

# 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**  
**ISSA VICTORY FUND**

ADDRESS (number and street) **PO BOX 463007**  
Check if different than previously reported. (ACC) **ESCONDIDO CA 92046**

2. FEC IDENTIFICATION NUMBER ▼ CITY ▲ STATE ▲ ZIP CODE ▲  
**C C00725747** 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 **11 / 03 / 2020** in the State of **CA**  
(d) 30-Day POST-Election Report for the:  
 General (30G)  Runoff (30R)  Special (30S)  
Election on \_\_\_\_\_ in the State of \_\_\_\_\_

5. Covering Period **10 / 01 / 2020** through **10 / 14 / 2020**

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

Signature of Treasurer **SLATER, JEN, , ,** [Electronically Filed] Date **10 / 19 / 2020**

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

**ISSA VICTORY FUND**

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

|  | COLUMN A<br>This Period               | COLUMN B<br>Calendar Year-to-Date      |
|--|---------------------------------------|--|
| 6. (a) Cash on Hand<br>January 1, <input type="text" value="2020"/>  | <input type="text" value="0.00"/>     | <input type="text" value="0.00"/>      |
| (b) Cash on Hand at<br>Beginning of Reporting Period.....  | <input type="text" value="599.32"/>   |  |
| (c) Total Receipts (from Line 19) .....  | <input type="text" value="20274.00"/> | <input type="text" value="459492.00"/> |
| (d) Subtotal (add Lines 6(b) and<br>6(c) for Column A and Lines<br>6(a) and 6(c) for Column B).....              | <input type="text" value="20873.32"/> | <input type="text" value="459492.00"/> |
| 7. Total Disbursements (from Line 31).....   | <input type="text" value="20274.00"/> | <input type="text" value="458892.68"/> |
| 8. Cash on Hand at Close of<br>Reporting Period<br>(subtract Line 7 from Line 6(d)).....                         | <input type="text" value="599.32"/>   | <input type="text" value="599.32"/>    |
| 9. Debts and Obligations Owed <b>TO</b><br>the Committee (Itemize all on<br>Schedule C and/or Schedule D) .....  | <input type="text" value="0.00"/>     |  |
| 10. Debts and Obligations Owed <b>BY</b><br>the Committee (Itemize all on<br>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  
**ISSA VICTORY FUND**

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

| I. Receipts   | COLUMN A<br>Total This Period | COLUMN B<br>Calendar Year-to-Date |
|---|-------------------------------|-----------------------------------|
| 11. Contributions (other than loans) From:  |                               |                                   |
| (a) Individuals/Persons Other Than Political Committees   |                               |                                   |
| (i) Itemized (use Schedule A).....  | 19975.00                      | 453551.00                         |
| (ii) Unitemized .....   | 299.00                        | 2241.00                           |
| (iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶   | 20274.00                      | 455792.00                         |
| (b) Political Party Committees .....  | 0.00                          | 0.00                              |
| (c) Other Political Committees (such as PACs).....  | 0.00                          | 3700.00                           |
| (d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) .....  | 20274.00                      | 459492.00                         |
| 12. Transfers From Affiliated/Other Party Committees.....   | 0.00                          | 0.00                              |
| 13. All Loans Received .....  | 0.00                          | 0.00                              |
| 14. Loan Repayments Received.....   | 0.00                          | 0.00                              |
| 15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)..... | 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)).....▶                         | 20274.00                      | 459492.00                         |
| 20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶                                   | 20274.00                      | 459492.00                         |

**DETAILED SUMMARY PAGE**  
of Disbursements

| II. Disbursements  | COLUMN A<br>Total This Period | COLUMN B<br>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 .....   | 15021.20                      | 61484.01                          |
| (c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....                        | 15021.20                      | 61484.01                          |
| 22. Transfers to Affiliated/Other Party Committees.....  | 5252.80                       | 397408.67                         |
| 23. Contributions to Federal Candidates/Committees and Other Political Committees.....         | 0.00                          | 0.00                              |
| 24. Independent Expenditures (use Schedule E) .....  | 0.00                          | 0.00                              |
| 25. Coordinated Party Expenditures (52 U.S.C. § 30116(d)) (use Schedule F).....                | 0.00                          | 0.00                              |
| 26. Loan Repayments Made.....  | 0.00                          | 0.00                              |
| 27. Loans Made.....  | 0.00                          | 0.00                              |
| 28. Refunds of Contributions To:   |                               |                                   |
| (a) Individuals/Persons Other Than Political Committees .....                                  | 0.00                          | 0.00                              |
| (b) Political Party Committees .....   | 0.00                          | 0.00                              |
| (c) Other Political Committees (such as PACs).....   | 0.00                          | 0.00                              |
| (d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....                            | 0.00                          | 0.00                              |
| 29. Other Disbursements (Including Non-Federal Donations).....                                 | 0.00                          | 0.00                              |
| 30. Federal Election Activity (52 U.S.C. § 30101(20))  |                               |                                   |
| (a) Allocated Federal Election Activity (from Schedule H6)                                     |                               |                                   |
| (i) Federal Share .....  | 0.00                          | 0.00                              |
| (ii) "Levin" Share.....  | 0.00                          | 0.00                              |
| (b) Federal Election Activity Paid Entirely With Federal Funds .....                           | 0.00                          | 0.00                              |
| (c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b)) .....            | 0.00                          | 0.00                              |
| 31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..      | 20274.00                      | 458892.68                         |
| 32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31)..... | 20274.00                      | 458892.68                         |

**DETAILED SUMMARY PAGE**  
of Disbursements

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Page 5

| <b>III. Net Contributions/<br/>Operating Expenditures</b>                            | <b>COLUMN A<br/>Total This Period</b> | <b>COLUMN B<br/>Calendar Year-to-Date</b> |
|--|---------------------------------------|---|
| 33. Total Contributions (other than loans)<br>(from Line 11(d), page 3) .....        | 20274.00                              | 459492.00                                 |
| 34. Total Contribution Refunds<br>(from Line 28(d)) .....                            | 0.00                                  | 0.00                                      |
| 35. Net Contributions (other than loans)<br>(subtract Line 34 from Line 33) .....    | 20274.00                              | 459492.00                                 |
| 36. Total Federal Operating Expenditures<br>(add Line 21(a)(i) and Line 21(b)) ..... | 15021.20                              | 61484.01                                  |
| 37. Offsets to Operating Expenditures<br>(from Line 15, page 3).....                 | 0.00                                  | 0.00                                      |
| 38. Net Operating Expenditures<br>(subtract Line 37 from Line 36) .....              | 15021.20                              | 61484.01                                  |

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

|   |                              |                              |
|---|------------------------------|------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER:             | PAGE 6 OF 14                 |
|   | (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)  
**ISSA VICTORY FUND**

**A. ATKINSON, BEN, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1304 SAN PABLO CT  
 City SAN MARCOS State CA Zip Code 92078  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) VIASAT Occupation (for Individual) PRODUCT MANAGER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 10 / 01 / 2020  
**Transaction ID : INCA293**  
 Amount of Each Receipt this Period 500.00  
 Memo Item

**B. HOURAMI, JAMEEL, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 338 N BROADWAY  
 City LOS ANGELES State CA Zip Code 90012  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) JAMEEL HOURAMI, MD Occupation (for Individual) PHYSICIAN  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 2800.00

Date of Receipt 10 / 01 / 2020  
**Transaction ID : INCA288**  
 Amount of Each Receipt this Period 2800.00  
 Memo Item

**C. HOURAMI, JUDY, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 338 N BROADWAY  
 City LOS ANGELES State CA Zip Code 90012  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) NONE Occupation (for Individual) HOMEMAKER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 2800.00

Date of Receipt 10 / 01 / 2020  
**Transaction ID : INCA289**  
 Amount of Each Receipt this Period 2800.00  
 Memo Item

|   |         |
|---|---------|
| <b>SUBTOTAL</b> of Receipts This Page (optional).....           | 6100.00 |
| <b>TOTAL</b> This Period (last page this line number only)..... |         |

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

|   |                              |                                   |   |
|---|------------------------------|-----------------------------------|---|
| Use separate schedule(s) for each category of the Detailed Summary Page |                              | FOR LINE NUMBER: (check only one) | PAGE 7 OF 14  |
| <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)  
**ISSA VICTORY FUND**

**A. JOSEPHSON, JULIAN, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2516 RUETTE NICOLE  
 City SAN DIEGO State CA Zip Code 92037  
 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 ▼ 1000.00

Date of Receipt 10 / 03 / 2020  
**Transaction ID : INCA299**  
 Amount of Each Receipt this Period 1000.00  
 Memo Item

**B. BRAVO, SHERLYN, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 12217 BOULDER VIEW DR  
 City POWAY State CA Zip Code 92064  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) TACTICAL ENGINEERING & ANALYSIS Occupation (for Individual) DIRECTOR, HR  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 10 / 07 / 2020  
**Transaction ID : INCA303**  
 Amount of Each Receipt this Period 500.00  
 Memo Item

**C. CLARK, ELLOINE M./MRS. WILL, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 3716 MAPLEWOOD  
 City DALLAS State TX Zip Code 75205  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 8400.00

Date of Receipt 10 / 09 / 2020  
**Transaction ID : INCA314**  
 Amount of Each Receipt this Period 2800.00  
 Memo Item

|   |         |
|---|---------|
| <b>SUBTOTAL</b> of Receipts This Page (optional).....           | 4300.00 |
| <b>TOTAL</b> This Period (last page this line number only)..... |         |

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

|   |                              |                              |
|---|------------------------------|------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER:             | PAGE 8 OF 14                 |
|   | (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)  
**ISSA VICTORY FUND**

**A. EVANS, RALPH G., , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO BOX 1350  
 City DOUGLAS State GA Zip Code 31534  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) R.W. GRIFFIN Occupation (for Individual) EXECUTIVE  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 2800.00

Date of Receipt 10 / 09 / 2020  
**Transaction ID : INCA315**  
 Amount of Each Receipt this Period 2800.00  
 Memo Item

**B. LOWMAN, AUDREY J., , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 3431 LOMITA BLVD  
 City TORRANCE State CA Zip Code 90505  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) MICRONOVA MANUFACTURING, INC Occupation (for Individual) PRESIDENT  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1600.00

Date of Receipt 10 / 09 / 2020  
**Transaction ID : INCA316**  
 Amount of Each Receipt this Period 1600.00  
 Memo Item

**C. LOWMAN, FRANK, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 705 VIA HORCADA  
 City PALOS VERDES ESTAT State CA Zip Code 90274  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) MICRONOVA MANUFACTURING, INC Occupation (for Individual) EXECUTIVE  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 10 / 09 / 2020  
**Transaction ID : INCA339**  
 Amount of Each Receipt this Period 400.00  
 Memo Item

|   |         |
|---|---------|
| <b>SUBTOTAL</b> of Receipts This Page (optional).....           | 4800.00 |
| <b>TOTAL</b> This Period (last page this line number only)..... |         |



**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

|   |                              |                                   |   |
|---|------------------------------|-----------------------------------|---|
| Use separate schedule(s) for each category of the Detailed Summary Page |                              | FOR LINE NUMBER: (check only one) | PAGE 9 OF 14  |
| <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)  
**ISSA VICTORY FUND**

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

Mailing Address 3511 CAMINO DEL RIO S #307

|                   |             |                   |
|-------------------|-------------|-------------------|
| City<br>SAN DIEGO | State<br>CA | Zip Code<br>92108 |
|-------------------|-------------|-------------------|

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

|   |                                    |
|---|------------------------------------|
| Name of Employer (for Individual)<br>KRISTIN GAINES | Occupation (for Individual)<br>CEO |
|---|------------------------------------|

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 |
| 10    |   | 12    |   | 2020        |

**Transaction ID : INCA317**

Amount of Each Receipt this Period  
1000.00

Memo Item

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

Mailing Address 12408 CAMINO DEL VALLE

|               |             |                   |
|---------------|-------------|-------------------|
| City<br>POWAY | State<br>CA | Zip Code<br>92064 |
|---------------|-------------|-------------------|

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

|  |  |
|--|--|
| Name of Employer (for Individual)<br>RETIRED | Occupation (for Individual)<br>RETIRED |
|--|--|

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 |
| 10    |   | 13    |   | 2020        |

**Transaction ID : INCA328**

Amount of Each Receipt this Period  
1500.00

Memo Item

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

Mailing Address 2200 AUTO PARK WAY STE A

|                   |             |                   |
|-------------------|-------------|-------------------|
| City<br>ESCONDIDO | State<br>CA | Zip Code<br>92029 |
|-------------------|-------------|-------------------|

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

|  |   |
|--|---|
| Name of Employer (for Individual)<br>WEST AUTOMOTIVE GROUP | Occupation (for Individual)<br>ENTREPRENEUR |
|--|---|

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 10    |   | 14    |   | 2020        |

**Transaction ID : INCA336**

Amount of Each Receipt this Period  
250.00

Memo Item

|   |         |
|---|---------|
| <b>SUBTOTAL</b> of Receipts This Page (optional).....           | 2750.00 |
| <b>TOTAL</b> This Period (last page this line number only)..... |         |

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

|   |                              |                              |
|---|------------------------------|------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER:             | PAGE 10 OF 14                |
|   | (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)  
**ISSA VICTORY FUND**

|   |                          |   |
|---|--------------------------|---|
| Full Name of Individual (Last, First, Middle Initial) or Full Organization Name<br><b>A. GULKO, MARINA, , ,</b>                 |                          | Date of Receipt   |
| Mailing Address 4982 BROOKBURN DR   |                          | <input type="text" value="10"/> / <input type="text" value="14"/> / <input type="text" value="2020"/> |
| City<br>SAN DIEGO   | State<br>CA              | Zip Code<br>92130   |
| FEC ID number of contributing federal political committee.<br><input type="text" value="C"/>                                    |                          | <b>Transaction ID : INCA337</b>   |
| Name of Employer (for Individual)<br>NCSC   |                          | Occupation (for Individual)<br>SUBSTITUTE TEACHER   |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ | Amount of Each Receipt this Period<br><input type="text" value="250.00"/>                             |
|   |                          | <input type="checkbox"/> Memo Item  |

|   |                          |   |
|---|--------------------------|---|
| Full Name of Individual (Last, First, Middle Initial) or Full Organization Name<br><b>B. JAGLOM, ARIELA, , ,</b>                                |                          | Date of Receipt   |
| Mailing Address 155 W 68TH ST, #304   |                          | <input type="text" value="10"/> / <input type="text" value="14"/> / <input type="text" value="2020"/> |
| City<br>NEW YORK  | State<br>NY              | Zip Code<br>10023   |
| FEC ID number of contributing federal political committee.<br><input type="text" value="C"/>  |                          | <b>Transaction ID : INCA332</b>   |
| Name of Employer (for Individual)<br>RETIRED  |                          | Occupation (for Individual)<br>RETIRED  |
| Receipt For: 2020<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ | Amount of Each Receipt this Period<br><input type="text" value="250.00"/>                             |
|   |                          | <input type="checkbox"/> Memo Item  |

|   |                          |   |
|---|--------------------------|---|
| Full Name of Individual (Last, First, Middle Initial) or Full Organization Name<br><b>C. NOVKOV, MIKE, , ,</b>                                |                          | Date of Receipt   |
| Mailing Address 1325 PACIFIC HWY #2001  |                          | <input type="text" value="10"/> / <input type="text" value="14"/> / <input type="text" value="2020"/> |
| City<br>SAN DIEGO   | State<br>CA              | Zip Code<br>92101   |
| FEC ID number of contributing federal political committee.<br><input type="text" value="C"/>  |                          | <b>Transaction ID : INCA322</b>   |
| Name of Employer (for Individual)<br>MIKE NOVKOV  |                          | Occupation (for Individual)<br>COMMERCIAL REAL ESTATE   |
| Receipt For: 2020<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | Aggregate Year-to-Date ▼ | Amount of Each Receipt this Period<br><input type="text" value="250.00"/>                             |
|   |                          | <input type="checkbox"/> Memo Item  |

|  |                                     |
|--|-------------------------------------|
| <b>SUBTOTAL</b> of Receipts This Page (optional).....▶           | <input type="text" value="750.00"/> |
| <b>TOTAL</b> This Period (last page this line number only).....▶ | <input type="text"/>                |

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

|   |                              |                                   |   |
|---|------------------------------|-----------------------------------|---|
| Use separate schedule(s) for each category of the Detailed Summary Page |                              | FOR LINE NUMBER: (check only one) | PAGE 11 OF 14   |
| <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)  
**ISSA VICTORY FUND**

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

Mailing Address 2215 CEDAR SPRINGS RD #912

|                |             |                   |
|----------------|-------------|-------------------|
| City<br>DALLAS | State<br>TX | Zip Code<br>75201 |
|----------------|-------------|-------------------|

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

|  |   |
|--|---|
| Name of Employer (for Individual)<br>ALAN E ROBBINS, DPM | Occupation (for Individual)<br>PODIATRIST |
|--|---|

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 10    |   | 14    |   | 2020        |

**Transaction ID : INCA327**

Amount of Each Receipt this Period  
250.00

Memo Item

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

Mailing Address 5144 MEADOWS DEL MAR

|                   |             |                   |
|-------------------|-------------|-------------------|
| City<br>SAN DIEGO | State<br>CA | Zip Code<br>92130 |
|-------------------|-------------|-------------------|

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

|  |  |
|--|--|
| Name of Employer (for Individual)<br>RETIRED | Occupation (for Individual)<br>RETIRED |
|--|--|

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 10    |   | 14    |   | 2020        |

**Transaction ID : INCA333**

Amount of Each Receipt this Period  
250.00

Memo Item

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

Mailing Address 6320 CANOGA AVE #1630

|                         |             |                   |
|-------------------------|-------------|-------------------|
| City<br>WOODLANDS HILLS | State<br>CA | Zip Code<br>91367 |
|-------------------------|-------------|-------------------|

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

|   |  |
|---|--|
| Name of Employer (for Individual)<br>METROPOLITAN MARKETING | Occupation (for Individual)<br>MANAGER |
|---|--|

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 10    |   | 14    |   | 2020        |

**Transaction ID : INCA329**

Amount of Each Receipt this Period  
250.00

Memo Item

|   |        |
|---|--------|
| <b>SUBTOTAL</b> of Receipts This Page (optional).....           | 750.00 |
| <b>TOTAL</b> This Period (last page this line number only)..... |        |

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**

|   |                              |                              |
|---|------------------------------|------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER:             | PAGE 12 OF 14                |
|   | (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)  
**ISSA VICTORY FUND**

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

Mailing Address 3710 BARRINGTON DR

|                   |             |                   |
|-------------------|-------------|-------------------|
| City<br>ALLENTOWN | State<br>PA | Zip Code<br>18104 |
|-------------------|-------------|-------------------|

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

|  |  |
|--|--|
| Name of Employer (for Individual)<br>RETIRED | Occupation (for Individual)<br>RETIRED |
|--|--|

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 10    |   | 14    |   | 2020        |

**Transaction ID : INCA335**

Amount of Each Receipt this Period  
250.00

Memo Item

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

Mailing Address 6663 RANCHO DEL ACACIA WAY

|                   |             |                   |
|-------------------|-------------|-------------------|
| City<br>SAN DIEGO | State<br>CA | Zip Code<br>92130 |
|-------------------|-------------|-------------------|

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

|  |  |
|--|--|
| Name of Employer (for Individual)<br>RETIRED | Occupation (for Individual)<br>RETIRED |
|--|--|

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
275.00

Date of Receipt  

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 10    |   | 14    |   | 2020        |

**Transaction ID : INCA324**

Amount of Each Receipt this Period  
275.00

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

|   |          |
|---|----------|
| <b>SUBTOTAL</b> of Receipts This Page (optional).....           | 525.00   |
| <b>TOTAL</b> This Period (last page this line number only)..... | 19975.00 |

**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)  
**ISSA VICTORY FUND**

Full Name (Last, First, Middle Initial)

**A. ANEDOT**

Mailing Address 1340 POYDRAS ST STE 1770

City NEW ORLEANS State LA Zip Code 70112

Purpose of Disbursement  
CREDIT CARD TRANSACTION FEES

Category/  
Type

Candidate Name

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

Date of Disbursement  
M M / D D / Y Y Y Y Y Y  
10 / 01 / 2020

FEC Identification Number  
  
**Transaction ID : EXPB361**  
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**B. BANK OF AMERICA**

Mailing Address 330 SOUTH SANTA FE AVENUE

City VISA State CA Zip Code 92081

Purpose of Disbursement  
BANK FEE

Category/  
Type

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

Date of Disbursement  
M M / D D / Y Y Y Y Y Y  
10 / 14 / 2020

FEC Identification Number  
  
**Transaction ID : EXPB358**  
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**C. PACIFIC POLITICAL, INC**

Mailing Address 1800 THIBODO RD, #300

City VISTA State CA Zip Code 92081

Purpose of Disbursement  
FUNDRAISING SERVICES COST

Category/  
Type

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

Date of Disbursement  
M M / D D / Y Y Y Y Y Y  
10 / 14 / 2020

FEC Identification Number  
  
**Transaction ID : EXPB338**  
Amount of Each Disbursement this Period

Memo Item

|  |                                       |
|--|---------------------------------------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional).....▶      | <input type="text" value="15021.20"/> |
| <b>TOTAL</b> This Period (last page this line number only).....▶ | <input type="text" value="15021.20"/> |

**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)  
**ISSA VICTORY FUND**

|   |  |   |
|---|--|---|
| Full Name (Last, First, Middle Initial)<br><b>A. ISSA FOR CONGRESS</b>  |  | Date of Disbursement<br>MM / DD / YYYY<br>10 / 14 / 2020                    |
| Mailing Address 9070 IRVINE CENTER DR, #150   |  | FEC Identification Number<br>C 000350520<br><b>Transaction ID : EXPB363</b> |
| City<br>IRVINE  | State<br>CA  | Zip Code<br>92618   |
| Purpose of Disbursement<br>PROCEEDS FOR JOINT FUNDRAISING   |  | 24G<br>Category/<br>Type  |
| Candidate Name<br><b>ISSA, DARRELL, , ,</b>   |  | Amount of Each Disbursement this Period<br>4527.35                          |
| Office Sought: <input checked="" type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: 2020<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | <input type="checkbox"/> Memo Item  |
| State: CA   | District: 49   |   |

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>B. ISSA PAC - INVEST IN A SECURE &amp; SAFE AMERICA</b>                  |  | Date of Disbursement<br>MM / DD / YYYY<br>10 / 14 / 2020                    |
| Mailing Address PO BOX 3799  |  | FEC Identification Number<br>C 000450320<br><b>Transaction ID : EXPB364</b> |
| City<br>VISTA  | State<br>CA  | Zip Code<br>92085   |
| Purpose of Disbursement<br>PROCEEDS FOR JOINT FUNDRAISING  |  | 24G<br>Category/<br>Type  |
| Candidate Name<br><b>ISSA PAC - INVEST IN A SECURE &amp; SAFE AMERICA</b>  |  | Amount of Each Disbursement this Period<br>725.45                           |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: 2020<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | <input type="checkbox"/> Memo Item  |
| State:   | District:  |   |

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>C.</b>   |  | Date of Disbursement<br>MM / DD / YYYY  |
| Mailing Address  |  | FEC Identification Number<br>C          |
| City   | State  | Zip Code                                |
| Purpose of Disbursement  |  | Category/<br>Type                       |
| Candidate Name   |  | Amount of Each Disbursement this Period |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | <input type="checkbox"/> Memo Item      |
| State:   | District:  |   |

|  |         |
|--|---------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional).....▶      | 5252.80 |
| <b>TOTAL</b> This Period (last page this line number only).....▶ | 5252.80 |