



**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 05/2016)

Page 2

Write or Type Committee Name

**NRA Victory Fund Inc**

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="0"/>	<input type="text" value="0.00"/>	<input type="text" value="0.00"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="2066056.49"/>	
(c) Total Receipts (from Line 19) .....	<input type="text" value="1184542.04"/>	<input type="text" value="19722806.00"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<input type="text" value="3250598.53"/>	<input type="text" value="19722806.00"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="3161756.59"/>	<input type="text" value="19588964.06"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="88841.94"/>	<input type="text" value="133841.94"/>
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<input type="text" value="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

**NRA Victory Fund Inc**

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).....	56000.00	510500.00
(ii) Unitemized .....	700.00	1100.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	56700.00	511600.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	10289109.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) .....	56700.00	10800709.00
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).....	15637.04	332792.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	1112205.00	8589305.00
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)).....▶	1184542.04	19722806.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	1184542.04	19722806.00

**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 .....	271286.95	38136.81
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	271286.95	38136.81
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditures (use Schedule E) .....	2875207.60	19452560.39
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).....	15262.04	98266.86
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)) ..	3161756.59	19588964.06
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	3161756.59	19588964.06

**DETAILED SUMMARY PAGE**  
of Disbursements

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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) .....	56700.00	10800709.00
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	56700.00	10800709.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	271286.95	38136.81
37. Offsets to Operating Expenditures (from Line 15, page 3).....	15637.04	332792.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	255649.91	- 294655.19

**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 39
	<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	

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)  
**NRA Victory Fund Inc**

**A. ALLEN, SANDRA, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 137 TIMBERMILL LANE  
 City EDWARDSVILLE State IL Zip Code 62025  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For: 2022  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 1000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 30 / 2020  
**Transaction ID : 11A100**  
 Amount of Each Receipt this Period  
 0.00  
 Memo Item CONTRIBUTION  
 ADDING OCCUPATION AND EMPLOYER INFORMATION

**B. Bachenberg, William, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 3835 Mauch Chunk Road  
 City Allentown State PA Zip Code 18104  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) SELF-EMPLOYED Occupation (for Individual) ATTORNEY  
 Receipt For: 2022  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 60000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 30 / 2020  
**Transaction ID : 11A101**  
 Amount of Each Receipt this Period  
 0.00  
 Memo Item CONTRIBUTION  
 ADDING OCCUPATION AND EMPLOYER INFORMATION

**C. Beaman, Lee, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1525 Broadway  
 City Nashville State TN Zip Code 37203  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For: 2022  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 20000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 30 / 2020  
**Transaction ID : 11A102**  
 Amount of Each Receipt this Period  
 0.00  
 Memo Item CONTRIBUTION  
 ADDING OCCUPATION AND EMPLOYER INFORMATION

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	0.00
<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 39
	<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)  
**NRA Victory Fund Inc**

**A. CALLAN, ROBERT, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 7761 N. AVENIDA DE CARLOTTA  
 City TUCSON State AZ Zip Code 85704  
 FEC ID number of contributing federal political committee. C  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For: 2022  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 12 / 30 / 2020  
**Transaction ID : 11A103**  
 Amount of Each Receipt this Period 0.00  
 Memo Item CONTRIBUTION  
 ADDING OCCUPATION AND EMPLOYER INFORMATION

**B. COLTRANE, MICHAEL, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 110 FOREST CLIFF COURT NE  
 City CONCORD State NC Zip Code 28025  
 FEC ID number of contributing federal political committee. C  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For: 2022  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 12 / 30 / 2020  
**Transaction ID : 11A104**  
 Amount of Each Receipt this Period 0.00  
 Memo Item CONTRIBUTION  
 ADDING OCCUPATION AND EMPLOYER INFORMATION

**C. Curtis, Joshua, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1918 New Bedford Drive  
 City Sun City Center State FL Zip Code 33573  
 FEC ID number of contributing federal political committee. C  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For: 2022  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 50000.00

Date of Receipt 12 / 30 / 2020  
**Transaction ID : 11A105**  
 Amount of Each Receipt this Period 0.00  
 Memo Item CONTRIBUTION  
 ADDING OCCUPATION AND EMPLOYER INFORMATION

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	0.00
<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 8 OF 39
<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)  
**NRA Victory Fund Inc**

**A. CURTIS, JOSHUA, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1918 NEW BEDFORD DRIVE  
 City SUN CITY CENTER State FL Zip Code 33573  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) INFO REQUESTED Occupation (for Individual) INFO REQUESTED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 50000.00

Date of Receipt 12 / 17 / 2020  
**Transaction ID : SA11A.284**  
 Amount of Each Receipt this Period 50000.00  
 Memo Item  
**RECEIPT**

**B. DRAPER, ANNE, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 9905 WHITETAIL LANE  
 City LITTLETON State CO Zip Code 80127  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For: 2022  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 7000.00

Date of Receipt 12 / 30 / 2020  
**Transaction ID : 11A106**  
 Amount of Each Receipt this Period 0.00  
 Memo Item  
**CONTRIBUTION**  
 ADDING OCCUPATION AND EMPLOYER INFORMATION

**C. FERGUSON, WYATT, , , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 400 SADDLE OAKS DRIVE  
 City BENTON State AR Zip Code 72019  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) FERGUSON'S, INC. Occupation (for Individual) PRESIDENT  
 Receipt For: 2022  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 12 / 30 / 2020  
**Transaction ID : 11A141**  
 Amount of Each Receipt this Period 0.00  
 Memo Item  
**CONTRIBUTION**  
 ADDING OCCUPATION AND EMPLOYER INFORMATION

<b>SUBTOTAL</b> of Receipts This Page (optional).....	50000.00
<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 9 OF 39
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**NRA Victory Fund Inc**

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

Mailing Address 7490 COON CREEK ROAD

City PFAFFTOWN	State NC	Zip Code 27040
-------------------	-------------	-------------------

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

Name of Employer (for Individual) GRANDVIEW, INC.	Occupation (for Individual) PRESIDENT
--	--

Receipt For: 2022  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
12		30		2020

**Transaction ID : 11A107**

Amount of Each Receipt this Period  
0.00

Memo Item  
CONTRIBUTION

ADDING OCCUPATION AND EMPLOYER INFORMATION

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

Mailing Address 1933 SUNRISE KEY BLVD

City FT LAUDERDALE	State FL	Zip Code 33304
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF-EMPLOYED	Occupation (for Individual) PRODUCER
--	---

Receipt For: 2022  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2000.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
12		30		2020

**Transaction ID : 11A108**

Amount of Each Receipt this Period  
0.00

Memo Item  
CONTRIBUTION

ADDING OCCUPATION AND EMPLOYER INFORMATION

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

Mailing Address 1933 SUNRISE KEY BLVD

City FT LAUDERDALE	State FL	Zip Code 33304
-----------------------	-------------	-------------------

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

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

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
2000.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
12		17		2020

**Transaction ID : SA11A.272**

Amount of Each Receipt this Period  
2000.00

Memo Item  
RECEIPT

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	2000.00
<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:	PAGE 10 OF 39
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
	<input type="checkbox"/> 12	<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**NRA Victory Fund Inc**

**A. GHILARDUCCI, SHERRI, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2712 BIG BEAR CIRCLE  
 City SEDALIA State CO Zip Code 80135  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) SELF-EMPLOYED Occupation (for Individual) RANCHER  
 Receipt For: 2022  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 30 / 2020  
**Transaction ID : 11A109**  
 Amount of Each Receipt this Period 0.00  
 Memo Item CONTRIBUTION  
 ADDING OCCUPATION AND EMPLOYER INFORMATION

**B. GLADSTONE, LORNA, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1161 CREST LANE  
 City MCLEAN State VA Zip Code 22101  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For: 2022  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 30 / 2020  
**Transaction ID : 11A110**  
 Amount of Each Receipt this Period 0.00  
 Memo Item CONTRIBUTION  
 ADDING OCCUPATION AND EMPLOYER INFORMATION

**C. GOWIN, KRISTIN, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 33 SHARON DRIVE  
 City FAIRVIEW State NC Zip Code 28730  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) ASHEVILLE ARTHRITIS Occupation (for Individual) MEDICAL DOCTOR  
 Receipt For: 2022  
 Primary  General  
 Other (specify)  
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 30 / 2020  
**Transaction ID : 11A111**  
 Amount of Each Receipt this Period 0.00  
 Memo Item CONTRIBUTION  
 ADDING OCCUPATION AND EMPLOYER INFORMATION

**SUBTOTAL** of Receipts This Page (optional).....▶ 0.00  
**TOTAL** 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 11 OF 39
<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)  
**NRA Victory Fund Inc**

**A. Grout, Renee, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1512 Stagecoach Road SE  
 City Albuquerque State NM Zip Code 87123  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For: 2022  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 200.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 30 / 2020  
**Transaction ID : 11A112**  
 Amount of Each Receipt this Period  
 0.00  
 Memo Item CONTRIBUTION  
 ADDING OCCUPATION AND EMPLOYER INFORMATION

**B. HALEY, CARL, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 5 SAINT JAMES PLACE  
 City NASHVILLE State TN Zip Code 37215  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For: 2022  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 30 / 2020  
**Transaction ID : 11A113**  
 Amount of Each Receipt this Period  
 0.00  
 Memo Item CONTRIBUTION  
 ADDING OCCUPATION AND EMPLOYER INFORMATION

**C. Harrison, J. Frank, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 4100 Coca Cola Plaza Suite 100  
 City Charlotte State NC Zip Code 28211  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) COCA-COLA BOTTLING COMPANY Occupation (for Individual) CHAIRMAN & CEO  
 Receipt For: 2022  
 Primary  General  
 Other (specify)  
 Aggregate Year-to-Date ▼ 10000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 30 / 2020  
**Transaction ID : 11A114**  
 Amount of Each Receipt this Period  
 0.00  
 Memo Item CONTRIBUTION  
 ADDING OCCUPATION AND EMPLOYER INFORMATION

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	0.00
<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 12 OF 39
<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)  
**NRA Victory Fund Inc**

**A. HEAD, JERRY, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO BOX 467  
 City CORSICANA State TX Zip Code 75151  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) JERRY L. HEAD INVESTMENTS Occupation (for Individual) INVESTMENT BANKER  
 Receipt For: 2022  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 12 / 30 / 2020  
**Transaction ID : 11A115**  
 Amount of Each Receipt this Period 0.00  
 Memo Item CONTRIBUTION  
 ADDING OCCUPATION AND EMPLOYER INFORMATION

**B. HENLINE, CLIFFORD, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 4900 FALLS OF NEUSE ROAD SUITE 150  
 City RALEIGH State NC Zip Code 27609  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) TRAIL CREEK INVESTMENTS Occupation (for Individual) DIRECTOR  
 Receipt For: 2022  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 2500.00

Date of Receipt 12 / 30 / 2020  
**Transaction ID : 11A116**  
 Amount of Each Receipt this Period 0.00  
 Memo Item CONTRIBUTION  
 ADDING OCCUPATION AND EMPLOYER INFORMATION

**C. Hollfelder, Thomas, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address N7889 Lakeside Park Road  
 City Elkhart Lake State WI Zip Code 53020  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For: 2022  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 12 / 30 / 2020  
**Transaction ID : 11A117**  
 Amount of Each Receipt this Period 0.00  
 Memo Item CONTRIBUTION  
 ADDING OCCUPATION AND EMPLOYER INFORMATION

<b>SUBTOTAL</b> of Receipts This Page (optional).....	0.00
<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 13 OF 39
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**NRA Victory Fund Inc**

**A. Honea, Gene, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO Box 6631

City Raleigh	State NC	Zip Code 27628
-----------------	-------------	-------------------

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

Name of Employer (for Individual)  
SELF-EMPLOYED

Occupation (for Individual)  
LANDSCAPER

Receipt For: 2022  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
200.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 30 / 2020

**Transaction ID : 11A118**

Amount of Each Receipt this Period  
0.00

Memo Item  
CONTRIBUTION

ADDING OCCUPATION AND EMPLOYER INFORMATION

**B. HUMBLE, TED, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 80 FOREST ROAD

City ASHEVILLE	State NC	Zip Code 28803
-------------------	-------------	-------------------

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

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For: 2022  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 30 / 2020

**Transaction ID : 11A119**

Amount of Each Receipt this Period  
0.00

Memo Item  
CONTRIBUTION

ADDING OCCUPATION AND EMPLOYER INFORMATION

**C. HUMBLE, TED, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 80 FOREST ROAD

City ASHEVILLE	State NC	Zip Code 28803
-------------------	-------------	-------------------

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

Name of Employer (for Individual)  
INFO REQUESTED

Occupation (for Individual)  
INFO REQUESTED

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 28 / 2020

**Transaction ID : SA11A.271**

Amount of Each Receipt this Period  
1000.00

Memo Item  
RECEIPT

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1000.00
<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 14 OF 39
<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)  
**NRA Victory Fund Inc**

**A. KENT, WILLIAM, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO BOX 908001  
 City MIDLAND State TX Zip Code 79708  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) PRINCIPAL Occupation (for Individual) WESCON MANAGEMENT GROUP  
 Receipt For: 2022  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 12 / 30 / 2020  
**Transaction ID : 11A142**  
 Amount of Each Receipt this Period 0.00  
 Memo Item CONTRIBUTION  
 ADDING OCCUPATION AND EMPLOYER INFORMATION

**B. Lajam, Claudette, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 30 Knollwood Drive  
 City Larchmont State NY Zip Code 10538  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) NYU LANGOME HEALTH Occupation (for Individual) ORTHOPEDIC SURGEON  
 Receipt For: 2022  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 12 / 30 / 2020  
**Transaction ID : 11A120**  
 Amount of Each Receipt this Period 0.00  
 Memo Item CONTRIBUTION  
 ADDING OCCUPATION AND EMPLOYER INFORMATION

**C. Markert, William, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO Box 455  
 City Blackduck State MN Zip Code 56630  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For: 2022  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 15000.00

Date of Receipt 12 / 30 / 2020  
**Transaction ID : 11A121**  
 Amount of Each Receipt this Period 0.00  
 Memo Item CONTRIBUTION  
 ADDING OCCUPATION AND EMPLOYER INFORMATION

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	0.00
<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 15 OF 39
	<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)  
**NRA Victory Fund Inc**

**A. Marks, Sheldon, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 5925 N. Mina Vista  
 City Tucson State AZ Zip Code 85718  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) SELF-EMPLOYED Occupation (for Individual) PHYSICIAN  
 Receipt For: 2022  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 30 / 2020  
**Transaction ID : 11A122**  
 Amount of Each Receipt this Period 0.00  
 Memo Item CONTRIBUTION  
 ADDING OCCUPATION AND EMPLOYER INFORMATION

**B. MARKS, SHELDON, F. , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 5925 N. MINA VISTA  
 City TUCSON State AZ Zip Code 85718  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) INFO REQUESTED Occupation (for Individual) INFO REQUESTED  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 11 / 30 / 2020  
**Transaction ID : SA11A.276**  
 Amount of Each Receipt this Period 1000.00  
 Memo Item RECEIPT

**C. Martin, Marion, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 255 Fielder Lane  
 City Savannah State TN Zip Code 38372  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) WINDOVER FARM Occupation (for Individual) OWNER  
 Receipt For: 2022  
 Primary     General  
 Other (specify)  
 Aggregate Year-to-Date ▼ 30000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 30 / 2020  
**Transaction ID : 11A123**  
 Amount of Each Receipt this Period 0.00  
 Memo Item CONTRIBUTION  
 ADDING OCCUPATION AND EMPLOYER INFORMATION

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1000.00
<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 16 OF 39
<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)  
**NRA Victory Fund Inc**

**A. Matthews, George, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1925 N. Flagler Drive  
 City West Palm Beach State FL Zip Code 33407  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For: 2022  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 5000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 30 / 2020  
**Transaction ID : 11A124**  
 Amount of Each Receipt this Period  
 0.00  
 Memo Item  
 CONTRIBUTION  
 ADDING OCCUPATION AND EMPLOYER INFORMATION

**B. Moore, Robert, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO Box 6334  
 City Falls Church State VA Zip Code 22040  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) FEDERAL GOVERNMENT Occupation (for Individual) INFORMATION TECHNOLOGY  
 Receipt For: 2022  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 1000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 30 / 2020  
**Transaction ID : 11A125**  
 Amount of Each Receipt this Period  
 0.00  
 Memo Item  
 CONTRIBUTION  
 ADDING OCCUPATION AND EMPLOYER INFORMATION

**C. MOORE, ROBERT, T., , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO BOX 6334  
 City FALLS CHURCH State VA Zip Code 22040  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) INFO REQUESTED Occupation (for Individual) INFO REQUESTED  
 Receipt For:  
 Primary  General  
 Other (specify)  
 Aggregate Year-to-Date ▼  
 1000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 08 / 2020  
**Transaction ID : SA11A.275**  
 Amount of Each Receipt this Period  
 1000.00  
 Memo Item  
 RECEIPT

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1000.00
<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 17 OF 39
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**NRA Victory Fund Inc**

**A. MOYER, ELAINE, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO BOX 100  
 City ICKESBURG State PA Zip Code 17037  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) FAITH UNITED CHURCH Occupation (for Individual) PASTOR  
 Receipt For: 2022  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 200.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 30 / 2020  
**Transaction ID : 11A126**  
 Amount of Each Receipt this Period  
 0.00  
 Memo Item CONTRIBUTION  
 ADDING OCCUPATION AND EMPLOYER INFORMATION

**B. MURLAND, AUDREY, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 25339 CROWN POINT COURT  
 City FARMINGTON HILLS State MI Zip Code 48335  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) TURBINE TOOL & GAUGE Occupation (for Individual) PRESIDENT  
 Receipt For: 2022  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 3000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 30 / 2020  
**Transaction ID : 11A127**  
 Amount of Each Receipt this Period  
 0.00  
 Memo Item CONTRIBUTION  
 ADDING OCCUPATION AND EMPLOYER INFORMATION

**C. NORMAN, RICHARD, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 40959 PACER LANE  
 City PAEONIAN SPRINGS State VA Zip Code 20129  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) THE RICHARD NORMAN COMPANY Occupation (for Individual) PRESIDENT  
 Receipt For: 2022  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 30 / 2020  
**Transaction ID : 11A128**  
 Amount of Each Receipt this Period  
 0.00  
 Memo Item CONTRIBUTION  
 ADDING OCCUPATION AND EMPLOYER INFORMATION

**SUBTOTAL** of Receipts This Page (optional).....▶ 0.00  
**TOTAL** 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:	PAGE 18 OF 39
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**NRA Victory Fund Inc**

**A. PATTERSON, JAMES, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 10350 ORMSBY PARK PLACE  
 SUITE 202  
 City LOUISVILLE State KY Zip Code 40223  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) PATTCO, LLC Occupation (for Individual) PRESIDENT  
 Receipt For: 2022  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 10000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 30 / 2020  
**Transaction ID : 11A129**  
 Amount of Each Receipt this Period  
 0.00  
 Memo Item  
 CONTRIBUTION  
 ADDING OCCUPATION AND EMPLOYER INFORMATION

**B. ROBERTS, SURRY, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 120 WOODBURN ROAD  
 City RALEIGH State NC Zip Code 27605  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For: 2022  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 30 / 2020  
**Transaction ID : 11A130**  
 Amount of Each Receipt this Period  
 0.00  
 Memo Item  
 CONTRIBUTION  
 ADDING OCCUPATION AND EMPLOYER INFORMATION

**C. ROCOVICH, JOHN, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 5264 FALCON RIDGE ROAD SW  
 City ROANOKE State VA Zip Code 24018  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) MOSS & ROCOVICH Occupation (for Individual) ATTORNEY  
 Receipt For: 2022  
 Primary  General  
 Other (specify)  
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 30 / 2020  
**Transaction ID : 11A131**  
 Amount of Each Receipt this Period  
 0.00  
 Memo Item  
 CONTRIBUTION  
 ADDING OCCUPATION AND EMPLOYER INFORMATION

**SUBTOTAL** of Receipts This Page (optional).....▶ 0.00  
**TOTAL** 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 19 OF 39
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**NRA Victory Fund Inc**

**A. RUMPEL, BARBARA, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1279 HOUSTON STREET  
 City MELBOURNE State FL Zip Code 32935  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) SELF-EMPLOYED Occupation (for Individual) DEVELOPER  
 Receipt For: 2022  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 10000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 30 / 2020  
**Transaction ID : 11A132**  
 Amount of Each Receipt this Period  
 0.00  
 Memo Item CONTRIBUTION  
 ADDING OCCUPATION AND EMPLOYER INFORMATION

**B. Schumann, John, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 8225 5th Street SW  
 City Vero Beach State FL Zip Code 32968  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For: 2022  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 150000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 30 / 2020  
**Transaction ID : 11A133**  
 Amount of Each Receipt this Period  
 0.00  
 Memo Item CONTRIBUTION  
 ADDING OCCUPATION AND EMPLOYER INFORMATION

**C. Shores, William, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 3334 Horseshoe Bend Court  
 City Longwood State FL Zip Code 32779  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) SELF-EMPLOYED Occupation (for Individual) ACCOUNTANT  
 Receipt For: 2022  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 10000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 30 / 2020  
**Transaction ID : 11A134**  
 Amount of Each Receipt this Period  
 0.00  
 Memo Item CONTRIBUTION  
 ADDING OCCUPATION AND EMPLOYER INFORMATION

**SUBTOTAL** of Receipts This Page (optional).....▶ 0.00  
**TOTAL** 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 20 OF 39
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**NRA Victory Fund Inc**

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

Mailing Address 205 CAMERON STREET

City ALEXANDRIA	State VA	Zip Code 22314
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF-EMPLOYED	Occupation (for Individual) CONSULTANT
--	---

Receipt For: 2022  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
12		30		2020

**Transaction ID : 11A135**

Amount of Each Receipt this Period  
0.00

Memo Item CONTRIBUTION

ADDING OCCUPATION AND EMPLOYER INFORMATION

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

Mailing Address 9119 E. CHARTER OAK DRIVE

City SCOTTSDALE	State AZ	Zip Code 85260
--------------------	-------------	-------------------

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

Name of Employer (for Individual) SELF-EMPLOYED	Occupation (for Individual) SPEAKER
--	--

Receipt For: 2022  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
12		30		2020

**Transaction ID : 11A136**

Amount of Each Receipt this Period  
0.00

Memo Item CONTRIBUTION

ADDING OCCUPATION AND EMPLOYER INFORMATION

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

Mailing Address PO BOX 3649

City WILMINGTON	State NC	Zip Code 28406
--------------------	-------------	-------------------

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

Name of Employer (for Individual) NONE	Occupation (for Individual) HOMEMAKER
---	--

Receipt For: 2022  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
25000.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
12		30		2020

**Transaction ID : 11A138**

Amount of Each Receipt this Period  
0.00

Memo Item CONTRIBUTION

ADDING OCCUPATION AND EMPLOYER INFORMATION

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	0.00
<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 21 OF 39
	<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)  
**NRA Victory Fund Inc**

**A. SULLIVAN, SCOTT, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO BOX 3649  
 City WILMINGTON State NC Zip Code 28406  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) CAMERON MANAGEMENT Occupation (for Individual) CO-FOUNDER  
 Receipt For: 2022  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 25000.00

Date of Receipt 12 / 30 / 2020  
**Transaction ID : 11A137**  
 Amount of Each Receipt this Period 0.00  
 Memo Item CONTRIBUTION  
 ADDING OCCUPATION AND EMPLOYER INFORMATION

**B. Sutton, Michael , , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 30013 Sunset Pointe  
 City Deer Island State FL Zip Code 32776  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For: 2022  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 12 / 30 / 2020  
**Transaction ID : 11A139**  
 Amount of Each Receipt this Period 0.00  
 Memo Item CONTRIBUTION  
 ADDING OCCUPATION AND EMPLOYER INFORMATION

**C. SUTTON, MICHAEL , W. , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 30013 SUNSET POINTE  
 City DEER ISLAND State FL Zip Code 32776  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) INFO REQUESTED Occupation (for Individual) INFO REQUESTED  
 Receipt For:  
 Primary  General  
 Other (specify)  
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 12 / 10 / 2020  
**Transaction ID : SA11A.274**  
 Amount of Each Receipt this Period 1000.00  
 Memo Item RECEIPT

**SUBTOTAL** of Receipts This Page (optional).....▶ 1000.00  
**TOTAL** 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:	PAGE 22 OF 39
(check only one)	
<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)  
**NRA Victory Fund Inc**

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

Mailing Address **PO BOX 747**

City <b>FULSHEAR</b>	State <b>TX</b>	Zip Code <b>77441</b>
-------------------------	--------------------	--------------------------

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

Name of Employer (for Individual) <b>WELKER ENGINEERING</b>	Occupation (for Individual) <b>ENGINEER</b>
--	--

Receipt For: 2022  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
**5000.00**

Date of Receipt  
**12 / 30 / 2020**

**Transaction ID : 11A140**

Amount of Each Receipt this Period  
**0.00**

Memo Item  
**CONTRIBUTION**

**ADDING OCCUPATION AND EMPLOYER INFORMATION**

**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)
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Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

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

Amount of Each Receipt this Period

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>0.00</b>
<b>TOTAL</b> This Period (last page this line number only).....▶	<b>56000.00</b>

**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 23 OF 39
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input checked="" type="checkbox"/> 15	<input type="checkbox"/> 16
			<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**NRA Victory Fund Inc**

**A. D & S OUTDOOR ADVERTISING**

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

Mailing Address 926 MT. PISGAH ROAD

City RINGGOLD	State GA	Zip Code 30736
------------------	-------------	-------------------

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

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

Receipt For: 2020  
 Primary  General  
 Other (specify) ▼  
 RUNOFF

Aggregate Year-to-Date ▼  
375.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	16	/	2020

**Transaction ID : SA15.245**

Amount of Each Receipt this Period  
375.00

Memo Item  
IN-KIND - DIGITAL BILLBOARD SPACE

**B. NRA INSTITUTE FOR LEGISLATIVE ACTION**

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

Mailing Address 11250 WAPLES MILL ROAD

City FAIRFAX	State VA	Zip Code 22030
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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 ▼  
8406571.86

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	31	/	2020

**Transaction ID : SA15.253**

Amount of Each Receipt this Period  
5000.00

Memo Item  
IN-KIND CONTRIBUTION  
LEGAL FEES - OUTSIDE COUNSEL

**C. NRA INSTITUTE FOR LEGISLATIVE ACTION**

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

Mailing Address 11250 WAPLES MILL ROAD

City FAIRFAX	State VA	Zip Code 22030
-----------------	-------------	-------------------

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 ▼  
8406571.86

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	31	/	2020

**Transaction ID : SA15.255**

Amount of Each Receipt this Period  
5693.00

Memo Item  
IN-KIND CONTRIBUTION  
ADMINISTRATIVE AND OVERHEAD

<b>SUBTOTAL</b> of Receipts This Page (optional).....	11068.00
<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 24 OF 39
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" 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)  
**NRA Victory Fund Inc**

**A. NRA INSTITUTE FOR LEGISLATIVE ACTION**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 11250 WAPLES MILL ROAD

City FAIRFAX	State VA	Zip Code 22030
-----------------	-------------	-------------------

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

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

Aggregate Year-to-Date ▼  
8406571.86

Date of Receipt  

M M	/	D D	/	Y Y Y Y
12		31		2020

**Transaction ID : SA15.257**

Amount of Each Receipt this Period  
4569.04

Memo Item  
IN-KIND CONTRIBUTION

SALARIES AND BENEFITS

**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
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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).....	4569.04
<b>TOTAL</b> This Period (last page this line number only).....	15637.04



**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 25 OF 39
<input 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 checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**NRA Victory Fund Inc**

**A. DX SERVICE CO, INC.**

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

Mailing Address 300 JACKSON HILL STREET

City HOUSTON	State TX	Zip Code 77007
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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 ▼  
15000.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	23	/	2020

**Transaction ID : SA17.267**

Amount of Each Receipt this Period  
5000.00

Memo Item  
**RECEIPT**

**B. DX SERVICE CO, INC.**

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

Mailing Address 300 JACKSON HILL STREET

City HOUSTON	State TX	Zip Code 77007
-----------------	-------------	-------------------

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 ▼  
15000.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	25	/	2020

**Transaction ID : SA17.269**

Amount of Each Receipt this Period  
5000.00

Memo Item  
**RECEIPT**

**C. NRA INSTITUTE FOR LEGISLATIVE ACTION**

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

Mailing Address 11250 WAPLES MILL ROAD

City FAIRFAX	State VA	Zip Code 22030
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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 ▼  
8406571.86

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	16	/	2020

**Transaction ID : SA17.268**

Amount of Each Receipt this Period  
992205.00

Memo Item  
**RECEIPT**

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1002205.00
<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 26 OF 39
<input 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 checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**NRA Victory Fund Inc**

**A. NRA INSTITUTE FOR LEGISLATIVE ACTION**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 11250 WAPLES MILL ROAD

City FAIRFAX	State VA	Zip Code 22030
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FEC ID number of contributing federal political committee. **C**

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

Aggregate Year-to-Date ▼  
8406571.86

Date of Receipt  

M M	/	D D	/	Y Y Y Y
11		24		2020

**Transaction ID : SA17.270**

Amount of Each Receipt this Period  

110000.00
-----------

Memo Item  
**RECEIPT**

**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)
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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  

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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).....▶	110000.00
<b>TOTAL</b> This Period (last page this line number only).....▶	1112205.00

**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)  
**NRA Victory Fund Inc**

Full Name (Last, First, Middle Initial)  
**A. CHAIN BRIDGE BANK, N.A.**

Mailing Address 1445-A LAUGHLIN AVENUE

City MCLEAN State VA Zip Code 22101

Purpose of Disbursement BANK FEE

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: 12 / 11 / 2020

FEC Identification Number: C

Transaction ID : SB21B.I259

Amount of Each Disbursement this Period: 25.00

Memo Item

Full Name (Last, First, Middle Initial)  
**B. CHAIN BRIDGE BANK, N.A.**

Mailing Address 1445-A LAUGHLIN AVENUE

City MCLEAN State VA Zip Code 22101

Purpose of Disbursement BANK FEE

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: 11 / 30 / 2020

FEC Identification Number: C

Transaction ID : SB21B.I260

Amount of Each Disbursement this Period: 75.00

Memo Item

Full Name (Last, First, Middle Initial)  
**C. CHAIN BRIDGE BANK, N.A.**

Mailing Address 1445-A LAUGHLIN AVENUE

City MCLEAN State VA Zip Code 22101

Purpose of Disbursement BANK FEE

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: 11 / 30 / 2020

FEC Identification Number: C

Transaction ID : SB21B.I261

Amount of Each Disbursement this Period: 25.00

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 125.00

**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)  
**NRA Victory Fund Inc**

Full Name (Last, First, Middle Initial)  
**A. CHAIN BRIDGE BANK, N.A.**

Mailing Address 1445-A LAUGHLIN AVENUE

City MCLEAN State VA Zip Code 22101

Purpose of Disbursement BANK FEE

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 Y Y  
11 / 24 / 2020

FEC Identification Number: C

Transaction ID : SB21B.I262

Amount of Each Disbursement this Period: 20.00

Memo Item

Full Name (Last, First, Middle Initial)  
**B. CHAIN BRIDGE BANK, N.A.**

Mailing Address 1445-A LAUGHLIN AVENUE

City MCLEAN State VA Zip Code 22101

Purpose of Disbursement BANK FEE

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 Y Y  
12 / 14 / 2020

FEC Identification Number: C

Transaction ID : SB21B.I263

Amount of Each Disbursement this Period: 25.00

Memo Item

Full Name (Last, First, Middle Initial)  
**C. CHAIN BRIDGE BANK, N.A.**

Mailing Address 1445-A LAUGHLIN AVENUE

City MCLEAN State VA Zip Code 22101

Purpose of Disbursement BANK FEE

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 Y Y  
12 / 15 / 2020

FEC Identification Number: C

Transaction ID : SB21B.I264

Amount of Each Disbursement this Period: 12.00

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 57.00

**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)  
**NRA Victory Fund Inc**

Full Name (Last, First, Middle Initial)

**A. CHAIN BRIDGE BANK, N.A.**

Mailing Address 1445-A LAUGHLIN AVENUE

City MCLEAN State VA Zip Code 22101

Purpose of Disbursement  
BANK FEE

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

M M / D D / Y Y Y Y Y  
12 / 17 / 2020

FEC Identification Number

C  
Transaction ID : SB21B.I265  
Amount of Each Disbursement this Period  
25.00

Memo Item

Full Name (Last, First, Middle Initial)

**B. CHAIN BRIDGE BANK, N.A.**

Mailing Address 1445-A LAUGHLIN AVENUE

City MCLEAN State VA Zip Code 22101

Purpose of Disbursement  
BANK FEE

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify)

Category/  
Type

Date of Disbursement

M M / D D / Y Y Y Y Y  
12 / 31 / 2020

FEC Identification Number

C  
Transaction ID : SB21B.I266  
Amount of Each Disbursement this Period  
75.00

Memo Item

Full Name (Last, First, Middle Initial)

**C. STARBOARD STRATEGIC, INC.**

Mailing Address 817 SLATERS LANE

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement  
PREPAID MEDIA

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For: 2020  Primary  General  Other (specify) ▼  
RUNOFF

004  
Category/  
Type

Date of Disbursement

M M / D D / Y Y Y Y Y  
12 / 14 / 2020

FEC Identification Number

C  
Transaction ID : SB21B.I241  
Amount of Each Disbursement this Period  
1419999.56

Memo Item

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

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

1420099.56

**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)  
**NRA Victory Fund Inc**

Full Name (Last, First, Middle Initial) <b>A. STARBOARD STRATEGIC, INC.</b>		Date of Disbursement MM / DD / YYYY 12 / 14 / 2020
Mailing Address 817 SLATERS LANE		FEC Identification Number C [REDACTED] <b>Transaction ID : SB21B.I244</b> Amount of Each Disbursement this Period [REDACTED] - 23451.56
City ALEXANDRIA	State VA	Zip Code 22314
Purpose of Disbursement USE OF PREPAID DIGITAL		Category/Type 004
Candidate Name		Memo Item <input type="checkbox"/>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ RUNOFF	
State: _____	District: _____	

Full Name (Last, First, Middle Initial) <b>B. STARBOARD STRATEGIC, INC.</b>		Date of Disbursement MM / DD / YYYY 12 / 17 / 2020
Mailing Address 817 SLATERS LANE		FEC Identification Number C [REDACTED] <b>Transaction ID : SB21B.I277</b> Amount of Each Disbursement this Period [REDACTED] 995287.94
City ALEXANDRIA	State VA	Zip Code 22314
Purpose of Disbursement PREPAID MEDIA		Category/Type 004
Candidate Name		Memo Item <input type="checkbox"/>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ RUNOFF	
State: _____	District: _____	

Full Name (Last, First, Middle Initial) <b>C. STARBOARD STRATEGIC, INC.</b>		Date of Disbursement MM / DD / YYYY 12 / 22 / 2020
Mailing Address 817 SLATERS LANE		FEC Identification Number C [REDACTED] <b>Transaction ID : SB21B.I279</b> Amount of Each Disbursement this Period [REDACTED] - 2391835.94
City ALEXANDRIA	State VA	Zip Code 22314
Purpose of Disbursement USE OF PREPAID MEDIA		Category/Type [REDACTED]
Candidate Name		Memo Item <input type="checkbox"/>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ RUNOFF	
State: _____	District: _____	

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

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

[REDACTED] - 1419999.56
[REDACTED]

**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

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)  
**NRA Victory Fund Inc**

Full Name (Last, First, Middle Initial)  
**A. TARGETED VICTORY, LLC**

Mailing Address 2311 WILSON BOULEVARD  
SUITE 200

City ARLINGTON State VA Zip Code 22201

Purpose of Disbursement PREPAID MEDIA

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For: 2020  
 Primary  General  
 Other (specify) ▼

Category/Type: **004**

Date of Disbursement: 11 / 24 / 2020

FEC Identification Number: **C**

Transaction ID : **SB21B.I185**

Amount of Each Disbursement this Period: 500000.00

Memo Item

Full Name (Last, First, Middle Initial)  
**B. TARGETED VICTORY, LLC**

Mailing Address 2311 WILSON BOULEVARD  
SUITE 200

City ARLINGTON State VA Zip Code 22201

Purpose of Disbursement PREPAID MEDIA

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For: 2020  
 Primary  General  
 Other (specify) ▼

Category/Type: **004**

Date of Disbursement: 11 / 30 / 2020

FEC Identification Number: **C**

Transaction ID : **SB21B.I187**

Amount of Each Disbursement this Period: - 89000.00  
USE OF PREPAID MEDIA

Memo Item

Full Name (Last, First, Middle Initial)  
**C. TARGETED VICTORY, LLC**

Mailing Address 2311 WILSON BOULEVARD  
SUITE 200

City ARLINGTON State VA Zip Code 22201

Purpose of Disbursement USE OF PREPAID MEDIA

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For: 2020  
 Primary  General  
 Other (specify) ▼

Category/Type: **RUNOFF**

Date of Disbursement: 12 / 12 / 2020

FEC Identification Number: **C**

Transaction ID : **SB21B.I278**

Amount of Each Disbursement this Period: - 175000.00

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 236000.00

**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)  
**NRA Victory Fund Inc**

Full Name (Last, First, Middle Initial)

**A. TARGETED VICTORY, LLC**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		22		2020

Mailing Address 2311 WILSON BOULEVARD  
SUITE 200

City ARLINGTON State VA Zip Code 22201

Purpose of Disbursement  
USE OF PREPAID MEDIA

C
Transaction ID : SB21B.I280
Amount of Each Disbursement this Period
- 195545.10
<input type="checkbox"/> Memo Item

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For: 2020  
 Primary  General  
 Other (specify) ▼  
RUNOFF

Full Name (Last, First, Middle Initial)

**B. TARGETED VICTORY, LLC**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		31		2020

Mailing Address 2311 WILSON BOULEVARD  
SUITE 200

City ARLINGTON State VA Zip Code 22201

Purpose of Disbursement  
PREPAID MEDIA

C
Transaction ID : SB21B.I285
Amount of Each Disbursement this Period
230550.05
<input type="checkbox"/> Memo Item

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify)

Full Name (Last, First, Middle Initial)

**C.**

Date of Disbursement

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

Mailing Address

City State Zip Code

Purpose of Disbursement

C
Amount of Each Disbursement this Period
<input type="checkbox"/> Memo Item

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

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

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

35004.95
271286.95



**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 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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)  
**NRA Victory Fund Inc**

**A. NRA INSTITUTE FOR LEGISLATIVE ACTION**

Full Name (Last, First, Middle Initial)

Mailing Address 11250 WAPLES MILL ROAD

City FAIRFAX State VA Zip Code 22030

Purpose of Disbursement IN-KIND CONTRIBUTION

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 12 / 31 / 2020

FEC Identification Number: C

Transaction ID : SB29.I254

Amount of Each Disbursement this Period: 5000.00

Memo Item LEGAL FEES - OUTSIDE COUNSEL

**B. NRA INSTITUTE FOR LEGISLATIVE ACTION**

Full Name (Last, First, Middle Initial)

Mailing Address 11250 WAPLES MILL ROAD

City FAIRFAX State VA Zip Code 22030

Purpose of Disbursement IN-KIND CONTRIBUTION

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 12 / 31 / 2020

FEC Identification Number: C

Transaction ID : SB29.I256

Amount of Each Disbursement this Period: 5693.00

Memo Item ADMINISTRATIVE AND OVERHEAD

**C. NRA INSTITUTE FOR LEGISLATIVE ACTION**

Full Name (Last, First, Middle Initial)

Mailing Address 11250 WAPLES MILL ROAD

City FAIRFAX State VA Zip Code 22030

Purpose of Disbursement IN-KIND CONTRIBUTION

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 12 / 31 / 2020

FEC Identification Number: C

Transaction ID : SB29.I258

Amount of Each Disbursement this Period: 4569.04

Memo Item SALARIES AND BENEFITS

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	15262.04
<b>TOTAL</b> This Period (last page this line number only).....▶	15262.04

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full)
NRA Victory Fund Inc
FEC IDENTIFICATION NUMBER
C C00741710

Check if 24-hour report 48-hour report
New report Amends report filed on

Full Name of Payee
D & S OUTDOOR ADVERTISING
AD RUNS 12/16/20 TO 1/5/21; SEE IN-KIND ON SCHEDULE A
Mailing Address 926 MT. PISGAH ROAD
City RINGGOLD State GA Zip Code 30736
Purpose of Expenditure IN-KIND - DIGITAL BILLBOARD SPACE
Category/Type 004
Date of Public Distribution/Dissemination 12/16/2020
Amount 187.50
Transaction ID: SE24.246
Date of Disbursement or Obligation 12/16/2020

Name of Federal Candidate:
WARNOCK, RAPHAEL, ,
Support Oppose
Office Sought: House Senate State: GA
Disbursement For: Primary General Other (specify) RUNOFF

Full Name of Payee
D & S OUTDOOR ADVERTISING
AD RUNS 12/16/20 TO 1/5/21; SEE IN-KIND ON SCHEDULE A
Mailing Address 926 MT. PISGAH ROAD
City RINGGOLD State GA Zip Code 30736
Purpose of Expenditure IN-KIND - DIGITAL BILLBOARD SPACE
Category/Type 004
Date of Public Distribution/Dissemination 12/16/2020
Amount 187.50
Transaction ID: SE24.247
Date of Disbursement or Obligation 12/16/2020

Name of Federal Candidate:
OSSOFF, T., JONATHAN, ,
Support Oppose
Office Sought: House Senate State: GA
Disbursement For: Primary General Other (specify) RUNOFF

(a) SUBTOTAL of Itemized Independent Expenditures 375.00
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

OWENS, ROBERT, G. , [Electronically Filed]
Signature

Date 12/17/2020

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full)
NRA Victory Fund Inc
FEC IDENTIFICATION NUMBER
C C00741710

Check if 24-hour report 48-hour report
New report Amends report filed on

Full Name of Payee STARBOARD STRATEGIC, INC.
Mailing Address 817 SLATERS LANE
City ALEXANDRIA State VA Zip Code 22314
Purpose of Expenditure DIGITAL BILLBOARD ADVERTISING
Category/Type 001
Date of Public Distribution/Dissemination 12/14/2020
Amount 11725.78
Transaction ID: SE24.242
Date of Disbursement or Obligation 12/14/2020

Name of Federal Candidate: OSSOFF, T., JONATHAN,
Support Oppose
Office Sought: House Senate State: GA
Disbursement For: Primary General Other (specify) RUNOFF

Full Name of Payee STARBOARD STRATEGIC, INC.
Mailing Address 817 SLATERS LANE
City ALEXANDRIA State VA Zip Code 22314
Purpose of Expenditure DIGITAL BILLBOARD ADVERTISING
Category/Type 001
Date of Public Distribution/Dissemination 12/14/2020
Amount 11725.78
Transaction ID: SE24.243
Date of Disbursement or Obligation 12/14/2020

Name of Federal Candidate: WARNOCK, RAPHAEL,
Support Oppose
Office Sought: House Senate State: GA
Disbursement For: Primary General Other (specify) RUNOFF

(a) SUBTOTAL of Itemized Independent Expenditures 23451.56
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

OWENS, ROBERT, G.,

[Electronically Filed]

Date 12/15/2020

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full)
NRA Victory Fund Inc
FEC IDENTIFICATION NUMBER
C C00741710

Check if 24-hour report 48-hour report
New report Amends report filed on

Full Name of Payee STARBOARD STRATEGIC, INC.
Mailing Address 817 SLATERS LANE
City ALEXANDRIA State VA Zip Code 22314
Purpose of Expenditure TELEVISION ADVERTISING
Category/Type 004
Date of Public Distribution/Dissemination 12/22/2020
Amount 1195917.97
Transaction ID: SE24.248
Date of Disbursement or Obligation 12/22/2020

Name of Federal Candidate: OSSOFF, T., JONATHAN,
Support Oppose
Office Sought: House Senate
Disbursement For: Primary General Other (specify) RUNOFF
Calendar Year-To-Date Per Election for Office Sought 2830707.60

Full Name of Payee STARBOARD STRATEGIC, INC.
Mailing Address 817 SLATERS LANE
City ALEXANDRIA State VA Zip Code 22314
Purpose of Expenditure TELEVISION ADVERTISING
Category/Type 004
Date of Public Distribution/Dissemination 12/22/2020
Amount 1195917.97
Transaction ID: SE24.249
Date of Disbursement or Obligation 12/22/2020

Name of Federal Candidate: WARNOCK, RAPHAEL,
Support Oppose
Office Sought: House Senate
Disbursement For: Primary General Other (specify) RUNOFF
Calendar Year-To-Date Per Election for Office Sought 2830707.60

(a) SUBTOTAL of Itemized Independent Expenditures 2391835.94
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

OWENS, ROBERT, G.,

[Electronically Filed]

Date

12/21/2020

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full)
NRA Victory Fund Inc
FEC IDENTIFICATION NUMBER
C C00741710

Check if 24-hour report 48-hour report
New report Amends report filed on

Full Name of Payee
TARGETED VICTORY, LLC
Mailing Address
2311 WILSON BOULEVARD
SUITE 200
City
ARLINGTON State
VA Zip Code
22201
Purpose of Expenditure
DIGITAL ADVERTISING
Category/Type
004
Date of Public Distribution/Dissemination
11 / 30 / 2020
Amount
44500.00
Transaction ID : SE24.188
Date of Disbursement or Obligation
11 / 30 / 2020

Name of Federal Candidate:
OSSOFF, T., JONATHAN,
Support Oppose
Office Sought:
House Senate
District: State: GA
Calendar Year-To-Date
Per Election for Office Sought
2830707.60
Disbursement For:
Primary General
Other (specify)

Full Name of Payee
TARGETED VICTORY, LLC
Mailing Address
2311 WILSON BOULEVARD
SUITE 200
City
ARLINGTON State
VA Zip Code
22201
Purpose of Expenditure
DIGITAL ADVERTISING
Category/Type
004
Date of Public Distribution/Dissemination
11 / 30 / 2020
Amount
44500.00
Transaction ID : SE24.189
Date of Disbursement or Obligation
11 / 30 / 2020

Name of Federal Candidate:
WARNOCK, RAPHAEL,
Support Oppose
Office Sought:
House Senate
District: State: GA
Calendar Year-To-Date
Per Election for Office Sought
44500.00
Disbursement For:
Primary General
Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 89000.00
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Signature OWENS, ROBERT, G., [Electronically Filed] Date 12 / 02 / 2020

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full)
NRA Victory Fund Inc
FEC IDENTIFICATION NUMBER
C C00741710

Check if 24-hour report 48-hour report
New report Amends report filed on

Full Name of Payee
TARGETED VICTORY, LLC
Mailing Address
2311 WILSON BOULEVARD
SUITE 200
City
ARLINGTON State
VA Zip Code
22201
Purpose of Expenditure
DIGITAL ADVERTISING
Category/Type
004
Date of Public Distribution/Dissemination
12 / 12 / 2020
Amount
87500.00
Transaction ID : SE24.239
Date of Disbursement or Obligation
12 / 12 / 2020

Name of Federal Candidate:
OSSOFF, T., JONATHAN,
Support Oppose
Office Sought:
House Senate
District: State: GA
Calendar Year-To-Date
Per Election for Office Sought
2830707.60
Disbursement For:
Primary General
Other (specify)

Full Name of Payee
TARGETED VICTORY, LLC
Mailing Address
2311 WILSON BOULEVARD
SUITE 200
City
ARLINGTON State
VA Zip Code
22201
Purpose of Expenditure
DIGITAL ADVERTISING
Category/Type
004
Date of Public Distribution/Dissemination
12 / 12 / 2020
Amount
87500.00
Transaction ID : SE24.240
Date of Disbursement or Obligation
12 / 12 / 2020

Name of Federal Candidate:
WARNOCK, RAPHAEL,
Support Oppose
Office Sought:
House Senate
District: State: GA
Calendar Year-To-Date
Per Election for Office Sought
2830707.60
Disbursement For:
Primary General
Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures
175000.00
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

OWENS, ROBERT, G.,

[Electronically Filed]

Date

12 / 14 / 2020

Signature

**SCHEDULE E (FEC Form 3X)  
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) <b>NRA Victory Fund Inc</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <b>C</b> C00741710
--	--

Check if  24-hour report  48-hour report  New report Amends report filed on  /  /

Full Name of Payee <input type="checkbox"/> Memo Item <b>TARGETED VICTORY, LLC</b>		
Mailing Address 2311 WILSON BOULEVARD SUITE 200		
City ARLINGTON	State VA	Zip Code 22201
Purpose of Expenditure DIGITAL ADVERTISING		Category/ Type <input type="text"/> 004

Date of Public Distribution/Dissemination <input type="text"/> 12 / <input type="text"/> 22 / <input type="text"/> 2020
Amount <input type="text"/> 97772.55
<b>Transaction ID : SE24.250</b> Date of Disbursement or Obligation <input type="text"/> 12 / <input type="text"/> 22 / <input type="text"/> 2020

Name of Federal Candidate: PERDUE, DAVID, , ,	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <u>GA</u>
Calendar Year-To-Date Per Election for Office Sought <input type="text"/> 2830707.60	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General 2020 <input checked="" type="checkbox"/> Other (specify) ▶ <u>RUNOFF</u>	

Full Name of Payee <input type="checkbox"/> Memo Item <b>TARGETED VICTORY, LLC</b>		
Mailing Address 2311 WILSON BOULEVARD SUITE 200		
City ARLINGTON	State VA	Zip Code 22201
Purpose of Expenditure DIGITAL ADVERTISING		Category/ Type <input type="text"/> 004

Date of Public Distribution/Dissemination <input type="text"/> 12 / <input type="text"/> 22 / <input type="text"/> 2020
Amount <input type="text"/> 97772.55
<b>Transaction ID : SE24.251</b> Date of Disbursement or Obligation <input type="text"/> 12 / <input type="text"/> 22 / <input type="text"/> 2020

Name of Federal Candidate: LOEFFLER, KELLY, , ,	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <u>GA</u>
Calendar Year-To-Date Per Election for Office Sought <input type="text"/> 2830707.60	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General 2020 <input checked="" type="checkbox"/> Other (specify) ▶ <u>RUNOFF</u>	

<b>(a) SUBTOTAL</b> of Itemized Independent Expenditures .....	<input type="text"/> 195545.10
<b>(b) SUBTOTAL</b> of Unitemized Independent Expenditures.....	<input type="text"/>
<b>(c) TOTAL</b> Independent Expenditures .....	<input type="text"/> 2875207.60

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

OWENS, ROBERT, G. , ,

[Electronically Filed]

Date  12 /  21 /  2020

Signature