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 :	on 8400	0418			Rep File			CAND	IDATE		СОМ	4ITTEE	✓	LOBI	BYIST		
Name of Filing C	ommittee, Candid	late or L	obbyist:		NRA	VIC	CTORY	/ FUND					_				
Street Address:	11250 WAPL	ES MILL	ROAD														
City:	FAIRFAX							State:	VA			Zip Cod	le: 22	2030-0	000		
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDAY PRIMARY	PRE	- 2		30 DA PRIMA		POST-	3.		AMENDM REPORT		Yes	No	•	/
(place X to the right of	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDAY ELECTION	PRE	- 5	. X	30 DA ELECT		POST-	6.		TERMINA REPORT		Yes	No	•	\
report type)	ANNUAL REPORT	7.	Year 2021					IG METH CHECK (PAPER DISK			DISKE	TTE	
Name of Office S	Sought by Candida	ite:	•					DATE (OF ELE	CTIC	N	District Office Party Cod Number Code			ty Code	Count	ty
								МО	DAY	YI	EAR	- rumber	code	<u> </u>		couc	
								1:	L	2 2021 (SEE INSTRUCTIONS FO				ONS FOR C	ODES)		
	Receipts and	МО	DAY Y	/EAR				МО	DAY	Y	EAR	FOR OFFICE USE ONLY					
Expenditures	trom:		9 14	2	021	Т	0	10		18	2021						
A. Amount Bro	ught Forward Fro	m Last R	eport				\$				0.00						
B. Total Moneta	ary Contributions	And Rec	eipts (From S	Sche	dule	I)	\$				250.00						
C. Total Funds	Available (Sum O	f Lines A	and B)				\$:	250.00						
D. Total Expend	ditures (From Sch	edule II	I)				\$			2	250.00	50.00					
E. Ending Cash	Balance (Subtra	t Line D	From Line C))			\$				0.00	0.00					
F. Value Of In-	Kind Contribution	s Receiv	ed (From Sch	edu	le II))	\$				0.00						
G. Unpaid Debt	s And Obligations	(From S	Schedule IV)				\$				0.00			•			
			,	AFF	IDA	VI	ΓSE	CTION									
PART I - If this is	s a Committee rep	ort, trea	surer sign he	ere. 1	If this	s is	a Can	ndidate ı	eport,	candi	date sig	ın here.					
I swear (or affirm) correct and comple	that this report, incete.	luding the	e attached sche	dules	filed	on	paper (or by elec	tronic m	edium	, are to t	he best o	f my kno	wledge	and belie	ef , tru	1e,
Sworn to and subs	cribed before me th day of	s	20							S	Signature	of Perso	n Submit	ting Rep	ort		
	Signate	ıre					-					Prin	ted Name	e			_
My Commission Ex	cpires						_					Ema	il				
	МО	D	AY	YR					Ar	ea Cod	le	Daytim	e Teleph	one Nu	mber		
Part II- If this is	a report of a can	didate's	authorized C	omn	nittee	e, Ca	andida	ate shal	sign h	ere.							
I swear (or affirm) No 320) as amende	that to the best of ed.	my knowl	edge and belief	this	politi	cal	commi	ittee has	not viola	ted ar	ıy provis	ions of th	e act of J	une 3,1	937 (P.L.	. 1333	i,
Sworn to and subsc	ribed before me this	1									S	ignature o	of Candid	ate			-
	day of —— ————						-					Printe	d Name				-
	Signature						-										_
My Commission Exp	ires											Ema					
	МО	D	AY	YR			•		Area	Code		Da	aytime T	elephon	e Numbe	er	·

SCHEDULE I CONTRIBUTIONS AND RECEIPTS

Detailed Summary Page

Name of Filing Committee or Candidate	Reporting	g Period				
NRA VICTORY FUND	From:	9/14/202	<u>1</u> To:	10/18/2021		
1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor						
TOTAL for the Reporting) Period	(1)	\$	250.00		
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)	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		
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 an totals from Boxes 1,2,3 and 4; also enter this amount on Page1, Report Cover Pa			\$	250.00		

PART A

CONTRIBUTIONS RECEIVED FROM POLITICAL COMMITTEES

\$50.01 TO \$250.00

	this Part to itemize only with an aggregate valu								
Name of Filing Comm	nittee or Candidate		Reporting Period						
			From:			То	:		
		<u> </u>			DATE			AMOUNT	
Full Name of Contributi	ing Committee			МО	DAY	YEAR			
Mailing Address							\$	0.00	
City	State	Zip Code (Plus 4)						
	•	·			•	•	$\overline{}$	DACE TOTAL	

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

PAGE TOTAL \$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 Fining Committee of Candidate			Reporting Period From: To:					
			From: To):	
					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 Candi	ame of Filing Committee or Candidate Rep		Reporting	Period				
			From:			То:		
				DA	TE		Α	MOUNT
Full Name of Contributing Commit	tee			мо	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Cod	e (Plus 4)					
								PAGE TOTAL
Enter Grand Total of Part C on S	Schedule I, Detail	ed Summary 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.)

ame of Filing Committee or Candidate		Rep	orting Pe	riod				
			Fror	n:		To) :	
				D	ATE		А	MOUNT
Full Name of Contributor				мо	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Code (Plu	s 4)					
Employer Name		•		Occupa	tion		•	
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 S	ummary Page	Section	on 3.			\$	PAGE TOTAL 0.00

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 C	Candidate		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 o	on Schedule I. Detailed	d Summary Page.	Section	4.			PAGE TOTA	ıL
		· • • • • • • • • • • • • • • • • • • •					\$ C	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>9/14/2021</u> To:	<u>10/18/2021</u>					
1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS PER CONTRIBUTOR								
TOTAL for the Reporting Pe	eriod (1)	\$	0.00					
. IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.01 TO \$250.00 (FROM PART 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		Reporting	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 Sum	mary Pag	ле Г		PAGE TOTAL
Section 2.	incudic 11, 111 Kii	ia contributions beta	nea Sam	illial y I as	, ,		PAGE TOTAL
						\$	0.00

SCHEDULE II PART G IN-KIND CONTRIBUTIONS RECEIVED

VALUE OVER \$250.00

Name of Filing Committee or Candidate	•				Re	porting P	Period			
					Fro	om:		To:		
							DATE			AMOUNT
Full Name of Contributor						мо	DAY	YEAR		
Mailing Address									\$	0.00
City	State		Zip Code(F	Plus 4)						
Employer of Contributor						Occupat	tion			
Employer Mailing Address/Principal Pla Business	ce of	City		State		Zip 4)	Code(Plus	Descri	ption o	f Contribution
Enter Grand Total of Part G on Sci	nedule II, 1	In-Kind	Contributi	ons De	taile	ed				PAGE TOTAL
Summary Page, Section 3.	-, -									0.00

SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate	Reporting	g Period		
NRA VICTORY FUND	From	9/14/2021	То:	<u>10/18/2021</u>
		DATE		AMOUNT

				DATE			AMOUNT	
To Whom Paid Friends of Andrew Lewis	riends of Andrew Lewis				YEAR			
Mailing Address 4514 ELWILL DRIVE			9	14	2021	\$	250.00	
City HARRISONBURG	State PA	Zip Code (Plus 4) 17112	Description of Expenditure Direct Contribution					
Enter Grand Total of Expendit	er Grand Total of Expenditures on Page 1, Report Cover Page, Item D.						250.00	