# **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 :	Filer Identification8400418RepNumber :Filed									СОМІ	MITTEE	✓	LOBI	BYIST	
Name of Filing C	Committee, Candid	ate or L	obbyist:		NRA VI	СТОР	RY FUND								
Street Address:	Street Address: 11250 WAPLES MILL ROAD														
City:	FAIRFAX						State:	VA			Zip Co	<b>de:</b> 22	030-0	000	
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDA PRIMARY	Y PRE	- 2.	30 D PRIN	DAY 1ARY	POST-	POST- 3.		AMENDMENT REPORT?		Yes	No	$\checkmark$
(place X to the right of	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDA ELECTION	Y PRE	- 5. <b>X</b>	30 D ELEC	DAY CTION	POST-	6.		TERMIN/ REPORT		Yes	No	$\checkmark$
report type)     ANNUAL REPORT     7.     Year 2016     FILING METHOD       ( ) CHECK ONE							PAPER		$\checkmark$	DISKE	TTE				
Name of Office Sought by Candidate:							DATE	OF ELE	стіо	N	District Number	Office Code	Par	ty Code	County Code
							мо	DAY	YE	AR					
							11		8	2016		(SEE INS	TRUCTI	ONS FOR	CODES)
	Receipts and	мо	DAY	YEAR	2		мо	DAY	YE	AR	FC	R OFFIC	E USE	ONLY	
Expenditures	s from:		9 20	2	016 <b>1</b>	0	10		24	2016					
A. Amount Bro	ught Forward Froi	n Last F	Report			9	\$			0.00					
B. Total Monet	ary Contributions	And Red	ceipts (Fron	n Sche	dule I)		\$		1,0	00.00					
C. Total Funds	Available (Sum Of	f Lines A	A and B)				\$			00.00					
D. Total Expen	ditures (From Sch	edule II	[])			9	\$		1,0	00.00					
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	/)		9	\$			0.00					
				AFF	IDAVI	IT SI	ECTION								
	s a Committee rep		-					• •		-	-				
I swear (or affirm correct and complete	) that this report, inc ete.	luding th	e attached sc	hedules	s filed on	pape	r or by elec	tronic m	edium,	, are to f	the best o	f my knov	vledge	and beli	ef , true
Sworn to and subs	cribed before me this day of	5	20						s	ignature	e of Perso	n Submitt	ing Rep	oort	
	Signatu	re				_					Prin	ted Name			
My Commission E	-										Ema	il			
	мо	D	AY	YR				Are	ea Cod	le	Daytim	e Teleph	one Nu	mber	
Part II- If this is	a report of a can	didate's	authorized	Comm	nittee, G	Candi	date shall	sign he	ere.						
I swear (or affirm) No 320) as amende	that to the best of r	ny knowl	ledge and beli	ief this	political	com	mittee has	not viola	ted an	y provis	ions of th	e act of Ju	ine 3,1	937 (P.L	. 1333,
Sworn to and subscribed before me this										s	ignature o	of Candida	ite		
day of 20 Printed Name															
											Printe	u Name			
Signature My Commission Expires											Ema	il			
	мо	D	YAY	YR		_		Area	Code		D	aytime Te	elephon	e Numb	er

### SCHEDULE I CONTRIBUTIONS AND RECEIPTS Detailed Summary Page

Name of Filing Committee or Candidate **Reporting Period** NRA VICTORY FUND From: <u>9/20/2016</u> **To:** 10/24/2016 1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor 1,000.00 \$ **TOTAL for the Reporting Period** (1) 2. Contributions Received - \$ 50.01 To \$250.00 (From Part A and Part B) \$ 0.00 **Contributions Received From Political Committees (Part A)** 0.00 All Other Contributions (Part B) \$ **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 0.00 All Other Contributions (Part D) \$ **TOTAL for the Reporting Period** (3) \$ 0.00 4. Other Receipts, Refunds, Interest Earned, Returned Checks, Etc . (From Part E) 0.00 **TOTAL for the Reporting Period** (4) \$ Total Monetary Contributions and Receipts During this Reporting Period (Add and enter amount \$ 1,000.00 totals from Boxes 1,2,3 and 4; also enter this amount on Page1, Report Cover Page, Item B.)

PAGE 3

# 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			Re	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)			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 Schedule I, Detailed Summary Page, Section 2. \$ 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	Reporting Period					
			From:			То:			
				DA	TE		А	MOUNT	
Full Name of Contributing Comm	ittee			мо	DAY	YEAR			
Mailing Address							\$	0.00	
City	State	Zip Cod	e (Plus 4)						
						ſ		PAGE TOTAL	
Enter Grand Total of Part C or	n Schedule I, Detaile	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		АМ	OUNT
Full Name of Contributor				мо	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zi	p Code (Plus 4)					
Employer Name				Occupat	tion			
Employer Mailing Address/Principal P Business	lace of		City		State		Zip Code	(Plus 4)
Enter Grand Total of Part C on Sc	hedule I <i>,</i> Deta	iled Sumr	narv Page, Secti	on 3.		Γ	PA	GE TOTAL
	,		, . <u>.</u>	-			\$	0.00

I

## 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	ting Perio	od			
			From:			То:		
				D	ATE		AMOUNT	
Full Name				мо	DAY	YEAR		
Mailing Address							\$ i	0.00
City	State	Zip Code (	Plus 4)					
Receipt Description					1	1		
Enter Grand Total of Part E	on Schodulo I. Dotailog		Section	4			PAGE TOT	AL
		i Suillilai y Page,	Section	-			\$	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 Period		
NRA VICTORY FUND	From:	<u>9/20/2016</u> <b>то:</b>	<u>10/24/2016</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 Re			Reporting	g Period			
F						То:	
				DATE		АМО	UNT
Full Name of Contributor			мо	DAY	YEAR		
Mailing Address	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 P	Period			
					From:		То:		
						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

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	Name of Filing Committee or Candidate				Reporting Period						
NRA VICTORY FUND	From	<u>9/20</u>	То:	<u>10/24/2016</u>							
	DATE AMOU										
<b>To Whom Paid</b> Friends of John Rafferty				DAY	YEAR						
Mailing Address P.O. Box 624			10	18	2016	\$	1,000.00				
CityHarrisburgStateZip Code (Plus 4)PA17108				Description of Expenditure Direct Contribution							
Fatan Crand Tatal of Funanditumes on Dags 1. Depart Course Dags Them D							PAGE TOTAL				
Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.						\$	1,000.00				