Campaign Finance Report

(NOTE: This report must be clear and legible. It may be typed or printed in blue or black ink.)

Filer Identificati Number :	i on 8400	418			Rep File			CANDI	DATE		СОМИ	4ITTEE	✓	LOBI	BYIST	
Name of Filing C	Name of Filing Committee, Candidate or Lobbyist: NRA VICTORY FUND															
Street Address: 11250 WAPLES MILL ROAD																
City:	FAIRFAX							State:	VA			Zip Coo	le: 22	030-0	000	
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDA PRIMARY	Y PRE	:- 2	2.	30 DA PRIMA		POST-	3.		AMENDM REPORT		Yes	No	\checkmark
(place X to the right of	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDA ELECTION	Y PRI	E- 5	5.	30 DA ELECT		POST-	6.		TERMINA REPORT		Yes	No	Y
report type)	ANNUAL REPORT	7.	Year 2015					NG METHO				PAPER		\checkmark	DISKE	TTE
Name of Office S	Sought by Candida	te:						DATE O	F ELEC	CTIO	N	District Number	Office Code	Par	ty Code	County Code
								мо	DAY	YE	AR					
								11		3	2015		(SEE INS	TRUCTI	ONS FOR	CODES)
	Receipts and	мо	DAY	YEAF	ર			мо	DAY	Y	EAR	FO	R OFFIC	E USE	ONLY	
Expenditures	s from:		10 20	2	2015	Т	0	11	1	.3	2015					
A. Amount Bro	ught Forward Froi	n Last F	Report				\$				0.00					
B. Total Monet	ary Contributions	And Red	ceipts (Fron	n Sche	edule	I)	\$			2,9	947.95					
C. Total Funds	Available (Sum Of	f Lines A	A and B)				\$			2,9	947.95					
D. Total Expen	ditures (From Sch	edule II	II)				\$			2,9	947.95					
E. Ending Cash	Balance (Subtrac	t Line D	From Line	C)			\$				0.00	-				
F. Value Of In-	Kind Contribution	s Receiv	ved (From S	chedu	le II))	\$				0.00					
G. Unpaid Deb	ts And Obligations	(From	Schedule IV	/)			\$				0.00					
				AFF	IDA	VI	T SE	CTION								
PART I - If this is	s a Committee rep	ort, trea	asurer sign	here.	If thi	s is	a Car	ndidate re	eport, c	andi	date sig	gn here.				
I swear (or affirm correct and compl) that this report, inc ete.	luding th	e attached sc	hedule	s filed	on	paper	or by elect	ronic me	dium	, are to t	the best o	f my know	ledge	and beli	ef , true
Sworn to and subs	cribed before me this day of	5	20							s	Signature	e of Perso	n Submitt	ing Rep	oort	
	Signatu	re					-					Prin	ted Name			
My Commission E	-											Ema	il			
	мо	D	AY	YR			-		Are	a Coc	le	Daytim	e Teleph	one Nu	mber	
Part II- If this is	a report of a can	didate's	authorized	Comr	nittee	e, C	andid	ate shall	sign he	ere.						
I swear (or affirm) No 320) as amende	that to the best of r	ny knowl	edge and beli	ief this	s politi	ical	comm	ittee has n	ot violat	ed an	ıy provis	ions of th	e act of Ju	ine 3,1	937 (P.L	1333,
Sworn to and subscribed before me this Signature of Candidate																
	day of		20				-					Printe	d Name			
	Signature						-					FINCE				
Signature My Commission Expires									Email							
	мо	D	YAY	YR	2		-		Area	Code		Da	aytime Te	lephon	e Numb	er

SCHEDULE I CONTRIBUTIONS AND RECEIPTS Detailed Summary Page

Detailed Summary Page				
Name of Filing Committee or Candidate	Reporting	g Period		
NRA VICTORY FUND	From:	<u>10/20/201</u>	. <u>5</u> To:	<u>11/13/2015</u>
1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor				
TOTAL for the Reporting	Period	(1)	\$	2,947.95
2. Contributions Received - \$ 50.01 To \$250.00 (From Part A and Part B)				
Contributions Received From Political Committees (Part A)			\$	0.00
All Other Contributions (Part B)			\$	0.00
TOTAL for the Reporting	Period	(2)	\$	0.00
3. Contributions Received Over \$250.00 (From Part C and Part D)				
Contributions Received From Political Committees (Part C)			\$	0.00
All Other Contributions (Part D)			\$	0.00
TOTAL for the Reporting	Period	(3)	\$	0.00
4. Other Receipts, Refunds, Interest Earned, Returned Checks, Etc . (From Part E)				
TOTAL for the Reporting	Period	(4)	\$	0.00
Total Monetary Contributions and Receipts During this Reporting Period (Add and totals from Boxes 1,2,3 and 4; also enter this amount on Page1, Report Cover Pag			\$	2,947.95

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PART A CONTRIBUTIONS RECEIVED FROM POLITICAL COMMITTEES

\$50.01 TO \$250.00

Use this Part to itemize only contributions received from political committees with an aggregate value from \$50.01 to \$250.00 in the reporting period.

Name of Filing Committee or Candidate					Reporting Period						
			Fro	om:		То	:				
					DATE			AMOUNT			
Full Name of Contributing Committee				мо	DAY	YEAR					
Mailing Address							\$	0.00			
City	State	Zip Code (Plus	4)								
							Γ	PAGE TOTAL			

Enter Grand Total of Part A on Schedule I, Detailed Summary Page, Section 2.

0.00

\$

PART B ALL OTHER CONTRIBUTIONS \$50.01 TO \$250.00 Use this Part to itemize all other contributions with an aggregate value from \$50.01 to \$250.00 in the reporting period. (Exclude contributions from political committees reported in Part A)									
Name of Filing Committee or Candidat	e		Rep	orting P	eriod				
From: To:									
					DATE			AMOUNT	
Full Name of Contributor				мо	DAY	YEAR			
Mailing Address							\$	0.00	
City	State	Zip Code (Plus 4)							
PAGE TOTAL									
Enter Grand Total of Part A on S	Schedule I, Detail	ed Summary Pag	je, Se	ection 2	<u>.</u>		\$	0.00	

PART C Contributions Received From Political Committees

OVER \$250.00

Use this Part to itemize only contributions received from Political committees with an aggregate value from Over \$250.00 in the reporting period.

Name of Filing Committee or Candidate			Reporting					
			From:			То:		
				DA	TE		А	MOUNT
Full Name of Contributing Commit	ttee			мо	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Cod	e (Plus 4)					
						ſ		PAGE TOTAL
Enter Grand Total of Part C on	Schedule I, Detail	ed Summary Pa	age, Sectio	n 3.			\$	0.00

PART D ALL OTHER CONTRIBUTIONS

OVER \$250.00

Use this Part to itemize all other contributions with an aggregate value of

over \$250.00 in the reporting period.

(Exclude contributions from political committees reported in Part C.)

Name of Filing Committee or Candidate	Reporting Period	
	From:	То:

				D	ATE		АМО	UNT
Full Name of Contributor				мо	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip	Code (Plus 4)					
Employer Name	·			Occupat	tion		·	
Employer Mailing Address/Princ Business	ipal Place of		City	·	State		Zip Code ((Plus 4)
Enter Grand Total of Part C o	on Schedule I, Detail	ed Sumn	ary Page, Secti	on 3.			PAG	E TOTAL
						4	5	0.00

PART E **OTHER RECEIPTS**

REFUNDS, INTEREST INCOME, RETURNED CHECKS, ETC. Use this Part to report refunds received, interest earned, returned checks and

prior expenditures that were returned to the filer.

Name of Filing Committee or Candidate	Report	ing Perio	od						
From:					om: To:				
				D	ATE			AMOUNT	
Full Name				мо	DAY	YEAR			
Mailing Address							\$	i	0.00
City	State	Zip Code (Plus 4)						
Receipt Description									
Enter Grand Total of Part E on Schedu	le T. Detailed Sumn	nary Page	Section	4				PAGE TO	ΓAL
		iaiy raye,	Section	7.			\$		0.00

SCHEDULE II IN-KIND CONTRIBUTIONS AND VALUABLE THINGS RECEIVED

USE THIS SCHEDULE TO REPORT ALL IN-KIND CONTRIBUTIONS OF VALUABLE THINGS DURING THE REPORTING PERIOD.

Detailed Summary Page

Name of Filing Committee or Candidate	Reporting Perio	d	
NRA VICTORY FUND	From:	<u>10/20/2015</u> To:	<u>11/13/2015</u>
1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS P	ER CONTRIBUTOR		
TOTAL for the Reporting Pe	riod (1)	\$	0.00
2. IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.01 TO \$250.00 (FROM PAR	TF)		
TOTAL for the Reporting Pe	riod (2)	\$	0.00
3. IN-KIND CONTRIBUTION RECIEVED - VALUE OVER \$250.00 (FROM PART G)			
TOTAL for the Reporting Pe	riod (3)	\$	0.00
TOTAL VALUE OF IN-KIND CONTRIBUTIONS DURING THIS REPORTING PERIOD (amount totals from Boxes 1,2, and 3; also enter on Page 1, Reports Cover Page, 1		\$	0.00

SCHEDULE II PART F IN-KIND CONTRIBUTIONS RECEIVED

VALUE OF \$50.01 TO \$250.00

Name of Filing Committee or Candidate R				Reporting Period					
	From:			То:					
				DATE		АМО	UNT		
Full Name of Contributor			мо	DAY	YEAR				
Mailing Address						\$	0.00		
City	State	Zip Code (Plus 4)	,						
Description of Contribution:									
Enter Grand Total of Part F on Sched Section 2.	ule II, In-Kind Co	ontributions Deta	iled Sum	mary Pag	je,	PAGE	TOTAL		
					4	6	0.00		

0.00

SCHEDULE II PART G IN-KIND CONTRIBUTIONS RECEIVED VALUE OVER \$250.00

Name of Filing Committee or Candidate						Reporting Period					
					From:		To:				
						DATE			AMOUNT		
Full Name of Contributor					мо	DAY	YEAR				
Mailing Address								\$	0.00		
City	State		Zip Code(Plus	4)							
Employer of Contributor			1		Occupa	l tion					
Employer Mailing Address/Prin Business	cipal Place of	City	Sta	te	Zip 4)	Code(Plus	Descri	ption of	Contribution		
Enter Grand Total of Part G	Con Schedule II	In-Kind	Contributions	Dota	iled				PAGE TOTAL		

	1
Enter Grand Total of Part G on Schedule II, In-Kind Contributions Detailed Summary Page, Section 3.	PAGE

SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate				Reporting Period				
NRA VICTORY FUND				From	rom <u>10/20/2015</u>		То:	<u>11/13/2015</u>
					DATE		AMOUNT	
To Whom Paid Prolist, Inc.				мо	DAY	YEAR		
Mailing Address 4510 Buckeystown Pike, Suite M				10	23	2015	\$	2,061.80
City Frederick	s	tate	Zip Code (Plus 4)	Description of Expenditure				
		MD	21703	Endorsement Postcards - Postage - supporting Guy Reschenthaler - Sen Dist 37				
To Whom Paid Prolist, Inc.				мо	DAY	YEAR		
Mailing Address 4510 Buckeystown Pike, Suite M				10	23	2015	\$	886.15
City Frederick	s	tate	Zip Code (Plus 4)	Description of Expenditure				
		MD	21703	Endorsement Postcards - Postcards - supporting Guy Reschenthaler - Sen Dist 37				
Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.							PAGE TOTAL	
Enter Grand Tota	al of Expenditures on	Page 1, Report C	over Page, Item I) .			\$	2,947.95