

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**
VICTORY 2016

ADDRESS (number and street) 43 S Powerline Rd
#262
 Check if different than previously reported. (ACC) Pompano Beach FL 33069

2. FEC IDENTIFICATION NUMBER ▼ CITY ▲ STATE ▲ ZIP CODE ▲
C C00572792 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 M M M / D D D / Y Y Y Y Y Y in the State of
(d) 30-Day POST-Election Report for the:
 General (30G) Runoff (30R) Special (30S)
Election on M M M / D D D / Y Y Y Y Y Y in the State of
11 06 2018

5. Covering Period M M M / D D D / Y Y Y Y Y Y through M M M / D D D / Y Y Y Y Y Y
10 01 2018 through 11 26 2018

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

Signature of Treasurer Olney, Norman, , Mr., [Electronically Filed] Date M M M / D D D / Y Y Y Y Y Y
12 06 2018

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

VICTORY 2016

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="2018"/>	<input type="text" value="68095.22"/>	<input type="text" value="68095.22"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="37494.73"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="78985.00"/>	<input type="text" value="112513.00"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<input type="text" value="116479.73"/>	<input type="text" value="180608.22"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="41138.75"/>	<input type="text" value="105267.24"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="75340.98"/>	<input type="text" value="75340.98"/>
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

FEC Form 3X (Rev. 05/2016)

Write or Type Committee Name

VICTORY 2016

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).....	72135.00	103683.00
(ii) Unitemized	6850.00	8830.00
(iii) TOTAL (add Lines 11(a)(i) and (ii).....▶	78985.00	112513.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	78985.00	112513.00
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)).....▶	78985.00	112513.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	78985.00	112513.00

DETAILED SUMMARY PAGE
of Disbursements

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures	24738.75	88617.24
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	24738.75	88617.24
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditures (use Schedule E)	16400.00	16400.00
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	250.00
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)) ..	41138.75	105267.24
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	41138.75	105267.24

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)	78985.00	112513.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	78985.00	112513.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	24738.75	88617.24
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	24738.75	88617.24

**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 18
<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)
VICTORY 2016

A. Black, Fredda, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1420 W Pine Ave
 City Midland State TX Zip Code 79705
 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 ▼ 635.00

Date of Receipt 10 / 19 / 2018
Transaction ID : SA11AI.5495
 Amount of Each Receipt this Period 135.00
 Memo Item Contribution

B. Black, Gerald, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 15068 FM 766
 City Gonzales State TX Zip Code 78629
 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 ▼ 1000.00

Date of Receipt 11 / 05 / 2018
Transaction ID : SA11AI.5503
 Amount of Each Receipt this Period 1000.00
 Memo Item Contribution

C. Brunk, Ulla, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address W 3885 Creek Ln
 City Lake Geneva State WI Zip Code 53247
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Brunk Ind Occupation (for Individual) CFO
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 10 / 19 / 2018
Transaction ID : SA11AI.5493
 Amount of Each Receipt this Period 200.00
 Memo Item Contribution

SUBTOTAL of Receipts This Page (optional).....▶	1335.00
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 18
	<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)
VICTORY 2016

A. Favre, Art, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 610 Highland Crossing St

City Baton Rouge	State LA	Zip Code 70810
---------------------	-------------	-------------------

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

Name of Employer (for Individual) Performance Contractors	Occupation (for Individual) Contractor
--	---

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
10		19		2018

Transaction ID : SA11AI.5494

Amount of Each Receipt this Period
10000.00

Memo Item Contribution

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

Mailing Address 3243 Kirkham Dr

City Glendale	State CA	Zip Code 91206
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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 ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		16		2018

Transaction ID : SA11AI.5490

Amount of Each Receipt this Period
300.00

Memo Item Contribution

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

Mailing Address 223 Pendleton Ave

City Palm Beach	State FL	Zip Code 33480
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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 ▼
5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		05		2018

Transaction ID : SA11AI.5499

Amount of Each Receipt this Period
5000.00

Memo Item Contribution

SUBTOTAL of Receipts This Page (optional).....▶	15300.00
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 18
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
VICTORY 2016

A. Roberts, Richard, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1109 S Bay Shore Dr
 City Virginia Beach State VA Zip Code 23451
 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 ▼ 3500.00

Date of Receipt 10 / 16 / 2018
Transaction ID : SA11AI.5492
 Amount of Each Receipt this Period 2500.00
 Memo Item Contribution

B. Therkildsen, C. G., , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 18304 Gulf Bl
 City Redington Shores State FL Zip Code 33708
 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 ▼ 69998.00

Date of Receipt 10 / 31 / 2018
Transaction ID : SA11AI.5488
 Amount of Each Receipt this Period 50000.00
 Memo Item Contribution

C. Till, Michael, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 71 N Gary Glen Cir
 City Spring State TX Zip Code 77382
 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 ▼ 1000.00

Date of Receipt 11 / 06 / 2018
Transaction ID : SA11AI.5497
 Amount of Each Receipt this Period 1000.00
 Memo Item Contribution

SUBTOTAL of Receipts This Page (optional).....	53500.00
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 18
(check only one)

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

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NAME OF COMMITTEE (In Full)
VICTORY 2016

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Zaiser, Len, , ,

Mailing Address 10130 Market St

City Naples	State FL	Zip Code 34112
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Azimuth Tech	Occupation (for Individual) Executive
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
11	/	05	/	2018

Transaction ID : SA11AI.5501

Amount of Each Receipt this Period
2000.00

Memo Item Contribution

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

Mailing Address

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M	/	D D	/	Y Y Y Y
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Amount of Each Receipt this Period

Memo Item

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

Mailing Address

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

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

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

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt

M M	/	D D	/	Y Y Y Y
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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).....	72135.00

**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)
VICTORY 2016

Full Name (Last, First, Middle Initial) A. Amazon		Date of Disbursement MM / DD / YYYY 10 / 26 / 2018
Mailing Address PO Box 81225		FEC Identification Number C [REDACTED] Transaction ID : SB21B.5472 Amount of Each Disbursement this Period [REDACTED] 39.01
City Seattle	State WA	
Zip Code 98108	Purpose of Disbursement Office Supplies	Memo Item <input type="checkbox"/>
Candidate Name	Category/Type	
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. Black Hills Consultants		Date of Disbursement MM / DD / YYYY 10 / 19 / 2018
Mailing Address 110 E Center St, Suite 2053		FEC Identification Number C [REDACTED] Transaction ID : SB21B.5479 Amount of Each Disbursement this Period [REDACTED] 7000.00
City Madison	State SD	
Zip Code 57042	Purpose of Disbursement List Rental/Mailing	Memo Item <input type="checkbox"/>
Candidate Name	Category/Type	
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. California Bank & Trust		Date of Disbursement MM / DD / YYYY 10 / 16 / 2018
Mailing Address PO Box 489		FEC Identification Number C [REDACTED] Transaction ID : SB21B.5464 Amount of Each Disbursement this Period [REDACTED] 30.00
City Lawndale	State CA	
Zip Code 90260	Purpose of Disbursement wire fee	Memo Item <input type="checkbox"/>
Candidate Name	Category/Type	
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).....▶	[REDACTED] 7069.01
TOTAL This Period (last page this line number only).....▶	[REDACTED]

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
VICTORY 2016

Full Name (Last, First, Middle Initial) A. Hampson, Janet, , ,		Date of Disbursement MM / DD / YYYY 10 / 02 / 2018	
Mailing Address 13421 Malena Dr		FEC Identification Number C [] Transaction ID : SB21B.5475 Amount of Each Disbursement this Period [] 2400.00	
City Santa Ana	State CA	Zip Code 92705	Category/ Type []
Purpose of Disbursement Clerical		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. Hampson, Janet, , ,		Date of Disbursement MM / DD / YYYY 10 / 19 / 2018	
Mailing Address 13421 Malena Dr		FEC Identification Number C [] Transaction ID : SB21B.5477 Amount of Each Disbursement this Period [] 1200.00	
City Santa Ana	State CA	Zip Code 92705	Category/ Type []
Purpose of Disbursement Clerical		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. Hampson, Janet, , ,		Date of Disbursement MM / DD / YYYY 10 / 19 / 2018	
Mailing Address 13421 Malena Dr		FEC Identification Number C [] Transaction ID : SB21B.5478 Amount of Each Disbursement this Period [] 500.00	
City Santa Ana	State CA	Zip Code 92705	Category/ Type []
Purpose of Disbursement Postage Reimbursement		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).....▶	[] 4100.00
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)
VICTORY 2016

A. Hampson, Janet, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 13421 Malena Dr

City Santa Ana State CA Zip Code 92705

Purpose of Disbursement Clerical

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 10 / 26 / 2018

FEC Identification Number: C

Transaction ID : SB21B.5476

Amount of Each Disbursement this Period: 1200.00

Memo Item

B. Heritage Trust Consulting

Full Name (Last, First, Middle Initial)

Mailing Address 16861 NW 82nd Ave

City Miami Lakes State FL Zip Code 33016

Purpose of Disbursement Printing & Mailing

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 10 / 01 / 2018

FEC Identification Number: C

Transaction ID : SB21B.5457

Amount of Each Disbursement this Period: 500.00

Memo Item

C. Heritage Trust Consulting

Full Name (Last, First, Middle Initial)

Mailing Address 16861 NW 82nd Ave

City Miami Lakes State FL Zip Code 33016

Purpose of Disbursement Printing & Mailing

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 10 / 01 / 2018

FEC Identification Number: C

Transaction ID : SB21B.5458

Amount of Each Disbursement this Period: 780.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 2480.00

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

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)
VICTORY 2016

Full Name (Last, First, Middle Initial) A. Heritage Trust Consulting		Date of Disbursement MM / DD / YYYY 10 / 10 / 2018	
Mailing Address 16861 NW 82nd Ave		FEC Identification Number C [] Transaction ID : SB21B.5460 Amount of Each Disbursement this Period [] 300.00	
City Miami Lakes	State FL	Zip Code 33016	Category/ Type []
Purpose of Disbursement Printing & Mailing		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. Heritage Trust Consulting		Date of Disbursement MM / DD / YYYY 10 / 12 / 2018	
Mailing Address 16861 NW 82nd Ave		FEC Identification Number C [] Transaction ID : SB21B.5461 Amount of Each Disbursement this Period [] 1000.00	
City Miami Lakes	State FL	Zip Code 33016	Category/ Type []
Purpose of Disbursement Printing & Mailing		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. Heritage Trust Consulting		Date of Disbursement MM / DD / YYYY 10 / 12 / 2018	
Mailing Address 16861 NW 82nd Ave		FEC Identification Number C [] Transaction ID : SB21B.5462 Amount of Each Disbursement this Period [] 640.85	
City Miami Lakes	State FL	Zip Code 33016	Category/ Type []
Purpose of Disbursement Printing & Mailing		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).....▶	[] 1940.85
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)
VICTORY 2016

Full Name (Last, First, Middle Initial) A. Heritage Trust Consulting		Date of Disbursement MM / DD / YYYY 10 / 17 / 2018	
Mailing Address 16861 NW 82nd Ave		FEC Identification Number C [] Transaction ID : SB21B.5465 Amount of Each Disbursement this Period [] 500.00	
City Miami Lakes	State FL	Zip Code 33016	Category/ Type []
Purpose of Disbursement Printing & Mailing		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. Heritage Trust Consulting		Date of Disbursement MM / DD / YYYY 10 / 18 / 2018	
Mailing Address 16861 NW 82nd Ave		FEC Identification Number C [] Transaction ID : SB21B.5466 Amount of Each Disbursement this Period [] 500.00	
City Miami Lakes	State FL	Zip Code 33016	Category/ Type []
Purpose of Disbursement Printing & Mailing		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. Heritage Trust Consulting		Date of Disbursement MM / DD / YYYY 10 / 18 / 2018	
Mailing Address 16861 NW 82nd Ave		FEC Identification Number C [] Transaction ID : SB21B.5467 Amount of Each Disbursement this Period [] 300.00	
City Miami Lakes	State FL	Zip Code 33016	Category/ Type []
Purpose of Disbursement Printing & Mailing		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).....▶	[] 1300.00
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)
VICTORY 2016

Full Name (Last, First, Middle Initial) A. Heritage Trust Consulting		Date of Disbursement MM / DD / YYYY 10 / 22 / 2018	
Mailing Address 16861 NW 82nd Ave		FEC Identification Number C [] Transaction ID : SB21B.5469 Amount of Each Disbursement this Period [] 1500.00	
City Miami Lakes	State FL	Zip Code 33016	Category/ Type []
Purpose of Disbursement Printing & Mailing		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. Heritage Trust Consulting		Date of Disbursement MM / DD / YYYY 10 / 26 / 2018	
Mailing Address 16861 NW 82nd Ave		FEC Identification Number C [] Transaction ID : SB21B.5471 Amount of Each Disbursement this Period [] 1251.88	
City Miami Lakes	State FL	Zip Code 33016	Category/ Type []
Purpose of Disbursement Printing & Mailing		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. Landslide Communications		Date of Disbursement MM / DD / YYYY 10 / 16 / 2018	
Mailing Address 3838 Raymert Dr Ste 3		FEC Identification Number C [] Transaction ID : SB21B.5463 Amount of Each Disbursement this Period [] 4000.00	
City Las Vegas	State NV	Zip Code 89121	Category/ Type []
Purpose of Disbursement Strategic 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:			

SUBTOTAL of Disbursements This Page (optional).....▶	[] 6751.88
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)
VICTORY 2016

Full Name (Last, First, Middle Initial) A. Staples		Date of Disbursement MM / DD / YYYY 10 / 04 / 2018	
Mailing Address 2120 East 17th St		FEC Identification Number C [] Transaction ID : SB21B.5459 Amount of Each Disbursement this Period [] 434.74	
City Santa Ana	State CA	Zip Code 92705	Category/ Type []
Purpose of Disbursement Toner		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. Staples		Date of Disbursement MM / DD / YYYY 10 / 19 / 2018	
Mailing Address 2120 East 17th St		FEC Identification Number C [] Transaction ID : SB21B.5468 Amount of Each Disbursement this Period [] 396.50	
City Santa Ana	State CA	Zip Code 92705	Category/ Type []
Purpose of Disbursement Toner		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. Staples		Date of Disbursement MM / DD / YYYY 10 / 22 / 2018	
Mailing Address 2120 East 17th St		FEC Identification Number C [] Transaction ID : SB21B.5470 Amount of Each Disbursement this Period [] 163.74	
City Santa Ana	State CA	Zip Code 92705	Category/ Type []
Purpose of Disbursement Office Supplies		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).....▶	[] 994.98
TOTAL This Period (last page this line number only).....▶	[] 24636.72

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full)
VICTORY 2016
FEC IDENTIFICATION NUMBER
C C00572792

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

Full Name of Payee: Black Hills Consultants
Mailing Address: 110 E Center St, Suite 2053
City: Madison, State: SD, Zip Code: 57042
Purpose of Expenditure: Email Distribution
Category/Type: 004
Date of Public Distribution/Dissemination: 11/05/2018
Amount: 10000.00
Transaction ID: SE.5487
Date of Disbursement or Obligation: 11/05/2018

Name of Federal Candidate: SCOTT, RICK, ,
Support [checked] Oppose []
Office Sought: House [], Senate [checked]
Disbursement For: Primary [], General [checked]
Calendar Year-To-Date Per Election for Office Sought: 10000.00

Full Name of Payee: Heritage Trust Consulting
Mailing Address: 16861 NW 82nd Ave
City: Miami Lakes, State: FL, Zip Code: 33016
Purpose of Expenditure: Email Distribution
Category/Type: 004
Date of Public Distribution/Dissemination: 11/05/2018
Amount: 2400.00
Transaction ID: SE.5483
Date of Disbursement or Obligation: 11/06/2018

Name of Federal Candidate: SCOTT, RICK, ,
Support [checked] Oppose []
Office Sought: House [], Senate [checked]
Disbursement For: Primary [], General [checked]
Calendar Year-To-Date Per Election for Office Sought: 12400.00

(a) SUBTOTAL of Itemized Independent Expenditures: 12400.00
(b) SUBTOTAL of Unitemized Independent Expenditures:
(c) TOTAL Independent Expenditures:

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

Signature: Olney, Norman, , Mr. [Electronically Filed] Date: 12/06/2018

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

NAME OF COMMITTEE (In Full) VICTORY 2016	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00572792 </div>
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Check if 24-hour report 48-hour report ▶ New report Amends report filed on M M / D D / Y Y Y Y Y Y

Full Name of Payee <input type="checkbox"/> Memo Item Heritage Trust Consulting			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y <div style="border: 1px solid black; padding: 2px; display: inline-block;">11 / 05 / 2018</div>		
Mailing Address 16861 NW 82nd Ave			Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">2499.00</div>		
City Miami Lakes	State FL	Zip Code 33016			
Purpose of Expenditure Email Distribution		Category/Type 004	Transaction ID : SE.5485 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y <div style="border: 1px solid black; padding: 2px; display: inline-block;">11 / 14 / 2018</div>		
Name of Federal Candidate: SCOTT, RICK, , ,			Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <u>FL</u>		
Calendar Year-To-Date Per Election for Office Sought 14899.00			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶ _____		

Full Name of Payee <input type="checkbox"/> Memo Item Heritage Trust Consulting			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y <div style="border: 1px solid black; padding: 2px; display: inline-block;">11 / 05 / 2018</div>		
Mailing Address 16861 NW 82nd Ave			Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">1501.00</div>		
City Miami Lakes	State FL	Zip Code 33016			
Purpose of Expenditure Email Distribution		Category/Type 004	Transaction ID : SE.5486 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y <div style="border: 1px solid black; padding: 2px; display: inline-block;">11 / 23 / 2018</div>		
Name of Federal Candidate: SCOTT, RICK, , ,			Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <u>FL</u>		
Calendar Year-To-Date Per Election for Office Sought 16400.00			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶ _____		

(a) SUBTOTAL of Itemized Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px; display: inline-block;">4000.00</div>
(b) SUBTOTAL of Unitemized Independent Expenditures..... ▶	<div style="border: 1px solid black; padding: 2px; display: inline-block;"> </div>
(c) TOTAL Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px; display: inline-block;">16400.00</div>

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

Olney, Norman, , Mr. *[Electronically Filed]* Date M M / D D / Y Y Y Y Y Y
12 / 06 / 2018

Signature