

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**
CORNYN VICTORY COMMITTEE

ADDRESS (number and street) **PO BOX 13026**
Check if different than previously reported. (ACC) **AUSTIN TX 78711**

2. FEC IDENTIFICATION NUMBER ▼ CITY ▲ STATE ▲ ZIP CODE ▲
C C00770180 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 / / 2021 through / / 2021

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.
PURPURA, SALVATORE, A, MR.,
Type or Print Name of Treasurer

Signature of Treasurer PURPURA, SALVATORE, A, MR., [Electronically Filed] Date / / 2021

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

CORNYN VICTORY COMMITTEE

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="579915.80"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="2000309.00"/>	<input type="text" value="4102660.94"/>
(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="2580224.80"/>	<input type="text" value="4102660.94"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="1781842.20"/>	<input type="text" value="3304278.34"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="798382.60"/>	<input type="text" value="798382.60"/>
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed BY 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

CORNYN VICTORY COMMITTEE

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

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	1941475.00	3990375.00
(ii) Unitemized	334.00	1882.27
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	1941809.00	3992257.27
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	58500.00	108500.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	2000309.00	4100757.27
12. Transfers From Affiliated/Other Party Committees.....	0.00	1903.67
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)).....▶	2000309.00	4102660.94
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	2000309.00	4102660.94

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	223807.15	276559.04
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	223807.15	276559.04
22. Transfers to Affiliated/Other Party Committees.....	1533035.05	2948019.30
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	54700.00
(b) Political Party Committees	25000.00	25000.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	25000.00	79700.00
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)) ..	1781842.20	3304278.34
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	1781842.20	3304278.34

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 5

III. Net Contributions/ Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	2000309.00	4100757.27
34. Total Contribution Refunds (from Line 28(d))	25000.00	79700.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	1975309.00	4021057.27
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	223807.15	276559.04
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	223807.15	276559.04

**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 6 OF 66
<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)
CORNYN VICTORY COMMITTEE

A. AGRAWAL, DURGA, D., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2921 UNIVERSITY BLVD

City HOUSTON	State TX	Zip Code 77005-3451
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) PIPING TECH. AND PRODUCTS	Occupation (for Individual) CEO/PRESIDENT
--	--

Receipt For:
 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
09		30		2021

Transaction ID : SA11A.594468

Amount of Each Receipt this Period
10000.00

Memo Item
CONTRIBUTION

B. BECK, DAVID, J., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3652 INVERNESS DR

City HOUSTON	State TX	Zip Code 77019-1102
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) BECK REDDEN LLP	Occupation (for Individual) ATTORNEY
--	---

Receipt For:
 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
09		29		2021

Transaction ID : SA11A.593916

Amount of Each Receipt this Period
5000.00

Memo Item
CONTRIBUTION

C. BOWDEN, MURRY, , MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 5847 SAN FELIPE ST STE 3600

City HOUSTON	State TX	Zip Code 77057-3263
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) HANOVER CO	Occupation (for Individual) EXECUTIVE
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Receipt For:
 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
09		15		2021

Transaction ID : SA11A.593451

Amount of Each Receipt this Period
25000.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	40000.00
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 7 OF 66
	<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)
CORNYN VICTORY COMMITTEE

A. BOWDEN, POLLY, , MRS.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1780 S POST OAK LN

City HOUSTON	State TX	Zip Code 77056-3748
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FEC ID number of contributing federal political committee. **C**

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

Receipt For:
 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
09		15		2021

Transaction ID : SA11A.593450

Amount of Each Receipt this Period
25000.00

Memo Item
CONTRIBUTION

B. CHAPMAN, NEIL, , MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4518 BLUFFVIEW BLVD

City DALLAS	State TX	Zip Code 75209-1902
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) EXXON MOBIL	Occupation (for Individual) PRESIDENT
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		20		2021

Transaction ID : SA11A.593655

Amount of Each Receipt this Period
2500.00

Memo Item
CONTRIBUTION

C. CHIANG, WILFRED, , MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 411 PINEY POINT RD

City HOUSTON	State TX	Zip Code 77024-6501
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) PLAINS ALL AMERICAN	Occupation (for Individual) EXECUTIVE
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Receipt For:
 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
08		30		2021

Transaction ID : SA11A.592494

Amount of Each Receipt this Period
5000.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	32500.00
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 8 OF 66
	<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)
CORNYN VICTORY COMMITTEE

A. CONTRERAS, ROBERTO, , MR., IV
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4521 SAN FELIPE ST, UNIT 3301

City HOUSTON	State TX	Zip Code 77027-3388
FEC ID number of contributing federal political committee. C		
Name of Employer (for Individual) ST. CHRISTOPHER HOLDINGS		Occupation (for Individual) EXECUTIVE VICE PRESIDENT
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		29		2021

Transaction ID : SA11A.593910

Amount of Each Receipt this Period

1000.00

 Memo Item
CONTRIBUTION

B. COOLEY, MARYAM, , MRS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2651 KIPLING ST, APT 3604

City HOUSTON	State TX	Zip Code 77098-2041
FEC ID number of contributing federal political committee. C		
Name of Employer (for Individual) TELOS RESOURCES, LLC		Occupation (for Individual) CEO
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 2500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		20		2021

Transaction ID : SA11A.593653

Amount of Each Receipt this Period

2500.00

 Memo Item
CONTRIBUTION

C. DICKE, JAMES, F., MR., II
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 422 EASTHAVEN DR

City NEW BREMEN	State OH	Zip Code 45869-1210
FEC ID number of contributing federal political committee. C		
Name of Employer (for Individual) CROWN EQUIPMENT CORPORATION		Occupation (for Individual) C.E.O.
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Aggregate Year-to-Date ▼ 5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		24		2021

Transaction ID : SA11A.592489

Amount of Each Receipt this Period

5000.00

 Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	8500.00
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 9 OF 66
	(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)
CORNYN VICTORY COMMITTEE

A. FISH, JOHN, F., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 776 BOYLSTON ST, PH2A

City BOSTON	State MA	Zip Code 02199-7854
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SUFFOLK CONSTRUCTION	Occupation (for Individual) CHAIRMAN & CEO
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
152500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		02		2021

Transaction ID : SA11A.589548

Amount of Each Receipt this Period
152500.00

Memo Item
CONTRIBUTION

B. FOWLER, RANDY, , MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO BOX 5716

City KINGWOOD	State TX	Zip Code 77325-5716
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) ENTERPRISE PRODUCTS COMPANY	Occupation (for Individual) CO-CEO AND CFO
--	---

Receipt For:
 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
09		08		2021

Transaction ID : SA11A.593204

Amount of Each Receipt this Period
5000.00

Memo Item
CONTRIBUTION

C. GANZI, VICTOR, F., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 106 CENTRAL PARK SOUTH
APT 27E

City NEW YORK	State NY	Zip Code 10019-1578
------------------	-------------	------------------------

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

Name of Employer (for Individual) SELF-EMPLOYED	Occupation (for Individual) CORPORATE DIRECTOR/CONSULTA
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
50000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		22		2021

Transaction ID : SA11A.593912

Amount of Each Receipt this Period
50000.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	207500.00
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 10 OF 66
	(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)
CORNYN VICTORY COMMITTEE

A. GARLAND, GREG, C., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1600 POST OAK BLVD, UNIT 2200

City HOUSTON	State TX	Zip Code 77056-2922
FEC ID number of contributing federal political committee. C		
Name of Employer (for Individual) PHILLIPS		Occupation (for Individual) CHAIRMAN & CEO
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 5000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 29 / 2021
Transaction ID : SA11A.593909

Amount of Each Receipt this Period
 5000.00

Memo Item
 CONTRIBUTION

B. GONSOLIN, AL, A., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 16757

City SUGAR LAND	State TX	Zip Code 77496-6757
FEC ID number of contributing federal political committee. C		
Name of Employer (for Individual) GONSOLIN ENT.		Occupation (for Individual) CEO
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 25000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 19 / 2021
Transaction ID : SA11A.590563

Amount of Each Receipt this Period
 25000.00

Memo Item
 CONTRIBUTION

C. GREEN, STEPHEN, W., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5773 WOODWAY DR #309

City HOUSTON	State TX	Zip Code 77057-1501
FEC ID number of contributing federal political committee. C		
Name of Employer (for Individual) CHEVRON		Occupation (for Individual) EXECUTIVE
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Aggregate Year-to-Date ▼ 2500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 20 / 2021
Transaction ID : SA11A.593657

Amount of Each Receipt this Period
 2500.00

Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	32500.00
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 11 OF 66
	(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)
CORNYN VICTORY COMMITTEE

A. HASLAM, JAMES, A., MR., II
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P.O. BOX 10146

City KNOXVILLE	State TN	Zip Code 37939-0146
FEC ID number of contributing federal political committee. C		
Name of Employer (for Individual) PILOT CORPORATION		Occupation (for Individual) OWNER
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 10000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		10		2021

Transaction ID : SA11A.593214

Amount of Each Receipt this Period

10000.00

 Memo Item
CONTRIBUTION

B. HERRO, DAVID, G., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1230 S OCEAN BLVD

City PALM BEACH	State FL	Zip Code 33480-5006
FEC ID number of contributing federal political committee. C		
Name of Employer (for Individual) HARRIS ASSOCIATES LP		Occupation (for Individual) INVESTMENT MANAGEMENT
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 25000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		10		2021

Transaction ID : SA11A.590049

Amount of Each Receipt this Period

25000.00

 Memo Item
CONTRIBUTION

C. HILDEBRAND, JEFFERY, D., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 1308

City HOUSTON	State TX	Zip Code 77251-1308
FEC ID number of contributing federal political committee. C		
Name of Employer (for Individual) HILCORP ENERGY COMPANY		Occupation (for Individual) CEO
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Aggregate Year-to-Date ▼ 50000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		10		2021

Transaction ID : SA11A.590050

Amount of Each Receipt this Period

50000.00

 Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	85000.00
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 12 OF 66
	<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)
CORNYN VICTORY COMMITTEE

A. HILDEBRAND, MELINDA, B., MRS.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO BOX 1308

City HOUSTON	State TX	Zip Code 77251-1308
-----------------	-------------	------------------------

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

Name of Employer (for Individual) HILCORP VENTURES, INC.	Occupation (for Individual) VICE PRESIDENT
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
50000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		10		2021

Transaction ID : SA11A.590051

Amount of Each Receipt this Period
50000.00

Memo Item
CONTRIBUTION

B. HOLT, JULIANNA, H., MS.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2191 LITTLE BLANCO RD

City BLANCO	State TX	Zip Code 78606-4764
----------------	-------------	------------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
100000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		19		2021

Transaction ID : SA11A.590564

Amount of Each Receipt this Period
100000.00

Memo Item
CONTRIBUTION

C. HOLT, MAYNARD, , MR., III
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 6340 BROMPTON RD

City HOUSTON	State TX	Zip Code 77005-3404
-----------------	-------------	------------------------

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

Name of Employer (for Individual) TUDOR, PICKERING, HOLT & CO.	Occupation (for Individual) CEO
---	------------------------------------

Receipt For:
 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
09		07		2021

Transaction ID : SA11A.593200

Amount of Each Receipt this Period
25000.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	175000.00
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 13 OF 66
	(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

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)
CORNYN VICTORY COMMITTEE

A. JACOB, RYAN, F., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3300 GREENLEE DR
 City AUSTIN State TX Zip Code 78703-1528
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CAPITAL ASSET EXCHANGE Occupation (for Individual) CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 100000.00

Date of Receipt 09 / 27 / 2021
Transaction ID : SA11A.593911
 Amount of Each Receipt this Period 100000.00
 Memo Item
 CONTRIBUTION

B. KEISER, MICHAEL, L., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2450 N. LAKEVIEW AVENUE
 City CHICAGO State IL Zip Code 60614-2878
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BANDON DUNES GOLF RESORT Occupation (for Individual) OWNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 10000.00

Date of Receipt 08 / 16 / 2021
Transaction ID : SA11A.592185
 Amount of Each Receipt this Period 10000.00
 Memo Item
 CONTRIBUTION

C. LANCE, RYAN, M., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2603 DOMINECO LN
 City KATY State TX Zip Code 77450-5373
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CONOCOPHILLIPS Occupation (for Individual) CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 10000.00

Date of Receipt 09 / 20 / 2021
Transaction ID : SA11A.593656
 Amount of Each Receipt this Period 10000.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	120000.00
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 14 OF 66
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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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)
CORNYN VICTORY COMMITTEE

A. LANIER, MARK, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 691505

City HOUSTON	State TX	Zip Code 77269-1505
-----------------	-------------	------------------------

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

Name of Employer (for Individual) LANIER LAW FIRM	Occupation (for Individual) ATTORNEY
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
50000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 01 / 2021
Transaction ID : SA11A.589545

Amount of Each Receipt this Period
 10000.00

Memo Item
 CONTRIBUTION

B. LANIER, MARK, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 691505

City HOUSTON	State TX	Zip Code 77269-1505
-----------------	-------------	------------------------

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

Name of Employer (for Individual) LANIER LAW FIRM	Occupation (for Individual) ATTORNEY
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
50000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 01 / 2021
Transaction ID : SA11A.591103

Amount of Each Receipt this Period
 10000.00

Memo Item
 CONTRIBUTION

C. LANIER, MARK, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 691505

City HOUSTON	State TX	Zip Code 77269-1505
-----------------	-------------	------------------------

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

Name of Employer (for Individual) LANIER LAW FIRM	Occupation (for Individual) ATTORNEY
--	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
50000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 02 / 2021
Transaction ID : SA11A.592947

Amount of Each Receipt this Period
 10000.00

Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	30000.00
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 15 OF 66
	<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)
CORNYN VICTORY COMMITTEE

A. LEACH, TIMOTHY, A., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2735 RACQUET CLUB DR
 City MIDLAND State TX Zip Code 79705-7433
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CONCHO RESOURCES, INC. Occupation (for Individual) PRESIDENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 10000.00

Date of Receipt 08 / 31 / 2021
Transaction ID : SA11A.592716
 Amount of Each Receipt this Period 10000.00
 Memo Item CONTRIBUTION

B. LIPSCHULTZ, MARC, S., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 245 PARK AVENUE 41ST FLOOR
 City NEW YORK State NY Zip Code 10167-0002
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) OWL ROCK CAPITOL PARTNERS Occupation (for Individual) PRESIDENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 50000.00

Date of Receipt 07 / 20 / 2021
Transaction ID : SA11A.590822
 Amount of Each Receipt this Period 50000.00
 Memo Item CONTRIBUTION

C. MARTIN, RUBEN, S., MR., III
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 191
 City KILGORE State TX Zip Code 75663-0191
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MARTIN RESOURCE MANAGEMENT Occupation (for Individual) CEO
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 25000.00

Date of Receipt 08 / 20 / 2021
Transaction ID : SA11A.592190
 Amount of Each Receipt this Period 25000.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	85000.00
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 16 OF 66
	(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)
CORNYN VICTORY COMMITTEE

A. MARTIN, SUE, , MRS.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3 HUNTINGTON ST

City LONGVIEW	State TX	Zip Code 75601-3500
------------------	-------------	------------------------

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

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

Receipt For:
 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
08		20		2021

Transaction ID : SA11A.592189

Amount of Each Receipt this Period
25000.00

Memo Item
CONTRIBUTION

B. MCCREA, MARSHALL, , MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO BOX 592137

City SAN ANTONIO	State TX	Zip Code 78259-0156
---------------------	-------------	------------------------

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

Name of Employer (for Individual) ENERGY TRANSFER	Occupation (for Individual) CHIEF OPERATING OFFICER
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
38125.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		17		2021

Transaction ID : SA11A.592186

Amount of Each Receipt this Period
38125.00

Memo Item
CONTRIBUTION

C. MCLANE, DRAYTON, , MR., JR.
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO BOX 549

City TEMPLE	State TX	Zip Code 76503-0549
----------------	-------------	------------------------

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

Name of Employer (for Individual) MCLANE GROUP	Occupation (for Individual) CHAIRMAN
---	---

Receipt For:
 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
08		03		2021

Transaction ID : SA11A.591588

Amount of Each Receipt this Period
25000.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	88125.00
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 17 OF 66
	<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)
CORNYN VICTORY COMMITTEE

A. MISCHER, PAULA , M., MS.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4 MOTT LANE

City HOUSTON	State TX	Zip Code 77024-7315
-----------------	-------------	------------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
12500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		29		2021

Transaction ID : SA11A.593913

Amount of Each Receipt this Period
12500.00

Memo Item
CONTRIBUTION

B. MISCHER, WALTER, M., MR., JR
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4605 POST OAK PLACE DR, STE 265

City HOUSTON	State TX	Zip Code 77027-9730
-----------------	-------------	------------------------

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

Name of Employer (for Individual) MISCHER INVESTMENTS LP	Occupation (for Individual) REAL ESTATE
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
12500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		14		2021

Transaction ID : SA11A.593436

Amount of Each Receipt this Period
12500.00

Memo Item
CONTRIBUTION

C. NAU, JOHN, L., MR., III
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO BOX 130130

City HOUSTON	State TX	Zip Code 77219-0130
-----------------	-------------	------------------------

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

Name of Employer (for Individual) SILVER EAGLE DISTRIBUTORS	Occupation (for Individual) PRESIDENT & CEO
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
141300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		02		2021

Transaction ID : SA11A.589547

Amount of Each Receipt this Period
141300.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	166300.00
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 18 OF 66
	<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)
CORNYN VICTORY COMMITTEE

A. NAYMOLA, LODDIE, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 500 W 5TH ST, STE 750
 City AUSTIN State TX Zip Code 78701-3836
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) 4 HORN INVESTMENTS Occupation (for Individual) CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 50000.00

Date of Receipt 09 / 10 / 2021
Transaction ID : SA11A.593215
 Amount of Each Receipt this Period 50000.00
 Memo Item
 CONTRIBUTION

B. NIEHAUS, ROBERT, H., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 770 PARK AVENUE
 City NEW YORK State NY Zip Code 10021-4153
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GCP CAPITAL PARTNERS Occupation (for Individual) INVESTMENT MANAGER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 25000.00

Date of Receipt 07 / 26 / 2021
Transaction ID : SA11A.591094
 Amount of Each Receipt this Period 25000.00
 Memo Item
 CONTRIBUTION

C. NYE, ALLEN, , MR., JR.
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3821 HANOVER ST
 City DALLAS State TX Zip Code 75225-7117
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ONCOR ELECTRIC DELIVERY COMPANY Occupation (for Individual) CEO
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 10000.00

Date of Receipt 08 / 30 / 2021
Transaction ID : SA11A.592495
 Amount of Each Receipt this Period 10000.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	85000.00
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 66
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
CORNYN VICTORY COMMITTEE

A. ONSTEAD, KAY , M., MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5298 MEMORIAL DR
 City HOUSTON State TX Zip Code 77007-8260
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) INVESTMENTS
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 84100.00

Date of Receipt **07 / 12 / 2021**
Transaction ID : SA11A.590287
 Amount of Each Receipt this Period 21025.00
 Memo Item CONTRIBUTION

B. ONSTEAD, KAY , M., MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5298 MEMORIAL DR
 City HOUSTON State TX Zip Code 77007-8260
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) INVESTMENTS
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 84100.00

Date of Receipt **08 / 06 / 2021**
Transaction ID : SA11A.591595
 Amount of Each Receipt this Period 21025.00
 Memo Item CONTRIBUTION

C. PORTER, MICHAEL, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9094 DOSS SPRING CREEK RD
 City DOSS State TX Zip Code 78618-0219
 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 ▼ 152000.00

Date of Receipt **07 / 23 / 2021**
Transaction ID : SA11A.590826
 Amount of Each Receipt this Period 152000.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	194050.00
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 66
	<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)
CORNYN VICTORY COMMITTEE

A. ROBISON, JAMES , KIRK, MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4445 N MESA ST, STE 100

City EL PASO	State TX	Zip Code 79902-1109
-----------------	-------------	------------------------

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

Name of Employer (for Individual) PIZZA PROPERTIES INC.	Occupation (for Individual) CEO
--	------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
25000.00

Date of Receipt
08 / 25 / 2021
Transaction ID : SA11A.592487

Amount of Each Receipt this Period
50000.00

Memo Item
CONTRIBUTION

CORRECTION CHARGED BACK \$25,000.00 ON 09/30/2021

B. ROBISON, JAMES , KIRK, MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4445 N MESA ST, STE 100

City EL PASO	State TX	Zip Code 79902-1109
-----------------	-------------	------------------------

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

Name of Employer (for Individual) PIZZA PROPERTIES INC.	Occupation (for Individual) CEO
--	------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
25000.00

Date of Receipt
09 / 30 / 2021
Transaction ID : SA11A.594182

Amount of Each Receipt this Period
- 25000.00

Memo Item
CONTRIBUTION

CORRECTION CHARGED BACK

C. ROWE, JOHN, W., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4351 GULF SHORE BLVD, N
PH #2

City NAPLES	State FL	Zip Code 34103-2697
----------------	-------------	------------------------

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 ▼
10000.00

Date of Receipt
09 / 01 / 2021
Transaction ID : SA11A.592946

Amount of Each Receipt this Period
10000.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	35000.00
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 21 OF 66
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
CORNYN VICTORY COMMITTEE

A. SCHMITZ, JOHN, D., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 819
 City GAINESVILLE State TX Zip Code 76241-0819
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) B29 INVESTMENTS Occupation (for Individual) OWNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 25000.00

Date of Receipt 07 / 01 / 2021
Transaction ID : SA11A.589542
 Amount of Each Receipt this Period 25000.00
 Memo Item
 CONTRIBUTION

B. SCHORR, PAUL, C., MR., IV
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 720 PARK AVENUE APT. 5A
 City NEW YORK State NY Zip Code 10021-4954
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ONE EQUITY PARTNERS Occupation (for Individual) SENIOR MANAGING DIRECTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 50000.00

Date of Receipt 07 / 10 / 2021
Transaction ID : SA11A.590048
 Amount of Each Receipt this Period 50000.00
 Memo Item
 CONTRIBUTION

C. SIMMONS, ANNETTE, C., MRS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4925 GREENVILLE AVE #800
 City DALLAS State TX Zip Code 75206-4017
 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 ▼ 50000.00

Date of Receipt 09 / 20 / 2021
Transaction ID : SA11A.593658
 Amount of Each Receipt this Period 50000.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	125000.00
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 22 OF 66
	<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	

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)
CORNYN VICTORY COMMITTEE

A. SMITH, CLARK, C., MR., III
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 366 TYNEBRIDGE LN
 City HOUSTON State TX Zip Code 77024-7425
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BUCKEYE PARTNERS LP Occupation (for Individual) CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2500.00

Date of Receipt 09 / 13 / 2021
Transaction ID : SA11A.593434
 Amount of Each Receipt this Period 2500.00
 Memo Item
 CONTRIBUTION

B. SPELLINGS, JAMES, M., MR., JR.
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6623 WAGGONER DR.
 City DALLAS State TX Zip Code 75230-5235
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) EXXON MOBIL CORP. Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 09 / 15 / 2021
Transaction ID : SA11A.593437
 Amount of Each Receipt this Period 5000.00
 Memo Item
 CONTRIBUTION

C. STONE, STUART, REAGAN, MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 766
 City RAYMONDVILLE State TX Zip Code 78580-0766
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF-EMPLOYED Occupation (for Individual) RANCHER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 09 / 29 / 2021
Transaction ID : SA11A.593907
 Amount of Each Receipt this Period 5000.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	12500.00
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 23 OF 66
	(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)
CORNYN VICTORY COMMITTEE

A. TALLEY, DARRIN, , MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 8502 HAVEN TRAIL

City TOMBALL	State TX	Zip Code 77375-2650
-----------------	-------------	------------------------

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

Name of Employer (for Individual) EXXON MOBIL	Occupation (for Individual) PRESIDENT
--	--

Receipt For:
 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
09		10		2021

Transaction ID : SA11A.593216

Amount of Each Receipt this Period
5000.00

Memo Item
CONTRIBUTION

B. TILLMAN, LEE, M., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 5555 SAN FELIPE

City HOUSTON	State TX	Zip Code 77056-2701
-----------------	-------------	------------------------

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

Name of Employer (for Individual) MARATHON OIL	Occupation (for Individual) CEO
---	------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
6500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		15		2021

Transaction ID : SA11A.593438

Amount of Each Receipt this Period
6500.00

Memo Item
CONTRIBUTION

C. VANLOH, JENNIFER, F., MRS.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4007 INVERNESS DR

City HOUSTON	State TX	Zip Code 77019-1005
-----------------	-------------	------------------------

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

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

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
12500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		12		2021

Transaction ID : SA11A.590500

Amount of Each Receipt this Period
12500.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	24000.00
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 24 OF 66
	(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)
CORNYN VICTORY COMMITTEE

A. VANLOH, WIL, , MR., JR.
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4007 INVERNESS DR
 City HOUSTON State TX Zip Code 77019-1005
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) QUANTUM ENERGY PARTNERS Occupation (for Individual) CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 12500.00

Date of Receipt **07 / 12 / 2021**
Transaction ID : SA11A.590499
 Amount of Each Receipt this Period 12500.00
 Memo Item
CONTRIBUTION

B. WALKER, JOHN, B., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7 PINE GROVE CIR
 City HOUSTON State TX Zip Code 77024-3022
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) EVERVEST, LTD. Occupation (for Individual) CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt **09 / 20 / 2021**
Transaction ID : SA11A.593654
 Amount of Each Receipt this Period 10000.00
 Memo Item
CONTRIBUTION
 SEE REATTRIBUTION

C. WALKER, JOHN, B., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7 PINE GROVE CIR
 City HOUSTON State TX Zip Code 77024-3022
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) EVERVEST, LTD. Occupation (for Individual) CEO
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt **09 / 21 / 2021**
Transaction ID : SA11A.593671
 Amount of Each Receipt this Period -5000.00
 Memo Item
CONTRIBUTION
 REATTRIBUTION TO SPOUSE

SUBTOTAL of Receipts This Page (optional).....	22500.00
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 25 OF 66
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
CORNYN VICTORY COMMITTEE

A. WALKER, LISA, A., MRS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7 PINE GROVE CIR
 City HOUSTON State TX Zip Code 77024-3022
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HOMEMAKER Occupation (for Individual) HOMEMAKER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 09 / 21 / 2021
Transaction ID : SA11A.593670
 Amount of Each Receipt this Period 5000.00
 Memo Item CONTRIBUTION
 REATTRIBUTION FROM SPOUSE

B. WALTER, PAULA, L., MRS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1100 LOUISIANA ST, STE 320
 City HOUSTON State TX Zip Code 77002-5231
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HOMEMAKER Occupation (for Individual) HOMEMAKER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 25000.00

Date of Receipt 09 / 15 / 2021
Transaction ID : SA11A.593449
 Amount of Each Receipt this Period 25000.00
 Memo Item CONTRIBUTION

C. WASCOM, DENNIS, G., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1770 S POST OAK LN, APT 2608
 City HOUSTON State TX Zip Code 77056-3759
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) EXXON MOBIL Occupation (for Individual) EXECUTIVE
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 09 / 15 / 2021
Transaction ID : SA11A.593454
 Amount of Each Receipt this Period 5000.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 30000.00
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 26 OF 66
	(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)
CORNYN VICTORY COMMITTEE

A. WILKINSON, JULIA, M., MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3939 BEE CAVES RD STE C100
 City W LAKE HILLS State TX Zip Code 78746-6429
 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 ▼ 152500.00

Date of Receipt 08 / 30 / 2021
Transaction ID : SA11A.592718
 Amount of Each Receipt this Period 152500.00
 Memo Item CONTRIBUTION

B. WOOD, DONALD, E., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3501 FAUDREE RD
 City ODESSA State TX Zip Code 79765-8634
 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 ▼ 12500.00

Date of Receipt 08 / 03 / 2021
Transaction ID : SA11A.591591
 Amount of Each Receipt this Period 12500.00
 Memo Item CONTRIBUTION

C. WOOD, TANYA, G., MRS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3501 FAUDREE RD
 City ODESSA State TX Zip Code 79765-8634
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HOMEMAKER Occupation (for Individual) HOMEMAKER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 12500.00

Date of Receipt 08 / 03 / 2021
Transaction ID : SA11A.591590
 Amount of Each Receipt this Period 12500.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	177500.00
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 27 OF 66
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
CORNYN VICTORY COMMITTEE

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. MISCHER INVESTMENTS, L.P.

Mailing Address 4605 POST OAK PLACE DR STE 265

City HOUSTON State TX Zip Code 77027-9730

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 ▼
0.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 03 / 2021
Transaction ID : SA11A.591592

Amount of Each Receipt this Period
25000.00

Memo Item
CONTRIBUTION

SEE ATTRIBUTION BELOW; REFUNDED \$25,000.00 ON 09/03/2021

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. MISCHER, WALTER, M., MR., JR

Mailing Address 4605 POST OAK PLACE DR, STE 265

City HOUSTON State TX Zip Code 77027-9730

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

Name of Employer (for Individual) MISCHER INVESTMENTS LP Occupation (for Individual) REAL ESTATE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
12500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 03 / 2021
Transaction ID : SA11A.591593

Amount of Each Receipt this Period
25000.00

Memo Item
CONTRIBUTION

PARTNERSHIP ATTRIBUTION; REFUNDED \$25,000.00 ON 09/03/2021

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

Mailing Address P.O. BOX 9891

City ARLINGTON State VA Zip Code 22219-1891

FEC ID number of contributing federal political committee. **C** C00694323

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

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
211133.13

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 05 / 2021
Transaction ID : SA11C.589732

Amount of Each Receipt this Period
9660.00

Memo Item
CONTRIBUTION

WINRED SEE BELOW FOR DONORS REQUIRING ITEMIZATION; SEE ATTRIBUTION BELOW FOR ALL DONORS ABOVE ITEMIZ

SUBTOTAL of Receipts This Page (optional)..... ▶ 25000.00

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 28 OF 66
	<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)
CORNYN VICTORY COMMITTEE

A. PLANK, MICHAEL, , MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 225 HEDWIG RD

City HOUSTON	State TX	Zip Code 77024-6735
-----------------	-------------	------------------------

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

Name of Employer (for Individual) THE PLANK COMPANIES	Occupation (for Individual) CEO
--	------------------------------------

Receipt For:
 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
06	/	30	/	2021

Transaction ID : SA11A.589733

Amount of Each Receipt this Period
10000.00

Memo Item
CONTRIBUTION

WINRED SEE BELOW FOR DONORS REQUIRING ITEMIZATION

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

Mailing Address P.O. BOX 9891

City ARLINGTON	State VA	Zip Code 22219-1891
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00694323

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
211133.13

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	26	/	2021

Transaction ID : SA11C.590828

Amount of Each Receipt this Period
24150.00

Memo Item
CONTRIBUTION

WINRED SEE BELOW FOR DONORS REQUIRING ITEMIZATION; SEE ATTRIBUTION BELOW FOR ALL DONORS ABOVE ITEMIZ

C. PAUL, ANDREW, M., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address P.O. BOX 5109

City ASPEN	State CO	Zip Code 81612-5109
---------------	-------------	------------------------

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

Name of Employer (for Individual) SOPRIS CAPITAL	Occupation (for Individual) CEO
---	------------------------------------

Receipt For:
 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
07	/	19	/	2021

Transaction ID : SA11A.590829

Amount of Each Receipt this Period
25000.00

Memo Item
CONTRIBUTION

WINRED SEE BELOW FOR DONORS REQUIRING ITEMIZATION

SUBTOTAL of Receipts This Page (optional).....▶	35000.00
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 29 OF 66
	<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)
CORNYN VICTORY COMMITTEE

A. WINRED

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

Mailing Address P.O. BOX 9891

City ARLINGTON	State VA	Zip Code 22219-1891
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00694323

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
211133.13

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		09		2021

Transaction ID : SA11C.591104

Amount of Each Receipt this Period
24150.00

Memo Item
CONTRIBUTION

WINRED SEE BELOW FOR DONORS REQUIRING ITEMIZATION; SEE ATTRIBUTION BELOW FOR ALL DONORS ABOVE ITEMIZ

B. VALACH, KENNETH, J., MR.,

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

Mailing Address 750 TOWN AND COUNTRY BLVD
SUITE 520

City HOUSTON	State TX	Zip Code 77024-4161
-----------------	-------------	------------------------

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

Name of Employer (for Individual) CROW HOLDINGS INDUSTRIAL	Occupation (for Individual) CEO
---	------------------------------------

Receipt For:
 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
07		30		2021

Transaction ID : SA11A.591105

Amount of Each Receipt this Period
25000.00

Memo Item
CONTRIBUTION

WINRED SEE BELOW FOR DONORS REQUIRING ITEMIZATION

C. WINRED

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

Mailing Address P.O. BOX 9891

City ARLINGTON	State VA	Zip Code 22219-1891
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00694323

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

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
211133.13

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		23		2021

Transaction ID : SA11C.592481

Amount of Each Receipt this Period
33810.00

Memo Item
CONTRIBUTION

WINRED SEE BELOW FOR DONORS REQUIRING ITEMIZATION; SEE ATTRIBUTION BELOW FOR ALL DONORS ABOVE ITEMIZ

SUBTOTAL of Receipts This Page (optional).....	25000.00
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 30 OF 66
	<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)
CORNYN VICTORY COMMITTEE

A. BRIGHAM, BEN , BUD, MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3806 SPIRIT LAKE CV
 City AUSTIN State TX Zip Code 78746-1644
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ANTHEM VENTURES Occupation (for Individual) CHAIRMAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 25000.00

Date of Receipt 08 / 18 / 2021
Transaction ID : SA11A.592482
 Amount of Each Receipt this Period 25000.00
 Memo Item CONTRIBUTION
 WINRED SEE BELOW FOR DONORS REQUIRING ITEMIZATION

B. HATFIELD, JAY, D., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2373 BROADWAY APT. 1927
 City NEW YORK State NY Zip Code 10024-2841
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFRASTRUCTURE CAPITAL Occupation (for Individual) CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 10000.00

Date of Receipt 08 / 17 / 2021
Transaction ID : SA11A.592483
 Amount of Each Receipt this Period 10000.00
 Memo Item CONTRIBUTION
 WINRED SEE BELOW FOR DONORS REQUIRING ITEMIZATION

C. WINRED
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P.O. BOX 9891
 City ARLINGTON State VA Zip Code 22219-1891
 FEC ID number of contributing federal political committee. **C** C00694323
 Name of Employer (for Individual) Occupation (for Individual)
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 211133.13

Date of Receipt 09 / 13 / 2021
Transaction ID : SA11C.593226
 Amount of Each Receipt this Period 4865.60
 Memo Item CONTRIBUTION
 WINRED SEE BELOW FOR DONORS REQUIRING ITEMIZATION; SEE ATTRIBUTION BELOW FOR ALL DONORS ABOVE ITEMIZ

SUBTOTAL of Receipts This Page (optional).....	35000.00
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 31 OF 66
	<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)
CORNYN VICTORY COMMITTEE

A. FOX, LEONARD, MARTIN, MR., JR.
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3715 UNIVERSITY BLVD

City DALLAS	State TX	Zip Code 75205-1708
----------------	-------------	------------------------

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

Name of Employer (for Individual) EXXON MOBIL	Occupation (for Individual) ASSISTANT COMPTROLLER
--	--

Receipt For:
 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
09		09		2021

Transaction ID : SA11A.593228

Amount of Each Receipt this Period
5000.00

Memo Item CONTRIBUTION

WINRED SEE BELOW FOR DONORS REQUIRING ITEMIZATION

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

Mailing Address P.O. BOX 9891

City ARLINGTON	State VA	Zip Code 22219-1891
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00694323

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
211133.13

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		20		2021

Transaction ID : SA11C.593638

Amount of Each Receipt this Period
35111.20

Memo Item CONTRIBUTION

WINRED SEE BELOW FOR DONORS REQUIRING ITEMIZATION; SEE ATTRIBUTION BELOW FOR ALL DONORS ABOVE ITEMIZ

C. GJERVIK, STAAL, , MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 7410 FORT AUGUSTA COURT

City SPRING	State TX	Zip Code 77389-5064
----------------	-------------	------------------------

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

Name of Employer (for Individual) EXXONMOBIL	Occupation (for Individual) ENGINEERING CONSULTANT
---	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
1500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		14		2021

Transaction ID : SA11A.593642

Amount of Each Receipt this Period
1500.00

Memo Item CONTRIBUTION

WINRED SEE BELOW FOR DONORS REQUIRING ITEMIZATION

SUBTOTAL of Receipts This Page (optional).....▶	6500.00
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 32 OF 66
	<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)
CORNYN VICTORY COMMITTEE

A. MIKELLS, KATHRYN, A., MS.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 5959 LAS COLINAS BOULEVARD

City IRVING	State TX	Zip Code 75039-4202
----------------	-------------	------------------------

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

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

Receipt For:
 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
09		12		2021

Transaction ID : SA11A.593643

Amount of Each Receipt this Period
5000.00

Memo Item
CONTRIBUTION

WINRED SEE BELOW FOR DONORS REQUIRING ITEMIZATION

B. PRYOR, JAY, R., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1200 SMITH ST
25TH FLOOR

City HOUSTON	State TX	Zip Code 77002-4309
-----------------	-------------	------------------------

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

Name of Employer (for Individual) CHEVRON	Occupation (for Individual) VICE PRESIDENT
--	---

Receipt For:
 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
09		11		2021

Transaction ID : SA11A.593641

Amount of Each Receipt this Period
10000.00

Memo Item
CONTRIBUTION

WINRED SEE BELOW FOR DONORS REQUIRING ITEMIZATION

C. WILLIAMS, JACK, P., MR., JR.
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3745 AVIEMORE DRIVE

City FORT WORTH	State TX	Zip Code 76109-4858
--------------------	-------------	------------------------

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

Name of Employer (for Individual) EXXON MOBIL	Occupation (for Individual) SR. EXECUTIVE VP
--	---

Receipt For:
 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
09		11		2021

Transaction ID : SA11A.593644

Amount of Each Receipt this Period
5000.00

Memo Item
CONTRIBUTION

WINRED SEE BELOW FOR DONORS REQUIRING ITEMIZATION

SUBTOTAL of Receipts This Page (optional).....	20000.00
TOTAL This Period (last page this line number only).....	

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

FOR LINE NUMBER: PAGE 33 OF 66
Use separate schedule(s) for each category of the Detailed Summary Page
11a 11b 11c 12 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
CORNYN VICTORY COMMITTEE

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
WOJNAR, THEODORE, J., MR., JR.
Mailing Address 5959 LAS COLINAS BOULEVARD
City IRVING State TX Zip Code 75039-4202
FEC ID number of contributing federal political committee. C
Name of Employer (for Individual) EXXON MOBIL Occupation (for Individual) VP
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date 5000.00

Date of Receipt 09 / 15 / 2021
Transaction ID : SA11A.593639
Amount of Each Receipt this Period 5000.00
Memo Item CONTRIBUTION
WINRED SEE BELOW FOR DONORS REQUIRING ITEMIZATION

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
WOODS, DARREN, WAYNE, MR.,
Mailing Address 6125 LUTHER LN, STE 114
City DALLAS State TX Zip Code 75225-6202
FEC ID number of contributing federal political committee. C
Name of Employer (for Individual) EXXON MOBIL Occupation (for Individual) CHAIRMAN AND CEO
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date 10000.00

Date of Receipt 09 / 15 / 2021
Transaction ID : SA11A.593640
Amount of Each Receipt this Period 10000.00
Memo Item CONTRIBUTION
WINRED SEE BELOW FOR DONORS REQUIRING ITEMIZATION

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
WINRED
Mailing Address P.O. BOX 9891
City ARLINGTON State VA Zip Code 22219-1891
FEC ID number of contributing federal political committee. C C00694323
Name of Employer (for Individual) Occupation (for Individual)
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date 211133.13

Date of Receipt 09 / 20 / 2021
Transaction ID : SA11C.593651
Amount of Each Receipt this Period 961.70
Memo Item CONTRIBUTION
WINRED SEE BELOW FOR DONORS REQUIRING ITEMIZATION; SEE ATTRIBUTION BELOW FOR ALL DONORS ABOVE ITEMIZ

SUBTOTAL of Receipts This Page (optional)..... 15000.00
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 34 OF 66
<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)
CORNYN VICTORY COMMITTEE

A. GIBBS, JON, , MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 210 SOUTH FAZIO WAY

City SPRING	State TX	Zip Code 77389-2711
----------------	-------------	------------------------

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

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

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
09	/	16	/	2021

Transaction ID : SA11A.593652

Amount of Each Receipt this Period
1000.00

Memo Item
CONTRIBUTION

WINRED SEE BELOW FOR DONORS REQUIRING ITEMIZATION

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

Mailing Address P.O. BOX 9891

City ARLINGTON	State VA	Zip Code 22219-1891
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00694323

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
211133.13

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	29	/	2021

Transaction ID : SA11C.593914

Amount of Each Receipt this Period
961.70

Memo Item
CONTRIBUTION

SEE ATTRIBUTION BELOW FOR ALL DONORS ABOVE ITEMIZATION THRESHOLD

C. MORGAN, DAVID, , MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 8103 VANITY HL

City SAN ANTONIO	State TX	Zip Code 78256-2510
---------------------	-------------	------------------------

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

Name of Employer (for Individual) SBS CONSTRUCTION	Occupation (for Individual) VICE PRESIDENT
---	---

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
09	/	20	/	2021

Transaction ID : SA11A.593915

Amount of Each Receipt this Period
1000.00

Memo Item
CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional).....▶	2000.00
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 35 OF 66
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
CORNYN VICTORY COMMITTEE

A. WINRED
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P.O. BOX 9891
 City ARLINGTON State VA Zip Code 22219-1891
 FEC ID number of contributing federal political committee. **C** C00694323
 Name of Employer (for Individual) Occupation (for Individual)
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 211133.13

Date of Receipt 09 / 30 / 2021
Transaction ID : SA11C.594174
 Amount of Each Receipt this Period 1923.70
 Memo Item CONTRIBUTION
 WINRED SEE BELOW FOR DONORS REQUIRING ITEMIZATION; SEE ATTRIBUTION BELOW FOR ALL DONORS ABOVE ITEMIZ

B. SEAY, GEORGE, E., MR., III
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2626 COLE AVENUE SUITE 700
 City DALLAS State TX Zip Code 75204-4065
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ANNANDALE CAPITAL Occupation (for Individual) CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2000.00

Date of Receipt 09 / 29 / 2021
Transaction ID : SA11A.594175
 Amount of Each Receipt this Period 2000.00
 Memo Item CONTRIBUTION
 WINRED SEE BELOW FOR DONORS REQUIRING ITEMIZATION

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

SUBTOTAL of Receipts This Page (optional).....▶	2000.00
TOTAL This Period (last page this line number only).....▶	1941475.00

**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 36 OF 66
<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)
CORNYN VICTORY COMMITTEE

A. EXXONMOBIL CORPORATION POLITICAL ACTION COMMITTEE (EXXONMOBIL)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 5959 LAS COLINAS BLVD

City IRVING	State TX	Zip Code 75039-4202
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00121368

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

Receipt For:
 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
09		29		2021

Transaction ID : SA11C.593908

Amount of Each Receipt this Period
20000.00

Memo Item
CONTRIBUTION

B. HALLIBURTON COMPANY PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 3000 N SAM HOUSTON PKWY E

City HOUSTON	State TX	Zip Code 77032-3219
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00035691

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

Receipt For:
 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
09		15		2021

Transaction ID : SA11C.593452

Amount of Each Receipt this Period
10000.00

Memo Item
CONTRIBUTION

C. MARATHON OIL COMPANY EMPLOYEES POLITICAL ACTION COMMITTEE (M)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 5555 SAN FELIPE ST

City HOUSTON	State TX	Zip Code 77056-2701
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00040568

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

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
3500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		30		2021

Transaction ID : SA11C.593919

Amount of Each Receipt this Period
3500.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	33500.00
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 37 OF 66
 (check only one)

<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)
CORNYN VICTORY COMMITTEE

A. UNITED SERVICES AUTOMOBILE ASSOCIATION EMPLOYEE PAC - USAA

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

Mailing Address 9800 FREDERICKSBURG RD
ROOM 501

City SAN ANTONIO State TX Zip Code 78288-0001

FEC ID number of contributing federal political committee. **C** C00164145

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

Receipt For:
 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
 09 / 30 / 2021

Transaction ID : SA11C.593918

Amount of Each Receipt this Period
 25000.00

Memo Item
 CONTRIBUTION

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

Amount of Each Receipt this Period

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	25000.00
TOTAL This Period (last page this line number only).....▶	58500.00

**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)
CORNYN VICTORY COMMITTEE

Full Name (Last, First, Middle Initial) A. PURPURA, SALVATORE, , ,		Date of Disbursement MM / DD / YYYY 08 / 01 / 2021	
Mailing Address 6334 PUMPERNICKEL LANE		FEC Identification Number C [] Transaction ID : SB21B.16 Amount of Each Disbursement this Period [] 1406.25	
City MONROE	State NC	Zip Code 28110	Category/ Type []
Purpose of Disbursement COMPLIANCE CONSULTING		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) ▼		Memo Item <input type="checkbox"/>
State: District:			

Full Name (Last, First, Middle Initial) B. PURPURA, SALVATORE, , ,		Date of Disbursement MM / DD / YYYY 08 / 31 / 2021	
Mailing Address 6334 PUMPERNICKEL LANE		FEC Identification Number C [] Transaction ID : SB21B.17 Amount of Each Disbursement this Period [] 937.50	
City MONROE	State NC	Zip Code 28110	Category/ Type []
Purpose of Disbursement COMPLIANCE CONSULTING		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) ▼		Memo Item <input type="checkbox"/>
State: District:			

Full Name (Last, First, Middle Initial) C. ABILENE AERO		Date of Disbursement MM / DD / YYYY 09 / 28 / 2021	
Mailing Address 2850 AIRPORT BLVD		FEC Identification Number C [] Transaction ID : SB21B.1 Amount of Each Disbursement this Period [] 2158.60	
City ABILENE	State TX	Zip Code 79602	Category/ Type []
Purpose of Disbursement AIR CHARTER 9-16-21		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) ▼		Memo Item <input type="checkbox"/>
State: District:			

SUBTOTAL of Disbursements This Page (optional).....▶	[] 4502.35
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)
CORNYN VICTORY COMMITTEE

Full Name (Last, First, Middle Initial) A. CHAIN BRIDGE BANK		Date of Disbursement MM / DD / YYYY 07 / 07 / 2021
Mailing Address 1445 A LAUGHLIN AVE		FEC Identification Number C [] Transaction ID : SB21B.2 Amount of Each Disbursement this Period [] 25.00
City MCLEAN	State VA	Zip Code 22101
Purpose of Disbursement BANK FEE		Category/ Type []
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	

Full Name (Last, First, Middle Initial) B. CHAIN BRIDGE BANK		Date of Disbursement MM / DD / YYYY 09 / 29 / 2021
Mailing Address 1445 A LAUGHLIN AVE		FEC Identification Number C [] Transaction ID : SB21B.3 Amount of Each Disbursement this Period [] 225.00
City MCLEAN	State VA	Zip Code 22101
Purpose of Disbursement BANK FEE		Category/ Type []
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	

Full Name (Last, First, Middle Initial) C. CITIBANK		Date of Disbursement MM / DD / YYYY 07 / 23 / 2021
Mailing Address PO BOX 9001037		FEC Identification Number C [] Transaction ID : SB21B.4 Amount of Each Disbursement this Period [] 455.00 NO VENDORS REQUIRING ITEMIZATION
City LOUISVILLE	State KY	Zip Code 40290
Purpose of Disbursement CREDIT CARD PAYMENT		Category/ Type []
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	

SUBTOTAL of Disbursements This Page (optional).....▶	[] 705.00
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)
CORNYN VICTORY COMMITTEE

A. CMDI

Full Name (Last, First, Middle Initial)

Mailing Address 1593 SPRING HILL ROAD
SUITE 400

City TYSONS CORNER State VA Zip Code 22182

Purpose of Disbursement DATABASE MANAGEMENT

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: MM / DD / YYYY
07 / 26 / 2021

FEC Identification Number: C

Transaction ID : SB21B.5

Amount of Each Disbursement this Period: 250.00

Memo Item

B. CMDI

Full Name (Last, First, Middle Initial)

Mailing Address 1593 SPRING HILL ROAD
SUITE 400

City TYSONS CORNER State VA Zip Code 22182

Purpose of Disbursement DATABASE MANAGEMENT

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: MM / DD / YYYY
08 / 25 / 2021

FEC Identification Number: C

Transaction ID : SB21B.6

Amount of Each Disbursement this Period: 250.00

Memo Item

C. CMDI

Full Name (Last, First, Middle Initial)

Mailing Address 1593 SPRING HILL ROAD
SUITE 400

City TYSONS CORNER State VA Zip Code 22182

Purpose of Disbursement DATABASE MANAGEMENT

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: MM / DD / YYYY
09 / 27 / 2021

FEC Identification Number: C

Transaction ID : SB21B.7

Amount of Each Disbursement this Period: 250.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 750.00

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)
CORNYN VICTORY COMMITTEE

A. HEADLINERS CLUB

Full Name (Last, First, Middle Initial)

Mailing Address 221 W 6TH ST
SUITE 2100

City AUSTIN State TX Zip Code 78701

Purpose of Disbursement FOOD AND BEVERAGE

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: MM / DD / YYYY
08 / 16 / 2021

FEC Identification Number: C

Transaction ID : SB21B.10

Amount of Each Disbursement this Period: 147.88

Memo Item

B. HEADLINERS CLUB

Full Name (Last, First, Middle Initial)

Mailing Address 221 W 6TH ST
SUITE 2100

City AUSTIN State TX Zip Code 78701

Purpose of Disbursement FOOD AND BEVERAGE

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: MM / DD / YYYY
07 / 12 / 2021

FEC Identification Number: C

Transaction ID : SB21B.8

Amount of Each Disbursement this Period: 189.37

Memo Item

C. HEADLINERS CLUB

Full Name (Last, First, Middle Initial)

Mailing Address 221 W 6TH ST
SUITE 2100

City AUSTIN State TX Zip Code 78701

Purpose of Disbursement FOOD AND BEVERAGE

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: MM / DD / YYYY
08 / 10 / 2021

FEC Identification Number: C

Transaction ID : SB21B.9

Amount of Each Disbursement this Period: 176.76

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 514.01

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)
CORNYN VICTORY COMMITTEE

Full Name (Last, First, Middle Initial) A. HUCKABY DAVIS LISKER		Date of Disbursement MM / DD / YYYY 08 / 31 / 2021
Mailing Address 228 S WASHINGTON ST STE 115		FEC Identification Number C [] Transaction ID : SB21B.11 Amount of Each Disbursement this Period [] 968.30
City ALEXANDRIA	State VA	Zip Code 22314
Purpose of Disbursement COMPLIANCE CONSULTING		Category/ Type []
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	

Full Name (Last, First, Middle Initial) B. MAIANNE SAHL & COMPANY LLC		Date of Disbursement MM / DD / YYYY 07 / 07 / 2021
Mailing Address 16714 FITZHUGH RD		FEC Identification Number C [] Transaction ID : SB21B.12 Amount of Each Disbursement this Period [] 158274.18
City DRIPPING SPRINGS	State TX	Zip Code 78620
Purpose of Disbursement FINANCE CONSULTING		Category/ Type []
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	

Full Name (Last, First, Middle Initial) C. MAIANNE SAHL & COMPANY LLC		Date of Disbursement MM / DD / YYYY 08 / 04 / 2021
Mailing Address 16714 FITZHUGH RD		FEC Identification Number C [] Transaction ID : SB21B.13 Amount of Each Disbursement this Period [] 162.94
City DRIPPING SPRINGS	State TX	Zip Code 78620
Purpose of Disbursement FOOD AND BEVERAGE/DELIVERY		Category/ Type []
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	

SUBTOTAL of Disbursements This Page (optional).....▶	[] 159405.42
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)
CORNYN VICTORY COMMITTEE

Full Name (Last, First, Middle Initial) A. MAIANNE SAHL & COMPANY LLC		Date of Disbursement MM / DD / YYYY 09 / 26 / 2021	
Mailing Address 16714 FITZHUGH RD		FEC Identification Number C [] Transaction ID : SB21B.14 Amount of Each Disbursement this Period [] 6004.48	
City DRIPPING SPRINGS	State TX	Zip Code 78620	Category/ Type []
Purpose of Disbursement TRAVEL/DELIVERY/CATERING		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		

Full Name (Last, First, Middle Initial) B. MAIANNE SAHL & COMPANY LLC		Date of Disbursement MM / DD / YYYY 07 / 06 / 2021	
Mailing Address 16714 FITZHUGH RD		FEC Identification Number C [] Transaction ID : SB21B.15 Amount of Each Disbursement this Period [] 453.19	
City DRIPPING SPRINGS	State TX	Zip Code 78620	Category/ Type []
Purpose of Disbursement TRAVEL/FOOD AND BEVERAGE/PRINTING		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		

Full Name (Last, First, Middle Initial) C. STRIPE		Date of Disbursement MM / DD / YYYY 07 / 01 / 2021	
Mailing Address 510 TOWNSEND ST		FEC Identification Number C [] Transaction ID : SB21B.18 Amount of Each Disbursement this Period [] 290.30	
City SAN FRANCISCO	State CA	Zip Code 94103	Category/ Type []
Purpose of Disbursement CREDIT CARD MERCHANT FEE		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		

SUBTOTAL of Disbursements This Page (optional).....▶	[] 6747.97
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)
CORNYN VICTORY COMMITTEE

Full Name (Last, First, Middle Initial)

A. STRIPE

Mailing Address 510 TOWNSEND ST

City SAN FRANCISCO State CA Zip Code 94103

Purpose of Disbursement
CREDIT CARD MERCHANT FEE

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
07 / 11 / 2021

FEC Identification Number

C

Transaction ID : SB21B.19

Amount of Each Disbursement this Period

610.03

Memo Item

Full Name (Last, First, Middle Initial)

B. STRIPE

Mailing Address 510 TOWNSEND ST

City SAN FRANCISCO State CA Zip Code 94103

Purpose of Disbursement
CREDIT CARD MERCHANT FEE

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
07 / 11 / 2021

FEC Identification Number

C

Transaction ID : SB21B.20

Amount of Each Disbursement this Period

725.30

Memo Item

Full Name (Last, First, Middle Initial)

C. STRIPE

Mailing Address 510 TOWNSEND ST

City SAN FRANCISCO State CA Zip Code 94103

Purpose of Disbursement
CREDIT CARD MERCHANT FEE

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
08 / 01 / 2021

FEC Identification Number

C

Transaction ID : SB21B.21

Amount of Each Disbursement this Period

290.30

Memo Item

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

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

1625.63

**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)
CORNYN VICTORY COMMITTEE

Full Name (Last, First, Middle Initial)

A. STRIPE

Mailing Address 510 TOWNSEND ST

City SAN FRANCISCO State CA Zip Code 94103

Purpose of Disbursement
CREDIT CARD MERCHANT FEE

Candidate Name

Office Sought: House Senate President

State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
08 / 06 / 2021

FEC Identification Number

C

Transaction ID : SB21B.22

Amount of Each Disbursement this Period

610.03

Memo Item

Full Name (Last, First, Middle Initial)

B. STRIPE

Mailing Address 510 TOWNSEND ST

City SAN FRANCISCO State CA Zip Code 94103

Purpose of Disbursement
CREDIT CARD MERCHANT FEE

Candidate Name

Office Sought: House Senate President

State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
08 / 17 / 2021

FEC Identification Number

C

Transaction ID : SB21B.23

Amount of Each Disbursement this Period

1105.93

Memo Item

Full Name (Last, First, Middle Initial)

C. STRIPE

Mailing Address 510 TOWNSEND ST

City SAN FRANCISCO State CA Zip Code 94103

Purpose of Disbursement
CREDIT CARD MERCHANT FEE

Candidate Name

Office Sought: House Senate President

State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
09 / 06 / 2021

FEC Identification Number

C

Transaction ID : SB21B.24

Amount of Each Disbursement this Period

290.30

Memo Item

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

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

2006.26

**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)
CORNYN VICTORY COMMITTEE

Full Name (Last, First, Middle Initial)

A. STRIPE

Mailing Address 510 TOWNSEND ST

City SAN FRANCISCO State CA Zip Code 94103

Purpose of Disbursement
CREDIT CARD MERCHANT FEE

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Category/
Type

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : SB21B.25
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

B. STRIPE

Mailing Address 510 TOWNSEND ST

City SAN FRANCISCO State CA Zip Code 94103

Purpose of Disbursement
CREDIT CARD MERCHANT FEE

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Category/
Type

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : SB21B.26
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

C. STRIPE

Mailing Address 510 TOWNSEND ST

City SAN FRANCISCO State CA Zip Code 94103

Purpose of Disbursement
CREDIT CARD MERCHANT FEE

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Category/
Type

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : SB21B.27
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)
CORNYN VICTORY COMMITTEE

Full Name (Last, First, Middle Initial)

A. STRIPE

Mailing Address 510 TOWNSEND ST

City SAN FRANCISCO State CA Zip Code 94103

Purpose of Disbursement
CREDIT CARD MERCHANT FEE

Candidate Name

Office Sought: House Senate President

State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
09 / 14 / 2021

FEC Identification Number

C []

Transaction ID : SB21B.28

Amount of Each Disbursement this Period

[] 362.80

Memo Item

Full Name (Last, First, Middle Initial)

B. STRIPE

Mailing Address 510 TOWNSEND ST

City SAN FRANCISCO State CA Zip Code 94103

Purpose of Disbursement
CREDIT CARD MERCHANT FEE

Candidate Name

Office Sought: House Senate President

State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
09 / 15 / 2021

FEC Identification Number

C []

Transaction ID : SB21B.29

Amount of Each Disbursement this Period

[] 145.30

Memo Item

Full Name (Last, First, Middle Initial)

C. STRIPE

Mailing Address 510 TOWNSEND ST

City SAN FRANCISCO State CA Zip Code 94103

Purpose of Disbursement
CREDIT CARD MERCHANT FEE

Candidate Name

Office Sought: House Senate President

State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
09 / 20 / 2021

FEC Identification Number

C []

Transaction ID : SB21B.30

Amount of Each Disbursement this Period

[] 72.80

Memo Item

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

[] 580.90

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)
CORNYN VICTORY COMMITTEE

Full Name (Last, First, Middle Initial)

A. STRIPE

Mailing Address 510 TOWNSEND ST

City SAN FRANCISCO State CA Zip Code 94103

Purpose of Disbursement
CREDIT CARD MERCHANT FEE

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
09 / 20 / 2021

FEC Identification Number

C

Transaction ID : SB21B.31

Amount of Each Disbursement this Period

72.80

Memo Item

Full Name (Last, First, Middle Initial)

B. STRIPE

Mailing Address 510 TOWNSEND ST

City SAN FRANCISCO State CA Zip Code 94103

Purpose of Disbursement
CREDIT CARD MERCHANT FEE

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
09 / 22 / 2021

FEC Identification Number

C

Transaction ID : SB21B.32

Amount of Each Disbursement this Period

362.80

Memo Item

Full Name (Last, First, Middle Initial)

C. STRIPE

Mailing Address 510 TOWNSEND ST

City SAN FRANCISCO State CA Zip Code 94103

Purpose of Disbursement
CREDIT CARD MERCHANT FEE

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
09 / 28 / 2021

FEC Identification Number

C

Transaction ID : SB21B.33

Amount of Each Disbursement this Period

29.30

Memo Item

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

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

464.90

**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)
CORNYN VICTORY COMMITTEE

Full Name (Last, First, Middle Initial)

A. STRIPE

Mailing Address 510 TOWNSEND ST

City SAN FRANCISCO State CA Zip Code 94103

Purpose of Disbursement
CREDIT CARD MERCHANT FEE

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
09 / 29 / 2021

FEC Identification Number

C

Transaction ID : SB21B.34

Amount of Each Disbursement this Period

145.30

Memo Item

Full Name (Last, First, Middle Initial)

B. STRIPE

Mailing Address 510 TOWNSEND ST

City SAN FRANCISCO State CA Zip Code 94103

Purpose of Disbursement
CREDIT CARD MERCHANT FEE

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
09 / 30 / 2021

FEC Identification Number

C

Transaction ID : SB21B.35

Amount of Each Disbursement this Period

29.30

Memo Item

Full Name (Last, First, Middle Initial)

C. TAG LLC

Mailing Address PO BOX 1243

City ALEXANDRIA State VA Zip Code 22313

Purpose of Disbursement
FINANCE CONSULTING

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
07 / 07 / 2021

FEC Identification Number

C

Transaction ID : SB21B.36

Amount of Each Disbursement this Period

18974.65

Memo Item

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

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

19149.25

**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)
CORNYN VICTORY COMMITTEE

Full Name (Last, First, Middle Initial)

A. TAG LLC

Mailing Address PO BOX 1243

City
ALEXANDRIA

State
VA

Zip Code
22313

Purpose of Disbursement
FINANCE CONSULTING

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
08 / 06 / 2021

FEC Identification Number

C

Transaction ID : SB21B.37

Amount of Each Disbursement this Period

8016.00

Memo Item

Full Name (Last, First, Middle Initial)

B. TAG LLC

Mailing Address PO BOX 1243

City
ALEXANDRIA

State
VA

Zip Code
22313

Purpose of Disbursement
FINANCE CONSULTING

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
09 / 08 / 2021

FEC Identification Number

C

Transaction ID : SB21B.38

Amount of Each Disbursement this Period

3616.00

Memo Item

Full Name (Last, First, Middle Initial)

C. THOMAS GRAPHICS

Mailing Address PO BOX 14226

City
AUSTIN

State
TX

Zip Code
78714

Purpose of Disbursement
PRINTING

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
09 / 28 / 2021

FEC Identification Number

C

Transaction ID : SB21B.39

Amount of Each Disbursement this Period

9790.51

Memo Item

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

21422.51

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)
CORNYN VICTORY COMMITTEE

Full Name (Last, First, Middle Initial)

A. WINRED

Mailing Address PO BOX 9891

City ARLINGTON State VA Zip Code 22219

Purpose of Disbursement
CREDIT CARD MERCHANT FEE

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
07 / 10 / 2021

FEC Identification Number

C

Transaction ID : SB21B.40

Amount of Each Disbursement this Period

340.00

Memo Item

Full Name (Last, First, Middle Initial)

B. WINRED

Mailing Address PO BOX 9891

City ARLINGTON State VA Zip Code 22219

Purpose of Disbursement
CREDIT CARD MERCHANT FEE

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
07 / 19 / 2021

FEC Identification Number

C

Transaction ID : SB21B.41

Amount of Each Disbursement this Period

0.76

Memo Item

Full Name (Last, First, Middle Initial)

C. WINRED

Mailing Address PO BOX 9891

City ARLINGTON State VA Zip Code 22219

Purpose of Disbursement
CREDIT CARD MERCHANT FEE

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
07 / 26 / 2021

FEC Identification Number

C

Transaction ID : SB21B.42

Amount of Each Disbursement this Period

850.00

Memo Item

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

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

1190.76

**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)
CORNYN VICTORY COMMITTEE

Full Name (Last, First, Middle Initial) A. WINRED		Date of Disbursement MM / DD / YYYY 08 / 02 / 2021
Mailing Address PO BOX 9891		FEC Identification Number C [] Transaction ID : SB21B.43 Amount of Each Disbursement this Period [] 850.00 <input type="checkbox"/> Memo Item
City ARLINGTON	State VA	
Zip Code 22219	Purpose of Disbursement CREDIT CARD MERCHANT FEE	Category/ Type []
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. WINRED		Date of Disbursement MM / DD / YYYY 08 / 23 / 2021
Mailing Address PO BOX 9891		FEC Identification Number C [] Transaction ID : SB21B.44 Amount of Each Disbursement this Period [] 1190.00 <input type="checkbox"/> Memo Item
City ARLINGTON	State VA	
Zip Code 22219	Purpose of Disbursement CREDIT CARD MERCHANT FEE	Category/ Type []
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. WINRED		Date of Disbursement MM / DD / YYYY 08 / 30 / 2021
Mailing Address PO BOX 9891		FEC Identification Number C [] Transaction ID : SB21B.45 Amount of Each Disbursement this Period [] 7.69 <input type="checkbox"/> Memo Item
City ARLINGTON	State VA	
Zip Code 22219	Purpose of Disbursement CREDIT CARD MERCHANT FEE	Category/ Type []
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional).....▶	[] 2047.69
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)
CORNYN VICTORY COMMITTEE

Full Name (Last, First, Middle Initial) A. WINRED			Date of Disbursement MM / DD / YYYY 09 / 13 / 2021		
Mailing Address PO BOX 9891			FEC Identification Number C [] Transaction ID : SB21B.46 Amount of Each Disbursement this Period [] 209.40		
City ARLINGTON	State VA	Zip Code 22219	Category/Type []		
Purpose of Disbursement CREDIT CARD MERCHANT FEE			Amount of Each Disbursement this Period [] 209.40		
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. WINRED			Date of Disbursement MM / DD / YYYY 09 / 20 / 2021		
Mailing Address PO BOX 9891			FEC Identification Number C [] Transaction ID : SB21B.47 Amount of Each Disbursement this Period [] 1388.80		
City ARLINGTON	State VA	Zip Code 22219	Category/Type []		
Purpose of Disbursement CREDIT CARD MERCHANT FEE			Amount of Each Disbursement this Period [] 1388.80		
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) C. WINRED			Date of Disbursement MM / DD / YYYY 09 / 21 / 2021		
Mailing Address PO BOX 9891			FEC Identification Number C [] Transaction ID : SB21B.48 Amount of Each Disbursement this Period [] 38.30		
City ARLINGTON	State VA	Zip Code 22219	Category/Type []		
Purpose of Disbursement CREDIT CARD MERCHANT FEE			Amount of Each Disbursement this Period [] 38.30		
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)..... ▶			[] 1636.50		
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)
CORNYN VICTORY COMMITTEE

Full Name (Last, First, Middle Initial) A. WINRED		Date of Disbursement MM / DD / YYYY 09 / 27 / 2021
Mailing Address PO BOX 9891		FEC Identification Number C [] Transaction ID : SB21B.49 Amount of Each Disbursement this Period [] 38.30
City ARLINGTON	State VA	Zip Code 22219
Purpose of Disbursement CREDIT CARD MERCHANT FEE		Category/ Type []
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	

Full Name (Last, First, Middle Initial) B. WINRED		Date of Disbursement MM / DD / YYYY 09 / 30 / 2021
Mailing Address PO BOX 9891		FEC Identification Number C [] Transaction ID : SB21B.50 Amount of Each Disbursement this Period [] 76.30
City ARLINGTON	State VA	Zip Code 22219
Purpose of Disbursement CREDIT CARD MERCHANT FEE		Category/ Type []
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	

Full Name (Last, First, Middle Initial) C.		Date of Disbursement MM / DD / YYYY [] / [] / []
Mailing Address		FEC Identification Number C [] Amount of Each Disbursement this Period []
City	State	Zip Code
Purpose of Disbursement		Category/ Type []
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	

SUBTOTAL of Disbursements This Page (optional).....▶	114.60
TOTAL This Period (last page this line number only).....▶	223807.15

**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 checked="" 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)
CORNYN VICTORY COMMITTEE

Full Name (Last, First, Middle Initial) A. BOOZMAN FOR ARKANSAS		Date of Disbursement MM / DD / YYYY 09 / 29 / 2021
Mailing Address PO BOX 671		FEC Identification Number C
City ROGERS	State AR	Zip Code 72757
Purpose of Disbursement TRANSFER TO AUTH CMTEE OF NET JOINT FUNDRAISING PROCEEDS		Transaction ID : SB22.15
Candidate Name BOOZMAN, JOHN, , SEN,		Amount of Each Disbursement this Period 68249.74
Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: AR	District:	

Full Name (Last, First, Middle Initial) B. BOOZMAN FOR ARKANSAS		Date of Disbursement MM / DD / YYYY 09 / 29 / 2021
Mailing Address PO BOX 671		FEC Identification Number C
City ROGERS	State AR	Zip Code 72757
Purpose of Disbursement TRANSFER TO AUTH CMTEE OF NET JOINT FUNDRAISING PROCEEDS		Transaction ID : SB22.16
Candidate Name BOOZMAN, JOHN, , SEN,		Amount of Each Disbursement this Period 17344.45
Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: AR	District:	

Full Name (Last, First, Middle Initial) C. FAMILIES FOR JAMES LANKFORD		Date of Disbursement MM / DD / YYYY 09 / 28 / 2021
Mailing Address 709 E LINDEN LANE		FEC Identification Number C
City MUSTANG	State OK	Zip Code 73064
Purpose of Disbursement TRANSFER TO AUTH CMTEE OF NET JOINT FUNDRAISING PROCEEDS		Transaction ID : SB22.1
Candidate Name LANKFORD, JAMES, , SEN,		Amount of Each Disbursement this Period 76123.91
Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: OK	District:	

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

161718.10

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 type="checkbox"/> 21b	<input checked="" 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)
CORNYN VICTORY COMMITTEE

A. FAMILIES FOR JAMES LANKFORD

Full Name (Last, First, Middle Initial)
Mailing Address 709 E LINDEN LANE

City MUSTANG State OK Zip Code 73064

Purpose of Disbursement
TRANSFER TO AUTH CMTEE OF NET JOINT FUNDRAISING PROCEEDS

Candidate Name
LANKFORD, JAMES, , SEN,

Office Sought: House Senate President
Disbursement For: 2022 Primary General Other (specify) ▼

State: OK District:

Date of Disbursement: 09 / 28 / 2021

FEC Identification Number: C
Transaction ID : SB22.2
Amount of Each Disbursement this Period: 17875.32

Memo Item

B. FRIENDS OF MIKE LEE

Full Name (Last, First, Middle Initial)
Mailing Address PO BOX 1537

City SALT LAKE CITY State UT Zip Code 84110

Purpose of Disbursement
TRANSFER TO AUTH CMTEE OF NET JOINT FUNDRAISING PROCEEDS

Candidate Name
LEE, MIKE, , SEN,

Office Sought: House Senate President
Disbursement For: 2022 Primary General Other (specify)

State: UT District:

Date of Disbursement: 09 / 29 / 2021

FEC Identification Number: C
Transaction ID : SB22.25
Amount of Each Disbursement this Period: 71837.52

Memo Item

C. FRIENDS OF MIKE LEE

Full Name (Last, First, Middle Initial)
Mailing Address PO BOX 1537

City SALT LAKE CITY State UT Zip Code 84110

Purpose of Disbursement
TRANSFER TO AUTH CMTEE OF NET JOINT FUNDRAISING PROCEEDS

Candidate Name
LEE, MIKE, , SEN,

Office Sought: House Senate President
Disbursement For: 2022 Primary General Other (specify) ▼

State: UT District:

Date of Disbursement: 09 / 29 / 2021

FEC Identification Number: C
Transaction ID : SB22.26
Amount of Each Disbursement this Period: 17644.77

Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶ 107357.61

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 type="checkbox"/> 21b	<input checked="checked" 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)
CORNYN VICTORY COMMITTEE

Full Name (Last, First, Middle Initial)
A. FRIENDS OF TODD YOUNG INC

Mailing Address PO BOX 3743

City CARMEL	State IN	Zip Code 46082	Date of Disbursement MM / DD / YYYY 09 / 28 / 2021	
Purpose of Disbursement TRANSFER TO AUTH CMTEE OF NET JOINT FUNDRAISING PROCEEDS			FEC Identification Number C	
Candidate Name YOUNG, TODD, , SEN,			Transaction ID : SB22.3	
Office Sought: <input type="checkbox"/> House <input checked="checked" type="checkbox"/> Senate <input type="checkbox"/> President			Amount of Each Disbursement this Period 71608.25	
Disbursement For: 2022 <input checked="checked" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			Memo Item <input type="checkbox"/>	
State: IN District:				

Full Name (Last, First, Middle Initial)
B. FRIENDS OF JOHN THUNE

Mailing Address 25681 DITCH ROAD

City RENNER	State SD	Zip Code 57055	Date of Disbursement MM / DD / YYYY 09 / 28 / 2021	
Purpose of Disbursement TRANSFER TO AUTH CMTEE OF NET JOINT FUNDRAISING PROCEEDS			FEC Identification Number C	
Candidate Name THUNE, JOHN, , SEN,			Transaction ID : SB22.31	
Office Sought: <input type="checkbox"/> House <input checked="checked" type="checkbox"/> Senate <input type="checkbox"/> President			Amount of Each Disbursement this Period 73077.13	
Disbursement For: 2022 <input checked="checked" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			Memo Item <input type="checkbox"/>	
State: SD District:				

Full Name (Last, First, Middle Initial)
C. FRIENDS OF TODD YOUNG INC

Mailing Address PO BOX 3743

City CARMEL	State IN	Zip Code 46082	Date of Disbursement MM / DD / YYYY 09 / 28 / 2021	
Purpose of Disbursement TRANSFER TO AUTH CMTEE OF NET JOINT FUNDRAISING PROCEEDS			FEC Identification Number C	
Candidate Name YOUNG, TODD, , SEN,			Transaction ID : SB22.4	
Office Sought: <input type="checkbox"/> House <input checked="checked" type="checkbox"/> Senate <input type="checkbox"/> President			Amount of Each Disbursement this Period 19926.48	
Disbursement For: 2022 <input type="checkbox"/> Primary <input checked="checked" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			Memo Item <input type="checkbox"/>	
State: IN District:				

SUBTOTAL of Disbursements This Page (optional).....▶	164611.86
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 type="checkbox"/> 21b	<input checked="" 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)
CORNYN VICTORY COMMITTEE

Full Name (Last, First, Middle Initial) A. GRASSLEY COMMITTEE INC		Date of Disbursement MM / DD / YYYY 09 / 29 / 2021
Mailing Address PO BOX 1000		FEC Identification Number C [] Transaction ID : SB22.13 Amount of Each Disbursement this Period [] 68004.72
City DES MOINES	State IA	Zip Code 50304
Purpose of Disbursement TRANSFER TO AUTH CMTEE OF NET JOINT FUNDRAISING PROCEEDS		Category/ Type []
Candidate Name GRASSLEY, CHUCK, , SEN,		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: IA	District:	

Full Name (Last, First, Middle Initial) B. GRASSLEY COMMITTEE INC		Date of Disbursement MM / DD / YYYY 09 / 29 / 2021
Mailing Address PO BOX 1000		FEC Identification Number C [] Transaction ID : SB22.14 Amount of Each Disbursement this Period [] 17993.25
City DES MOINES	State IA	Zip Code 50304
Purpose of Disbursement TRANSFER TO AUTH CMTEE OF NET JOINT FUNDRAISING PROCEEDS		Category/ Type []
Candidate Name GRASSLEY, CHUCK, , SEN,		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: IA	District:	

Full Name (Last, First, Middle Initial) C. HOEVEN FOR SENATE		Date of Disbursement MM / DD / YYYY 09 / 28 / 2021
Mailing Address 1029 N 5TH ST		FEC Identification Number C [] Transaction ID : SB22.5 Amount of Each Disbursement this Period [] 71153.84
City BISMARCK	State ND	Zip Code 58501
Purpose of Disbursement TRANSFER TO AUTH CMTEE OF NET JOINT FUNDRAISING PROCEEDS		Category/ Type []
Candidate Name HOEVEN, JOHN, , SEN,		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: ND	District:	

SUBTOTAL of Disbursements This Page (optional).....▶	[] 157151.81
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 type="checkbox"/> 21b	<input checked="" 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)
CORNYN VICTORY COMMITTEE

Full Name (Last, First, Middle Initial) A. HOEVEN FOR SENATE		Date of Disbursement MM / DD / YYYY 09 / 28 / 2021
Mailing Address 1029 N 5TH ST		FEC Identification Number C [] Transaction ID : SB22.6 Amount of Each Disbursement this Period [] 18225.44
City BISMARK	State ND	Zip Code 58501
Purpose of Disbursement TRANSFER TO AUTH CMTEE OF NET JOINT FUNDRAISING PROCEEDS		Category/ Type []
Candidate Name HOEVEN, JOHN, , SEN,		
Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: ND	District:	<input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) B. JOHN KENNEDY FOR US INC		Date of Disbursement MM / DD / YYYY 09 / 28 / 2021
Mailing Address 2900 CLEARVIEW PKWY STE 206		FEC Identification Number C [] Transaction ID : SB22.7 Amount of Each Disbursement this Period [] 58836.78
City METAIRIE	State LA	Zip Code 70006
Purpose of Disbursement TRANSFER TO AUTH CMTEE OF NET JOINT FUNDRAISING PROCEEDS		Category/ Type []
Candidate Name KENNEDY, JOHN, , SEN,		
Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: LA	District:	<input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) C. JOHN KENNEDY FOR US INC		Date of Disbursement MM / DD / YYYY 09 / 28 / 2021
Mailing Address 2900 CLEARVIEW PKWY STE 206		FEC Identification Number C [] Transaction ID : SB22.8 Amount of Each Disbursement this Period [] 15207.92
City METAIRIE	State LA	Zip Code 70006
Purpose of Disbursement TRANSFER TO AUTH CMTEE OF NET JOINT FUNDRAISING PROCEEDS		Category/ Type []
Candidate Name KENNEDY, JOHN, , SEN,		
Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: LA	District:	<input type="checkbox"/> Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶	[] 92270.14
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 type="checkbox"/> 21b	<input checked="" 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)
CORNYN VICTORY COMMITTEE

A. LISA MURKOWSKI FOR US SENATE

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address PO BOX 100847

M M M	/	D D D	/	Y Y Y Y Y
09		29		2021

City ANCHORAGE State AK Zip Code 99510

FEC Identification Number

Purpose of Disbursement
TRANSFER TO AUTH CMTEE OF NET JOINT FUNDRAISING PROCEEDS

C

Candidate Name
MURKOWSKI, LISA, , SEN,

Category/
Type

Transaction ID : SB22.17

Amount of Each Disbursement this Period

Office Sought: House Senate President
Disbursement For: 2022 Primary General Other (specify) ▼

60185.56

State: AK District:

Memo Item

B. LISA MURKOWSKI FOR US SENATE

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address PO BOX 100847

M M M	/	D D D	/	Y Y Y Y Y
09		29		2021

City ANCHORAGE State AK Zip Code 99510

FEC Identification Number

Purpose of Disbursement
TRANSFER TO AUTH CMTEE OF NET JOINT FUNDRAISING PROCEEDS

C

Candidate Name
MURKOWSKI, LISA, , SEN,

Category/
Type

Transaction ID : SB22.18

Amount of Each Disbursement this Period

Office Sought: House Senate President
Disbursement For: 2022 Primary General Other (specify) ▼

15409.48

State: AK District:

Memo Item

C. MARCO RUBIO FOR SENATE

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address 228 S WASHINGTON ST
STE 115

M M M	/	D D D	/	Y Y Y Y Y
09		29		2021

City ALEXANDRIA State VA Zip Code 22314

FEC Identification Number

Purpose of Disbursement
TRANSFER TO AUTH CMTEE OF NET JOINT FUNDRAISING PROCEEDS

C

Candidate Name
RUBIO, MARCO, , SEN,

Category/
Type

Transaction ID : SB22.19

Amount of Each Disbursement this Period

Office Sought: House Senate President
Disbursement For: 2022 Primary General Other (specify) ▼

75987.74

State: FL District:

Memo Item

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

151582.78

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

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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 type="checkbox"/> 21b	<input checked="" 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)
CORNYN VICTORY COMMITTEE

A. MARCO RUBIO FOR SENATE

Full Name (Last, First, Middle Initial)
MARCO RUBIO FOR SENATE

Date of Disbursement: 09 / 29 / 2021

Mailing Address: 228 S WASHINGTON ST STE 115

City: ALEXANDRIA State: VA Zip Code: 22314

Purpose of Disbursement: TRANSFER TO AUTH CMTEE OF NET JOINT FUNDRAISING PROCEEDS

Candidate Name: RUBIO, MARCO, , SEN, Category/Type: []

Office Sought: Senate Disbursement For: 2022 Primary General Other (specify) ▼

State: FL District: []

FEC Identification Number: C [] Transaction ID : SB22.20

Amount of Each Disbursement this Period: 20010.02

Memo Item

B. MIKE CRAPO FOR US SENATE

Full Name (Last, First, Middle Initial)
MIKE CRAPO FOR US SENATE

Date of Disbursement: 09 / 28 / 2021

Mailing Address: 2107 W SUNRISE RIM RD

City: BOISE State: ID Zip Code: 83705

Purpose of Disbursement: TRANSFER TO AUTH CMTEE OF NET JOINT FUNDRAISING PROCEEDS

Candidate Name: CRAPO, MIKE, , SEN, Category/Type: []

Office Sought: Senate Disbursement For: 2022 Primary General Other (specify) ▼

State: ID District: []

FEC Identification Number: C [] Transaction ID : SB22.10

Amount of Each Disbursement this Period: 20091.50

Memo Item

C. MIKE CRAPO FOR US SENATE

Full Name (Last, First, Middle Initial)
MIKE CRAPO FOR US SENATE

Date of Disbursement: 09 / 28 / 2021

Mailing Address: 2107 W SUNRISE RIM RD

City: BOISE State: ID Zip Code: 83705

Purpose of Disbursement: TRANSFER TO AUTH CMTEE OF NET JOINT FUNDRAISING PROCEEDS

Candidate Name: CRAPO, MIKE, , SEN, Category/Type: []

Office Sought: Senate Disbursement For: 2022 Primary General Other (specify) ▼

State: ID District: []

FEC Identification Number: C [] Transaction ID : SB22.9

Amount of Each Disbursement this Period: 72399.91

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 112501.43

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 type="checkbox"/> 21b	<input checked="" 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)
CORNYN VICTORY COMMITTEE

Full Name (Last, First, Middle Initial) A. MORAN FOR KANSAS INC		Date of Disbursement MM / DD / YYYY 09 / 29 / 2021
Mailing Address PO BOX 541		FEC Identification Number C [] Transaction ID : SB22.21 Amount of Each Disbursement this Period [] 69909.90
City BELLEVILLE	State KS	Zip Code 66935
Purpose of Disbursement TRANSFER TO AUTH CMTEE OF NET JOINT FUNDRAISING PROCEEDS		Category/Type []
Candidate Name MORAN, JERRY, , SEN,		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: KS	District:	

Full Name (Last, First, Middle Initial) B. MORAN FOR KANSAS INC		Date of Disbursement MM / DD / YYYY 09 / 29 / 2021
Mailing Address PO BOX 541		FEC Identification Number C [] Transaction ID : SB22.22 Amount of Each Disbursement this Period [] 17396.16
City BELLEVILLE	State KS	Zip Code 66935
Purpose of Disbursement TRANSFER TO AUTH CMTEE OF NET JOINT FUNDRAISING PROCEEDS		Category/Type []
Candidate Name MORAN, JERRY, , SEN,		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: KS	District:	

Full Name (Last, First, Middle Initial) C. RAND PAUL FOR US SENATE		Date of Disbursement MM / DD / YYYY 09 / 28 / 2021
Mailing Address PO BOX 72928		FEC Identification Number C [] Transaction ID : SB22.11 Amount of Each Disbursement this Period [] 71002.61
City NEWPORT	State KY	Zip Code 41072
Purpose of Disbursement TRANSFER TO AUTH CMTEE OF NET JOINT FUNDRAISING PROCEEDS		Category/Type []
Candidate Name PAUL, RAND, , SEN,		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: KY	District:	

SUBTOTAL of Disbursements This Page (optional).....▶	[] 158308.67
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 type="checkbox"/> 21b	<input checked="" 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)
CORNYN VICTORY COMMITTEE

Full Name (Last, First, Middle Initial) A. RAND PAUL FOR US SENATE		Date of Disbursement MM / DD / YYYY 09 / 28 / 2021
Mailing Address PO BOX 72928		FEC Identification Number C [] Transaction ID : SB22.12 Amount of Each Disbursement this Period [] 17382.10
City NEWPORT	State KY	Zip Code 41072
Purpose of Disbursement TRANSFER TO AUTH CMTEE OF NET JOINT FUNDRAISING PROCEEDS		Category/Type []
Candidate Name PAUL, RAND, , SEN,		Memo Item <input type="checkbox"/>
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: KY	District:	

Full Name (Last, First, Middle Initial) B. RON JOHNSON FOR SENATE INC		Date of Disbursement MM / DD / YYYY 09 / 29 / 2021
Mailing Address 138 CONANT ST 2ND FL		FEC Identification Number C [] Transaction ID : SB22.27 Amount of Each Disbursement this Period [] 71037.08
City BEVERLY	State MA	Zip Code 01915
Purpose of Disbursement TRANSFER TO AUTH CMTEE OF NET JOINT FUNDRAISING PROCEEDS		Category/Type []
Candidate Name JOHNSON, RON, , SEN,		Memo Item <input type="checkbox"/>
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: WI	District:	

Full Name (Last, First, Middle Initial) C. RON JOHNSON FOR SENATE INC		Date of Disbursement MM / DD / YYYY 09 / 29 / 2021
Mailing Address 138 CONANT ST 2ND FL		FEC Identification Number C [] Transaction ID : SB22.28 Amount of Each Disbursement this Period [] 17748.87
City BEVERLY	State MA	Zip Code 01915
Purpose of Disbursement TRANSFER TO AUTH CMTEE OF NET JOINT FUNDRAISING PROCEEDS		Category/Type []
Candidate Name JOHNSON, RON, , SEN,		Memo Item <input type="checkbox"/>
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: WI	District:	

SUBTOTAL of Disbursements This Page (optional).....▶	[] 106168.05
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 type="checkbox"/> 21b	<input checked="" 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)
CORNYN VICTORY COMMITTEE

Full Name (Last, First, Middle Initial) A. TEXANS FOR SENATOR JOHN CORNYN		Date of Disbursement MM / DD / YYYY 09 / 29 / 2021
Mailing Address PO BOX 13026		FEC Identification Number C [] Transaction ID : SB22.30 Amount of Each Disbursement this Period [] 65356.16
City AUSTIN	State TX	Zip Code 78711
Purpose of Disbursement TRANSFER TO AUTH CMTEE OF NET JOINT FUNDRAISING PROCEEDS		Category/ Type []
Candidate Name CORNYN, JOHN, , SEN,		
Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: TX	District:	

Full Name (Last, First, Middle Initial) B. TIM SCOTT FOR SENATE		Date of Disbursement MM / DD / YYYY 09 / 29 / 2021
Mailing Address 1405 ASHLEY RIVER RD		FEC Identification Number C [] Transaction ID : SB22.23 Amount of Each Disbursement this Period [] 60156.92
City CHARLESTON	State SC	Zip Code 29407
Purpose of Disbursement TRANSFER TO AUTH CMTEE OF NET JOINT FUNDRAISING PROCEEDS		Category/ Type []
Candidate Name SCOTT, TIM, , SEN,		
Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	<input type="checkbox"/> Memo Item
State: SC	District:	

Full Name (Last, First, Middle Initial) C. TIM SCOTT FOR SENATE		Date of Disbursement MM / DD / YYYY 09 / 29 / 2021
Mailing Address 1405 ASHLEY RIVER RD		FEC Identification Number C [] Transaction ID : SB22.24 Amount of Each Disbursement this Period [] 19021.48
City CHARLESTON	State SC	Zip Code 29407
Purpose of Disbursement TRANSFER TO AUTH CMTEE OF NET JOINT FUNDRAISING PROCEEDS		Category/ Type []
Candidate Name SCOTT, TIM, , SEN,		
Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: SC	District:	

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

144534.56

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 type="checkbox"/> 21b	<input checked="" 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)
CORNYN VICTORY COMMITTEE

Full Name (Last, First, Middle Initial)

A. NRSC

Mailing Address 425 2ND ST NE

City
WASHINGTON

State
DC

Zip Code
20002

Purpose of Disbursement
TRANSFER TO AUTH CMTEE OF NET JOINT FUNDRAISING PROCEEDS

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Category/
Type

Date of Disbursement

/ /
09 / 29 / 2021

FEC Identification Number

C

Transaction ID : SB22.29
Amount of Each Disbursement this Period

176830.04

Memo Item

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Category/
Type

Date of Disbursement

/ /
 / /

FEC Identification Number

C

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Category/
Type

Date of Disbursement

/ /
 / /

FEC Identification Number

C

Amount of Each Disbursement this Period

Memo Item

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

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

176830.04

1533035.05

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 checked="" type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
CORNYN VICTORY COMMITTEE

A. MISCHER INVESTMENTS LP

Full Name (Last, First, Middle Initial)

Mailing Address 4605 POST OAK PLACE

City HOUSTON State TX Zip Code 77027

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: MM / DD / YYYY
09 / 03 / 2021

FEC Identification Number: C

Transaction ID : SB28B.1

Amount of Each Disbursement this Period: 25000.00

Memo Item

B.

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: MM / DD / YYYY

FEC Identification Number: C

Amount of Each Disbursement this Period

Memo Item

C.

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: MM / DD / YYYY

FEC Identification Number: C

Amount of Each Disbursement this Period

Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶	25000.00
TOTAL This Period (last page this line number only).....▶	25000.00