

FEC FORM 3

REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee

RECEIVED DATE

11 APR - 8 PM 1:44
Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT

Example: If typing, type over the lines.

12FE4M5

Alaska-Arkansas Victory Fund

ADDRESS (number and street)

600 Pennsylvania Ave SE, Ste 210



Check if different than previously reported. (ACC)

Washington

DC

20003

2. FEC IDENTIFICATION NUMBER

CITY

STATE

ZIP CODE

STATE DISTRICT

C00541813

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)



Termination Report (TER)

(b) 12-Day PRE-Election Report for the:



Primary (12P)



General (12G)



Runoff (12R)



Convention (12C)



Special (12S)

Election on

MM / DD / YYYY

MM / DD / YYYY

MM / DD / YYYY

in the State of

MM / DD / YYYY

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



General (30G)



Runoff (30R)



Special (30S)

Election on

MM / DD / YYYY

MM / DD / YYYY

MM / DD / YYYY

in the State of

MM / DD / YYYY

5. Covering Period

MM / DD / YYYY
01 / 01 / 2014

MM / DD / YYYY
01 / 01 / 2014

MM / DD / YYYY
2014

through

MM / DD / YYYY
03 / 31 / 2014

MM / DD / YYYY
03 / 31 / 2014

MM / DD / YYYY
03 / 31 / 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 Judith Zamore

Signature of Treasurer

Judith Zamore

Date

MM / DD / YYYY
04 / 07 / 2014

MM / DD / YYYY
04 / 07 / 2014

MM / DD / YYYY
04 / 07 / 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 3 (Revised 02/2003)

SUMMARY PAGE
of Receipts and Disbursements

FEC Form 3 (Revised 02/2003)

Page 2

Write or Type Committee Name

Alaska-Arkansas Victory Fund

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

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e))...	19,310.00	154,960.00
(b) Total Contribution Refunds (from Line 20(d)) ..	0.00	0.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a))...	19,310.00	154,960.00
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17) ..	751.65	11,483.80
(b) Total Offsets to Operating Expenditures (from Line 14) ..	0.00	0.00
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a))...	751.65	11,483.80
8. Cash on Hand at Close of Reporting Period (from Line 27) ..	4,090.20	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D) ..	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D) ..	0.00	

For further information contact:

Federal Election Commission
999 E Street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

14020174987

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3 (Revised 12/2003)

Page 3

Write or Type Committee Name

Alaska-Arkansas Victory Fund

Report Covering the Period: From:

M	M
01	

 /

D	D
01	

 /

Y	Y	Y	Y	Y	Y
2	0	1	4		

 To:

M	M
03	

 /

D	D
31	

 /

Y	Y	Y	Y	Y	Y
2	0	1	4		

I. RECEIPTS

COLUMN A
Total This Period

COLUMN B
Election Cycle-to-Date

11. CONTRIBUTIONS (other than loans) FROM:

(a) Individuals/Persons Other Than Political Committees

(i) Itemized (use Schedule A)...

17,310.00

149,460.00

(ii) Unitemized

0.00

0.00

(iii) TOTAL of contributions from individuals .

17,310.00

149,460.00

(b) Political Party Committees...

0.00

3,500.00

(c) Other Political Committees (such as PACs)...

2,000.00

2,000.00

(d) The Candidate

0.00

0.00

(e) TOTAL CONTRIBUTIONS (other than loans)

(add Lines 11(a)(iii), (b), (c), and (d))...

19,310.00

154,960.00

12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES ..

0.00

0.00

13. LOANS:

(a) Made or Guaranteed by the Candidate...

0.00

0.00

(b) All Other Loans...

0.00

0.00

(c) TOTAL LOANS

(add Lines 13(a) and (b))...

0.00

0.00

14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.)..

0.00

0.00

15. OTHER RECEIPTS

(Dividends, Interest, etc.).....

0.00

0.00

16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15)

(Carry Total to Line 24, page 4)...

19,310.00

154,960.00

14020174988

DETAILED SUMMARY PAGE
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES ..	751.65	11,483.80
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES ..	18,800.00	139,386.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate ..	0.00	0.00
(b) Of All Other Loans	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)) ..	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees ..	0.00	0.00
(b) Political Party Committees ..	0.00	0.00
(c) Other Political Committees (such as PACs) ..	0.00	0.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)) ..	0.00	0.00
21. OTHER DISBURSEMENTS	0.00	0.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ▶	19,551.65	150,869.80

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD ..	4,331.85
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3) ..	19,310.00
25. SUBTOTAL (add Line 23 and Line 24) ..	23,641.85
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22) ..	19,551.65
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25) ..	4,090.20

14020174989

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

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

FOR LINE NUMBER: PAGE 1 OF 5

(check only one)

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

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

NAME OF COMMITTEE (In Full)
Alaska-Arkansas Victory Fund

A.

Full Name (Last, First, Middle Initial)
Sam Radin

Mailing Address
29 The Crossing at Blind Brk
City Purchase, NY State Zip Code 10577

Date of Receipt
MM / DD / YYYY
01 / 06 / 2014

FEC ID number of contributing federal political committee. C

Amount of Each Receipt this Period
2,500.00

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date
2,500.00

B.

Full Name (Last, First, Middle Initial)
David Gitlitz

Mailing Address
PO Box 6000
City Parachute, CO State Zip Code 81635

Date of Receipt
MM / DD / YYYY
01 / 27 / 2014

FEC ID number of contributing federal political committee. C

Amount of Each Receipt this Period
1,000.00

Name of Employer Occupation
Community Holdings Manager

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date
1,000.00

Earmarked through ActBlue

C.

Full Name (Last, First, Middle Initial)
ActBlue (C00401224)

Mailing Address
P.O. Box 441146
City Somerville, MA State Zip Code 02144

Date of Receipt
MM / DD / YYYY
01 / 27 / 2014

FEC ID number of contributing federal political committee. C

Amount of Each Receipt this Period
MEMO 1,000.00

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date
7,010.00

Contribution earmarked through ActBlue not a contribution

SUBTOTAL of Receipts This Page (optional)..... 3,500.00

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

14020174990

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

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

FOR LINE NUMBER: PAGE 2 OF 5

(check only one)

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

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NAME OF COMMITTEE (In Full)
Alaska-Arkansas Victory Fund

A.

Full Name (Last, First, Middle Initial)
Patrick Hamill

Mailing Address
4908 Tower Rd
City: Denver, CO State: CO Zip Code: 80249

Date of Receipt
MM/DD/YYYY
01/31/2014

FEC ID number of contributing federal political committee. [C]

Amount of Each Receipt this Period
2,000.00

Name of Employer: Oakwood Homes Occupation: CEO

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date
2,000.00

Earmarked through ActBlue

B.

Full Name (Last, First, Middle Initial)
ActBlue (C00401224)

Mailing Address
P.O. Box 441146
City: Somerville, MA State: MA Zip Code: 02144

Date of Receipt
MM/DD/YYYY
01/31/2014

FEC ID number of contributing federal political committee. [C]

Amount of Each Receipt this Period
MEMO 2,000.00

Name of Employer: Occupation:

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date
7,010.00

Con ribut on ea arked through A tBlue not a con ribut n

C.

Full Name (Last, First, Middle Initial)
Joey Brown

Mailing Address
3948 mount pleasant rd
City: Groveland, fl State: fl Zip Code: 34736

Date of Receipt
MM/DD/YYYY
02/14/2014

FEC ID number of contributing federal political committee. [C]

Amount of Each Receipt this Period
10.00

Name of Employer: Self Occupation: Painter

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date
10.00

E arked through ActBlue

SUBTOTAL of Receipts This Page (optional)..... 2,010.00

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

14020174991

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

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

FOR LINE NUMBER:		PAGE 3		OF 5	
(check only one)					
<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c
<input type="checkbox"/>	12	<input type="checkbox"/>	13a	<input type="checkbox"/>	11d
				<input type="checkbox"/>	14
				<input type="checkbox"/>	15

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NAME OF COMMITTEE (In Full)
Alaska-Arkansas Victory Fund

A. Full Name (Last, First, Middle Initial)
ActBlue (C00401224)

Mailing Address
P.O. Box 441146
City State Zip Code
Somerville, MA 02144

FEC ID number of contributing federal political committee.

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 / /

Amount of Each Receipt this Period
 10.00

Con ribut on earmarked through ActBlue
not a con ribution

B. Full Name (Last, First, Middle Initial)
Harry Brittenham

Mailing Address
9100 Wilshire Blvd Ste 400W
City State Zip Code
Beverly Hills, CA 90212

FEC ID number of contributing federal political committee.

Name of Employer Occupation
Ziffren Brittenham Brauco & Fischer Attorney

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 / /

Amount of Each Receipt this Period

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

Mailing Address
401 St. Cloud Rd
City State Zip Code
Los Angeles, CA 90077

FEC ID number of contributing federal political committee.

Name of Employer Occupation
Disney Co Chairman

Receipt For:
 Primary General
 Other (specify)

Election Cycle-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).....

14020174992

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

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

FOR LINE NUMBER: PAGE 4 OF 5

(check only one)

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

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NAME OF COMMITTEE (In Full)
Alaska-Arkansas Victory Fund

Full Name (Last, First, Middle Initial) A. Melissa Maxfield		Date of Receipt 03 / 31 / 2014	
Mailing Address 8947 Donna Lu Dr City State Zip Code Odessa, FL 33556		Amount of Each Receipt this Period 2,000.00	
FEC ID number of contributing federal political committee. C	Name of Employer Comcast Corp	Occupation Senior VP	Earmarked through ActBlue
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2,000.00		

Full Name (Last, First, Middle Initial) B. ActBlue (C00401224)		Date of Receipt 03 / 31 / 2014	
Mailing Address P.O. Box 441146 City State Zip Code Somerville, MA 02144		Amount of Each Receipt this Period MEMO 2,000.00	
FEC ID number of contributing federal political committee. C	Name of Employer	Occupation	Con tribution ea rked through ActBlue not a contribut n
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 7,010.00		

Full Name (Last, First, Middle Initial) C. Hope Warschaw		Date of Receipt 03 / 31 / 2014	
Mailing Address 514 Palisades Beach Rd City State Zip Code Santa Monica, CA 90402		Amount of Each Receipt this Period 2,000.00	
FEC ID number of contributing federal political committee. C	Name of Employer Self	Occupation Consultant	E arked thro tBlue
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2,000.00		

SUBTOTAL of Receipts This Page (optional).....	4,000.00
TOTAL This Period (last page this line number only).....	

14020174993

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

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

FOR LINE NUMBER: PAGE 5 OF 5

(check only one)

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

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NAME OF COMMITTEE (In Full)
Alaska-Arkansas Victory Fund

A. Full Name (Last, First, Middle Initial)
ActBlue (C00401224)

Mailing Address
P.O. Box 441146
City State Zip Code
Somerville, MA 02144

FEC ID number of contributing federal political committee. C

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date
7,010.00

Date of Receipt
MM / DD / YYYY
03 / 31 / 2014

Amount of Each Receipt this Period
MEMO 2,000.00

C ribut on ea arked through ActBlue
n a contrib n

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)

Election Cycle-to-Date

Date of Receipt
MM / DD / YYYY

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)

Election Cycle-to-Date

Date of Receipt
MM / DD / YYYY

Amount of Each Receipt this Period

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

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

0.00

17,310.00

14020174994

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

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

FOR LINE NUMBER:
(check only one)

PAGE 1 OF 1

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

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NAME OF COMMITTEE (In Full)
Alaska-Arkansas Victory Fund

Full Name (Last, First, Middle Initial) A. Sony Pictures Entertainment Inc PAC		Date of Receipt MM / DD / YYYY 03 / 28 / 2014
Mailing Address 10202 W Washington Blvd Thalberg-1111 City State Zip Code Culver City, CA 90232		Amount of Each Receipt this Period 2,000.00
FEC ID number of contributing federal political committee. C C00282038	Occupation	
Name of Employer	Occupation	Amount of Each Receipt this Period 2,000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2,000.00	

Full Name (Last, First, Middle Initial) B.		Date of Receipt MM / DD / YYYY
Mailing Address City State Zip Code		Amount of Each Receipt this Period
FEC ID number of contributing federal political committee. C	Occupation	
Name of Employer	Occupation	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date	

Full Name (Last, First, Middle Initial) C.		Date of Receipt MM / DD / YYYY
Mailing Address City State Zip Code		Amount of Each Receipt this Period
FEC ID number of contributing federal political committee. C	Occupation	
Name of Employer	Occupation	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date	

SUBTOTAL of Receipts This Page (optional).....	2,000.00
TOTAL This Period (last page this line number only).....	2,000.00

14020174995

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

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

FOR LINE NUMBER: PAGE 1 OF 2
(check only one)

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

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NAME OF COMMITTEE (In Full)
Alaska-Arkansas Victory Fund

A. Full Name (Last, First, Middle Initial)
Capitol Compliance Associates

Date of Disbursement
MM / DD / YYYY
01 / 02 / 2014

Mailing Address
PO Box 15293

City State Zip Code
Washington, DC 20003

Purpose of Disbursement
Compliance Services

Candidate Name

Amount of Each Disbursement this Period
474.75

Category/Type

Office Sought: House Senate President
Disbursement For: Primary General Other (specify)

State: District:

B. Full Name (Last, First, Middle Initial)
ActBlue Technical Services

Date of Disbursement
MM / DD / YYYY
01 / 20 / 2014

Mailing Address
366 Summer St

City State Zip Code
Somerville, MA 02144

Purpose of Disbursement
Merchant Fees

Candidate Name

Amount of Each Disbursement this Period
39.50

Category/Type

Office Sought: House Senate President
Disbursement For: Primary General Other (specify)

State: District:

C. Full Name (Last, First, Middle Initial)
ActBlue Technical Services

Date of Disbursement
MM / DD / YYYY
01 / 26 / 2014

Mailing Address
366 Summer St

City State Zip Code
Somerville, MA 02144

Purpose of Disbursement
Merchant Fees

Candidate Name

Amount of Each Disbursement this Period
79.00

Category/Type

Office Sought: House Senate President
Disbursement For: Primary General Other (specify)

State: District:

SUBTOTAL of Disbursements This Page (optional)..... 593.25

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

14020174996

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

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

FOR LINE NUMBER:
(check only one)

PAGE 2 OF 2

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

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NAME OF COMMITTEE (In Full)
Alaska-Arkansas Victory Fund

A. Full Name (Last, First, Middle Initial) ActBlue Technical Services		Date of Disbursement MM / DD / YYYY 02 / 09 / 2014	
Mailing Address 366 Summer St		Amount of Each Disbursement this Period 0.40	
City Somerville, MA	State MA	Zip Code 02144	Category/ Type
Purpose of Disbursement Merchant Fees		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: 	District: 		

B. Full Name (Last, First, Middle Initial) ActBlue Technical Services		Date of Disbursement MM / DD / YYYY 03 / 31 / 2014	
Mailing Address 366 Summer St		Amount of Each Disbursement this Period 158.00	
City Somerville, MA	State MA	Zip Code 02144	Category/ Type
Purpose of Disbursement Merchant Fees		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: 	District: 		

C. Full Name (Last, First, Middle Initial)		Date of Disbursement MM / DD / YYYY	
Mailing Address		Amount of Each Disbursement this Period	
City	State	Zip Code	Category/ Type
Purpose of Disbursement		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: 	District: 		

SUBTOTAL of Disbursements This Page (optional)	158.40
TOTAL This Period (last page this line number only)	751.65

14020174997

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

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

FOR LINE NUMBER:
(check only one)

PAGE 1 OF 1

17 18 19a 19b
 20a 20b 20c 21

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NAME OF COMMITTEE (In Full)
Alaska-Arkansas Victory Fund

<p>A. Full Name (Last, First, Middle Initial) Alaskans for Begich 2014</p>		<p>Date of Disbursement</p> <p>MM / DD / YYYY 03 / 31 / 2014</p>	
<p>Mailing Address 1231 W NORTHERN LTS #605</p>		<p>Amount of Each Disbursement this Period</p> <p>9,400.00</p>	
<p>City State Zip Code Anchorage, AK 99503</p>	<p>Purpose of Disbursement Transfer</p>	<p>Category/ Type</p>	
<p>Candidate Name Mark Begich</p>	<p>Disbursement For:</p> <p><input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>		
<p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: AK District:</p>	<p>Category/ Type</p>		
<p>B. Full Name (Last, First, Middle Initial) Mark Pryor for US Senate</p>		<p>Date of Disbursement</p> <p>MM / DD / YYYY 03 / 31 / 2014</p>	
<p>Mailing Address PO BOX 2720</p>		<p>Amount of Each Disbursement this Period</p> <p>9,400.00</p>	
<p>City State Zip Code Little Rock, AR 72203</p>	<p>Purpose of Disbursement Transfer</p>	<p>Category/ Type</p>	
<p>Candidate Name Mark Pryor</p>	<p>Disbursement For:</p> <p><input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>		
<p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: AR District:</p>	<p>Category/ Type</p>		
<p>C. Full Name (Last, First, Middle Initial)</p>		<p>Date of Disbursement</p> <p>MM / DD / YYYY</p>	
<p>Mailing Address</p>		<p>Amount of Each Disbursement this Period</p>	
<p>City State Zip Code</p>	<p>Purpose of Disbursement</p>	<p>Category/ Type</p>	
<p>Candidate Name</p>	<p>Disbursement For:</p> <p><input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>		
<p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p>	<p>Category/ Type</p>		
<p>SUBTOTAL of Disbursements This Page (optional).....</p>		<p>18,800.00</p>	
<p>TOTAL This Period (last page this line number only).....</p>		<p>751.65</p>	

14020174998

NANCY ERICKSON
SECRETARY

DANA K. McCALLUM
SUPERINTENDENT
HART SENATE OFFICE BUILDING
SUITE 232
WASHINGTON, DC 20510-71
PHONE: (202) 224-0322

United States Senate

OFFICE OF THE SECRETARY

OFFICE OF PUBLIC RECORDS

THE PRECEDING DOCUMENT WAS:

HAND DELIVERED _____

Date of Receipt

4-8-14

USPS FIRST CLASS MAIL _____

Postmark

USPS REGISTERED/CERTIFIED _____

Postmark

USPS PRIORITY MAIL _____

Postmark

DELIVERY CONFIRMATION OR SIGNATURE CONFIRMATION LABEL

USPS EXPRESS MAIL _____

Postmark

OVERNIGHT DELIVERY SERVICE:

SHIPPING DATE

NEXT BUSINESS DAY DELIVERY

FEDERAL EXPRESS _____

UPS _____

DEL _____

AIRBORNE EXPRESS _____

RECEIVED FROM FEDERAL ELECTION COMMISSION _____

Date of Receipt

POSTMARK ILLEGIBLE

NO POSTMARK

FAX _____

Date of Receipt

OTHER _____

Date of Receipt or Postmark

PREPARER

DH

DATE PREPARED

4-8-14

14020174999

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