

# FEC FORM 3X

# REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines. **12FE4M5**  
**NUNES VICTORY FUND**

ADDRESS (number and street) **PO BOX 6545**  
 Check if different than previously reported. (ACC) **VISALIA CA 93290**

2. FEC IDENTIFICATION NUMBER ▼ CITY ▲ STATE ▲ ZIP CODE ▲  
**C C00544031** 3. IS THIS REPORT  NEW (N) OR  AMENDED (A)

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)  
 July 31 Mid-Year Report (Non-election Year Only) (MY)  
 Termination Report (TER)  
(b) Monthly Report Due On:  
 Feb 20 (M2)  May 20 (M5)  Aug 20 (M8)  Nov 20 (M11) (Non-Election Year Only)  
 Mar 20 (M3)  Jun 20 (M6)  Sep 20 (M9)  Dec 20 (M12) (Non-Election Year Only)  
 Apr 20 (M4)  Jul 20 (M7)  Oct 20 (M10)  Jan 31 (YE)  
(c) 12-Day PRE-Election Report for the:  
 Primary (12P)  General (12G)  Runoff (12R)  
 Convention (12C)  Special (12S)  
Election on  /  /  in the State of   
(d) 30-Day POST-Election Report for the:  
 General (30G)  Runoff (30R)  Special (30S)  
Election on  /  /  in the State of

5. Covering Period  /  /  2022 through  /  /  2022

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.  
NUNES, TONI, DIAN, ,  
Type or Print Name of Treasurer

Signature of Treasurer NUNES, TONI, DIAN, , [Electronically Filed] Date  /  /  2022

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

**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 05/2016)

Write or Type Committee Name

**NUNES VICTORY FUND**

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

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2022"/>		339677.40
(b) Cash on Hand at Beginning of Reporting Period.....	205903.05	
(c) Total Receipts (from Line 19) .....	4753.00	60042.41
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	210656.05	399719.81
7. Total Disbursements (from Line 31).....	3680.30	192744.06
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	206975.75	206975.75
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	

This committee has qualified as a multicandidate 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

Write or Type Committee Name

**NUNES VICTORY FUND**

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

<b>I. Receipts</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Calendar Year-to-Date</b>
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	1500.00	12267.00
(ii) Unitemized .....	3253.00	47775.41
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	4753.00	60042.41
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) .....	4753.00	60042.41
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received .....	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	0.00	0.00
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)).....▶	4753.00	60042.41
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	4753.00	60042.41

**DETAILED SUMMARY PAGE**  
of Disbursements

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(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 Expenditures .....	3680.30	144618.08
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	3680.30	144618.08
22. Transfers to Affiliated/Other Party Committees.....	0.00	48125.98
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditures (use Schedule E) .....	0.00	0.00
25. Coordinated Party Expenditures (52 U.S.C. § 30116(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. 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 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements (Including Non-Federal Donations).....	0.00	0.00
30. Federal Election Activity (52 U.S.C. § 30101(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b)) .....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	3680.30	192744.06
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	3680.30	192744.06

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 5

<b>III. Net Contributions/ Operating Expenditures</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Calendar Year-to-Date</b>
33. Total Contributions (other than loans) (from Line 11(d), page 3) .....	4753.00	60042.41
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	4753.00	60042.41
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	3680.30	144618.08
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	3680.30	144618.08

**SCHEDULE A (FEC Form 3X)  
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"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 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)  
**NUNES VICTORY FUND**

**A. MAGANA, EDUARDO, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 515 CHURCH ST  
 City HALF MOON BAY State CA Zip Code 94019-1902  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) SPANISHTOWN RESTARAUNT Occupation (for Individual) RESTAURANTEUR  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 05 / 13 / 2022  
**Transaction ID : A289EF4F1607E4B9A83B**  
 Amount of Each Receipt this Period 500.00  
 Memo Item

**B. MCMILIN, VICKIE, S, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 3950 DRY CREEK RD  
 City BELGRADE State MT Zip Code 59714  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) NONE (RETIRED) Occupation (for Individual) RETIRED BOOKKEEPER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 04 / 07 / 2022  
**Transaction ID : AE203FE7D50704E9B866**  
 Amount of Each Receipt this Period 500.00  
 Memo Item

**C. MITCHELL, MARGARET, L, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1150 BEACH RD  
 City VERO BEACH State FL Zip Code 32963  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 09 / 2022  
**Transaction ID : AC78B317C249C4701A02**  
 Amount of Each Receipt this Period 250.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1250.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

# SCHEDULE A (FEC Form 3X) 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	<input type="checkbox"/> 11b
<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14
<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**NUNES VICTORY FUND**

**A.** Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
SARTORI, JAMES, , ,

Mailing Address 2919 WYNDHAM WAY

City MELBOURNE	State FL	Zip Code 32940
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF	Occupation (for Individual) FARMER
---	---------------------------------------

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  

M M	/	D D	/	Y Y Y Y
05		09		2022

**Transaction ID : A135BC97F504B4AF8AAD**

Amount of Each Receipt this Period  
250.00

Memo Item

**B.** Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address

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

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

Name of Employer (for Individual)	Occupation (for Individual)
-----------------------------------	-----------------------------

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt  

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

Amount of Each Receipt this Period

Memo Item

**C.** Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address

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

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

Name of Employer (for Individual)	Occupation (for Individual)
-----------------------------------	-----------------------------

Receipt For:  
 Primary     General  
 Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt  

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

Amount of Each Receipt this Period

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	250.00
<b>TOTAL</b> This Period (last page this line number only).....▶	1500.00

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**NUNES VICTORY FUND**

**A. ARISTOTLE**

Full Name (Last, First, Middle Initial)

Mailing Address 205 PENNSYLVANIA AVE, SE

City WASHINGTON State DC Zip Code 20003-1164

Purpose of Disbursement PROCESSING FEES

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 04 / 11 / 2022

FEC Identification Number: C

Transaction ID : B9257CCA1F

Amount of Each Disbursement this Period: 52.00

Memo Item

**B. ARISTOTLE**

Full Name (Last, First, Middle Initial)

Mailing Address 205 PENNSYLVANIA AVE, SE

City WASHINGTON State DC Zip Code 20003-1164

Purpose of Disbursement PROCESSING FEES

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 04 / 25 / 2022

FEC Identification Number: C

Transaction ID : BB8AF652DA

Amount of Each Disbursement this Period: 2.25

Memo Item

**C. CHASE VISA CARDMEMBER SERVICES**

Full Name (Last, First, Middle Initial)

Mailing Address P.O. BOX 94014

City PALATINE State IL Zip Code 60094-4014

Purpose of Disbursement SEE MEMO ITEMS

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 05 / 11 / 2022

FEC Identification Number: C

Transaction ID : B6B9E48E84

Amount of Each Disbursement this Period: 385.43

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 439.68

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



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

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

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**NUNES VICTORY FUND**

Full Name (Last, First, Middle Initial)

**A. ADOBE**

Mailing Address 151 SOUTH ALMADEN BLVD

City SAN JOSE State CA Zip Code 95113-2001

Purpose of Disbursement SOFTWARE

Category/Type

Candidate Name

Office Sought:  House  Senate  President  
 Disbursement For:  Primary  General  Other (specify) ▼  
 State: District:

Date of Disbursement  
 M M / D D / Y Y Y Y Y Y  
 05 / 11 / 2022

FEC Identification Number  
  
**Transaction ID : B5899907B87**  
 Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**B. OFFICE DEPOT**

Mailing Address 2425 S MOONEY BLVD

City VISALIA State CA Zip Code 93277

Purpose of Disbursement OFFICE SUPPLIES

Category/Type

Candidate Name

Office Sought:  House  Senate  President  
 Disbursement For:  Primary  General  Other (specify) ▼  
 State: District:

Date of Disbursement  
 M M / D D / Y Y Y Y Y Y  
 05 / 11 / 2022

FEC Identification Number  
  
**Transaction ID : B910BDCCAC**  
 Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**C. INNOVATIVE EMPLOYEE SOLUTIONS**

Mailing Address 9665 GRANITE RIDGE DR. #420

City SAN DIEGO State CA Zip Code 92123-2659

Purpose of Disbursement SEE MEMO ITEMS

Category/Type

Candidate Name

Office Sought:  House  Senate  President  
 Disbursement For:  Primary  General  Other (specify) ▼  
 State: District:

Date of Disbursement  
 M M / D D / Y Y Y Y Y Y  
 04 / 05 / 2022

FEC Identification Number  
  
**Transaction ID : B176DE4DBI**  
 Amount of Each Disbursement this Period

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

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

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

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**NUNES VICTORY FUND**

**A. LAMARSNA, MORGAN, , ,**

Full Name (Last, First, Middle Initial)

Mailing Address PO BOX 6545

City VISALIA State CA Zip Code 93290-6545

Purpose of Disbursement TRAVEL REIMBURSEMENT

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 04 / 05 / 2022

FEC Identification Number: C

Transaction ID : BA25E81E0A

Amount of Each Disbursement this Period: 65.10

Memo Item

**B. LAMARSNA, MORGAN, , ,**

Full Name (Last, First, Middle Initial)

Mailing Address PO BOX 6545

City VISALIA State CA Zip Code 93290-6545

Purpose of Disbursement PAYROLL

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 04 / 05 / 2022

FEC Identification Number: C

Transaction ID : B927349F17C

Amount of Each Disbursement this Period: 492.00

Memo Item

**C. INNOVATIVE EMPLOYEE SOLUTIONS**

Full Name (Last, First, Middle Initial)

Mailing Address 9665 GRANITE RIDGE DR. #420

City SAN DIEGO State CA Zip Code 92123-2659

Purpose of Disbursement SEE MEMO ITEMS

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 04 / 21 / 2022

FEC Identification Number: C

Transaction ID : B393AF7DDI

Amount of Each Disbursement this Period: 332.20

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 332.20

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



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

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**NUNES VICTORY FUND**

**A. LAMARSNA, MORGAN, , ,**

Full Name (Last, First, Middle Initial)

Mailing Address PO BOX 6545

City VISALIA State CA Zip Code 93290-6545

Purpose of Disbursement TRAVEL EXPENSE REIMBURSEMENT

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 05 / 06 / 2022

FEC Identification Number: C

Transaction ID : B6221A0806/

Amount of Each Disbursement this Period: 123.00

Memo Item

**B. INNOVATIVE EMPLOYEE SOLUTIONS**

Full Name (Last, First, Middle Initial)

Mailing Address 9665 GRANITE RIDGE DR. #420

City SAN DIEGO State CA Zip Code 92123-2659

Purpose of Disbursement SEE MEMO ITEMS

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 05 / 21 / 2022

FEC Identification Number: C

Transaction ID : B1D1A047FF/

Amount of Each Disbursement this Period: 182.56

Memo Item

**C. LAMARSNA, MORGAN, , ,**

Full Name (Last, First, Middle Initial)

Mailing Address PO BOX 6545

City VISALIA State CA Zip Code 93290-6545

Purpose of Disbursement PAYROLL

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 05 / 21 / 2022

FEC Identification Number: C

Transaction ID : B0A373053C

Amount of Each Disbursement this Period: 153.75

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 182.56

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

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

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**NUNES VICTORY FUND**

Full Name (Last, First, Middle Initial) <b>A. LAMARSNA, MORGAN, , ,</b>		Date of Disbursement MM / DD / YYYY 05 / 21 / 2022	
Mailing Address PO BOX 6545		FEC Identification Number C [REDACTED] <b>Transaction ID : B3BFDEEC41</b> Amount of Each Disbursement this Period [REDACTED] 28.81	
City VISALIA	State CA	Zip Code 93290-6545	Category/ Type 001
Purpose of Disbursement TRAVEL REIMBURSEMENT			
Candidate Name		Memo Item <input checked="" 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:			

Full Name (Last, First, Middle Initial) <b>B. INNOVATIVE EMPLOYEE SOLUTIONS</b>		Date of Disbursement MM / DD / YYYY 06 / 18 / 2022	
Mailing Address 9665 GRANITE RIDGE DR. #420		FEC Identification Number C [REDACTED] <b>Transaction ID : BF50E4F494C</b> Amount of Each Disbursement this Period [REDACTED] 132.56	
City SAN DIEGO	State CA	Zip Code 92123-2659	Category/ Type
Purpose of Disbursement SEE MEMO ITEMS			
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:			

Full Name (Last, First, Middle Initial) <b>C. PINNACLE PREMIX LLC</b>		Date of Disbursement MM / DD / YYYY 04 / 25 / 2022	
Mailing Address 7019 W SUNNYVIEW AVE		FEC Identification Number C [REDACTED] <b>Transaction ID : B4FAD18227</b> Amount of Each Disbursement this Period [REDACTED] 776.39	
City VISALIA	State CA	Zip Code 93291-9639	Category/ Type
Purpose of Disbursement			
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:			

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

908.95

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

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

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**NUNES VICTORY FUND**

Full Name (Last, First, Middle Initial)

**A. PINNACLE PREMIX LLC**

Mailing Address 7019 W SUNNYVIEW AVE

City  
VISALIA

State  
CA

Zip Code  
93291-9639

Purpose of Disbursement  
UTILITIES

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		2	5		2	0	2	2

FEC Identification Number

**Transaction ID : B34CDCB0C:**  
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**B. PINNACLE PREMIX LLC**

Mailing Address 7019 W SUNNYVIEW AVE

City  
VISALIA

State  
CA

Zip Code  
93291-9639

Purpose of Disbursement  
RENT

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify)

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		2	5		2	0	2	2

FEC Identification Number

**Transaction ID : B0AAB1E964**  
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**C. PINNACLE PREMIX LLC**

Mailing Address 7019 W SUNNYVIEW AVE

City  
VISALIA

State  
CA

Zip Code  
93291-9639

Purpose of Disbursement  
SEE MEMO ITEMS

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		3	1		2	0	2	2

FEC Identification Number

**Transaction ID : B5742D4417:**  
Amount of Each Disbursement this Period

Memo Item

**SUBTOTAL** of Disbursements This Page (optional).....▶

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

<input type="text" value="766.72"/>
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<input type="text"/>
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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**NUNES VICTORY FUND**

Full Name (Last, First, Middle Initial) <b>A. PINNACLE PREMIX LLC</b>		Date of Disbursement MM / DD / YYYY 05 / 31 / 2022
Mailing Address 7019 W SUNNYVIEW AVE		FEC Identification Number C [REDACTED] <b>Transaction ID : BEE1CA6393</b> Amount of Each Disbursement this Period [REDACTED] 266.72
City VISALIA	State CA	Zip Code 93291-9639
Purpose of Disbursement UTILITIES		Category/Type 001
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:	<input checked="" type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>B. PINNACLE PREMIX LLC</b>		Date of Disbursement MM / DD / YYYY 05 / 31 / 2022
Mailing Address 7019 W SUNNYVIEW AVE		FEC Identification Number C [REDACTED] <b>Transaction ID : BE8309CFF6</b> Amount of Each Disbursement this Period [REDACTED] 500.00
City VISALIA	State CA	Zip Code 93291-9639
Purpose of Disbursement RENT		Category/Type 001
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:	<input checked="" type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>C. PINNACLE PREMIX LLC</b>		Date of Disbursement MM / DD / YYYY 06 / 29 / 2022
Mailing Address 7019 W SUNNYVIEW AVE		FEC Identification Number C [REDACTED] <b>Transaction ID : B8C4A67558</b> Amount of Each Disbursement this Period [REDACTED] 370.09
City VISALIA	State CA	Zip Code 93291-9639
Purpose of Disbursement UTILITIES		Category/Type 001
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:	<input type="checkbox"/> Memo Item	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	[REDACTED] 370.09
<b>TOTAL</b> This Period (last page this line number only).....▶	[REDACTED] 3680.30