

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 Citizens United Political Victory Fund

ADDRESS (number and street) 1006 Pennsylvania Ave. SE Washington DC 20003

2. FEC IDENTIFICATION NUMBER C C00295527 3. IS THIS REPORT NEW (N) OR AMENDED (A)

4. TYPE OF REPORT (Choose One) (a) Quarterly Reports: April 15, July 15, October 15, January 31, July 31 Mid-Year, Termination Report (b) Monthly Report Due On: Feb 20, Mar 20, Apr 20, May 20, Jun 20, Jul 20, Aug 20, Sep 20, Oct 20, Nov 20, Dec 20, Jan 31 (c) 12-Day PRE-Election Report for the: Primary, General, Runoff, Convention, Special (d) 30-Day POST-Election Report for the: General, Runoff, Special

5. Covering Period 11 / 27 / 2012 through 12 / 31 / 2012

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 Kevin Allen

Signature of Treasurer Kevin Allen [Electronically Filed] Date 01 / 30 / 2013

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

**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name

**Citizens United Political Victory Fund**

Report Covering the Period: From:  /  /  To:  /  /

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2012"/>		1352340.82
(b) Cash on Hand at Beginning of Reporting Period.....	871517.43	
(c) Total Receipts (from Line 19) .....	5614.00	1836765.70
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	877131.43	3189106.52
7. Total Disbursements (from Line 31).....	3309.72	2315484.81
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	873821.71	873621.71
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	

This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

**For further information contact:**

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

**DETAILED SUMMARY PAGE**  
of Receipts

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name

**Citizens United Political Victory Fund**

Report Covering the Period: From:  /  /  To:  /  /

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	1530.00	300561.00
(ii) Unitemized .....	4084.00	1511204.70
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	5614.00	1811765.70
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) .....	5614.00	1811765.70
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	25000.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	0.00	0.00
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))..... ▶	5614.00	1836765.70
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	5614.00	1836765.70

**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 .....	2764.72	1185166.31
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	2764.72	1185166.31
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	602500.00
24. Independent Expenditures (use Schedule E) .....	0.00	278233.50
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 .....	545.00	13085.00
(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)).....	545.00	13085.00
29. Other Disbursements .....	0.00	236500.00
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0.00	0.00
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	3309.72	2315484.81
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	3309.72	2315484.81

**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) .....	5614.00	1811765.70
34. Total Contribution Refunds (from Line 28(d)) .....	545.00	13085.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	5069.00	1798680.70
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	2764.72	1185166.31
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	2764.72	1185166.31

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

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

FOR LINE NUMBER: PAGE 6 OF 16  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
**Citizens United Political Victory Fund**

**A. Mrs. Marjorie W Barber**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1129 Nancy Beth Dr  
 City State Zip Code  
 Kerrville TX 78028  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Information Requested Information Requested  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 430.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 11 / 30 / 2012  
**Transaction ID : A2012-2820244**  
 Amount of Each Receipt this Period  
 50.00

**B. Mrs. Marjorie W Barber**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1129 Nancy Beth Dr  
 City State Zip Code  
 Kerrville TX 78028  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Information Requested Information Requested  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 430.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 11 / 30 / 2012  
**Transaction ID : A2012-2820057**  
 Amount of Each Receipt this Period  
 25.00

**C. Mr. James Byrd**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1122 Vernon St  
 City State Zip Code  
 Clearwater FL 33756  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Information Requested Information Requested  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 280.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 11 / 30 / 2012  
**Transaction ID : A2012-2820240**  
 Amount of Each Receipt this Period  
 75.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 150.00  
**TOTAL** This Period (last page this line number only)..... ▶

: 97 `A-G79 @G B9CI G`H9LH`F9 @H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SA11AI  
Transaction ID :

Please note that our committee follows all federal regulations, including those found at 11 CFR 104.7(a) governing the solicitation of contributors. This committee specifically requests all pertinent information from contributors, including employer and occupation; informs contributors that the committee is required by law to report the same; and, makes a follow-up request for omitted information when necessary. The committee thus complies with the best efforts rules.

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: PAGE 8 OF 16  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**Citizens United Political Victory Fund**

Full Name (Last, First, Middle Initial)  
**A. Mrs. Lisa Cloninger**

Mailing Address 612 Front Ave

City Columbus State GA Zip Code 31901

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

Name of Employer Homemaker Occupation Homemaker

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **230.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 11 / 30 / 2012  
**Transaction ID : A2012-2820155**

Amount of Each Receipt this Period  
**200.00**

Full Name (Last, First, Middle Initial)  
**B. Mrs. Lisa Cloninger**

Mailing Address 612 Front Ave

City Columbus State GA Zip Code 31901

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

Name of Employer Homemaker Occupation Homemaker

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **230.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 11 / 30 / 2012  
**Transaction ID : A2012-2820059**

Amount of Each Receipt this Period  
**30.00**

Full Name (Last, First, Middle Initial)  
**C. Mr. Ralph E Gritman**

Mailing Address 2461 E High St Apt A-9

City Pottstown State PA Zip Code 19464

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 M / D D D / Y Y Y Y Y Y  
 11 / 27 / 2012  
**Transaction ID : A2012-2820216**

Amount of Each Receipt this Period  
**25.00**

**SUBTOTAL** of Receipts This Page (optional)..... ▶ **255.00**

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



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

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

FOR LINE NUMBER: PAGE 9 OF 16  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**Citizens United Political Victory Fund**

Full Name (Last, First, Middle Initial) <b>A. Mr. Joseph A Hartman</b>			Date of Receipt <table border="1"> <tr> <td>M</td><td>M</td><td>/</td> <td>D</td><td>D</td><td>/</td> <td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>11</td><td></td><td></td> <td>29</td><td></td><td></td> <td>2012</td><td></td><td></td><td></td> </tr> </table> <b>Transaction ID : A2012-2820176</b>	M	M	/	D	D	/	Y	Y	Y	Y	11			29			2012			
M	M	/	D	D	/	Y	Y	Y	Y														
11			29			2012																	
Mailing Address 3792 Ne Ocean Blvd Apt 402a			Amount of Each Receipt this Period <table border="1"> <tr> <td>100.00</td> </tr> </table>	100.00																			
100.00																							
City Jensen Beach	State FL	Zip Code 34957																					
FEC ID number of contributing federal political committee. C																							
Name of Employer Information Requested		Occupation Information Requested																					
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <table border="1"> <tr> <td>510.00</td> </tr> </table>	510.00																				
510.00																							

Full Name (Last, First, Middle Initial) <b>B. Mr. Joseph A Hartman</b>			Date of Receipt <table border="1"> <tr> <td>M</td><td>M</td><td>/</td> <td>D</td><td>D</td><td>/</td> <td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>11</td><td></td><td></td> <td>29</td><td></td><td></td> <td>2012</td><td></td><td></td><td></td> </tr> </table> <b>Transaction ID : A2012-2820162</b>	M	M	/	D	D	/	Y	Y	Y	Y	11			29			2012			
M	M	/	D	D	/	Y	Y	Y	Y														
11			29			2012																	
Mailing Address 3792 Ne Ocean Blvd Apt 402a			Amount of Each Receipt this Period <table border="1"> <tr> <td>30.00</td> </tr> </table>	30.00																			
30.00																							
City Jensen Beach	State FL	Zip Code 34957																					
FEC ID number of contributing federal political committee. C																							
Name of Employer Information Requested		Occupation Information Requested																					
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <table border="1"> <tr> <td>510.00</td> </tr> </table>	510.00																				
510.00																							

Full Name (Last, First, Middle Initial) <b>C. Ms. Elaine S Jocelyn</b>			Date of Receipt <table border="1"> <tr> <td>M</td><td>M</td><td>/</td> <td>D</td><td>D</td><td>/</td> <td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>11</td><td></td><td></td> <td>27</td><td></td><td></td> <td>2012</td><td></td><td></td><td></td> </tr> </table> <b>Transaction ID : A2012-2820108</b>	M	M	/	D	D	/	Y	Y	Y	Y	11			27			2012			
M	M	/	D	D	/	Y	Y	Y	Y														
11			27			2012																	
Mailing Address 5077 Beacon Hill Ct			Amount of Each Receipt this Period <table border="1"> <tr> <td>25.00</td> </tr> </table>	25.00																			
25.00																							
City Doylestown	State PA	Zip Code 18902																					
FEC ID number of contributing federal political committee. C																							
Name of Employer Information Requested		Occupation Information Requested																					
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <table border="1"> <tr> <td>230.00</td> </tr> </table>	230.00																				
230.00																							

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<table border="1"> <tr> <td>155.00</td> </tr> </table>	155.00
155.00		
<b>TOTAL</b> This Period (last page this line number only).....▶	<table border="1"> <tr> <td></td> </tr> </table>	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 10 OF 16
<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)  
**Citizens United Political Victory Fund**

**A. Mr. Dale E Keplinger**  
Full Name (Last, First, Middle Initial)

Mailing Address 3005 Princeton Ave.

City Middletown	State OH	Zip Code 45042
--------------------	-------------	-------------------

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 ▼ **305.00**

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	30	/	2012

**Transaction ID : A2012-2820132**

Amount of Each Receipt this Period  

20.00
-------

**B. Mr. Roy W Knipper**  
Full Name (Last, First, Middle Initial)

Mailing Address 19 Laurel Lake Dr

City Hudson	State OH	Zip Code 44236
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FEC ID number of contributing federal political committee. **C**

Name of Employer Information Requested	Occupation Information requested
---	-------------------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **215.00**

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	28	/	2012

**Transaction ID : A2012-2820038**

Amount of Each Receipt this Period  

20.00
-------

**C. Mr. Billy Millis**  
Full Name (Last, First, Middle Initial)

Mailing Address 2502 Barkwood Dr

City Austin	State TX	Zip Code 78748
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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 ▼ **705.00**

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	29	/	2012

**Transaction ID : A2012-2820248**

Amount of Each Receipt this Period  

20.00
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<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>60.00</b>
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

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

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NAME OF COMMITTEE (In Full)  
**Citizens United Political Victory Fund**

**A. Ms. Irene M Navratil**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 10720 S Washington St  
 Apt 105  
 City State Zip Code  
 Oak Lawn IL 60453  
 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 ▼  
 220.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 11 / 30 / 2012  
**Transaction ID : A2012-2820122**  
 Amount of Each Receipt this Period  
 20.00

**B. Mr. Richard L Olson**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 21 High Lake Rd  
 City State Zip Code  
 Traverse City MI 49686  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Information Requested Information Requested  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 210.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 11 / 29 / 2012  
**Transaction ID : A2012-2820167**  
 Amount of Each Receipt this Period  
 30.00

**C. Mrs. Dianne T Pingree**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 11 Sagamore Farm Rd  
 City State Zip Code  
 S Hamilton MA 01982  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Information Requested Information Requested  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 245.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 11 / 27 / 2012  
**Transaction ID : A2012-2820088**  
 Amount of Each Receipt this Period  
 45.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	95.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

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

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

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NAME OF COMMITTEE (In Full)  
**Citizens United Political Victory Fund**

**A. Mrs. Janice Rubel**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2000 S Bayshore Dr  
 Apt 68  
 City Miami State FL Zip Code 33133  
 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 ▼ 225.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 11 / 27 / 2012  
**Transaction ID : A2012-2820220**  
 Amount of Each Receipt this Period  
 15.00

**B. Mr. Frank H Suits**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 4964 State Rte. 41  
 City Homer State NY Zip Code 13077  
 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 ▼ 625.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 11 / 29 / 2012  
**Transaction ID : A2012-2820148**  
 Amount of Each Receipt this Period  
 100.00

**C. Mr. Frank H Suits**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 4964 State Rte. 41  
 City Homer State NY Zip Code 13077  
 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 ▼ 625.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 11 / 29 / 2012  
**Transaction ID : A2012-2820048**  
 Amount of Each Receipt this Period  
 500.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 615.00  
**TOTAL** This Period (last page this line number only)..... ▶

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

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

FOR LINE NUMBER: PAGE 13 OF 16  
(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)  
**Citizens United Political Victory Fund**

**A. Mr. Brian Weerts**

Full Name (Last, First, Middle Initial)  
Mailing Address 651 North Ave

City Hartland	State WI	Zip Code 53029
------------------	-------------	-------------------

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

Name of Employer Sheetmed	Occupation Self Employed
------------------------------	-----------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **445.00**

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	29	/	2012

**Transaction ID : A2012-2820040**

Amount of Each Receipt this Period  
**200.00**

**B.**

Full Name (Last, First, Middle Initial)  
Mailing Address

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

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt  

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

Amount of Each Receipt this Period

**C.**

Full Name (Last, First, Middle Initial)  
Mailing Address

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

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt  

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

Amount of Each Receipt this Period

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>200.00</b>
<b>TOTAL</b> This Period (last page this line number only).....▶	<b>1530.00</b>

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**Citizens United Political Victory Fund**

Full Name (Last, First, Middle Initial)

**A. Bank of America**

Mailing Address P.O. Box 25118

City Tampa State FL Zip Code 33622

Purpose of Disbursement  
Merchant Services Fees

001  
Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
State: FL District:

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼  
Not Applicable

Date of Disbursement

MM / DD / YYYY  
12 / 03 / 2012

Transaction ID : B446809

Amount of Each Disbursement this Period

197.33

Merchant Services Fees

Full Name (Last, First, Middle Initial)

**B. JP Morgan Chase Bank**

Mailing Address PO Box 659754

City San Antonio State TX Zip Code 78265

Purpose of Disbursement  
Bank Service Charges

001  
Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
State: LA District:

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼  
Not Applicable

Date of Disbursement

MM / DD / YYYY  
12 / 17 / 2012

Transaction ID : B446813

Amount of Each Disbursement this Period

196.53

Bank Service Charges

Full Name (Last, First, Middle Initial)

**C. First Merit Bank**

Mailing Address 295 First Merit Circle

City Akron State OH Zip Code 44307

Purpose of Disbursement  
Merchant Service Fees

001  
Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
State: OH District:

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼  
Not Applicable

Date of Disbursement

MM / DD / YYYY  
12 / 04 / 2012

Transaction ID : B446811

Amount of Each Disbursement this Period

1184.63

Merchant Service Fees

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

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

1578.49

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**Citizens United Political Victory Fund**

Full Name (Last, First, Middle Initial)

**A. First Merit Bank**

Mailing Address 295 First Merit Circle

City Akron State OH Zip Code 44307

Purpose of Disbursement  
Bank Service Charge

Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
State: OH District:

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼  
Not Applicable

Date of Disbursement

/  /

**Transaction ID : B446812**

Amount of Each Disbursement this Period

Bank Service Charge

Full Name (Last, First, Middle Initial)

**B.**

Mailing Address

City State Zip Code

Purpose of Disbursement

Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

/  /

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City State Zip Code

Purpose of Disbursement

Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  
 Primary  General  
 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)..... ▶

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input checked="" 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)  
**Citizens United Political Victory Fund**

Full Name (Last, First, Middle Initial)

**A. Donna J Patton**

Mailing Address 160 SE Saint Lucie Blvd Apt. 301

City State Zip Code  
Stuart FL 34996

Purpose of Disbursement  
Member Refund

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: FL District:

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼  
Not Applicable

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
12 / 17 / 2012

**Transaction ID : B446823**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**B.**

Mailing Address

City State Zip Code

Purpose of Disbursement

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

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

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City State Zip Code

Purpose of Disbursement

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

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

Amount of Each Disbursement this Period

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

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