

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1725 OF 22150

(check only one)

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

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NAME OF COMMITTEE (In Full)

Hillary Victory Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Verba, Sidney, , ,Mailing Address 983 Memorial Dr
2City
CambridgeState
MAZip Code
02138-5742FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
N/AOccupation (for Individual)
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		05		2016

Transaction ID : C12332968

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Porges, Karen, Shelly, ,

Mailing Address 1617 35th St NW

City
WashingtonState
DCZip Code
20007-2316FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Reservoir Q Global LLCOccupation (for Individual)
Consultant

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

27500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		13		2016

Transaction ID : C12858918

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Lohmann, Walter, , ,

Mailing Address 4005 Fort Worth Ave

City
AlexandriaState
VAZip Code
22304-1712FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RetiredOccupation (for Individual)
Attorney and Dietitian

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

2700.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		12		2016

Transaction ID : C12810618

Amount of Each Receipt this Period

2700.00

☐ Memo Item

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

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

3450.00