

**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) 4230 EAST TOWNE BLVD #700

Check if different than previously reported. (ACC) MADISON WI 53704

2. FEC IDENTIFICATION NUMBER ▼ CITY ▲ STATE ▲ ZIP CODE ▲

C C00572792

3. IS THIS REPORT NEW (N) OR AMENDED (A) X

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 MM / DD / YYYY in the State of

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

- General (30G) Runoff (30R) Special (30S)

Election on MM / DD / YYYY in the State of

5. Covering Period MM / DD / YYYY through MM / DD / YYYY

01 / 01 / 2016 through 03 / 31 / 2016

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 Mr. Norman Olney

Signature of Treasurer Mr. Norman Olney [Electronically Filed] Date 07 / 15 / 2016

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

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="2016"/>	<input type="text" value="35759.89"/>	<input type="text" value="35759.89"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="35759.89"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="69917.41"/>	<input type="text" value="69917.41"/>
(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="105677.30"/>	<input type="text" value="105677.30"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="63319.38"/>	<input type="text" value="63319.38"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="42357.92"/>	<input type="text" value="42357.92"/>
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. 06/2004)

Write or Type Committee Name

VICTORY 2016

Report Covering the Period: From: 01 / 01 / 2016 To: 03 / 31 / 2016

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).....	65947.41	65947.41
(ii) Unitemized	3970.00	3970.00
(iii) TOTAL (add		
Lines 11(a)(i) and (ii)..... ▶	69917.41	69917.41
(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)	69917.41	69917.41
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))..... ▶	69917.41	69917.41
20. Total Federal Receipts		
(subtract Line 18(c) from Line 19)..... ▶	69917.41	69917.41

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

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	40319.38	40319.38
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	40319.38	40319.38
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)	23000.00	23000.00
25. Coordinated Party Expenditures (2 U.S.C. §441a(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	0.00	0.00
30. Federal Election Activity (2 U.S.C. §431(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)) ..	63319.38	63319.38
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	63319.38	63319.38

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

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)	69917.41	69917.41
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	69917.41	69917.41
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	40319.38	40319.38
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	40319.38	40319.38

**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 25
	<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

Full Name (Last, First, Middle Initial)
A. Samar Bashir

Mailing Address 3701 Pin Oak Ln

City Richardson State TX Zip Code 75082

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

Name of Employer Richardson Construction Occupation President

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
 01 / 22 / 2016
Transaction ID : SA11AI.4419

Amount of Each Receipt this Period
250.00

Memo Item Contribution

Full Name (Last, First, Middle Initial)
B. Bruce Bowen

Mailing Address 4406 Sarong Dr

City Houston State TX Zip Code 77096

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

Name of Employer Self Occupation Geologist

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
 02 / 03 / 2016
Transaction ID : SA11AI.4503

Amount of Each Receipt this Period
1000.00

Memo Item Contribution

Full Name (Last, First, Middle Initial)
C. Beatrice Britton

Mailing Address PO Box 2327

City S Hamilton State MA Zip Code 01982

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

Name of Employer None Occupation Retired

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
 02 / 02 / 2016
Transaction ID : SA11AI.4462

Amount of Each Receipt this Period
1000.00

Memo Item Contribution

SUBTOTAL of Receipts This Page (optional).....	2250.00
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 25
	<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. Beatrice Britton
Full Name (Last, First, Middle Initial)
Mailing Address PO Box 2327

City S Hamilton	State MA	Zip Code 01982
--------------------	-------------	-------------------

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

Name of Employer None	Occupation Retired
--------------------------	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	06	/	2016

Transaction ID : SA11AI.4495

Amount of Each Receipt this Period
1000.00

Memo Item
Contribution

B. David Clinton
Full Name (Last, First, Middle Initial)
Mailing Address 12410 Boheme Dr

City Houston	State TX	Zip Code 77024
-----------------	-------------	-------------------

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

Name of Employer None	Occupation Retired
--------------------------	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	10	/	2016

Transaction ID : SA11AI.4507

Amount of Each Receipt this Period
500.00

Memo Item
Contribution

C. Allen Hartman
Full Name (Last, First, Middle Initial)
Mailing Address 2909 Hillcroft \$420

City Houston	State TX	Zip Code 77057
-----------------	-------------	-------------------

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

Name of Employer Hartman Real Estate	Occupation Chairman
---	------------------------

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
02	/	19	/	2016

Transaction ID : SA11AI.4493

Amount of Each Receipt this Period
5000.00

Memo Item
Contribution

SUBTOTAL of Receipts This Page (optional).....▶	6500.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 OF 25
	<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. Kenneth Johnson
Full Name (Last, First, Middle Initial)

Mailing Address 2165 Stopper Dr

City Montoursville State PA Zip Code 17754

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

Name of Employer None Occupation 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
 02 / 16 / 2016

Transaction ID : SA11AI.4489

Amount of Each Receipt this Period
300.00

Memo Item Contribution

B. Thomas Kader
Full Name (Last, First, Middle Initial)

Mailing Address 3584 Elm Bottom Cir

City Aubrey State TX Zip Code 76227

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

Name of Employer Sedalco Occupation CEO

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
 02 / 12 / 2016

Transaction ID : SA11AI.4423

Amount of Each Receipt this Period
5000.00

Memo Item Contribution

C. Marilyn Knueve
Full Name (Last, First, Middle Initial)

Mailing Address 7329 Regina Dr

City Fort Wayne State IN Zip Code 46815

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

Name of Employer None Occupation Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 10 / 2016

Transaction ID : SA11AI.4445

Amount of Each Receipt this Period
2000.00

Memo Item Contribution

SUBTOTAL of Receipts This Page (optional).....▶	7300.00
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 9 OF 25
	<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. James Lindemann
Full Name (Last, First, Middle Initial)

Mailing Address 840 FM 2224

City Holliday State TX Zip Code 76366

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

Name of Employer Self Occupation Oil Drilling

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 15 / 2016

Transaction ID : SA11AI.4447

Amount of Each Receipt this Period
2000.00

Memo Item Contribution

B. Michael Mangione
Full Name (Last, First, Middle Initial)

Mailing Address 3130 Corte Portofino

City Newport Beach State CA Zip Code 92660

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

Name of Employer Self Occupation McDonald's Restaurant

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 01 / 2016

Transaction ID : SA11AI.4470

Amount of Each Receipt this Period
500.00

Memo Item Contribution

C. Mary Ivey Matthews
Full Name (Last, First, Middle Initial)

Mailing Address 4876 Patric Rd

City Winnsboro State SC Zip Code 29180

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

Name of Employer None Occupation Retired

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
 03 / 15 / 2016

Transaction ID : SA11AI.4477

Amount of Each Receipt this Period
1000.00

Memo Item Contribution

SUBTOTAL of Receipts This Page (optional).....▶	3500.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 10 OF 25
	(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)
VICTORY 2016

A. Jim Moyer
Full Name (Last, First, Middle Initial)
Mailing Address 623 Ramsey Dr
City Hemphill State TX Zip Code 75948
FEC ID number of contributing federal political committee. **C**
Name of Employer None Occupation Retired Engineer
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date **25000.00**

Date of Receipt **02 / 09 / 2016**
Transaction ID : SA11AI.4449
Amount of Each Receipt this Period **25000.00**
 Memo Item
Contribution

B. Everette Newland
Full Name (Last, First, Middle Initial)
Mailing Address 8485 Jim Christal Rd
City Denton State TX Zip Code 76207
FEC ID number of contributing federal political committee. **C**
Name of Employer None Occupation Retired
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date **5000.00**

Date of Receipt **01 / 20 / 2016**
Transaction ID : SA11AI.4421
Amount of Each Receipt this Period **5000.00**
 Memo Item
Contribution

C. L.D. Robbins
Full Name (Last, First, Middle Initial)
Mailing Address 415 W Wall St #1400
City Midland State TX Zip Code 79701
FEC ID number of contributing federal political committee. **C**
Name of Employer Self Occupation Geologist
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date **500.00**

Date of Receipt **03 / 17 / 2016**
Transaction ID : SA11AI.4501
Amount of Each Receipt this Period **500.00**
 Memo Item
Contribution

SUBTOTAL of Receipts This Page (optional)..... **30500.00**
TOTAL This Period (last page this line number only).....

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 OF 25
	<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

Full Name (Last, First, Middle Initial) A. Beverly Roberts		Date of Receipt MM / DD / YYYY 03 / 16 / 2016 Transaction ID : SA11AI.4472
Mailing Address 818 Silvergate Dr		Amount of Each Receipt this Period 1000.00
City Houston	State TX	Zip Code 77079
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item Contribution
Name of Employer None	Occupation Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

Full Name (Last, First, Middle Initial) B. Bryan Sheffield		Date of Receipt MM / DD / YYYY 02 / 03 / 2016 Transaction ID : SA11AI.4456
Mailing Address 2705 Berenson Ln		Amount of Each Receipt this Period 2000.00
City Austin	State TX	Zip Code 78746
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item Contribution
Name of Employer Parsley Energy	Occupation CEO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2000.00	

Full Name (Last, First, Middle Initial) C. Horton Spitzer		Date of Receipt MM / DD / YYYY 02 / 03 / 2016 Transaction ID : SA11AI.4509
Mailing Address PO 1307		Amount of Each Receipt this Period 500.00
City Wilson	State WY	Zip Code 83014
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item Contribution
Name of Employer None	Occupation Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

SUBTOTAL of Receipts This Page (optional).....▶	3500.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 OF 25
	<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)
VICTORY 2016

Full Name (Last, First, Middle Initial)
A. Mark Stasney

Mailing Address 1527 Emerald Green Ln

City Houston State TX Zip Code 77094

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

Name of Employer Conoco Phillips Occupation Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 09 / 2016

Transaction ID : SA11AI.4458

Amount of Each Receipt this Period
500.00

Memo Item Contribution

Full Name (Last, First, Middle Initial)
B. Unitemized Contributions

Mailing Address 5535 Memorial Dr Ste F PMB 1004

City Houston State TX Zip Code 77007

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1897.41

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 31 / 2016

Transaction ID : SA11AI.4511

Amount of Each Receipt this Period
1897.41

Memo Item Unitemized Contributions

Full Name (Last, First, Middle Initial)
C. Mathew Vanderkop

Mailing Address 1704 Parkside Dr

City Pasadena State TX Zip Code 77502

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

Name of Employer None Occupation Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 10 / 2016

Transaction ID : SA11AI.4451

Amount of Each Receipt this Period
2000.00

Memo Item Contribution

SUBTOTAL of Receipts This Page (optional).....▶	4397.41
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 13 OF 25
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
VICTORY 2016

A. Mathew Vanderkop
 Full Name (Last, First, Middle Initial)
 Mailing Address 1704 Parkside Dr
 City Pasadena State TX Zip Code 77502
 FEC ID number of contributing federal political committee. **C**
 Name of Employer None Occupation Retired
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 4000.00

Date of Receipt 03 / 16 / 2016
Transaction ID : SA11AI.4476
 Amount of Each Receipt this Period 2000.00
 Memo Item Contribution

B. Mathew Vanderkop
 Full Name (Last, First, Middle Initial)
 Mailing Address 1704 Parkside Dr
 City Pasadena State TX Zip Code 77502
 FEC ID number of contributing federal political committee. **C**
 Name of Employer None Occupation Retired
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 6000.00

Date of Receipt 03 / 17 / 2016
Transaction ID : SA11AI.4500
 Amount of Each Receipt this Period 2000.00
 Memo Item Contribution

C. Lana Jean White
 Full Name (Last, First, Middle Initial)
 Mailing Address 4915 Robin Hood Dr
 City Ashland State KY Zip Code 41101
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Infinity Center Occupation Doctor
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2000.00

Date of Receipt 02 / 08 / 2016
Transaction ID : SA11AI.4443
 Amount of Each Receipt this Period 2000.00
 Memo Item Contribution

SUBTOTAL of Receipts This Page (optional).....▶	6000.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 14 OF 25
	<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)
VICTORY 2016

A. Walter Wild
 Full Name (Last, First, Middle Initial)
 Mailing Address 41-473 Kalaniana'ole Hwy
 City State Zip Code
 Waimanalo HI 96795
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 None Retired
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 16 / 2016
Transaction ID : SA11AI.4479
 Amount of Each Receipt this Period
 1000.00
 Memo Item
 Contribution

B. Robert Zielke
 Full Name (Last, First, Middle Initial)
 Mailing Address 1700 Ocean Blvd #7b
 City State Zip Code
 Pompano Beach FL 33062
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 None Retired
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 03 / 2016
Transaction ID : SA11AI.4496
 Amount of Each Receipt this Period
 1000.00
 Memo Item
 Contribution

C.
 Full Name (Last, First, Middle Initial)
 Mailing Address
 City State Zip Code
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 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).....▶	65947.41

**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"/> 24	<input type="checkbox"/> 25	<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. Black Hills Consultants

Mailing Address 110 E Center St, Suite 2053

City Madison State SD Zip Code 57042

Purpose of Disbursement
List Rental Fees

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
02 / 10 / 2016

Transaction ID : **SB21B.4405**

Amount of Each Disbursement this Period

6400.00

Memo Item

Full Name (Last, First, Middle Initial)

B. Janet Hampson

Mailing Address 13421 Malena Dr

City Santa Ana State CA Zip Code 92705

Purpose of Disbursement
Clerical Services

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
01 / 15 / 2016

Transaction ID : **SB21B.4391**

Amount of Each Disbursement this Period

1200.00

Memo Item

Full Name (Last, First, Middle Initial)

C. Janet Hampson

Mailing Address 13421 Malena Dr

City Santa Ana State CA Zip Code 92705

Purpose of Disbursement
Clerical Services

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
01 / 19 / 2016

Transaction ID : **SB21B.4392**

Amount of Each Disbursement this Period

1200.00

Memo Item

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

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

6400.00

**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"/> 24	<input type="checkbox"/> 25	<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. Janet Hampson

Mailing Address 13421 Malena Dr

City Santa Ana State CA Zip Code 92705

Purpose of Disbursement
Mailing Services

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
01 / 22 / 2016

Transaction ID : **SB21B.4393**

Amount of Each Disbursement this Period

2000.00

Memo Item

Full Name (Last, First, Middle Initial)

B. Janet Hampson

Mailing Address 13421 Malena Dr

City Santa Ana State CA Zip Code 92705

Purpose of Disbursement
Postage reimbursement

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
01 / 28 / 2016

Transaction ID : **SB21B.4394**

Amount of Each Disbursement this Period

490.00

Memo Item

Full Name (Last, First, Middle Initial)

C. Janet Hampson

Mailing Address 13421 Malena Dr

City Santa Ana State CA Zip Code 92705

Purpose of Disbursement
Mailing Services

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
02 / 10 / 2016

Transaction ID : **SB21B.4406**

Amount of Each Disbursement this Period

600.00

Memo Item

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

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

3090.00

**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"/> 24	<input type="checkbox"/> 25	<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. Janet Hampson

Mailing Address 13421 Malena Dr

City Santa Ana State CA Zip Code 92705

Purpose of Disbursement
Mailing Services

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
02 / 29 / 2016

Transaction ID : SB21B.4407

Amount of Each Disbursement this Period

1200.00

Memo Item

Full Name (Last, First, Middle Initial)

B. Heritage Trust Consulting

Mailing Address 16861 NW 82nd Ave

City Miami Lakes State FL Zip Code 33016

Purpose of Disbursement
Postage & Mailing

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
01 / 11 / 2016

Transaction ID : SB21B.4381

Amount of Each Disbursement this Period

2000.00

Memo Item

Full Name (Last, First, Middle Initial)

C. Heritage Trust Consulting

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
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
01 / 11 / 2016

Transaction ID : SB21B.4382

Amount of Each Disbursement this Period

999.99

Memo Item

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

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

4199.99

**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"/> 24	<input type="checkbox"/> 25	<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

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
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
01 / 21 / 2016

Transaction ID : **SB21B.4383**

Amount of Each Disbursement this Period

531.98

Memo Item

Full Name (Last, First, Middle Initial)

B. Heritage Trust Consulting

Mailing Address 16861 NW 82nd Ave

City Miami Lakes State FL Zip Code 33016

Purpose of Disbursement
Postage Advance

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
01 / 29 / 2016

Transaction ID : **SB21B.4385**

Amount of Each Disbursement this Period

500.00

Memo Item

Full Name (Last, First, Middle Initial)

C. Heritage Trust Consulting

Mailing Address 16861 NW 82nd Ave

City Miami Lakes State FL Zip Code 33016

Purpose of Disbursement
Postage & Mailing

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
02 / 04 / 2016

Transaction ID : **SB21B.4397**

Amount of Each Disbursement this Period

2499.00

Memo Item

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

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

3530.98

**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"/> 24	<input type="checkbox"/> 25	<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

Mailing Address 16861 NW 82nd Ave

City Miami Lakes State FL Zip Code 33016

Purpose of Disbursement
Postage

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
02 / 08 / 2016

Transaction ID : SB21B.4398

Amount of Each Disbursement this Period

500.00

Memo Item

Full Name (Last, First, Middle Initial)

B. Heritage Trust Consulting

Mailing Address 16861 NW 82nd Ave

City Miami Lakes State FL Zip Code 33016

Purpose of Disbursement
Postage & Mailing

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
02 / 12 / 2016

Transaction ID : SB21B.4399

Amount of Each Disbursement this Period

614.17

Memo Item

Full Name (Last, First, Middle Initial)

C. Heritage Trust Consulting

Mailing Address 16861 NW 82nd Ave

City Miami Lakes State FL Zip Code 33016

Purpose of Disbursement
Postage & Mailing

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
02 / 29 / 2016

Transaction ID : SB21B.4403

Amount of Each Disbursement this Period

1500.00

Memo Item

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

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

2614.17

**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"/> 24	<input type="checkbox"/> 25	<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

Mailing Address 16861 NW 82nd Ave

City Miami Lakes State FL Zip Code 33016

Purpose of Disbursement
Postage Advance for Mailing

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
03 / 02 / 2016

Transaction ID : SB21B.4412

Amount of Each Disbursement this Period

1000.00

Memo Item

Full Name (Last, First, Middle Initial)

B. Heritage Trust Consulting

Mailing Address 16861 NW 82nd Ave

City Miami Lakes State FL Zip Code 33016

Purpose of Disbursement
Postage & Mailing

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
03 / 07 / 2016

Transaction ID : SB21B.4413

Amount of Each Disbursement this Period

1999.99

Memo Item

Full Name (Last, First, Middle Initial)

C. Heritage Trust Consulting

Mailing Address 16861 NW 82nd Ave

City Miami Lakes State FL Zip Code 33016

Purpose of Disbursement
Postage & Mailing

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
03 / 08 / 2016

Transaction ID : SB21B.4418

Amount of Each Disbursement this Period

8206.29

Memo Item

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

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

11206.28

**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"/> 24	<input type="checkbox"/> 25	<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

Mailing Address 16861 NW 82nd Ave

City Miami Lakes State FL Zip Code 33016

Purpose of Disbursement
Postage & Mailing

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
03 / 11 / 2016

Transaction ID : SB21B.4417

Amount of Each Disbursement this Period

1000.00

Memo Item

Full Name (Last, First, Middle Initial)

B. Landslide Communications

Mailing Address 3838 Rayment Dr Ste 3

City Las Vegas State NV Zip Code 89121

Purpose of Disbursement
Strategic Consulting

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
03 / 08 / 2016

Transaction ID : SB21B.4414

Amount of Each Disbursement this Period

6000.00

Memo Item

Full Name (Last, First, Middle Initial)

C. Bryan Likely

Mailing Address 16861 NW 82nd Ave

City Miami Lakes State FL Zip Code 33016

Purpose of Disbursement
Graphic Design

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
02 / 29 / 2016

Transaction ID : SB21B.4401

Amount of Each Disbursement this Period

365.00

Memo Item

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

7365.00

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"/> 24	<input type="checkbox"/> 25	<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. Mr. Norman Olney

Mailing Address 5920 Friars Road Ste 204

City San Diego State CA Zip Code 92108

Purpose of Disbursement
Management Fee

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
02 / 08 / 2016

Transaction ID : SB21B.4404

Amount of Each Disbursement this Period

1500.00

Memo Item

Full Name (Last, First, Middle Initial)

B. Staples

Mailing Address 2120 East 17th St

City Santa Ana State CA Zip Code 92705

Purpose of Disbursement
Paper

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
03 / 01 / 2016

Transaction ID : SB21B.4411

Amount of Each Disbursement this Period

155.36

Memo Item

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY

Amount of Each Disbursement this Period

Memo Item

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

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

1655.36

40061.78

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>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on		

Full Name of Payee Black Hills Consultants		<input type="checkbox"/> Memo Item		Date of Public Distribution/Dissemination	
Mailing Address 110 E Center St, Suite 2053				<div style="display: flex; justify-content: space-between;"> 03 / 08 / 2016 </div>	
City Madison		State SD		Zip Code 57042	
Purpose of Expenditure Mailing		Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">004</div>		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 100%;">4000.00</div>	
Name of Federal Candidate RAFAEL EDWARD 'TED' CRUZ		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose		Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: <u>WI</u>	
Calendar Year-To-Date Per Election for Office Sought		<div style="border: 1px solid black; padding: 2px; display: inline-block; width: 100%;">4000.00</div>		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____	

Full Name of Payee Black Hills Consultants		<input type="checkbox"/> Memo Item		Date of Public Distribution/Dissemination	
Mailing Address 110 E Center St, Suite 2053				<div style="display: flex; justify-content: space-between;"> 04 / 07 / 2016 </div>	
City Madison		State SD		Zip Code 57042	
Purpose of Expenditure Mailing		Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">004</div>		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 100%;">4000.00</div>	
Name of Federal Candidate RAFAEL EDWARD 'TED' CRUZ		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose		Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: <u>CA</u>	
Calendar Year-To-Date Per Election for Office Sought		<div style="border: 1px solid black; padding: 2px; display: inline-block; width: 100%;">4000.00</div>		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____	

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	<div style="border: 1px solid black; padding: 2px; display: inline-block; width: 100%;">8000.00</div>
(b) SUBTOTAL of Unitemized Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px; display: inline-block; width: 100%; height: 20px;"></div>
(c) TOTAL Independent Expenditures..... ▶	<div style="border: 1px solid black; padding: 2px; display: inline-block; width: 100%; height: 20px;"></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.

Mr. Norman Olney

 Signature

[Electronically Filed] Date

07 /
 15 /
 2016

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) VICTORY 2016	FEC IDENTIFICATION NUMBER ▼ C C00572792
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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 Liftable Media <input type="checkbox"/> Memo Item	Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 01 / 07 / 2016
Mailing Address 42104 N Venture Dr Ste B122	Amount 5000.00
City State Zip Code Anthem AZ 85086	
Purpose of Expenditure Facebook Promotion	Category/Type 004
Name of Federal Candidate RAFAEL EDWARD 'TED' CRUZ	Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 01 / 06 / 2016
Name of Federal Candidate RAFAEL EDWARD 'TED' CRUZ	Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: <u>IA</u>
Calendar Year-To-Date Per Election for Office Sought	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____
	10000.00

Full Name of Payee Liftable Media <input type="checkbox"/> Memo Item	Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 02 / 08 / 2016
Mailing Address 42104 N Venture Dr Ste B122	Amount 5000.00
City State Zip Code Anthem AZ 85086	
Purpose of Expenditure Facebook Promotion	Category/Type 004
Name of Federal Candidate RAFAEL EDWARD 'TED' CRUZ	Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 02 / 08 / 2016
Name of Federal Candidate RAFAEL EDWARD 'TED' CRUZ	Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: <u>GA</u>
Calendar Year-To-Date Per Election for Office Sought	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____
	5000.00

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	10000.00
(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.

Mr. Norman Olney [Electronically Filed] Date M M / D D / Y Y Y Y Y Y
07 / 15 / 2016

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) VICTORY 2016	FEC IDENTIFICATION NUMBER ▼ C C00572792
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on M M M / D D D / Y Y Y Y Y Y	

Full Name of Payee USA Radio Networks <input type="checkbox"/> Memo Item	Date of Public Distribution/Dissemination M M M / D D D / Y Y Y Y Y Y 01 / 10 / 2016
Mailing Address 42104 N Venture Blvd	Amount 5000.00
City State Zip Code Anthem AZ 85086	Transaction ID : SE.4388 Date of Disbursement or Obligation M M M / D D D / Y Y Y Y Y Y 01 / 06 / 2016
Purpose of Expenditure Radio Advertising	Category/Type 004
Name of Federal Candidate RAFAEL EDWARD 'TED' CRUZ	Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: IA
Calendar Year-To-Date Per Election for Office Sought 5000.00	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ _____

Full Name of Payee <input type="checkbox"/> Memo Item	Date of Public Distribution/Dissemination M M M / D D D / Y Y Y Y Y Y
Mailing Address	Amount
City State Zip Code	Date of Disbursement or Obligation M M M / D D D / Y Y Y Y Y Y
Purpose of Expenditure	Category/Type
Name of Federal Candidate	Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input type="checkbox"/> Senate State: _____
Calendar Year-To-Date Per Election for Office Sought	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ _____

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	5000.00
(b) SUBTOTAL of Unitemized Independent Expenditures ▶	
(c) TOTAL Independent Expenditures..... ▶	23000.00

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.

Mr. Norman Olney

[Electronically Filed]

Signature _____ Date M M M / D D D / Y Y Y Y Y Y
07 / 15 / 2016