

# 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.

12FE4M5

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

M M / D D / Y Y Y Y

M M / D D / Y Y Y Y

M M / D D / Y Y Y Y

in the State of

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

General (30G)

Runoff (30R)

Special (30S)

Election on

M M / D D / Y Y Y Y

M M / D D / Y Y Y Y

M M / D D / Y Y Y Y

in the State of

5. Covering Period

M M / D D / Y Y Y Y

M M / D D / Y Y Y Y

M M / D D / Y Y Y Y

through

M M / D D / Y Y Y Y

M M / D D / Y Y Y Y

M M / D D / Y Y Y Y

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

M M / D D / Y Y Y Y

M M / D D / Y Y Y Y

M M / D D / Y Y Y Y

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

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))....	47800.00	174900.00
(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)).....	47800.00	174900.00
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17) .....	5867.89	22252.99
(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)).....	5867.89	22252.99
8. Cash on Hand at Close of Reporting Period (from Line 27).....	16200.00	
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	
10. Debts and Obligations Owed <b>BY</b> 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: M M / D D / Y Y Y Y 04 / 01 / 2017 To: M M / D D / Y Y Y Y 06 / 30 / 2017

<b>I. RECEIPTS</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Election Cycle-to-Date</b>
<b>11. CONTRIBUTIONS (other than loans) FROM:</b>		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	47800.00	170900.00
(ii) Unitemized .....	0.00	0.00
(iii) TOTAL of contributions from individuals .....	47800.00	170900.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	4000.00
(d) The Candidate .....	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	47800.00	174900.00
<b>12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES .....</b>	0.00	0.00
<b>13. LOANS:</b>		
(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
<b>14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.) .....</b>	0.00	0.00
<b>15. OTHER RECEIPTS (Dividends, Interest, etc.) .....</b>	0.00	0.00
<b>16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4).....</b>	47800.00	174900.00

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3 (Revised 05/2016)

PAGE 4 / 18

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	5867.89	22252.99
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES .....	75287.53	136447.01
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. <b>TOTAL DISBURSEMENTS</b> (add Lines 17, 18, 19(c), 20(d), and 21) ►	81155.42	158700.00

**III. CASH SUMMARY**

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	49555.42
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	47800.00
25. SUBTOTAL (add Line 23 and Line 24).....	97355.42
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	81155.42
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	16200.00

**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 5 OF 18	
	<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
**Comstock Victory Fund 2018**

**A.** Full Name (Last, First, Middle Initial)  
**DuPont, Lammot, , ,**

Mailing Address PO Box 1136

City McLean State VA Zip Code 22101

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

Name of Employer DuPont Fabros Technology Occupation Executive

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  
 06 / 28 / 2017

Transaction ID : SA11AI.4211

Amount of Each Receipt this Period  
5400.00

Memo Item

**B.** 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 ▼  
5400.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 04 / 04 / 2017

Transaction ID : SA11AI.4176

Amount of Each Receipt this Period  
2700.00

Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**Jacquemin, John, M., ,**

Mailing Address 8609 Westwood Center Drive Suite 450

City Vienna State VA Zip Code 22182

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

Name of Employer Mooring Financial Occupation President & CEO

Receipt For:  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
10000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 04 / 04 / 2017

Transaction ID : SA11AI.4178

Amount of Each Receipt this Period  
10000.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶	18100.00
<b>TOTAL</b> 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 18	
	<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**

**A.** Full Name (Last, First, Middle Initial)  
**Lindsey, Lawrence, B., ,**

Mailing Address 8425 Hampton Way

City Fairfax Station	State VT	Zip Code 22039
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FEC ID number of contributing federal political committee. **C**

Name of Employer Lindsey Group	Occupation Chief Executive Officer
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Receipt For:  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
10800.00

Date of Receipt  

M M / D D / Y Y Y Y Y Y
06 / 28 / 2017

**Transaction ID : SA11AI.4208**

Amount of Each Receipt this Period  
10800.00

Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**Moran, Donald, W., ,**

Mailing Address 858 Centrillion Drive

City McLean	State VA	Zip Code 22102
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FEC ID number of contributing federal political committee. **C**

Name of Employer The Moran Companies	Occupation President & CEO
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Receipt For:  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1800.00

Date of Receipt  

M M / D D / Y Y Y Y Y Y
05 / 05 / 2017

**Transaction ID : SA11AI.4202**

Amount of Each Receipt this Period  
1800.00

Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**Moran, Donald, W., ,**

Mailing Address 858 Centrillion Drive

City McLean	State VA	Zip Code 22102
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FEC ID number of contributing federal political committee. **C**

Name of Employer The Moran Companies	Occupation President & CEO
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Receipt For:  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
2700.00

Date of Receipt  

M M / D D / Y Y Y Y Y Y
06 / 01 / 2017

**Transaction ID : SA11AI.4203**

Amount of Each Receipt this Period  
900.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶	13500.00
<b>TOTAL</b> 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 7 OF 18	
	<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**

**A.** Full Name (Last, First, Middle Initial)  
**Mullen, Angel, , ,**

Mailing Address 9307 Fitz Folly Drive

City Great Falls	State VA	Zip Code 22066
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FEC ID number of contributing federal political committee. **C**

Name of Employer Retired	Occupation Retired
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Receipt For:  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
 2700.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 12 / 2017

**Transaction ID : SA11AI.4201**

Amount of Each Receipt this Period  
 2700.00

Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**Mullen, Michael, , ,**

Mailing Address 9307 Fitz Folly Drive

City Great Falls	State VA	Zip Code 22066
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FEC ID number of contributing federal political committee. **C**

Name of Employer Express Association of America	Occupation Executive Director
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Receipt For:  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
 2700.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 04 / 13 / 2017

**Transaction ID : SA11AI.4200**

Amount of Each Receipt this Period  
 2700.00

Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**Roth, T. Christopher, , ,**

Mailing Address 6849 Holland Street

City McLean	State VA	Zip Code 22101
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FEC ID number of contributing federal political committee. **C**

Name of Employer Trammell Crow Companies	Occupation Real Estate
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Receipt For:  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
 10800.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 17 / 2017

**Transaction ID : SA11AI.4199**

Amount of Each Receipt this Period  
 10800.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	16200.00
<b>TOTAL</b> This Period (last page this line number only).....▶	47800.00

**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 8 OF 18			
	<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) <b>A. Anedot</b>			Date of Disbursement M M / D D / Y Y Y Y 04 / 17 / 2017		
Mailing Address Po box 84314			FEC Identification Number C		
City Baton Rouge	State LA	Zip Code 70884	Amount of Each Disbursement this Period 121.80		
Purpose of Disbursement E-Merchant Fees		Category/ Type 001	Transaction ID : SB17.4180		
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>B. Anedot</b>			Date of Disbursement M M / D D / Y Y Y Y 05 / 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 121.80		
Purpose of Disbursement E-Merchant Fees		Category/ Type 001	Transaction ID : SB17.4188		
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>C. Anedot</b>			Date of Disbursement M M / D D / Y Y Y Y 05 / 18 / 2017		
Mailing Address Po box 84314			FEC Identification Number C		
City Baton Rouge	State LA	Zip Code 70884	Amount of Each Disbursement this Period 81.30		
Purpose of Disbursement E-Merchant Fees		Category/ Type 001	Transaction ID : SB17.4189		
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:					

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	324.90
<b>TOTAL</b> 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 9 OF 18
	<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) <b>A. Anedot</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 05 / 2017
Mailing Address Po box 84314		FEC Identification Number C
City Baton Rouge	State LA	Zip Code 70884
Purpose of Disbursement E-Merchant Fees	Category/ Type 001	
Candidate Name		Amount of Each Disbursement this Period 40.80
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:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>B. Bay Armoury, LLC</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 04 / 2017
Mailing Address 1829 Bay Street SE		FEC Identification Number C
City Washington	State DC	Zip Code 20003
Purpose of Disbursement SEE MEMO ITEMS	Category/ Type 001	
Candidate Name		Amount of Each Disbursement this Period 1136.77
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:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>c. Bay Armoury, LLC</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 04 / 2017
Mailing Address 1829 Bay Street SE		FEC Identification Number C
City Washington	State DC	Zip Code 20003
Purpose of Disbursement Mileage	Category/ Type 002	
Candidate Name		Amount of Each Disbursement this Period 97.33
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:	<input checked="" type="checkbox"/> Memo Item	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	1177.57
<b>TOTAL</b> 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 10 OF 18	
	<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) <b>A. Bay Armoury, LLC</b>			Date of Disbursement M M / D D / Y Y Y Y 04 / 04 / 2017	
Mailing Address 1829 Bay Street SE			FEC Identification Number C	
City Washington	State DC	Zip Code 20003	Amount of Each Disbursement this Period 75.00	
Purpose of Disbursement General Office Supplies		Category/ Type 001	Transaction ID : SB17.4141	
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:				

Full Name (Last, First, Middle Initial) <b>B. Bay Armoury, LLC</b>			Date of Disbursement M M / D D / Y Y Y Y 04 / 05 / 2017	
Mailing Address 1829 Bay Street SE			FEC Identification Number C	
City Washington	State DC	Zip Code 20003	Amount of Each Disbursement this Period 2620.00	
Purpose of Disbursement Fundraising Consulting		Category/ Type 003	Transaction ID : SB17.4121	
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>c. Campaign Financial Services</b>			Date of Disbursement M M / D D / Y Y Y Y 04 / 19 / 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 : SB17.4181	
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:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	3170.00
<b>TOTAL</b> 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 11 OF 18			
	<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) <b>A. Campaign Financial Services</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 19 / 2017
Mailing Address PO Box 30844		FEC Identification Number C
City Bethesda	State MD	Zip Code 20824
Purpose of Disbursement Compliance Consulting	Category/ Type 001	
Candidate Name	Amount of Each Disbursement this Period 500.00	
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) ▼	Transaction ID : SB17.4182
State: District:	<input checked="" type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>B. Campaign Financial Services</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 19 / 2017
Mailing Address PO Box 30844		FEC Identification Number C
City Bethesda	State MD	Zip Code 20824
Purpose of Disbursement General Office Supplies	Category/ Type 001	
Candidate Name	Amount of Each Disbursement this Period 50.00	
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) ▼	Transaction ID : SB17.4183
State: District:	<input checked="" type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>c. Campaign Financial Services</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 09 / 2017
Mailing Address PO Box 30844		FEC Identification Number C
City Bethesda	State MD	Zip Code 20824
Purpose of Disbursement SEE MEMO ITEMS	Category/ Type 001	
Candidate Name	Amount of Each Disbursement this Period 550.00	
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) ▼	Transaction ID : SB17.4184
State: District:	<input type="checkbox"/> Memo Item	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	550.00
<b>TOTAL</b> 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 18			
	<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) <b>A. Campaign Financial Services</b>			Date of Disbursement M M / D D / Y Y Y Y 05 / 09 / 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 PAC Compliance Consulting		Category/ Type 001	Transaction ID : SB17.4185		
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:					

Full Name (Last, First, Middle Initial) <b>B. Campaign Financial Services</b>			Date of Disbursement M M / D D / Y Y Y Y 05 / 09 / 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 PAC General Office Supplies		Category/ Type 001	Transaction ID : SB17.4186		
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:					

Full Name (Last, First, Middle Initial) <b>c. Campaign Financial Services</b>			Date of Disbursement M M / D D / Y Y Y Y 06 / 21 / 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 : SB17.4192		
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:					

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	550.00
<b>TOTAL</b> 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 18			
	<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) <b>A. Campaign Financial Services</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 21 / 2017
Mailing Address PO Box 30844		FEC Identification Number C
City Bethesda	State MD	Zip Code 20824
Purpose of Disbursement PAC Compliance Consulting		Category/ Type 001
Candidate Name		Amount of Each Disbursement this Period 500.00
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:	Transaction ID : SB17.4193 <input checked="" type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>B. Campaign Financial Services</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 21 / 2017
Mailing Address PO Box 30844		FEC Identification Number C
City Bethesda	State MD	Zip Code 20824
Purpose of Disbursement PAC General Office Supplies		Category/ Type 001
Candidate Name		Amount of Each Disbursement this Period 50.00
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:	Transaction ID : SB17.4194 <input checked="" type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>c. Capitol Hill Club</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 04 / 2017
Mailing Address 300 First Street SE		FEC Identification Number C
City Washington	State DC	Zip Code 20003
Purpose of Disbursement Meal Expense		Category/ Type 001
Candidate Name		Amount of Each Disbursement this Period 116.62
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:	Transaction ID : SB17.4140 <input checked="" type="checkbox"/> Memo Item	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	0.00
<b>TOTAL</b> 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 18	
	<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) <b>A. Capitol Hill Club</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 04 / 2017
Mailing Address 300 First Street SE		FEC Identification Number C
City Washington	State DC	Zip Code 20003
Purpose of Disbursement Parking Fee	Category/ Type 002	
Candidate Name		Amount of Each Disbursement this Period 48.00
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:	Transaction ID : SB17.4145 <input checked="" type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>B. Fast Courier</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 04 / 2017
Mailing Address 10319 Westlake Drive Unit 408		FEC Identification Number C
City Bethesda	State MD	Zip Code 20817
Purpose of Disbursement Courier Service	Category/ Type 001	
Candidate Name		Amount of Each Disbursement this Period 50.00
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:	Transaction ID : SB17.4137 <input checked="" type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>c. Four Seasons</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 04 / 2017
Mailing Address 2800 Pennsylvania Avenue NW		FEC Identification Number C
City Washington	State DC	Zip Code 20007
Purpose of Disbursement Parking Fee	Category/ Type 002	
Candidate Name		Amount of Each Disbursement this Period 29.00
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:	Transaction ID : SB17.4142 <input checked="" type="checkbox"/> Memo Item	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	0.00
<b>TOTAL</b> 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 15 OF 18	
	<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) <b>A. J. Gilbert's</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 04 / 2017
Mailing Address 6930 Old Dominion Drive		FEC Identification Number C
City McLean	State VA	Zip Code 22101
Purpose of Disbursement Catering	Category/ Type 003	
Candidate Name		Amount of Each Disbursement this Period 630.00
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:	Transaction ID : SB17.4139 <input checked="" type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>B. Lyft</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 04 / 2017
Mailing Address 2300 Harrison Street		FEC Identification Number C
City San Francisco	State CA	Zip Code 94110
Purpose of Disbursement Transportation	Category/ Type 002	
Candidate Name		Amount of Each Disbursement this Period 11.82
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:	Transaction ID : SB17.4143 <input checked="" type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>c. McLean Family Restaurant</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 04 / 2017
Mailing Address 1321 Chain Bridge Road		FEC Identification Number C
City McLean	State VA	Zip Code 22101
Purpose of Disbursement Meal Expense	Category/ Type 001	
Candidate Name		Amount of Each Disbursement this Period 35.15
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:	Transaction ID : SB17.4138 <input checked="" type="checkbox"/> Memo Item	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	0.00
<b>TOTAL</b> 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 16 OF 18	
	<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) <b>A. Uber</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 04 / 2017
Mailing Address 1455 Market Street Unit 400		FEC Identification Number C
City San Francisco	State CA	Zip Code 94103
Purpose of Disbursement Transportation	Category/ Type 002	
Candidate Name	Amount of Each Disbursement this Period 18.76	
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) ▼	Transaction ID : SB17.4144
State: District:	<input checked="" type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>B. United States Postal Service</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 04 / 2017
Mailing Address 600 Pennsylvania Avenue SE		FEC Identification Number C
City Washington	State DC	Zip Code 20003
Purpose of Disbursement Postage	Category/ Type 001	
Candidate Name	Amount of Each Disbursement this Period 0.47	
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) ▼	Transaction ID : SB17.4135
State: District:	<input checked="" type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>C. UPS</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 04 / 2017
Mailing Address 55 Glenlake Parkway NE		FEC Identification Number C
City Atlanta	State GA	Zip Code 30328
Purpose of Disbursement Express Shipping	Category/ Type 001	
Candidate Name	Amount of Each Disbursement this Period 24.62	
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) ▼	Transaction ID : SB17.4136
State: District:	<input checked="" type="checkbox"/> Memo Item	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	0.00
<b>TOTAL</b> This Period (last page this line number only).....▶	5772.47



**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 17 OF 18	
	<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) <b>A. Comstock for Congress</b>			Date of Disbursement M M / D D / Y Y Y Y 06 / 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 8595.47	
Purpose of Disbursement Transfer of Net Proceeds		Category/ Type 008	Transaction ID : SB18.4204	
Candidate Name <b>Comstock, Barbara, , ,</b>		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				

Full Name (Last, First, Middle Initial) <b>B. Comstock for Congress</b>			Date of Disbursement M M / D D / Y Y Y Y 06 / 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 9304.35	
Purpose of Disbursement Transfer of Net Proceeds		Category/ Type 008	Transaction ID : SB18.4205	
Candidate Name <b>Comstock, Barbara, , ,</b>		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				

Full Name (Last, First, Middle Initial) <b>c. National Republican Congressional Committee</b>			Date of Disbursement M M / D D / Y Y Y Y 04 / 05 / 2017	
Mailing Address 320 First Street SE			FEC Identification Number C C00075820	
City Washington	State DC	Zip Code 20003	Amount of Each Disbursement this Period 38405.18	
Purpose of Disbursement Transfer of Net Proceeds		Category/ Type 008	Transaction ID : SB18.4123	
Candidate Name		Memo Item <input type="checkbox"/>		
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:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	56305.00
<b>TOTAL</b> 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 18 OF 18	
	<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) <b>A. National Republican Congressional Committee</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 05 / 2017
Mailing Address 320 First Street SE		FEC Identification Number C C00075820
City Washington	State DC	Zip Code 20003
Purpose of Disbursement Transfer of Net Proceeds - Building Fund	<input type="checkbox"/> 008	Amount of Each Disbursement this Period 9152.24
Candidate Name	Category/ Type	Transaction ID : SB18.4124
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) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) <b>B. National Republican Congressional Committee</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 30 / 2017
Mailing Address 320 First Street SE		FEC Identification Number C C00075820
City Washington	State DC	Zip Code 20003
Purpose of Disbursement Transfer of Net Proceeds	<input type="checkbox"/> 008	Amount of Each Disbursement this Period 9830.29
Candidate Name	Category/ Type	Transaction ID : SB18.4206
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) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) <b>C.</b>		Date of Disbursement M M / D D / Y Y Y Y
Mailing Address		FEC Identification Number C
City	State	Zip Code
Purpose of Disbursement	<input type="checkbox"/>	Amount of Each Disbursement this Period
Candidate Name	Category/ Type	<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:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	18982.53
<b>TOTAL</b> This Period (last page this line number only).....▶	75287.53