

FEC FORM 3

REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full)

TYPE OR PRINT ▼

Example: If typing, type over the lines.

1 2 F E 4 M 5

Comstock Victory Fund 2018

ADDRESS (number and street)

PO Box 30844

Check if different than previously reported. (ACC)

Bethesda

MD

20824

CITY ▲

STATE ▲

ZIP CODE ▲

2. FEC IDENTIFICATION NUMBER ▼

C C00633347

3. IS THIS REPORT

NEW (N)

OR

AMENDED (A)

STATE ▼ DISTRICT

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:

April 15 Quarterly Report (Q1)

July 15 Quarterly Report (Q2)

October 15 Quarterly Report (Q3)

January 31 Year-End Report (YE)

Termination Report (TER)

(b) 12-Day PRE-Election Report for the:

Primary (12P) General (12G) Runoff (12R)

Convention (12C) Special (12S)

Election on MM / DD / YYYY in the State of

(c) 30-Day POST-Election Report for the:

General (30G) Runoff (30R) Special (30S)

Election on MM / DD / YYYY in the State of

5. Covering Period

MM / DD / YYYY 01 / 01 / 2017

through

MM / DD / YYYY 03 / 31 / 2017

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer

Marston, Chris, , ,

Signature of Treasurer

Marston, Chris, , ,

[Electronically Filed]

Date

MM / DD / YYYY 04 / 14 / 2017

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 52 U.S.C. §30109.

| | | | | | | | |
|-----------------|--|--|--|--|--|--|--|
| Office Use Only | | | | | | | |
|-----------------|--|--|--|--|--|--|--|

SUMMARY PAGE
of Receipts and Disbursements

FEC Form 3 (Revised 05/2016)

Write or Type Committee Name
Comstock Victory Fund 2018

Report Covering the Period: From: / / To: / /

| | COLUMN A This Period | COLUMN B Election Cycle-to-Date |
|---|-------------------------|------------------------------------|
| 6. Net Contributions (other than loans) | | |
| (a) Total Contributions (other than loans) (from Line 11(e)).... | 127100.00 | 127100.00 |
| (b) Total Contribution Refunds (from Line 20(d)) | 0.00 | 0.00 |
| (c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a))..... | 127100.00 | 127100.00 |
| 7. Net Operating Expenditures | | |
| (a) Total Operating Expenditures (from Line 17) | 16385.10 | 16385.10 |
| (b) Total Offsets to Operating Expenditures (from Line 14)..... | 0.00 | 0.00 |
| (c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a))..... | 16385.10 | 16385.10 |
| 8. Cash on Hand at Close of Reporting Period (from Line 27)..... | 49555.42 | |
| 9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)..... | 0.00 | |
| 10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)..... | 0.00 | |

For further information contact:

Federal Election Commission
999 E Street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3 (Revised 05/2016)

Write or Type Committee Name

Comstock Victory Fund 2018

Report Covering the Period: From: / / To: / /

| I. RECEIPTS | COLUMN A Total This Period | COLUMN B Election Cycle-to-Date |
|--|---------------------------------------|--|
| 11. CONTRIBUTIONS (other than loans) FROM: | | |
| (a) Individuals/Persons Other Than Political Committees | | |
| (i) Itemized (use Schedule A)..... | 123100.00 | 123100.00 |
| (ii) Unitemized | 0.00 | 0.00 |
| (iii) TOTAL of contributions from individuals | 123100.00 | 123100.00 |
| (b) Political Party Committees..... | 0.00 | 0.00 |
| (c) Other Political Committees (such as PACs)..... | 4000.00 | 4000.00 |
| (d) The Candidate | 0.00 | 0.00 |
| (e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d)).. | 127100.00 | 127100.00 |
| 12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES | 0.00 | 0.00 |
| 13. LOANS: | | |
| (a) Made or Guaranteed by the Candidate..... | 0.00 | 0.00 |
| (b) All Other Loans..... | 0.00 | 0.00 |
| (c) TOTAL LOANS (add Lines 13(a) and (b))..... | 0.00 | 0.00 |
| 14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.) | 0.00 | 0.00 |
| 15. OTHER RECEIPTS (Dividends, Interest, etc.) | 0.00 | 0.00 |
| 16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... | 127100.00 | 127100.00 |

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3 (Revised 05/2016)

PAGE 4 / 15

| II. DISBURSEMENTS | COLUMN A Total This Period | COLUMN B Election Cycle-to-Date |
|--|-------------------------------|------------------------------------|
| 17. OPERATING EXPENDITURES..... | 16385.10 | 16385.10 |
| 18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES | 61159.48 | 61159.48 |
| 19. LOAN REPAYMENTS: | | |
| (a) Of Loans Made or Guaranteed by the Candidate..... | 0.00 | 0.00 |
| (b) Of All Other Loans | 0.00 | 0.00 |
| (c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b))..... | 0.00 | 0.00 |
| 20. REFUNDS OF CONTRIBUTIONS TO: | | |
| (a) Individuals/Persons Other Than Political Committees | 0.00 | 0.00 |
| (b) Political Party Committees..... | 0.00 | 0.00 |
| (c) Other Political Committees (such as PACs)..... | 0.00 | 0.00 |
| (d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c))..... | 0.00 | 0.00 |
| 21. OTHER DISBURSEMENTS | 0.00 | 0.00 |
| 22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ► | 77544.58 | 77544.58 |

III. CASH SUMMARY

| | |
|---|-----------|
| 23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD..... | 0.00 |
| 24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3)..... | 127100.00 |
| 25. SUBTOTAL (add Line 23 and Line 24)..... | 127100.00 |
| 26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22)..... | 77544.58 |
| 27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25)..... | 49555.42 |

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 5 OF 15
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Comstock Victory Fund 2018

A. Full Name (Last, First, Middle Initial)
Anderson, Steven, C., ,
Mailing Address 9695 Mill Ridge Lane
City: Great Falls State: VA Zip Code: 22046
FEC ID number of contributing federal political committee: C
Name of Employer: National Assn. of Chain Drug Stores Occupation: President & CEO
Receipt For: Primary General Other (specify)
Election Cycle-to-Date: 6800.00

Date of Receipt: 03 / 06 / 2017
Transaction ID : SA11AI.4153
Amount of Each Receipt this Period: 6800.00
 Memo Item

B. Full Name (Last, First, Middle Initial)
Breaux, Paul, , ,
Mailing Address 8631 SE Royal Street
City: Hobe Sound State: FL Zip Code: 33455
FEC ID number of contributing federal political committee: C
Name of Employer: Breaux Vineyards Occupation: Owner
Receipt For: Primary General Other (specify)
Election Cycle-to-Date: 5400.00

Date of Receipt: 03 / 15 / 2017
Transaction ID : SA11AI.4153
Amount of Each Receipt this Period: 5400.00
 Memo Item

C. Full Name (Last, First, Middle Initial)
Freeman, John, K., ,
Mailing Address 1066 30th Street NW
City: Washington State: DC Zip Code: 20007
FEC ID number of contributing federal political committee: C
Name of Employer: Chesapeake Management Group Occupation: Chief Executive Officer
Receipt For: Primary General Other (specify)
Election Cycle-to-Date: 2700.00

Date of Receipt: 03 / 01 / 2017
Transaction ID : SA11AI.4151
Amount of Each Receipt this Period: 2700.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶ 14900.00
TOTAL This Period (last page this line number only).....▶

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

| | | | | |
|--------------------------------------|-----|--------------------------|-----|--------------------------|
| FOR LINE NUMBER: (check only one) | | PAGE 6 OF 15 | | |
| <input checked="" type="checkbox"/> | 11a | <input type="checkbox"/> | 11b | <input type="checkbox"/> |
| | 12 | <input type="checkbox"/> | 13a | <input type="checkbox"/> |
| | | <input type="checkbox"/> | 11c | <input type="checkbox"/> |
| | | | 13b | <input type="checkbox"/> |
| | | | 11d | <input type="checkbox"/> |
| | | | 14 | <input type="checkbox"/> |
| | | | | <input type="checkbox"/> |
| | | | | 15 |

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NAME OF COMMITTEE (In Full)
Comstock Victory Fund 2018

A. Full Name (Last, First, Middle Initial)
Johnson, Joyce, A., ,

Mailing Address 1176 Orlo Drive

| | | |
|----------------|-------------|-------------------|
| City McLean | State VA | Zip Code 22102 |
|----------------|-------------|-------------------|

FEC ID number of contributing federal political committee. **C**

| | |
|-----------------------------|-----------------------|
| Name of Employer Retired | Occupation Retired |
|-----------------------------|-----------------------|

Receipt For:
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
7500.00

Date of Receipt

| |
|-------------------------|
| M M / D D / Y Y Y Y Y Y |
| 03 / 24 / 2017 |

Transaction ID : SA11AI.4171

Amount of Each Receipt this Period
7500.00

Memo Item

B. Full Name (Last, First, Middle Initial)
Johnson, Robert, , ,

Mailing Address 1176 Orlo Drive

| | | |
|----------------|-------------|-------------------|
| City McLean | State VA | Zip Code 22102 |
|----------------|-------------|-------------------|

FEC ID number of contributing federal political committee. **C**

| | |
|---------------------------------------|-----------------------------|
| Name of Employer The Johnson Group | Occupation Film Producer |
|---------------------------------------|-----------------------------|

Receipt For:
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
7500.00

Date of Receipt

| |
|-------------------------|
| M M / D D / Y Y Y Y Y Y |
| 03 / 24 / 2017 |

Transaction ID : SA11AI.4169

Amount of Each Receipt this Period
7500.00

Memo Item

C. Full Name (Last, First, Middle Initial)
Saunders, Elizabeth, , ,

Mailing Address 5831 Bent Twig Road

| | | |
|----------------|-------------|-------------------|
| City McLean | State VA | Zip Code 22101 |
|----------------|-------------|-------------------|

FEC ID number of contributing federal political committee. **C**

| | |
|------------------------------------|--------------------------|
| Name of Employer Cassaday & Co. | Occupation Consultant |
|------------------------------------|--------------------------|

Receipt For:
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
5400.00

Date of Receipt

| |
|-------------------------|
| M M / D D / Y Y Y Y Y Y |
| 03 / 14 / 2017 |

Transaction ID : SA11AI.4155

Amount of Each Receipt this Period
5400.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

| |
|----------|
| 20400.00 |
|----------|

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

| | | | | |
|---|---|-------------------------------------|-------------------------------------|------------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | | PAGE 7 OF 15 | |
| | <input checked="" type="checkbox"/> 11a 12 | <input type="checkbox"/> 11b 13a | <input type="checkbox"/> 11c 13b | <input type="checkbox"/> 11d 14 |

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NAME OF COMMITTEE (In Full)
Comstock Victory Fund 2018

| | | | | |
|---|-------------|---|--|--|
| Full Name (Last, First, Middle Initial) A. Saunders, Sandy, , , | | | Date of Receipt M M / D D / Y Y Y Y Y Y 03 / 14 / 2017 | |
| Mailing Address 5831 Bent Twig Road | | | Transaction ID : SA11AI.4157 | |
| City McLean | State VA | Zip Code 22101 | Amount of Each Receipt this Period _____ 5400.00 | |
| FEC ID number of contributing federal political committee. C | | | <input type="checkbox"/> Memo Item | |
| Name of Employer Greenberg Traurig | | Occupation Shareholder | | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | Election Cycle-to-Date ▼ _____ 5400.00 | | |

| | | | | |
|---|-------------|--|--|--|
| Full Name (Last, First, Middle Initial) B. Virts, Sharon, D., , | | | Date of Receipt M M / D D / Y Y Y Y Y Y 03 / 16 / 2017 | |
| Mailing Address 43152 Laughing Quail Court | | | Transaction ID : SA11AI.4161 | |
| City Ashburn | State VA | Zip Code 20148 | Amount of Each Receipt this Period _____ 50000.00 | |
| FEC ID number of contributing federal political committee. C | | | <input type="checkbox"/> Memo Item | |
| Name of Employer Sharon D. Virts Foundation | | Occupation Director | | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | Election Cycle-to-Date ▼ _____ 50000.00 | | |

| | | | | |
|---|-------------|--|--|--|
| Full Name (Last, First, Middle Initial) C. Whitehead, Margaret, M., , | | | Date of Receipt M M / D D / Y Y Y Y Y Y 03 / 20 / 2017 | |
| Mailing Address 1124 Waverly Way | | | Transaction ID : SA11AI.4167 | |
| City McLean | State VA | Zip Code 22101 | Amount of Each Receipt this Period _____ 10800.00 | |
| FEC ID number of contributing federal political committee. C | | | <input type="checkbox"/> Memo Item | |
| Name of Employer Self-Employed | | Occupation Cultural Historian | | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | Election Cycle-to-Date ▼ _____ 10800.00 | | |

| | |
|---|----------------|
| SUBTOTAL of Receipts This Page (optional)..... ▶ | _____ 66200.00 |
| TOTAL This Period (last page this line number only)..... ▶ | _____ |

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Comstock Victory Fund 2018

A. Full Name (Last, First, Middle Initial)
Workman, Donald, A., ,

Mailing Address 6904 Georgetown Pike

City McLean State VA Zip Code 22101

FEC ID number of contributing federal political committee. **C**

Name of Employer Baker Hostetler Occupation Attorney

Receipt For:
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 5400.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 17 / 2017

Transaction ID : SA11AI.4163

Amount of Each Receipt this Period
 5400.00

Memo Item

B. Full Name (Last, First, Middle Initial)
Workman, Sandra, , ,

Mailing Address 6904 Georgetown Pike

City McLean State VA Zip Code 22101

FEC ID number of contributing federal political committee. **C**

Name of Employer Homemaker Occupation Homemaker

Receipt For:
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 5400.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 17 / 2017

Transaction ID : SA11AI.4165

Amount of Each Receipt this Period
 5400.00

Memo Item

C. Full Name (Last, First, Middle Initial)
Young, Andrea, , ,

Mailing Address 604 Boyle Lane

City McLean State VA Zip Code 22102

FEC ID number of contributing federal political committee. **C**

Name of Employer Homemaker Occupation Homemaker

Receipt For:
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 5400.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 28 / 2017

Transaction ID : SA11AI.4175

Amount of Each Receipt this Period
 5400.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 16200.00

TOTAL This Period (last page this line number only)..... ▶

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 9 OF 15
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
Comstock Victory Fund 2018

A. Full Name (Last, First, Middle Initial)
Young, M. Dendy, , ,

Mailing Address 604 Boyle Lane

City McLean State VA Zip Code 22102

FEC ID number of contributing federal political committee. C

Name of Employer Self-Employed Occupation Private Equity

Receipt For:
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
5400.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
03 / 28 / 2017

Transaction ID : SA11AI.4173

Amount of Each Receipt this Period
5400.00

Memo Item

B. Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

FEC ID number of contributing federal political committee. C

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt
M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

Memo Item

C. Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

FEC ID number of contributing federal political committee. C

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt
M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

Memo Item

| | |
|--|-----------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 5400.00 |
| TOTAL This Period (last page this line number only).....▶ | 123100.00 |

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

| | | | | |
|--------------------------------------|-------------------------------------|--|------------------------------------|-----------------------------|
| FOR LINE NUMBER: (check only one) | | PAGE 10 OF 15 | | |
| <input type="checkbox"/> 11a 12 | <input type="checkbox"/> 11b 13a | <input checked="" type="checkbox"/> 11c 13b | <input type="checkbox"/> 11d 14 | <input type="checkbox"/> 15 |

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NAME OF COMMITTEE (In Full)
Comstock Victory Fund 2018

A. Full Name (Last, First, Middle Initial)
National Association of Chain Drug Stores NACDS PAC

Mailing Address 1775 Wilson Boulevard
Suite 200

| | | |
|-------------------|-------------|-------------------|
| City Arlington | State VA | Zip Code 22209 |
|-------------------|-------------|-------------------|

FEC ID number of contributing federal political committee. **C** C00022368

| | |
|------------------|------------|
| Name of Employer | Occupation |
|------------------|------------|

Receipt For:
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
4000.00

Date of Receipt

| |
|-------------------------|
| M M / D D / Y Y Y Y Y Y |
| 03 / 09 / 2017 |

Transaction ID : SA11C.4148

Amount of Each Receipt this Period

| |
|---------|
| 4000.00 |
|---------|

Memo Item

B. Full Name (Last, First, Middle Initial)

Mailing Address

| | | |
|------|-------|----------|
| City | State | Zip Code |
|------|-------|----------|

FEC ID number of contributing federal political committee. **C**

| | |
|------------------|------------|
| Name of Employer | Occupation |
|------------------|------------|

Receipt For:
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt

| |
|-------------------------|
| M M / D D / Y Y Y Y Y Y |
|-------------------------|

Amount of Each Receipt this Period

| |
|--|
| |
|--|

Memo Item

C. Full Name (Last, First, Middle Initial)

Mailing Address

| | | |
|------|-------|----------|
| City | State | Zip Code |
|------|-------|----------|

FEC ID number of contributing federal political committee. **C**

| | |
|------------------|------------|
| Name of Employer | Occupation |
|------------------|------------|

Receipt For:
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt

| |
|-------------------------|
| M M / D D / Y Y Y Y Y Y |
|-------------------------|

Amount of Each Receipt this Period

| |
|--|
| |
|--|

Memo Item

| | |
|---|---------|
| SUBTOTAL of Receipts This Page (optional)..... ▶ | 4000.00 |
| TOTAL This Period (last page this line number only)..... ▶ | 4000.00 |

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

| | | | | | |
|---|---|---------------|--|--|--|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 11 OF 15 | | | |
| | <input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21 | | | | |

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NAME OF COMMITTEE (In Full)
Comstock Victory Fund 2018

| | | | | | |
|---|--|------------------------------------|---|--|--|
| Full Name (Last, First, Middle Initial) A. Anedot | | | Date of Disbursement M M / D D / Y Y Y Y 03 / 16 / 2017 | | |
| Mailing Address Po box 84314 | | | FEC Identification Number C | | |
| City Baton Rouge | State LA | Zip Code 70884 | Amount of Each Disbursement this Period 486.30 | | |
| Purpose of Disbursement E-Merchant Fees | | Category/ Type 001 | Transaction ID : SB17.4099 | | |
| Candidate Name | | <input type="checkbox"/> Memo Item | | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | | | |
| State: District: | | | | | |

| | | | | | |
|---|--|------------------------------------|---|--|--|
| Full Name (Last, First, Middle Initial) B. Anedot | | | Date of Disbursement M M / D D / Y Y Y Y 03 / 20 / 2017 | | |
| Mailing Address Po box 84314 | | | FEC Identification Number C | | |
| City Baton Rouge | State LA | Zip Code 70884 | Amount of Each Disbursement this Period 243.30 | | |
| Purpose of Disbursement E-Merchant Fees | | Category/ Type 001 | Transaction ID : SB17.4103 | | |
| Candidate Name | | <input type="checkbox"/> Memo Item | | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | | | |
| State: District: | | | | | |

| | | | | | |
|---|--|------------------------------------|---|--|--|
| Full Name (Last, First, Middle Initial) C. Anedot | | | Date of Disbursement M M / D D / Y Y Y Y 03 / 21 / 2017 | | |
| Mailing Address Po box 84314 | | | FEC Identification Number C | | |
| City Baton Rouge | State LA | Zip Code 70884 | Amount of Each Disbursement this Period 486.30 | | |
| Purpose of Disbursement E-Merchant Fees | | Category/ Type 001 | Transaction ID : SB17.4104 | | |
| Candidate Name | | <input type="checkbox"/> Memo Item | | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | | | |
| State: District: | | | | | |

| | |
|--|---------|
| SUBTOTAL of Disbursements This Page (optional).....▶ | 1215.90 |
| TOTAL This Period (last page this line number only).....▶ | |

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

| | | | | | |
|---|---|---------------|--|--|--|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 12 OF 15 | | | |
| | <input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21 | | | | |

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NAME OF COMMITTEE (In Full)
Comstock Victory Fund 2018

| | | | | | |
|---|--|------------------------------------|---|--|--|
| Full Name (Last, First, Middle Initial) A. Anedot | | | Date of Disbursement M M / D D / Y Y Y Y 03 / 27 / 2017 | | |
| Mailing Address Po box 84314 | | | FEC Identification Number C | | |
| City Baton Rouge | State LA | Zip Code 70884 | Amount of Each Disbursement this Period 486.30 | | |
| Purpose of Disbursement E-Merchant Fees | | Category/ Type 001 | Transaction ID : SB17.4109 | | |
| Candidate Name | | <input type="checkbox"/> Memo Item | | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | | | |
| State: District: | | | | | |

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|---|--|------------------------------------|---|--|--|
| Full Name (Last, First, Middle Initial) B. Anedot | | | Date of Disbursement M M / D D / Y Y Y Y 03 / 28 / 2017 | | |
| Mailing Address Po box 84314 | | | FEC Identification Number C | | |
| City Baton Rouge | State LA | Zip Code 70884 | Amount of Each Disbursement this Period 675.60 | | |
| Purpose of Disbursement E-Merchant Fees | | Category/ Type 001 | Transaction ID : SB17.4110 | | |
| Candidate Name | | <input type="checkbox"/> Memo Item | | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | | | |
| State: District: | | | | | |

| | | | | | |
|---|--|------------------------------------|---|--|--|
| Full Name (Last, First, Middle Initial) C. Anedot | | | Date of Disbursement M M / D D / Y Y Y Y 03 / 30 / 2017 | | |
| Mailing Address Po box 84314 | | | FEC Identification Number C | | |
| City Baton Rouge | State LA | Zip Code 70884 | Amount of Each Disbursement this Period 486.30 | | |
| Purpose of Disbursement E-Merchant Fees | | Category/ Type 001 | Transaction ID : SB17.4149 | | |
| Candidate Name | | <input type="checkbox"/> Memo Item | | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | | | |
| State: District: | | | | | |

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| SUBTOTAL of Disbursements This Page (optional).....▶ | 1648.20 |
| TOTAL This Period (last page this line number only).....▶ | |

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

| | | | | | |
|---|---|---------------|--|--|--|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 13 OF 15 | | | |
| | <input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21 | | | | |

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NAME OF COMMITTEE (In Full)
Comstock Victory Fund 2018

| | | | | | |
|---|--|------------------------------------|--|--|--|
| Full Name (Last, First, Middle Initial) A. Bay Armoury, LLC | | | Date of Disbursement MM / DD / YYYY 03 / 30 / 2017 | | |
| Mailing Address 1829 Bay Street SE | | | FEC Identification Number C | | |
| City Washington | State DC | Zip Code 20003 | Amount of Each Disbursement this Period 12960.00 | | |
| Purpose of Disbursement Fundraising Consulting | | Category/ Type 003 | Transaction ID : SB17.4115 | | |
| Candidate Name | | <input type="checkbox"/> Memo Item | | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | | | |
| State: District: | | | | | |

| | | | | | |
|---|--|------------------------------------|--|--|--|
| Full Name (Last, First, Middle Initial) B. Campaign Financial Services | | | Date of Disbursement MM / DD / YYYY 03 / 20 / 2017 | | |
| Mailing Address PO Box 30844 | | | FEC Identification Number C | | |
| City Bethesda | State MD | Zip Code 20824 | Amount of Each Disbursement this Period 550.00 | | |
| Purpose of Disbursement SEE MEMO ITEMS | | Category/ Type 001 | Transaction ID : SB17.4106 | | |
| Candidate Name | | <input type="checkbox"/> Memo Item | | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | | | |
| State: District: | | | | | |

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|---|--|---|--|--|--|
| Full Name (Last, First, Middle Initial) c. Campaign Financial Services | | | Date of Disbursement MM / DD / YYYY 03 / 20 / 2017 | | |
| Mailing Address PO Box 30844 | | | FEC Identification Number C | | |
| City Bethesda | State MD | Zip Code 20824 | Amount of Each Disbursement this Period 500.00 | | |
| Purpose of Disbursement Compliance Consulting | | Category/ Type 001 | Transaction ID : SB17.4107 | | |
| Candidate Name | | <input checked="" type="checkbox"/> Memo Item | | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | | | |
| State: District: | | | | | |

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| SUBTOTAL of Disbursements This Page (optional).....▶ | 13510.00 |
| TOTAL This Period (last page this line number only).....▶ | |

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

| | | | | | |
|---|---|------------------------------------|-------------------------------------|------------------------------------|--|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 14 OF 15 | | | |
| | <input checked="" type="checkbox"/> 17 20a | <input type="checkbox"/> 18 20b | <input type="checkbox"/> 19a 20c | <input type="checkbox"/> 19b 21 | |

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NAME OF COMMITTEE (In Full)
Comstock Victory Fund 2018

| | | | | | |
|---|--|---|---|--|--|
| Full Name (Last, First, Middle Initial) A. Campaign Financial Services | | | Date of Disbursement M M / D D / Y Y Y Y 03 / 20 / 2017 | | |
| Mailing Address PO Box 30844 | | | FEC Identification Number C | | |
| City Bethesda | State MD | Zip Code 20824 | Amount of Each Disbursement this Period 50.00 | | |
| Purpose of Disbursement General Office Supplies | | Category/ Type 001 | Transaction ID : SB17.4108 | | |
| Candidate Name | | <input checked="" type="checkbox"/> Memo Item | | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | | | |
| State: District: | | | | | |

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|---|--|-------------------|---|--|--|
| Full Name (Last, First, Middle Initial) B. | | | Date of Disbursement M M / D D / Y Y Y Y | | |
| Mailing Address | | | FEC Identification Number C | | |
| City | State | Zip Code | Amount of Each Disbursement this Period | | |
| Purpose of Disbursement | | Category/ Type | Memo Item | | |
| Candidate Name | | | | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | | | |
| State: District: | | | | | |

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|---|--|-------------------|---|--|--|
| Full Name (Last, First, Middle Initial) C. | | | Date of Disbursement M M / D D / Y Y Y Y | | |
| Mailing Address | | | FEC Identification Number C | | |
| City | State | Zip Code | Amount of Each Disbursement this Period | | |
| Purpose of Disbursement | | Category/ Type | Memo Item | | |
| Candidate Name | | | | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | | | |
| State: District: | | | | | |

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| SUBTOTAL of Disbursements This Page (optional).....▶ | 0.00 |
| TOTAL This Period (last page this line number only).....▶ | 16374.10 |

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

| | | | | |
|---|--------------------------------------|---|-------------------------------------|------------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | | PAGE 15 OF 15 | |
| | <input type="checkbox"/> 17 20a | <input checked="" type="checkbox"/> 18 20b | <input type="checkbox"/> 19a 20c | <input type="checkbox"/> 19b 21 |

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NAME OF COMMITTEE (In Full)
Comstock Victory Fund 2018

| | | | | |
|--|--|------------------------------------|---|--|
| Full Name (Last, First, Middle Initial) A. Comstock for Congress | | | Date of Disbursement M M / D D / Y Y Y Y 03 / 30 / 2017 | |
| Mailing Address PO Box 831 | | | FEC Identification Number C C00554261 | |
| City McLean | State VA | Zip Code 22101 | Amount of Each Disbursement this Period 33446.16 | |
| Purpose of Disbursement Transfer of Net Proceeds | | Category/ Type 008 | Transaction ID : SB18.4117 | |
| Candidate Name Comstock, Barbara, , , | | Memo Item <input type="checkbox"/> | | |
| Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | | |
| State: VA District: 10 | | | | |

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|--|--|------------------------------------|---|--|
| Full Name (Last, First, Middle Initial) B. Comstock for Congress | | | Date of Disbursement M M / D D / Y Y Y Y 03 / 30 / 2017 | |
| Mailing Address PO Box 831 | | | FEC Identification Number C C00554261 | |
| City McLean | State VA | Zip Code 22101 | Amount of Each Disbursement this Period 27713.32 | |
| Purpose of Disbursement Transfer of Net Proceeds | | Category/ Type 008 | Transaction ID : SB18.4118 | |
| Candidate Name Comstock, Barbara, , , | | Memo Item <input type="checkbox"/> | | |
| Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | | |
| State: VA District: 10 | | | | |

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|---|--|-------------------|---|--|
| Full Name (Last, First, Middle Initial) C. | | | Date of Disbursement M M / D D / Y Y Y Y | |
| Mailing Address | | | FEC Identification Number C | |
| City | State | Zip Code | Amount of Each Disbursement this Period | |
| Purpose of Disbursement | | Category/ Type | Memo Item <input type="checkbox"/> | |
| Candidate Name | | | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | | |
| State: District: | | | | |

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| SUBTOTAL of Disbursements This Page (optional).....▶ | 61159.48 |
| TOTAL This Period (last page this line number only).....▶ | 61159.48 |