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Image# 201810199125641461

FEC

REPORT OF RECEIPTS AND DISBURSEMENTS

FURIVI 3A FO	or Other Than An Au	thorized Committee	Office Use Only
1. NAME OF TOOMMITTEE (in full)	TYPE OR PRINT ▼	Example: If typing, type over the lines.	12FE4M5
VICTORYPAC			
ADDRESS (number and street) Check if different than previously	PO Box 5643		
reported. (ACC)	Derwood		MD 20855
2. FEC IDENTIFICATION NUI	MBER ▼ C	ITY A	STATE ▲ ZIP CODE ▲
C C00521021		IS THIS REPORT NEW (N) O	R AMENDED (A)
4. TYPE OF REPORT (Choose One) (a) Quarterly Reports:	Report Due On: Ma	b 20 (M2) May 20 (Nar 20 (M3) Jun 20 (M	(Non-Election Year Only) Sep 20 (M9) Dec 20 (M12 (Non-Election Year Only)
April 15 Quarterly Report (Q1 July 15 Quarterly Report (Q2 October 15 Quarterly Report (Q3 January 31 Year-End Report (YE	(c) 12-Day PRE-Election Report for the:	Primary (12P) Convention (12C) ion on 11 06	Oct 20 (M10) Jan 31 (YE) General (12G) Runoff (12R) Special (12S) in the State of
July 31 Mid-Year Report (Non-election Year Only) (MY) Termination Report (TER)	(d) 30-Day POST-Election Report for the:	General (30G)	Runoff (30R) Special (30S) in the State of
5. Covering Period 10	/ D D / Y Y Y Y Y Y O1 2018	through 10	M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
I certify that I have examined this Type or Print Name of Treasurer	Report and to the best of Moskowitz, Jedd, , ,	of my knowledge and belief it is	s true, correct and complete.
Signature of Treasurer Mosko	witz, Jedd, , ,	[Electronically Filed]	Date 10 / 19 / 2018
NOTE: Submission of false, erroned	ous, or incomplete informati	on may subject the person signir	ng this Report to the penalties of 52 U.S.C. § 3010
Office Use			FEC FORM 3X Rev. 05/2016

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

	FE	C Form 3X (Rev. 05/2016)	OF RECEIPTS AND DISBURSEMENTS	Page 2
		ype Committee Name		
_	VICTO	RYPAC		
R	Report Co	overing the Period: From:	10	D: 10 / 17 / 2018
			COLUMN A This Period	COLUMN B Calendar Year-to-Date
6.	(a) Ca	January 1, 2018		16317.63
	. ,	sh on Hand at ginning of Reporting Period	15119.24	
	(c) To	tal Receipts (from Line 19)	0.00	0.00
	6(0	btotal (add Lines 6(b) and c) for Column A and Lines a) and 6(c) for Column B)	15119.24	16317.63
7.	Total D	isbursements (from Line 31)	3536.32	4734.71
8.	Reporti	n Hand at Close of ng Period ct Line 7 from Line 6(d))	11582.92	11582.92
9.	the Cor	and Obligations Owed TO mmittee (Itemize all on alle C and/or Schedule D)	0.00	
10.	the Cor	and Obligations Owed BY mmittee (Itemize all on table C and/or Schedule D)	0.00	
	This	s committee has qualified as a multi	candidate committee. (see FEC FORM 1M)	
_			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 3X (Rev. 05/2016)

Nrite o	r Type	Committee	Name
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VICTORYPAC

Report Covering the Period: From: 10 01 2018 To: 10 17 2018				
I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date		
. Contributions (other than loans) From:				
(a) Individuals/Persons Other				
Than Political Committees	0.00	0.00		
(i) Itemized (use Schedule A)	0.00	0.00		
(ii) Unitemized	0.00	0.00		
(iii) TOTAL (add	45			
Lines 11(a)(i) and (ii)	0.00	0.00		
(b) Political Party Committees	0.00	0.00		
(c) Other Political Committees	0.00	2.22		
(such as PACs)	0.00	0.00		
(d) Total Contributions (add Lines				
11(a)(iii), (b), and (c)) (Carry	0.00	0.00		
Totals to Line 33, page 5) Transfers From Affiliated/Other	0.00	4 4		
Party Committees	0.00	0.00		
Tarty Committees				
All Loans Received	0.00	0.00		
	45 45	45 45		
Loan Repayments Received	0.00	0.00		
Offsets To Operating Expenditures	4 4	4 4		
(Refunds, Rebates, etc.)				
(Carry Totals to Line 37, page 5)	0.00	0.00		
Refunds of Contributions Made	7			
to Federal Candidates and Other				
Political Committees	0.00	0.00		
7. Other Federal Receipts				
(Dividends, Interest, etc.)	0.00	0.00		
(a) Non-Federal Account				
(from Schedule H3)	0.00	0.00		
(IIIIIII corlocale 110)	4 4	4 4		
(b) Levin Funds (from Schedule H5)	0.00	0.00		
(b) Leviii i unus (iioin ochedule 115)	4 4	1 4 1 4 1 4		
(c) Total Transfers (add 18(a) and 18(b))	0.00	0.00		
	4 4	4 4		
. Total Receipts (add Lines 11(d),				
12, 13, 14, 15, 16, 17, and 18(c))▶	0.00	0.00		
	7 7			
. Total Federal Receipts				
(subtract Line 18(c) from Line 19)▶	0.00	0.00		

DETAILED SUMMARY PAGE

of Disbursements

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Page 4

II. Disbursements		COLUMN A Total This Period	COLUMN B	
	Operating Expenditures:	Total THIS Period	Calendar Year-to-Date	
	(a) Allocated Federal/Non-Federal Activity (from Schedule H4)			
	(i) Federal Share	0.00	0.00	
	(ii) Non-Federal Share	0.00	0.00	
	(b) Other Federal Operating	36.32	234.71	
	Expenditures(c) Total Operating Expenditures	30.32	234.71	
	(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	36.32	234.71	
	Transfers to Affiliated/Other Party	30.02	7 7	
	Committees	0.00	0.00	
	Contributions to Federal Candidates/Committees	4 4	45 45 45	
	and Other Political Committees	0.00	0.00	
	ndependent Expenditures			
	(use Schedule E) Coordinated Party Expenditures	0.00	0.00	
	(52 U.S.C. § 30116(d))	0.00		
	(use Schedule F)	0.00	0.00	
	Loan Repayments Made	0.00	0.00	
	Loan Hopayments Wade	0.00	0.00	
	Loans Made	0.00	0.00	
	Refunds of Contributions To:	45 45 45	4 4	
	(a) Individuals/Persons Other Than Political Committees	0.00	0.00	
		4 4	4 4	
	(b) Political Party Committees	0.00	0.00	
	(c) Other Political Committees	7 7 7		
	(such as PACs)	0.00	0.00	
	(d) Total Contribution Refunds			
	(add Lines 28(a), (b), and (c))	0.00	0.00	
	Other Disbursements (Including			
	Non-Federal Donations)	3500.00	4500.00	
		75 75	4 4	
	Federal Election Activity (52 U.S.C. § 30101(2	20))		
	(a) Allocated Federal Election Activity (from Schedule H6)			
	(i) Federal Share	0.00	0.00	
	(i) i caciai citate	0.00	0.00	
	(ii) "Levin" Share	0.00	0.00	
	(b) Federal Election Activity Paid	4 4	1 4 1 4 1 4	
	Entirely With Federal Funds	0.00	0.00	
	(c) Total Federal Election Activity (add	7 7 7	<u> </u>	
	Lines 30(a)(i), 30(a)(ii) and 30(b))	0.00	0.00	
			7	
	Total Disbursements (add Lines 21(c), 22,			
	23, 24, 25, 26, 27, 28(d), 29 and 30(c))	3536.32	4734.71	
	Total Endoral Diahuraamanta	7 7	7 7 7	
	Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii)			
	from Line 31)	2522.22		
	10111 LITE 01/	3536.32	4734.71	

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 05/2016) III. Net Contributions/

Operating Expenditures

(from Line 11(d), page 3)

(from Line 28(d)).....

(subtract Line 34 from Line 33)

(add Line 21(a)(i) and Line 21(b))▶

(from Line 15, page 3).....

(subtract Line 37 from Line 36)

33. Total Contributions (other than loans)

35. Net Contributions (other than loans)

36. Total Federal Operating Expenditures

37. Offsets to Operating Expenditures

38. Net Operating Expenditures

34. Total Contribution Refunds

Page 5 **COLUMN A** COLUMN B **Total This Period** Calendar Year-to-Date 0.00 0.00 0.00 0.00 0.00 0.00 36.32 234.71 0.00 0.00 36.32 234.71

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SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS	Use separate schedule(s for each category of the Detailed Summary Page	21h	
Any information copied from such Reports and State or for commercial purposes, other than using the na NAME OF COMMITTEE (In Full) VICTORYPAC	ements may not be sold or united and address of any police.	used by any pers	on for the purpose of soliciting contributions
Full Name (Last, First, Middle Initial) A. Gaughran 2018 Mailing Address 62 Pinebrook Pl.			Date of Disbursement 10
City Bay Shore Purpose of Disbursement Non-Federal Contribution Candidate Name State NY 11706 11706 Categ			FEC Identification Number C Transaction ID : SB29.4156 Amount of Each Disbursement this Period
Office Sought: House Disburse Senate President State: District:	ement For: 2018 Primary 🗶 General Other (specify) 🔻		500.00 Memo Item
B. Lavine for Nassau Mailing Address 410 Jericho Tpke. Suite 200		Date of Disbursement M	
City Jericho Purpose of Disbursement Non-Federal Contribution Candidate Name	State Zip Code NY 11753	011 Category/ Type	FEC Identification Number C Transaction ID : SB29.4155 Amount of Each Disbursement this Period
Office Sought: House Disburse Senate President State: District:	ement For: Primary General Other (specify)	7,	1000.00 Memo Item
Full Name (Last, First, Middle Initial) C. Lisa Beth Gerstman Foundation Mailing Address 439 Oak St. Suite 1			Date of Disbursement 10
City Garden City Purpose of Disbursement Donation Candidate Name	State Zip Code NY 11530	012 Category/ Type	FEC Identification Number C Transaction ID: SB29.4154 Amount of Each Disbursement this Period
Office Sought: House Disburse Senate President State: District:	ement For: Primary General Other (specify) ▼		1000.00 Memo Item

SCHEDULE B (FEC Form 3X) TEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: PAGE 7 OF 7 (check only one) 21b 22 23 26 27 28a 28b 28c x 29 30b	
Any information copied from such Reports and Stater or for commercial purposes, other than using the nan			d by any perso	on for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full) VICTORYPAC				
Full Name (Last, First, Middle Initial) A. Nassau County Democratic Comm	ittee			Date of Disbursement M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 1541 Wilson Rd.				10 00 2010
East Meadow		p Code 11554		FEC Identification Number
Purpose of Disbursement Non-Federal Contribution Candidate Name	1		011	Transaction ID : SB29.4149
Office Sought: House Disburser	ment For:		Category/ Type	Amount of Each Disbursement this Period
Senate President	Primary Other (specify)	General ▼		Memo Item
State: District: Full Name (Last, First, Middle Initial)				<u> </u>
3.				Date of Disbursement
Mailing Address				
City	State	p Code		FEC Identification Number
Purpose of Disbursement				C
Candidate Name		Category/ Type		Amount of Each Disbursement this Period
Office Sought: House Senate President Disbursement For: Primary Other (specify) General Other (specify)				Memo Item
State: District: Full Name (Last, First, Middle Initial)				Mono Roll
C.				Date of Disbursement
Mailing Address				M M / D D / Y Y Y Y
City	State	p Code		FEC Identification Number
Purpose of Disbursement	Category/ Type			C
Candidate Name			Category/ Type	Amount of Each Disbursement this Period
Office Sought: House Disburser Senate	ment For:	General	3 F -	
State: President State:	Other (specify)	▼		Memo Item
SUBTOTAL of Disbursements This Page (optional)			······	1000.00
TOTAL This Period (last page this line number only))			3500.00