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)418			Repo Filed			CANDI	DATE		СОМІ	MITTEE	~	LUB	Dil		
Name of Filing C	ommittee, Candid	ate or L	obbyist:		NRA V	'ICTO	RY F	UND									
Street Address:	11250 WAPLE	S MILL	ROAD				_										
City:	FAIRFAX						St	ate:	VA			Zip Co	de: 2	2030-0	0000		
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDA PRIMARY	Y PRE-	- 2.)		DAY MARY		POST-	3.		AMENDN REPORT		Yes	✓ No)	
(place X to the right of	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDA ELECTION	Y PRE	5.	30 [ELE	DAY CTIO		POST-	6.		TERMINA REPORT		Yes	No	· \	
report type)	ANNUAL REPORT	7.	Year 2022					METHO				PAPER		\mathbb{V}	DISKI	TTE	
Name of Office S	ought by Candida	te:	-				D	ATE O	F ELE	CTIC	N	District Number	Office Code	Pa	rty Code	Count	,
							M	0	DAY	YI	AR			,			
								11		8	2022		(SEE II	NSTRUCT	ONS FOR	CODES)	
Summary of Expenditures	Receipts and	МО	DAY	YEAR			M	0	DAY	ΥI	AR	FC	OR OFFI	CE USE	ONLY		
			3 29	20	022	то		5		2	2022]					
A. Amount Bro	ught Forward Froi	m Last R	eport				\$				0.00						
B. Total Moneta	ary Contributions	And Rec	eipts (Fron	n Sche	dule I)	\$			2,0	00.00						
C. Total Funds	Available (Sum O	f Lines A	and B)				\$			2,0	00.00						
D. Total Expend	ditures (From Sch	edule II	I)				\$			2,0	00.00						
E. Ending Cash	Balance (Subtrac	t Line D	From Line	C)			\$				0.00	-					
F. Value Of In-	Kind Contribution	s Receiv	ed (From S	chedul	le II)		\$				0.00	-					
G. Unpaid Debt	s And Obligations	(From S	Schedule IV	/)			\$				0.00			'			_
				AFF	IDAV	'IT S	ECT	ΓΙΟΝ									
	a Committee rep	-	_								_						
correct and comple	that this report, inc ete.	luding the	e attached sc	hedules	s filed o	n pape	er or t	by elect	ronic m	edium	, are to 1	the best o	of my kno	owledge	and bel	ief , true	à
Sworn to and subs	cribed before me this day of	s	20							S	ignature	of Perso	n Submi	tting Re	port		
	Signatu	ıre				_						Prin	ted Nam	ie			-
My Commission Ex	pires											Ema	il				.
	МО	D	AY	YR					Are	ea Coc	le	Daytin	ne Telep	hone Nu	ımber		╛
Part II- If this is	a report of a can	didate's	authorized	Comm	nittee,	Candi	idate	shall:	sign he	ere.							
No 320) as amende		ny knowl	edge and beli	ief this	politica	al com	mitte	e has n	ot viola	ted an	y provis	ions of th	e act of :	June 3,1	.937 (P.I	L. 1333,	
Sworn to and subsc	ribed before me this day of		20								s	ignature	of Candid	date			
	<u> </u>											Printe	ed Name				٠
My Commission Exp	Signature ires											Ema	iil				.
	мо	D	AY	YR		_			Area	Code		D	aytime '	Telepho	ne Numi	per	

SCHEDULE I CONTRIBUTIONS AND RECEIPTS

Detailed Summary Page

Name of Filing Committee or Candidate	Reporting	g Period		
NRA VICTORY FUND	From:	3/29/202	<u>2</u> To:	5/2/2022
1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor				
TOTAL for the Reporting) Period	(1)	\$	2,000.00
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)			\$	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 an totals from Boxes 1,2,3 and 4; also enter this amount on Page1, Report Cover Pa			\$	2,000.00

PART A

CONTRIBUTIONS RECEIVED FROM POLITICAL COMMITTEES

\$50.01 TO \$250.00

	this Part to itemize onl with an aggregate value		\$2) in the			
Nume of Fining Comm		From:			То	:		
					DATE			AMOUNT
Full Name of Contribut	ing Committee			МО	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Code (Plus 4))					
	!	I			<u> </u>			DAGE 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 Filing Committee or Candida	ite		Rep	oorting P	eriod			
			Fro	m:		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:		To	o:	
				D	ATE		АМ	OUNT
Full Name of Contributor				мо	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Code (Plus	5 4)					
Employer Name				Occupa	tion			
Employer Mailing Address/Principal Plac Business	e of	City			State		Zip Code	e (Plus 4)
Enter Grand Total of Part C on Sche	dule I, Detailed Su	ummary Page,	Section	on 3.			PA \$	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	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. Detaile	d Summary Page	Section	4			,	PAGE TOTAL
	m Schedule 1, Betailet	<i>z</i> 50a. y 1 dgc,	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 Per	iod	
NRA VICTORY FUND	From:	3/29/2022 To :	5/2/2022
1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS P	PER CONTRIBUTO	R	
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 Candidat	:e		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 Sch	andula II. In-Kir	nd Contributions Data	ilad Sum	mary Pag			DACE TOTAL
Section 2.	iedule II, III-KII	ia contributions Deta	iiieu Suiii	iliai y Pag	, je,		PAGE TOTAL
						\$	0.00

SCHEDULE II PART G IN-KIND CONTRIBUTIONS RECEIVED

VALUE OVER \$250.00

Name of Filing Committee or Candidate					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 Plac Business	ce of	City		State		Zip 4)	Code(Plus	Descr	iption	of Contribution
Enter Grand Total of Part G on Sch Summary Page, Section 3.	edule II, I	in-Kind	Contributi	ons De	etaile	ed				PAGE TOTAL 0.00

STATEMENT OF EXPENDITURES

Name of Filing Committee or	Candidate		Reportir	ng Period			
NRA VICTORY FUND			From	<u>3/29</u>	9/2022	То:	5/2/2022
				DATE			AMOUNT
To Whom Paid Keith Gillespie (Team Gillespi	ie)		МО	DAY	YEAR		
Mailing Address P.O. Box 412				27	2022	\$	500.00
City Harrisburg State Zip Code (Plus 4) PA 17108				otion of Exp			
To Whom Paid Martin Causer (Friends of Ma	rtin Causer)		МО	DAY	YEAR		
Mailing Address 430 Frank	klin Church Road		4	12	2022	\$	500.00
City Dillsburg	State PA	Zip Code (Plus 4) 17019	1 .	otion of Exp			
To Whom Paid PA House Republican Campai	ign Committee		МО	DAY	YEAR		
Mailing Address P.O. Box	11787		4	27	2022	\$	1,000.00
City Harrisburg State Zip Code (Plus 4) PA 17108			1	otion of Exp Contributio			
							PAGE TOTAL

Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.

2,000.00