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			Rep File			CANDI	DATE		COMM	IITTEE	✓	LOBI	BYIST		
Name of Filing C	ommittee, Candid	ate or L	obbyist:	•	NRA	Pol	itical '	Victory F	und								
Street Address:	11250 WAPLE	S MILL	ROAD														
City:	FAIRFAX							State:	VA			Zip Cod	l e: 22	22030			
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDAY PRIMARY	/ PRE-	- 2	2.	30 DA PRIMA		POST-	3.		AMENDM REPORT?		Yes	No	•	/
(place X to the right of	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDAY	/ PRE	- 5	j.	30 DA ELECT		POST-	6. >	(TERMINA REPORT?		Yes	No		\
report type)	ANNUAL REPORT	7.	Year 2010					IG METHO				PAPER		/	DISKE	TTE	
Name of Office S	ought by Candida	te:	-			-		DATE 0	F ELE	CTI	ON	District Number	Office Code	Par	ty Code	Coun	
								МО	DAY	Y	/EAR			 			
								11		2	2010		(SEE IN	STRUCTI	ONS FOR C	ODES)	
	Immary of Receipts and MO DAY YEAR MO DAY YEAR									/EAR	FO	R OFFI	CE USE	ONLY			
Expenditures	penditures from: 1 1 2010 TO 11 22 2010									2010							
A. Amount Bro	ught Forward Fror	nt Forward From Last Report \$ 0.0								0.00							
B. Total Monet	Total Monetary Contributions And Receipts (From Schedule I) \$ 126,227.8								,227.88								
C. Total Funds Available (Sum Of Lines A and B) \$ 126,227.8									,227.88								
D. Total Expend	ditures (From Sch	edule II	I)				\$			1,	,001.47						
E. Ending Cash	Balance (Subtrac	Line D	From Line C	C)			\$			L25,	226.41						
F. Value Of In-	Kind Contributions	Receiv	ed (From So	hedu	le II))	\$				0.00						
G. Unpaid Debt	s And Obligations	(From S	Schedule IV)			\$			125,	,226.41						
				AFF	IDA	VI	ΓSE	CTION									
PART I - If this is	a Committee rep	ort, trea	surer sign h	nere. 1	[f this	s is	a Can	ndidate re	eport, o	and	lidate sig	n here.					
I swear (or affirm) correct and comple	that this report, incl ete.	uding the	attached sch	edules	filed	on	paper o	or by elect	ronic m	ediur	m, are to t	he best of	f my knov	wledge	and belie	ef , tru	1e
Sworn to and subs	cribed before me this day of	•	20								Signature	of Persoi	1 Submit	ting Rep	oort		
	Signatu	re	_				- -					Print	ted Name	•			-
My Commission Ex	_	. •										Emai	il				-
	мо	D	AY	YR			-		Are	ea Co	ode	Daytim	e Teleph	one Nu	mber		
Part II- If this is	a report of a cand	lidate's	authorized	Comn	nittee	e, Ca	andida	ate shall	sign he	ere.							
I swear (or affirm) No 320) as amende		ny knowle	edge and belie	ef this	politi	ical	commi	ittee has n	ot viola	ted a	ıny provisi	visions of the act of June 3,1937 (P.L. 1333,					
Sworn to and subsc	ribed before me this										Si	gnature o	f Candid	ate			-
	day of						-					Printed Name					
	Signature						-										_
My Commission Exp	ires											Emai					
	МО	D	AY	YR			•		Area	Code	•	Da	nytime T	elephor	e Numbe	er	

SCHEDULE I CONTRIBUTIONS AND RECEIPTS

Detailed Summary Page

Name of Filing Committee or Candidate	Reporting	g Period		
NRA Political Victory Fund	From:	1/1/201	<u>0</u> To:	11/22/2010
1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor				
TOTAL for the Reporting	Period	(1)	\$	125,977.88
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)	\$	250.00
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			\$	126,227.88

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		Re	porting	Period			
			Fre	om:		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.

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 Cand	Name of Fining Committee of Candidate			Reporting Period					
			Fro	m:		To):		
					DATE		АМ	OUNT	
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:		То):	
					D	ATE		A	MOUNT
Full Name of Contributor					мо	DAY	YEAR		
Mailing Address								\$	0.00
City	State	Zi	p Code (Plus	4)					
Employer Name	•	•			Occupa	tion		•	
Employer Mailing Address/Principal Pla Business	ce of		City			State		Zip Cod	le (Plus 4)
Enter Grand Total of Part C on Sch	edule I, Deta	iled Sumr	mary Page,	Section	on 3.			P	O.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	Candidate Reporting Period					
NRA Political Victory Fund	From:	<u>1/1/2010</u> To :	11/22/2010			

			D	ATE		AMOUNT
Full Name Committee to Elect Marc Gerge	У		мо	DAY	YEAR	
Mailing Address P.O. Box 221				24	2010	\$ 250.00
City McKeesport	State PA	Zip Code (Plus 4) 15134	10	31	2010	
Receipt Description Void ch	eck dated 10/10/2010					

Enter Grand Total of Part E on Schedule I, Detailed Summary Page, Section 4.

PAGE TOTAL \$ 250.00

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	I	
NRA Political Victory Fund	From:	<u>1/1/2010</u> To:	11/22/2010
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		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	е				Re	porting	Period			
					Fro	om:		То:		
					•		DATE			AMOUNT
Full Name of Contributor						мо	DAY	YEAR		
Mailing Address									\$	0.00
City	State		Zip Code(I	Plus 4)						
Employer of Contributor	1		•			Occupa	ation			
Employer Mailing Address/Principal Pla Business	ace of	City		State		Zip 4)	Code(Plus	Descri	ption	of Contribution
Enter Grand Total of Part G on Sc Summary Page, Section 3.	hedule II, I	in-Kind	Contributi	ons De	etaile	ed				PAGE TOTAL 0.00

STATEMENT OF EXPENDITURES

Name of Filing Committee or Co	andidate		Reporti	ng Period				
NRA Political Victory Fund			From	<u>1/:</u>	1/2010	То:	11/22/2010	
		l		DATE			AMOUNT	
To Whom Paid Federal Capitol Communication	ns Corporation		мо	DAY	YEAR			
Mailing Address 1120 G Street, NW, Suite 600				19	2010	\$ \$	437.50	
City Washington	Washington State Zip Code (Plus 4) DC 20005			Description of Expenditure Independent Exp - Graphic Arts Design - Support Tom Corbett for Gov				
To Whom Paid National Rifle Association of An	nerica		мо	DAY	YEAR			
Mailing Address 11250 Wap	les Mill Road		10	27	2010	\$	563.97	
City Fairfax	State VA	Zip Code (Plus 4) 22030	-				ting Tom Corbet	
Enter Grand Total of Expend	ditures on Page 1, Re	port Cover Page, Item [).				PAGE TOTAL	

1,001.47

STATEMENT OF UNPAID DEBTS

Use this Section to itemize all unpaid debts and obligations which are outstanding at the end of the reporting period

Name of Filing Committee or Candidate			Reporting Period						
NRA Political Victory Fund			From:		1/1/2010	То:		11/22/2010	
				DATE				Outstanding Balance of Debt	
Name of Creditor Master Print, Inc.				МО	DAY	YEAR			
Mailing Address 8401 Terminal Road				10	18	2010	\$	10,731.14	
City Newington	State Zip Code (Plus 4) VA 22122			Description of Debt Independent Exp - Print Postcards - Supporting Tom Corbett for Gov					
				DATE				Outstanding Balance of Debt	
Name of Creditor Prolist, Inc.				МО	DAY	YEAR			
Mailing Address 8341 Beechcraft Avenue				10	18	2010	\$	108,976.30	
City Gaithersburg	State Zip Code (Plus 4) MD 20879			Description of Debt Independent Exp - Postage - Supporting Tom Corbett for Gov					
				DATE				Outstanding Balance of Debt	
Name of Creditor Prolist, Inc.				МО	DAY	YEAR			
Mailing Address 8341 Beechcraft Avenue				10	18	2010	\$	5,518.97	
City Gaithersburg	State MD	Zip Code (Plu 20879	us 4)	4) Description of Debt Independent Exp - Postca Corbett for Gov				ards - Supporting Tom	
Enter Grand Total of Unpaid Debts on Page 1, Report Cover Page, Item G.							\$	PAGE TOTAL 125,226.41	