailing Address 1920 L St NW Ste 800		Amount 2676.13	
City Washington	State DC	Zip Code 20036-5045	Transaction ID : E9BA816A1CBE24543826
Purpose of Expenditure Staff Time for Field Canvass		Category/ Type	Date of Disbursement or Obligation M M M / D D D / Y Y Y Y Y Y
Name of Federal Candidate Sen. Kay R Hagan		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: NC
Calendar Year-To-Date Per Election for Office Sought		1470850.64	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶
Full Name of Payee League of Conservation Voters, Inc.		Date of Public Distribution/Dissemination M M M / D D D / Y Y Y Y Y Y 09 / 10 / 2014	
Mailing Address 1920 L St NW Ste 800		Amount 35.69	
City Washington	State DC	Zip Code 20036-5045	Transaction ID : EFBDF22CA423F475DB96
Purpose of Expenditure Staff Time for Mail Copy		Category/ Type	Date of Disbursement or Obligation M M M / D D D / Y Y Y Y Y Y 10 / 15 / 2014
Name of Federal Candidate Sen. Kay R Hagan		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: NC
Calendar Year-To-Date Per Election for Office Sought		1470850.64	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶
(a) SUBTOTAL of Itemized Independent Expenditures.....▶		35.69	
(b) SUBTOTAL of Unitemized Independent Expenditures.....▶			
(c) TOTAL Independent Expenditures.....▶			
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
Signature <i>Patrick Collins</i>		Date M M M / D D D / Y Y Y Y Y Y 10 / 23 / 2014	
		[Electronically Filed]	

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

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 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) LCV Victory Fund			FEC IDENTIFICATION NUMBER ▼ C C00486845		
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on M M M / D D D / Y Y Y Y Y Y					
Full Name of Payee League of Conservation Voters, Inc.			Date of Public Distribution/Dissemination 09 / 19 / 2014		
Mailing Address 1920 L St NW Ste 800			Amount 152.10		
City Washington		State DC	Zip Code 20036-5045		Transaction ID : EF61BDE019F9A4FC2886
Purpose of Expenditure Staff and Email for Online Message		Category/Type 		Date of Disbursement or Obligation 10 / 15 / 2014	
Name of Federal Candidate Joni K Ernst			<input type="checkbox"/> Support <input type="checkbox"/> Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> Oppose <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <u>IA</u>		
Calendar Year-To-Date Per Election for Office Sought 1667.93			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶ _____		
Full Name of Payee League of Conservation Voters, Inc.			Date of Public Distribution/Dissemination 09 / 10 / 2014		
Mailing Address 1920 L St NW Ste 800			Amount 35.69		
City Washington		State DC	Zip Code 20036-5045		Transaction ID : EFC442842893B45768FB
Purpose of Expenditure Staff Time for Mail Copy		Category/Type 		Date of Disbursement or Obligation 10 / 15 / 2014	
Name of Federal Candidate Gary Peters			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> Oppose <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <u>MI</u>		
Calendar Year-To-Date Per Election for Office Sought 1693.39			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶ _____		
(a) SUBTOTAL of Itemized Independent Expenditures..... ▶			187.79		
(b) SUBTOTAL of Unitemized Independent Expenditures ▶					
(c) TOTAL Independent Expenditures..... ▶					
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature <i>Patrick Collins</i>			Date 10 / 23 / 2014 <div style="text-align: center;">[Electronically Filed]</div>		

Full Name of Payee Mack-Sumner Communications, LLC [MEMO ITEM]		Date of Public Distribution/Dissemination <div> <div>MM / DD / YYYY</div> <div>10 / 15 / 2014</div> </div>	
Mailing Address 2001 N Beauregard St Ste 420		Amount <div> <div>17488.86</div> </div>	
City Alexandria	State VA	Zip Code 22311-1750	Transaction ID : E022F770F00A64AE7856 Date of Disbursement or Obligation <div> <div>MM / DD / YYYY</div> </div>
Purpose of Expenditure Doorhangers		Category/ Type <div> <div></div> </div>	
Name of Federal Candidate Sen. Kay R Hagan		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President District: _____ State: <u>NC</u>
Calendar Year-To-Date Per Election for Office Sought <div> <div>1470850.64</div> </div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ►	

(a) SUBTOTAL of Itemized Independent Expenditures.....	▶	35.69
(b) SUBTOTAL of Unitemized Independent Expenditures	▶	
(c) TOTAL Independent Expenditures.....	▶	

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURESPAGE 74 OF 82
FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) LCV Victory Fund		FEC IDENTIFICATION NUMBER ▼ C C00486845	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on		M M M / D D D / Y Y Y Y Y Y	
Full Name of Payee Mack-Sumner Communications, LLC [MEMO ITEM]		Date of Public Distribution/Dissemination M M M / D D D / Y Y Y Y Y Y 10 / 15 / 2014	
Mailing Address 2001 N Beauregard St Ste 420		Amount 3835.55	
City Alexandria	State VA	Zip Code 22311-1750	Transaction ID : E11A5A2E111D54274B3A
Purpose of Expenditure Pledge Cards		Category/ Type	Date of Disbursement or Obligation M M M / D D D / Y Y Y Y Y Y
Name of Federal Candidate Sen. Kay R Hagan		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: NC
Calendar Year-To-Date Per Election for Office Sought		1470850.64	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶
Full Name of Payee Mack-Sumner Communications, LLC [MEMO ITEM]		Date of Public Distribution/Dissemination M M M / D D D / Y Y Y Y Y Y 10 / 15 / 2014	
Mailing Address 2001 N Beauregard St Ste 420		Amount 787.10	
City Alexandria	State VA	Zip Code 22311-1750	Transaction ID : ED97C9D25AE3849149E3
Purpose of Expenditure T-Shirts		Category/ Type	Date of Disbursement or Obligation M M M / D D D / Y Y Y Y Y Y
Name of Federal Candidate Sen. Kay R Hagan		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: NC
Calendar Year-To-Date Per Election for Office Sought		1470850.64	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶
(a) SUBTOTAL of Itemized Independent Expenditures.....		0.00	
(b) SUBTOTAL of Unitemized Independent Expenditures			
(c) TOTAL Independent Expenditures.....			
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
Signature <i>Patrick Collins</i>		Date M M M / D D D / Y Y Y Y Y Y 10 / 23 / 2014	
		[Electronically Filed]	

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

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 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) LCV Victory Fund			FEC IDENTIFICATION NUMBER ▼ C C00486845		
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">M M M / D D D / Y Y Y Y Y Y</div>					
Full Name of Payee Mack-Summer Communications, LLC [MEMO ITEM]			Date of Public Distribution/Dissemination <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">M M M / D D D / Y Y Y Y Y Y</div> 10 / 15 / 2014		
Mailing Address 2001 N Beauregard St Ste 420			Amount <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">529.25</div>		
City Alexandria		State VA	Zip Code 22311-1750		
Purpose of Expenditure Stickers		Category/Type <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;"></div>		Transaction ID : E2A2233CF7E344F2BA45 Date of Disbursement or Obligation <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">M M M / D D D / Y Y Y Y Y Y</div>	
Name of Federal Candidate Sen. Kay R Hagan			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose		Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: NC
Calendar Year-To-Date Per Election for Office Sought <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">1470850.64</div>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ► _____		
Full Name of Payee Mosaic [MEMO ITEM]			Date of Public Distribution/Dissemination <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">M M M / D D D / Y Y Y Y Y Y</div> 10 / 14 / 2014		
Mailing Address 1920 L St NW Street Level			Amount <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">190.81</div>		
City Washington		State DC	Zip Code 20036-5004		
Purpose of Expenditure Printing		Category/Type <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;"></div>		Transaction ID : EB1B9BC42D7DD45F4B9 Date of Disbursement or Obligation <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">M M M / D D D / Y Y Y Y Y Y</div>	
Name of Federal Candidate Bruce L Braley			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose		Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: IA
Calendar Year-To-Date Per Election for Office Sought <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">1667.93</div>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ► _____		
(a) SUBTOTAL of Itemized Independent Expenditures.....			<div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">0.00</div>		
(b) SUBTOTAL of Unitemized Independent Expenditures			<div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;"></div>		
(c) TOTAL Independent Expenditures.....			<div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;"></div>		
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature <u>Patrick Collins</u> <div style="text-align: right;">[Electronically Filed]</div>			Date <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">M M M / D D D / Y Y Y Y Y Y</div> 10 / 23 / 2014		

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

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 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) LCV Victory Fund			FEC IDENTIFICATION NUMBER ▼ C C00486845		
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">M M M / D D D / Y Y Y Y Y Y</div>					
Full Name of Payee Mosaic [MEMO ITEM]			Date of Public Distribution/Dissemination <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">10</div> / <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">14</div> / <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">2014</div>		
Mailing Address 1920 L St NW Street Level			Amount <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">190.80</div>		
City Washington		State DC	Zip Code 20036-5004		Transaction ID : E5998872894004523B8C
Purpose of Expenditure Printing (Previously reported as \$80.00 on 10/19/14 48 Hour Report)			Category/Type <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;"></div>		Date of Disbursement or Obligation <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;"></div> / <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;"></div> / <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;"></div>
Name of Federal Candidate Gary Peters			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose		Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: MI
Calendar Year-To-Date Per Election for Office Sought			<div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">1693.39</div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ► _____
Full Name of Payee Mosaic [MEMO ITEM]			Date of Public Distribution/Dissemination <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">10</div> / <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">14</div> / <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">2014</div>		
Mailing Address 1920 L St NW Street Level			Amount <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">190.81</div>		
City Washington		State DC	Zip Code 20036-5004		Transaction ID : EA66258FD3F2441C9B43
Purpose of Expenditure Printing			Category/Type <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;"></div>		Date of Disbursement or Obligation <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;"></div> / <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;"></div> / <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;"></div>
Name of Federal Candidate Jeanne Shaheen			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose		Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: NH
Calendar Year-To-Date Per Election for Office Sought			<div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">1940.86</div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ► _____
(a) SUBTOTAL of Itemized Independent Expenditures..... ►					<div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">0.00</div>
(b) SUBTOTAL of Unitemized Independent Expenditures ►					<div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;"></div>
(c) TOTAL Independent Expenditures..... ►					<div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;"></div>
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature <i>Patrick Collins</i>			Date <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">10</div> / <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">23</div> / <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">2014</div>		[Electronically Filed]

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

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 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) LCV Victory Fund			FEC IDENTIFICATION NUMBER ▼ C C00486845		
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on M M M / D D D / Y Y Y Y Y Y					
Full Name of Payee Mosaic [MEMO ITEM]			Date of Public Distribution/Dissemination 10 / 14 / 2014		
Mailing Address 1920 L St NW Street Level			Amount 190.80		
City Washington State DC Zip Code 20036-5004		Transaction ID : EA613F8AF33BE4B3E99E Date of Disbursement or Obligation M M M / D D D / Y Y Y Y Y Y			
Purpose of Expenditure Printing		Category/Type 			
Name of Federal Candidate Sen. Mark E Udall			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President State: CO		
Calendar Year-To-Date Per Election for Office Sought 352173.34			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶ _____		
Full Name of Payee Mosaic [MEMO ITEM]			Date of Public Distribution/Dissemination 10 / 14 / 2014		
Mailing Address 1920 L St NW Street Level			Amount 190.81		
City Washington State DC Zip Code 20036-5004		Transaction ID : E876A50AC098D4158B84 Date of Disbursement or Obligation M M M / D D D / Y Y Y Y Y Y			
Purpose of Expenditure Printing		Category/Type 			
Name of Federal Candidate Mark Begich			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President State: AK		
Calendar Year-To-Date Per Election for Office Sought 793.72			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶ _____		
(a) SUBTOTAL of Itemized Independent Expenditures..... ▶			0.00		
(b) SUBTOTAL of Unitemized Independent Expenditures ▶					
(c) TOTAL Independent Expenditures..... ▶					
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature <i>Patrick Collins</i>			Date 10 / 23 / 2014 [Electronically Filed]		

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

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 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) LCV Victory Fund			FEC IDENTIFICATION NUMBER ▼ C C00486845		
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">M M M</div> / <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">D D D</div> / <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">Y Y Y Y Y Y</div>					
Full Name of Payee Nexus Strategies, Inc.			Date of Public Distribution/Dissemination <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">10</div> / <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">07</div> / <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">2014</div>		
Mailing Address 434 Fayetteville Street Two Hannover Square			Amount <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">5500.00</div>		
City Raleigh	State NC	Zip Code 27601-1701	Transaction ID : E5BE74DC27DEA40D1963		
Purpose of Expenditure Communications Consulting		Category/Type <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;"></div>	Date of Disbursement or Obligation <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">10</div> / <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">09</div> / <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">2014</div>		
Name of Federal Candidate Sen. Kay R Hagan		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: NC		
Calendar Year-To-Date Per Election for Office Sought		<div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">1411915.63</div>	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶ _____		
Full Name of Payee Sir Speedy [MEMO ITEM]			Date of Public Distribution/Dissemination <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">10</div> / <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">14</div> / <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">2014</div>		
Mailing Address 2001 L St NW			Amount <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">28.53</div>		
City Washington	State DC	Zip Code 20036-4905	Transaction ID : ECE14E618FF914299AF2		
Purpose of Expenditure Printing		Category/Type <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;"></div>	Date of Disbursement or Obligation <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;"></div> / <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;"></div> / <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;"></div>		
Name of Federal Candidate Bruce L Braley		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: IA		
Calendar Year-To-Date Per Election for Office Sought		<div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">1667.93</div>	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶ _____		
(a) SUBTOTAL of Itemized Independent Expenditures..... ▶			<div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">5500.00</div>		
(b) SUBTOTAL of Unitemized Independent Expenditures ▶			<div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;"></div>		
(c) TOTAL Independent Expenditures..... ▶			<div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;"></div>		
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature <i>Patrick Collins</i>		[Electronically Filed]		Date <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">10</div> / <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">23</div> / <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">2014</div>	

Full Name of Payee Sir Speedy [MEMO ITEM]		Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 10 / 14 / 2014	
Mailing Address 2001 L St NW		Amount 28.53	
City Washington	State DC	Zip Code 20036-4905	Transaction ID : E8FE1529CCCE34C1DAC Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y
Purpose of Expenditure Printing	Category/ Type		
Name of Federal Candidate Mark Begich	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate	District: _____ State: AK
Calendar Year-To-Date Per Election for Office Sought	793.72	Disbursement For: 2014 <input type="checkbox"/> Other (specify) ►	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General

(a) SUBTOTAL of Itemized Independent Expenditures.....	0.00
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures.....	

Full Name of Payee Sir Speedy [MEMO ITEM]		Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y 10 / 14 / 2014	
Mailing Address 2001 L St NW		Amount 28.53	
City Washington	State DC	Zip Code 20036-4905	Transaction ID : E05ED8F6DFAD54259B67
Purpose of Expenditure Printing	Category/ Type	Date of Disbursement or Obligation M M / D D / Y Y Y Y Y	
Name of Federal Candidate Jeanne Shaheen	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate	District: _____ State: NH
Calendar Year-To-Date Per Election for Office Sought	1940.86	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶	

(a) SUBTOTAL of Itemized Independent Expenditures.....	▶	0.00
(b) SUBTOTAL of Unitemized Independent Expenditures	▶	
(c) TOTAL Independent Expenditures.....	▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURESPAGE 81 OF 82
FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) LCV Victory Fund			FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;">C C00486845</div>		
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <div style="display: inline-block; border-bottom: 1px solid black; width: 40px; text-align: center;">M M M</div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 40px; text-align: center;">D D D</div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 80px; text-align: center;">Y Y Y Y Y Y Y Y</div>					
Full Name of Payee Stones' Phones, Inc. [MEMO ITEM]			Date of Public Distribution/Dissemination <div style="display: inline-block; border-bottom: 1px solid black; width: 40px; text-align: center;">M M M</div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 40px; text-align: center;">D D D</div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 80px; text-align: center;">Y Y Y Y Y Y Y Y</div> <div style="display: inline-block; width: 40px; text-align: center;">10</div> / <div style="display: inline-block; width: 40px; text-align: center;">14</div> / <div style="display: inline-block; width: 80px; text-align: center;">2014</div>		
Mailing Address 41-750 Las Palmas Drive Ste E-3			Amount <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px; text-align: right;">350000.00</div>		
City Rancho Mirage		State CA	Zip Code 92270-4678		
Purpose of Expenditure ESTIMATE: Phone Calls		Category/ Type <div style="border: 1px solid black; width: 60px; height: 20px; display: inline-block;"></div>		Transaction ID : E66D7107E5E4342B69E9 Date of Disbursement or Obligation <div style="display: inline-block; border-bottom: 1px solid black; width: 40px; text-align: center;">M M M</div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 40px; text-align: center;">D D D</div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 80px; text-align: center;">Y Y Y Y Y Y Y Y</div>	
Name of Federal Candidate Sen. Mark E Udall			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose		Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <u>CO</u>
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px; text-align: right;">352173.34</div>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶ _____		
Full Name of Payee The Strategy Group, Inc			Date of Public Distribution/Dissemination <div style="display: inline-block; border-bottom: 1px solid black; width: 40px; text-align: center;">M M M</div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 40px; text-align: center;">D D D</div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 80px; text-align: center;">Y Y Y Y Y Y Y Y</div> <div style="display: inline-block; width: 40px; text-align: center;">09</div> / <div style="display: inline-block; width: 40px; text-align: center;">30</div> / <div style="display: inline-block; width: 80px; text-align: center;">2014</div>		
Mailing Address 1603 Orrington Ave Ste 1730			Amount <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px; text-align: right;">173856.57</div>		
City Evanston		State IL	Zip Code 60201-5017		
Purpose of Expenditure Mailers		Category/ Type <div style="border: 1px solid black; width: 60px; height: 20px; display: inline-block;"></div>		Transaction ID : EC290B1F830694E59B4F Date of Disbursement or Obligation <div style="display: inline-block; border-bottom: 1px solid black; width: 40px; text-align: center;">M M M</div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 40px; text-align: center;">D D D</div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 80px; text-align: center;">Y Y Y Y Y Y Y Y</div> <div style="display: inline-block; width: 40px; text-align: center;">10</div> / <div style="display: inline-block; width: 40px; text-align: center;">02</div> / <div style="display: inline-block; width: 80px; text-align: center;">2014</div>	
Name of Federal Candidate Sen. Kay R Hagan			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose		Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <u>NC</u>
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px; text-align: right;">1406415.63</div>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶ _____		
(a) SUBTOTAL of Itemized Independent Expenditures..... ▶			<div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px; text-align: right;">173856.57</div>		
(b) SUBTOTAL of Unitemized Independent Expenditures ▶			<div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px; text-align: right;"></div>		
(c) TOTAL Independent Expenditures..... ▶			<div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px; text-align: right;"></div>		
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent. <div style="display: flex; justify-content: space-between;"><div style="width: 40%;">Signature <i>Patrick Collins</i></div><div style="width: 20%; text-align: center;">[Electronically Filed]</div><div style="width: 30%; text-align: right;">Date <div style="display: inline-block; border-bottom: 1px solid black; width: 40px; text-align: center;">M M M</div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 40px; text-align: center;">D D D</div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 80px; text-align: center;">Y Y Y Y Y Y Y Y</div> <div style="display: inline-block; width: 40px; text-align: center;">10</div> / <div style="display: inline-block; width: 40px; text-align: center;">23</div> / <div style="display: inline-block; width: 80px; text-align: center;">2014</div></div></div>					

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURESPAGE 82 OF 82
FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) LCV Victory Fund		FEC IDENTIFICATION NUMBER ▼ C C00486845	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on		M M M / D D D / Y Y Y Y Y Y	
Full Name of Payee Well & Lighthouse, LLC		Date of Public Distribution/Dissemination M M M / D D D / Y Y Y Y Y Y 10 / 15 / 2014	
Mailing Address 1244 19th Street NW		Amount 400000.00	
City Washington	State DC	Zip Code 20036-6618	Transaction ID : E8F8E27D523EA46E0963
Purpose of Expenditure Online Ads		Category/Type	Date of Disbursement or Obligation M M M / D D D / Y Y Y Y Y Y 10 / 15 / 2014
Name of Federal Candidate Cory Gardner		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: CO
Calendar Year-To-Date Per Election for Office Sought		752173.34	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶ _____
Full Name of Payee		Date of Public Distribution/Dissemination M M M / D D D / Y Y Y Y Y Y	
Mailing Address		Amount	
City	State	Zip Code	Date of Disbursement or Obligation M M M / D D D / Y Y Y Y Y Y
Purpose of Expenditure		Category/Type	
Name of Federal Candidate		<input type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input type="checkbox"/> Senate State: _____
Calendar Year-To-Date Per Election for Office Sought			Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ _____
(a) SUBTOTAL of Itemized Independent Expenditures.....▶		400000.00	
(b) SUBTOTAL of Unitemized Independent Expenditures.....▶			
(c) TOTAL Independent Expenditures.....▶		605552.81	
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
Signature <i>Patrick Collins</i>		Date M M M / D D D / Y Y Y Y Y Y 10 / 23 / 2014	
		[Electronically Filed]	