

**FEC
FORM 3****REPORT OF RECEIPTS
AND DISBURSEMENTS**
For An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼

Example: If typing, type over the lines.

12FE4M5

ANNIE KUSTER VICTORY FUND

ADDRESS (number and street)

1 PARK ROW 5TH FL



Check if different than previously reported. (ACC)

PROVIDENCE

RI

02903

CITY ▲

STATE ▲

ZIP CODE ▲

2. FEC IDENTIFICATION NUMBER ▼

C C00526210

3. IS THIS REPORT



NEW (N)

OR



AMENDED (A)

STATE ▼ DISTRICT

NH

02

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:



April 15 Quarterly Report (Q1)



July 15 Quarterly Report (Q2)



October 15 Quarterly Report (Q3)



January 31 Year-End Report (YE)



Termination Report (TER)

(b) 12-Day PRE-Election Report for the:



Primary (12P)



General (12G)



Runoff (12R)



Convention (12C)



Special (12S)

Election on

M M / D D / Y Y Y Y

in the State of

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



General (30G)



Runoff (30R)



Special (30S)

Election on

M M / D D / Y Y Y Y

in the State of

5. Covering Period

M M / D D / Y Y Y Y

01 / 01 / 2021

through

M M / D D / Y Y Y Y

06 / 30 / 2021

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Schorr, Alexandra, , ,

Type or Print Name of Treasurer

Schorr, Alexandra, , ,

Signature of Treasurer

[Electronically Filed]

Date

M M / D D / Y Y Y Y

07 / 30 / 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.

Office
Use
Only**FEC FORM 3**
(Revised 05/2016)

SUMMARY PAGE

of Receipts and Disbursements

FEC Form 3 (Revised 05/2016)

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Write or Type Committee Name
ANNIE KUSTER VICTORY FUND

Report Covering the Period: From: M M / D D / Y Y Y Y
01 / 01 / 2021 To: M M / D D / Y Y Y Y
06 / 30 / 2021

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e))....	1450.00	1500.00
(b) Total Contribution Refunds (from Line 20(d))	0.00	0.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a))	1450.00	1500.00
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	592.31	644.29
(b) Total Offsets to Operating Expenditures (from Line 14)	0.00	0.00
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a))	592.31	644.29
8. Cash on Hand at Close of Reporting Period (from Line 27)	4489.72	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	

For further information contact:

Federal Election Commission
 999 E Street, NW
 Washington, DC 20463

Toll Free 800-424-9530
 Local 202-694-1100

DETAILED SUMMARY PAGE of Receipts

FEC Form 3 (Revised 05/2016)

Write or Type Committee Name

ANNIE KUSTER VICTORY FUND

Report Covering the Period:

From:

M	M	/	D	D	/	Y	Y	Y	Y
0	1		0	1		2	0	2	1

To:

M	M	/	D	D	/	Y	Y	Y	Y
0	6		3	0		2	0	2	1

I. RECEIPTS
COLUMN A
Total This Period

COLUMN B
Election Cycle-to-Date

11. CONTRIBUTIONS (other than loans) FROM:

(a) Individuals/Persons Other Than Political Committees

(i) Itemized (use Schedule A).....

1000.00

1000.00

(ii) Unitemized.....

450.00

500.00

(iii) TOTAL of contributions from individuals ▶

1450.00

1500.00

(b) Political Party Committees.....

0.00

0.00

(c) Other Political Committees (such as PACs).....

0.00

0.00

(d) The Candidate.....

0.00

0.00

(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..

1450.00

1500.00

12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES

0.00

0.00

13. LOANS:

(a) Made or Guaranteed by the Candidate.....

0.00

0.00

(b) All Other Loans.....

0.00

0.00

(c) TOTAL LOANS (add Lines 13(a) and (b)).....

0.00

0.00

14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.)

0.00

0.00

15. OTHER RECEIPTS (Dividends, Interest, etc.)

0.00

0.00

16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶

1450.00

1500.00

DETAILED SUMMARY PAGE of Disbursements

FEC Form 3 (Revised 05/2016)

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II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	592.31	644.29
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES	1224.62	1224.62
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	0.00
(b) Of All Other Loans	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	0.00	0.00
21. OTHER DISBURSEMENTS	0.00	0.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ►	1816.93	1868.91

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	4856.65
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	1450.00
25. SUBTOTAL (add Line 23 and Line 24).....	6306.65
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	1816.93
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	4489.72

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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☒ 11a	☐ 11b	☐ 11c	☐ 11d
12	13a	13b	14
			15

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)

ANNIE KUSTER VICTORY FUND

A. Full Name (Last, First, Middle Initial) Brewer, Michael, , ,			Date of Receipt M M / D D / Y Y Y Y Y 03 / 30 / 2021		
Mailing Address 2700 Virginia Avenue NW Apt 1211			Transaction ID : SA11AI.5108		
City Washington	State DC	Zip Code 20037	Amount of Each Receipt this Period 1000.00		
FEC ID number of contributing federal political committee. C		Memo Item			
Name of Employer none		Occupation Self Employed			
Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼		Election Cycle-to-Date ▼ 1000.00			
B. Full Name (Last, First, Middle Initial)			Date of Receipt M M / D D / Y Y Y Y Y		
Mailing Address			Amount of Each Receipt this Period		
City	State	Zip Code	Memo Item		
FEC ID number of contributing federal political committee. C					
Name of Employer		Occupation			
Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼		Election Cycle-to-Date ▼			
C. Full Name (Last, First, Middle Initial)			Date of Receipt M M / D D / Y Y Y Y Y		
Mailing Address			Amount of Each Receipt this Period		
City	State	Zip Code	Memo Item		
FEC ID number of contributing federal political committee. C					
Name of Employer		Occupation			
Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼		Election Cycle-to-Date ▼			
SUBTOTAL of Receipts This Page (optional)..... ▶			1000.00		
TOTAL This Period (last page this line number only)..... ▶			1000.00		

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 6 OF 7

☒ 17	☐ 18	☐ 19a	☐ 19b
☐ 20a	☐ 20b	☐ 20c	☐ 21

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NAME OF COMMITTEE (In Full)

ANNIE KUSTER VICTORY FUND

Full Name (Last, First, Middle Initial)

A. CFO Compliance

Mailing Address One Park Row, 5th Floor

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		22		2021

City
ProvidenceState
RIZip Code
02903Purpose of Disbursement
Compliance Services

FEC Identification Number

C

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

385.00

Transaction ID : SB17.5086

☐ Memo Item

State:

District:

Full Name (Last, First, Middle Initial)

B.

Mailing Address

Date of Disbursement

M M	/	D D	/	Y Y Y Y

City

State

Zip Code

Purpose of Disbursement

FEC Identification Number

C

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼
☐ Memo Item

State:

District:

Full Name (Last, First, Middle Initial)

C.

Mailing Address

Date of Disbursement

M M	/	D D	/	Y Y Y Y

City

State

Zip Code

Purpose of Disbursement

FEC Identification Number

C

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼
☐ Memo Item

State:

District:

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

385.00

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

385.00

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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☐ 17 20a	☒ 18 20b	☐ 19a 20c	☐ 19b 21
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NAME OF COMMITTEE (In Full)

ANNIE KUSTER VICTORY FUND

Full Name (Last, First, Middle Initial)

A. KUSTER FOR CONGRESS, INC.

Mailing Address P.O. BOX 1498

City
CONCORDState
NHZip Code
03302Purpose of Disbursement
Victory Fund Transfer

Candidate Name

Office Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2022
☒ Primary ☐ General
☐ Other (specify) ▼

State: NH District: 02

Category/
Type

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		31		2021

FEC Identification Number

C C00462861

Amount of Each Disbursement this Period

1224.62

Transaction ID : SB18.5084

☐ Memo Item**B.**

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Category/
Type

Date of Disbursement

M M	/	D D	/	Y Y Y Y

FEC Identification Number

C

Amount of Each Disbursement this Period

☐ Memo Item**C.**

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Category/
Type

Date of Disbursement

M M	/	D D	/	Y Y Y Y

FEC Identification Number

C

Amount of Each Disbursement this Period

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

1224.62

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

1224.62