Campaign Finance Report

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

Filer Identification	on 8400	418			Repor Filed		CAND	IDATE		соми	ITTEE	✓	LOBI	BYIST		
Name of Filing C	ommittee, Candid	ate or L	obbyist:	1	NRA VI	CTOR'	Y FUND									
Street Address:	11250 WAPLE	S MILL	ROAD													
City:	FAIRFAX						State:	VA			Zip Co	de: 22	2030-0	000		
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDAY PRIMARY	/ PRE-	2.	30 DA		POST-	3.		AMENDM REPORT		Yes	No	`	
	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDAY ELECTION	/ PRE	- 5.	30 DA		POST-	6.		TERMINA REPORT		Yes	No	•	
_	ANNUAL REPORT	7. X	Year 2017				NG METH CHECK (PAPER		$\overline{}$	DISKET	TTE	
Name of Office S	ought by Candida	te:			-		DATE	OF ELE	CTIO	N	District Number	Office Code	Par	ty Code	Count	y
							МО	DAY	YE	AR				•		_
							1:	1	7	2017		(SEE IN	STRUCTI	ONS FOR C	ODES)	_
Summary of I		МО	DAY	YEAR			МО	DAY	YI	EAR	FC	R OFFI	CE USE	ONLY		
Expenditures	from:		1 1	20)17 1	ГО	1	2	31	2017						
A. Amount Brou	ight Forward Fron	n Last R	eport			\$				0.00						
B. Total Moneta	ary Contributions	And Rec	eipts (From	Sched	dule I)	\$			9,3	341.40						
C. Total Funds	Available (Sum Of	Lines A	and B)			\$			9,3	341.40						
D. Total Expend	litures (From Sch	edule II	I)			\$			9,3	341.40						
E. Ending Cash	Balance (Subtract	Line D	From Line C	E)		\$				0.00						
F. Value Of In-l	Kind Contributions	Receiv	ed (From Sc	hedul	e II)	\$				0.00						
G. Unpaid Debt	s And Obligations	(From S	Schedule IV)		\$				0.00						_
				AFF:	[DAV]	T SE	CTION									
	a Committee rep	-	_							_						Ц
I swear (or affirm) correct and comple	that this report, incl ete.	uding the	e attached sch	edules	filed on	paper	or by elec	tronic m	edium	, are to t	he best o	f my kno	wledge	and belie	f , true	à,
Sworn to and subse	cribed before me this day of	i	20						S	Signature	of Perso	n Submit	ting Rep	ort		•
	Signatu	ro.	_			_		-			Prin	ted Nam	e			-
My Commission Ex	_										Ema	il				-
	мо	D	AY	YR				Are	ea Cod	le	Daytim	ie Telepl	one Nu	mber		
Part II- If this is	a report of a cand	lidate's	authorized	Comm	ittee, (Candid	ate shal	l sign h	ere.							
I swear (or affirm) No 320) as amende	that to the best of n	ny knowle	edge and belie	ef this	political	comm	ittee has	not viola	ted an	y provis	ions of th	e act of J	une 3,1	937 (P.L.	1333,	
Sworn to and subsci	ribed before me this									s	ignature o	of Candid	ate			۱.
	day of —— ————					_					Printe	ed Name				ا .
My Commission Exp	Signature ires					_					Ema	il				.
																- 1

SCHEDULE I CONTRIBUTIONS AND RECEIPTS

Detailed Summary Page

Name of Filing Committee or Candidate	Reporting	Period		
NRA VICTORY FUND	From:	1/1/201	<u>7</u> To:	12/31/2017
1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor				
TOTAL for the Reporting	J Period	(1)	\$	9,341.40
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	J 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	y Period	(3)	\$	0.00
4. Other Receipts, Refunds, Interest Earned, Returned Checks, Etc. (From Part E)				
TOTAL for the Reporting	J Period	(4)	\$	0.00
Total Monetary Contributions and Receipts During this Reporting Period (Add an totals from Boxes 1,2,3 and 4; also enter this amount on Page1, Report Cover Pa			\$	9,341.40

PART A

CONTRIBUTIONS RECEIVED FROM POLITICAL COMMITTEES

\$50.01 TO \$250.00

	this Part to itemize onl with an aggregate valu	-			-			
Name of Filing Comm	nittee or Candidate		Re	porting	Period			
			Fro	om:		То	:	
		L			DATE			AMOUNT
Full Name of Contribut	ing Committee			мо	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Code (Plus 4))					
	•	•				-		DAGE TOTAL

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

0.00

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 Candi	date		Re _l Fro	oorting P m:	eriod	To	o:	
					DATE			AMOUNT
Full Name of Contributor				МО	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Code (Plus 4)					

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

PAGE TOTAL \$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	Period				
			From:			То:		
				DA	TE		А	MOUNT
Full Name of Contributing Committee				мо	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Cod	e (Plus 4)					
								PAGE TOTAL
Enter Grand Total of Part C on Scho	edule I, Detailed Sun	nmary Pa	age, Sectio	n 3.			\$	0.00

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			Rep	orting Pe	riod				
			Fron	n:		То	:		
				D/	ATE		А	MOUNT	
Full Name of Contributor				МО	DAY	YEAR			
Mailing Address							\$	C	0.00
City	State	Zip Code (Plus	s 4)						
Employer Name				Occupat	ion				
Employer Mailing Address/Principal Plac Business	e of	City			State		Zip Coo	de (Plus 4)	
Enter Grand Total of Part C on Sche	dule I, Detailed Su	ımmary Page,	Section	on 3.				PAGE TOTAL	
						_	•	0.00	0

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 Can	didate		Report	ting Perio	od			
			From:			To:		
				D	ATE			AMOUNT
Full Name		-		МО	DAY	YEAR		-
Mailing Address							\$	0.00
City	State	Zip Code (Plus 4)					
Receipt Description								
Enter Grand Total of Part E on S	Schedule I Detailer	d Summary Page	Section	4		[P	PAGE TOTAL
zne. Grana rotar or r art z on o	renedure 1/ Detaned	· Summary rage,	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>1/1/2017</u> To:	12/31/2017
1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS P	PER CONTRIBUTOR		
TOTAL for the Reporting Pe	eriod (1)	\$	0.00
2. IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.01 TO \$250.00 (FROM PAR	T F)		
TOTAL for the Reporting Pe	eriod (2)	\$	0.00
3. IN-KIND CONTRIBUTION RECIEVED - VALUE OVER \$250.00 (FROM PART G)			
TOTAL for the Reporting Pe	eriod (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,	•	\$	0.00

SCHEDULE II PART F IN-KIND CONTRIBUTIONS RECEIVED

VALUE OF \$50.01 TO \$250.00

Name of Filing Committee or Candid	ate		Reportin	g Period			
			From:			То:	
				DATE			AMOUNT
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 S	chedule II, In-Kir	nd Contributions Deta	iled Sun	ımary Pa	ge,		PAGE TOTAL
Section 2.						\$	0.00

SCHEDULE II PART G IN-KIND CONTRIBUTIONS RECEIVED

VALUE OVER \$250.00

Name of Filing Committee or Candidate	1				Re	porting l	Period			
					Fro	om:		To:		
							DATE			AMOUNT
Full Name of Contributor						мо	DAY	YEAR		
Mailing Address									- \$	0.00
City	State		Zip Code(I	Plus 4)						
Employer of Contributor						Occupa	ition			
Employer Mailing Address/Principal Pla Business	ce of	City		State		Zip 4)	Code(Plus	Descr	iptio	n of Contribution
Enter Grand Total of Part G on Sch Summary Page, Section 3.	nedule II, I	in-Kind	Contributi	ons De	etaile	ed				PAGE TOTAL 0.00

SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or C	Candidate		Reporti	ng Period			
NRA VICTORY FUND			From	1/	1/2017	То:	12/31/2017
				DATE			AMOUNT
To Whom Paid The New Frontier Fund			мо	DAY	YEAR		
Mailing Address P.O. Box 4	13		4	7	2017	\$	1,000.00
City Harrisburg	State PA	Zip Code (Plus 4) 17108		otion of Exp Contributio			
To Whom Paid Friends of Barry Jozwiak			мо	DAY	YEAR		
Mailing Address 590 Grang	e Road		4	7	2017	\$	250.00
City Bernville	State PA	Zip Code (Plus 4) 19506	-	otion of Exp			
To Whom Paid Camera for Senate	·		мо	DAY	YEAR		
Mailing Address 127 Crestv	iew Manor		4	18	2017	\$	500.00
City Monogahela	State PA	Zip Code (Plus 4) 15063	-	otion of Exp			
To Whom Paid Friends of Jake Corman			МО	DAY	YEAR		
Mailing Address P.O. Box 4	21		8	30	2017	\$	1,000.00
City Bellefonte	State PA	Zip Code (Plus 4) 16823	ı	otion of Exp			
To Whom Paid Camera for Senate			МО	DAY	YEAR		
Mailing Address 127 Crestv	iew Manor		8	30	2017	\$	500.00
City Monogahela	State	Zip Code (Plus 4)	Descrip	otion of Exp	enditure		

15063

Direct Contribution

PA

To Whom Paid Friends of Mike Turzai	мс	ю	DAY	YEAR		
Mailing Address P.O. Box 721		10	24	2017	\$	1,000.00
wextoru			tion of Exp			
To Whom Paid Team Gillespie	мо	10	DAY	YEAR		
Mailing Address 5225 Picking Road		10	24	2017	\$	300.00
TOIK			tion of Exp			
To Whom Paid Citizens for John Yudichak	мс	10	DAY	YEAR		
Mailing Address P.O. Box 545		10	24	2017	\$	500.00
narrisburg			t ion of Exp ontributio			
		-				
To Whom Paid Friends of Kurt Masser	мс	ю	DAY	YEAR		
	мо	12	DAY 7	YEAR 2017	\$	300.00
Friends of Kurt Masser Mailing Address P.O. Box 412 City Harrisburg State Zip	p Code (Plus 4) De	12 escript		2017 penditure	\$	300.00
Friends of Kurt Masser Mailing Address P.O. Box 412 City Harrisburg State Zip	p Code (Plus 4) De	12 Pescript	7 tion of Exp	2017 penditure	\$	300.00
Friends of Kurt Masser Mailing Address P.O. Box 412 City Harrisburg State Zip PA 17 To Whom Paid	p Code (Plus 4) 7108 De	12 Pescript	7 t ion of Exp ontributio	2017 penditure	\$	300.00 250.00
Friends of Kurt Masser Mailing Address P.O. Box 412 City Harrisburg State PA 17 To Whom Paid Elect Bill Kortz Committee Mailing Address 514 Ridgeview Drive City Dravosburg State Zip	p Code (Plus 4) 7108 MC p Code (Plus 4) p Code (Plus 4) De	12 Pescript irect C	7 tion of Exp ontributio	2017 penditure n YEAR 2017		
Friends of Kurt Masser Mailing Address P.O. Box 412 City Harrisburg State PA 17 To Whom Paid Elect Bill Kortz Committee Mailing Address 514 Ridgeview Drive City Dravosburg State Zip	p Code (Plus 4) 7108 MC p Code (Plus 4) p Code (Plus 4) De	12 Description 12 Description 12 Description	7 tion of Exp ontributio DAY 19 tion of Exp	2017 penditure n YEAR 2017		
Friends of Kurt Masser Mailing Address P.O. Box 412 City Harrisburg State PA 17 To Whom Paid Elect Bill Kortz Committee Mailing Address 514 Ridgeview Drive City Dravosburg State Zip PA 15 To Whom Paid	p Code (Plus 4) 7108 MC p Code (Plus 4) p Code (Plus 4) De Dir	12 Description 12 Description 12	tion of Expontributio DAY 19 tion of Expontributio	2017 Penditure n YEAR 2017 Penditure n		

						1700	GE 13	
To Whom Paid Prolist, Inc.				DAY	YEAR			
Mailing Address 4510 Buckeystown Pike, Suite M				21	2017	\$	42.70	
City Frederick	State MD	Zip Code (Plus 4) 21704	Description of Expenditure InKind - Shipping & Handling - SRCC					
To Whom Paid Prolist, Inc.				DAY	YEAR			
Mailing Address 4510 Buckeystown Pike, Suite M				29	2017	\$	48.70	
City Frederick	State MD	Zip Code (Plus 4) 21704	Description of Expenditure InKind - Shipping & Handling - Camera Bartolotta					
To Whom Paid Friends of Becky Corbin			МО	DAY	YEAR			
Mailing Address P.O. Box 412			4	18	2017	\$	250.00	
City Harrisburg	State PA	Zip Code (Plus 4) 17108	Description of Expenditure Direct Contribution					
To Whom Paid Friends of Ron Marsico			МО	DAY	YEAR			
Mailing Address 4320 Crestview Road			5	19	2017	\$	500.00	
City Harrisburg	State PA	Zip Code (Plus 4) 17112	Description of Expenditure Direct Contribution					
To Whom Paid Senate Republican Campaign Committee				DAY	YEAR			
Mailing Address P.O. Box 792			7	6	2017	\$	1,000.00	
City Harrisburg	State PA	Zip Code (Plus 4) 17108	Description of Expenditure Direct Contribution					
To Whom Paid NRA Institute for Legislative Action				DAY	YEAR		_	
NRA Institute for Legislative	Action							
Mailing Address	Action aples Mill Road		7	21	2017	\$	315.00	

To Whom Paid Friends of Mark Keller			мо	DAY	YEAR			
Mailing Address 6441 Waggoners Gap Road				19	2017	\$	375.00	
City Landisburg	State PA	Zip Code (Plus 4) 17040	Description of Expenditure Direct Contribution					
To Whom Paid NRA Institute for Legislative Action			МО	DAY	YEAR			
Mailing Address 11250 Waples Mill Road			9	29	2017	\$	210.00	
City Fairfax	State VA	Zip Code (Plus 4) 22030	Description of Expenditure InKind - NRA logo hats - Camera Bartolotta					
Enter Grand Total of Evnen	ditures on Page 1. Po	nort Cover Page Item D	•				PAGE TOTAL	
Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.						\$	9,341.40	