### **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			CAND	DATE		соми	<b>MITTEE</b>	<b>✓</b>	LOBI	BYIST		
Name of Filing C	Committee, Candid	ate or L	obbyist:		NRA F	Pol	itical	Victory F	und		•						
Street Address:	11250 WAPLE	S MILL	ROAD														
City:	FAIRFAX							State:	VA			Zip Cod	le: 22	2030			
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDAY PRIMARY	/ PRE-	- 2.	х	30 DA PRIMA		POST-	3.		AMENDM REPORT?		Yes	No	•	<b>\</b>
(place X to the right of	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDAY ELECTION	/ PRE	- 5.		30 DA ELECT		POST-	6.		TERMINA REPORT?		Yes	No		<b>/</b>
report type)	ANNUAL REPORT	7.	<b>Year</b> 2010					IG METH CHECK O				PAPER		<b>/</b>	DISKE	TTE	
Name of Office S	- Sought by Candida	te:			-			DATE C	F ELE	CTIC	N	District Number	Office Code	Par	ty Code	Coun	
								МО	DAY	YI	AR		10000			-	
								11		2	2010		(SEE IN	STRUCTI	ONS FOR C	ODES)	)
	Receipts and	МО	DAY	YEAR				МО	DAY	ΥI	EAR	FO	R OFFI	CE USE	ONLY		
Expenditures	i from:		1 1	20	010	T	0	5	5	3	2010						
A. Amount Bro	ught Forward Fron	n Last R	eport				\$				0.00						
B. Total Moneta	ary Contributions	And Rec	eipts (From	Sche	dule I	()	\$			3,:	100.00						
C. Total Funds	Available (Sum Of	Lines A	and B)				\$			3,:	100.00						
D. Total Expend	ditures (From Sch	edule II	I)				\$			3,1	100.00						
E. Ending Cash	Balance (Subtract	t Line D	From Line C	<b>E)</b>			\$				0.00						
F. Value Of In-	Kind Contributions	Receiv	ed (From Sc	hedul	le II)		\$				0.00						
G. Unpaid Debt	s And Obligations	(From S	Schedule IV	)			\$				0.00			•			
				AFF	IDΑ\	/IT	ΓSE	CTION									
	s a Committee rep	•	-						•		_						
I swear (or affirm) correct and complete	) that this report, incl ete.	uding the	attached sch	edules	s filed o	on į	paper (	or by elect	tronic m	edium	, are to t	the best o	f my knov	wledge	and belie	ef , tru	ue.
Sworn to and subs	cribed before me this day of	i	20							9	Signature	of Perso	n Submit	ing Rep	oort		_
	Signatu	ra					- -					Prin	ted Name				-
My Commission Ex	_								-			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 cand	lidate's	authorized	Comm	nittee,	, Ca	andida	ate shall	sign h	ere.							
I swear (or affirm) No 320) as amende	that to the best of n	ny knowle	edge and belie	ef this	politic	al	commi	ittee has r	not viola	ted an	y provis	ions of the	e act of J	une 3,1	937 (P.L.	. 1333	3,
Sworn to and subsc	ribed before me this								-		s	ignature o	of Candida	ate			-
	day of						-					Printe	d Name				-
	Signature						-										_
My Commission Exp	_											Ema	il				
	МО	D	AY	YR			•		Area	Code		Da	aytime T	elephor	e Numbe	er	-

# SCHEDULE I CONTRIBUTIONS AND RECEIPTS

**Detailed Summary Page** 

Name of Filing Committee or Candidate	Reporting	Period		
NRA Political Victory Fund	From:	1/1/201	<u>0</u> To:	5/3/2010
1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor				
TOTAL for the Reporting	Period	(1)	\$	3,100.00
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 antotals from Boxes 1,2,3 and 4; also enter this amount on Page1, Report Cover Page			\$	3,100.00

#### **PART A**

### **CONTRIBUTIONS RECEIVED FROM POLITICAL COMMITTEES**

\$50.01 TO \$250.00

	this Part to itemize onl with an aggregate value		\$2		) in the			
						То:		
					DATE			AMOUNT
Full Name of Contribut	ing Committee			МО	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Code (Plus 4)	)					
	<b>!</b>	<b>I</b>	!		<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	Candidate		Rep	oorting P	eriod			
			Fro	m:		To	<b>:</b>	
					DATE		А	MOUNT
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				
				Fror	n:		To	o:		
					D	ATE			AMOUNT	
Full Name of Contributor					мо	DAY	YEAR			
Mailing Address								\$		0.00
City	State	Zi	p Code (Plus	<b>4</b> )						
Employer Name		•			Occupa	tion	•	•		
Employer Mailing Address/Principal Pla Business	ce of		City			State		Zip C	ode (Plus	4)
Enter Grand Total of Part C on Scho	edule I, Detail	led Sumr	mary Page,	Section	on 3.			\$	PAGE TO	<b>TAL</b> 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>	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	d	
NRA Political Victory Fund	From:	<u>1/1/2010</u> <b>To</b> :	<u>5/3/2010</u>
1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS P	ER 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 Candidat	:e		Reporting	g Period			
			From:			То:	
				DATE			AMOUNT
Full Name of Contributor			МО	DAY	YEAR		
Mailing Address						<b>\$</b>	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					Reporting	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					Occupa	ation			
Employer Mailing Address/Principal Plad Business	ce of	City	Sta	ite	Zip 4)	Code(Plus	Descri	ption	of Contribution
Enter Grand Total of Part G on Sch	edule II, I	n-Kind	Contributions	Deta	ailed				PAGE TOTAL
Summary Page, Section 3.									0.00

## STATEMENT OF EXPENDITURES

Name of Filing Committee or C	andidate		Reportir	ng Period			
NRA Political Victory Fund			From	1/	1/2010	То:	5/3/2010
				DATE			AMOUNT
<b>To Whom Paid</b> Elect Bill Kortz Committee			мо	DAY	YEAR		
Mailing Address 514 Ridgev	iew Drive		4	26	2010	\$	250.00
<b>City</b> Dravosburg	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 15034		otion of Exp Contributio		2	
<b>To Whom Paid</b> Robbins for Senate Committee			МО	DAY	YEAR		
Mailing Address 353 Greenville Road				26	2010	\$	500.00
City Greenville State PA Zip Code (Plus 4) 16125				otion of Exp Contributio		2	
<b>To Whom Paid</b> Friends of Rich Alloway			мо	DAY	YEAR		
Mailing Address 62 S. Main	Street		4	26	2010	\$	500.00
<b>City</b> Chambersburg	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 17201		otion of Exp Contributio		2	
<b>To Whom Paid</b> Friends of Jim Wansacz			МО	DAY	YEAR		
Mailing Address P.O. Box 20	06		4	26	2010	\$	500.00
City Old Forge / Taylor	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 18517		otion of Exp		2	
<b>To Whom Paid</b> Bill DeWeese Campaign Comm	nittee		МО	DAY	YEAR		
Mailing Address P.O. Box 5	ailing Address P.O. Box 513				2010	\$	250.00
<b>City</b> Harrisburg	State	Zip Code (Plus 4)	Descrip	otion of Exp	penditure	2	

17108

Direct Contribution

PA

To Whom Paid			мо	DAY	YEAR		
People for Pyle							
Mailing Address P.O. Box 227			4	26	2010	\$	500.00
City Ford City	State	Zip Code (Plus 4)	Description of Expenditure				
,	PA	16226	Direct Contribution				
To Whom Paid Committee to Elect Marc Gergely			МО	DAY	YEAR		
Mailing Address P.O. Box 221			4	26	2010	\$	350.00
City McKeesport	State	Zip Code (Plus 4)	Description of Expenditure				
	PA	15134	Direct Contribution				
To Whom Paid Citizens for Jim Christiana			МО	DAY	YEAR		
Mailing Address 368 Lincoln Avenue			4	26	2010	\$	250.00
City Beaver	State	Zip Code (Plus 4)	Description of Expenditure				
	PA	15009	Direct Contribution				
							PAGE TOTAL
Enter Grand Total of Expenditu	ures on Page 1, Re	eport Cover Page, Item D	•			\$	3,100.00