

# FEC FORM 3

# REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee

Office Use Only

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

Example: If typing, type over the lines.

12FE4M5

MORAN VICTORY COMMITTEE

ADDRESS (number and street)

PO BOX 541

Check if different than previously reported. (ACC)

BELLEVILLE

KS

66935

CITY ▲

STATE ▲

ZIP CODE ▲

2. **FEC IDENTIFICATION NUMBER** ▼

C C00616268

3. IS THIS REPORT

NEW (N)

OR

AMENDED (A)

STATE ▼ DISTRICT

KS

00

4. **TYPE OF REPORT** (Choose One)

(a) Quarterly Reports:

April 15 Quarterly Report (Q1)

July 15 Quarterly Report (Q2)

October 15 Quarterly Report (Q3)

January 31 Year-End Report (YE)

Termination Report (TER)

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

Primary (12P)

General (12G)

Runoff (12R)

Convention (12C)

Special (12S)

Election on

M M

/ D D

/ Y Y Y Y

in the State of

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

General (30G)

Runoff (30R)

Special (30S)

Election on

M M

/ D D

/ Y Y Y Y

in the State of

5. Covering Period

M M / D D / Y Y Y Y

04 / 01 / 2018

through

M M / D D / Y Y Y Y

06 / 30 / 2018

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

GOTTSCHALK, TIMOTHY, , ,

Type or Print Name of Treasurer

Signature of Treasurer

GOTTSCHALK, TIMOTHY, , ,

[Electronically Filed]

Date

M M / D D / Y Y Y Y

07 / 12 / 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.

Office Use Only

**SUMMARY PAGE**  
of Receipts and Disbursements

FEC Form 3 (Revised 05/2016)

Write or Type Committee Name  
**MORAN VICTORY COMMITTEE**

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

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
<b>6. Net Contributions (other than loans)</b>		
(a) Total Contributions (other than loans) (from Line 11(e))....	71320.00	347970.00
(b) Total Contribution Refunds (from Line 20(d)) .....	0.00	2700.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	71320.00	345270.00
<b>7. Net Operating Expenditures</b>		
(a) Total Operating Expenditures (from Line 17) .....	43692.86	156534.11
(b) Total Offsets to Operating Expenditures (from Line 14).....	0.00	10000.00
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	43692.86	146534.11
<b>8. Cash on Hand at Close of Reporting Period (from Line 27).....</b>	33970.28	
<b>9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....</b>	0.00	
<b>10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....</b>	0.00	

**For further information contact:**

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

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

**DETAILED SUMMARY PAGE**  
of Receipts

FEC Form 3 (Revised 05/2016)

Write or Type Committee Name

**MORAN VICTORY COMMITTEE**

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

<b>I. RECEIPTS</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Election Cycle-to-Date</b>
<b>11. CONTRIBUTIONS (other than loans) FROM:</b>		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	22300.00	228250.00
(ii) Unitemized .....	20.00	220.00
(iii) TOTAL of contributions from individuals ▶	22320.00	228470.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	49000.00	119500.00
(d) The Candidate .....	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	71320.00	347970.00
<b>12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES .....</b>	0.00	0.00
<b>13. LOANS:</b>		
(a) Made or Guaranteed by the Candidate.....	0.00	0.00
(b) All Other Loans.....	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	0.00	0.00
<b>14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.) .....</b>	0.00	10000.00
<b>15. OTHER RECEIPTS (Dividends, Interest, etc.) .....</b>	0.00	0.00
<b>16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶</b>	71320.00	357970.00

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3 (Revised 05/2016)

PAGE 4 / 30

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	43692.86	156534.11
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES .....	37470.15	184225.97
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	0.00
(b) Of All Other Loans .....	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	2700.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	0.00	2700.00
21. OTHER DISBURSEMENTS .....	0.00	0.00
22. <b>TOTAL DISBURSEMENTS</b> (add Lines 17, 18, 19(c), 20(d), and 21) ►	81163.01	343460.08

**III. CASH SUMMARY**

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	43813.29
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	71320.00
25. SUBTOTAL (add Line 23 and Line 24).....	115133.29
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	81163.01
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	33970.28

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 5 OF 30	
	<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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)  
**MORAN VICTORY COMMITTEE**

**A.** Full Name (Last, First, Middle Initial)  
**BACON, JOEL, , ,**

Mailing Address 7111 RICHARD CASEY CT

City ALEXANDRIA	State VA	Zip Code 22307
--------------------	-------------	-------------------

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

Name of Employer AMERICAN ASSOC OF AIRPORT EXEC	Occupation VICE PRESIDENT
--	------------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1000.00

Date of Receipt  

M M / D D / Y Y Y Y Y Y
05 / 23 / 2018

**Transaction ID : SA11AI.5492**

Amount of Each Receipt this Period  

1000.00
---------

Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**BONILLA, HENRY, , ,**

Mailing Address 610 E MARKET ST  
UNIT 2918

City SAN ANTONIO	State TX	Zip Code 78205
---------------------	-------------	-------------------

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

Name of Employer THE NORMANDY GROUP	Occupation PARTNER
--	-----------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1000.00

Date of Receipt  

M M / D D / Y Y Y Y Y Y
04 / 03 / 2018

**Transaction ID : SA11AI.5420**

Amount of Each Receipt this Period  

1000.00
---------

Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**BURNETT, WALLACE, , ,**

Mailing Address 6218 BERKELEY RD

City ALEXANDRIA	State VA	Zip Code 22307
--------------------	-------------	-------------------

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

Name of Employer CAPITAL STRATEGIES PARTNERS	Occupation GOVERNMENT RELATIONS
---	------------------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1000.00

Date of Receipt  

M M / D D / Y Y Y Y Y Y
05 / 23 / 2018

**Transaction ID : SA11AI.5490**

Amount of Each Receipt this Period  

1000.00
---------

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶	3000.00
<b>TOTAL</b> This Period (last page this line number only)..... ▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 6 OF 30	
	<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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)  
**MORAN VICTORY COMMITTEE**

**A.** Full Name (Last, First, Middle Initial)  
**DOERRER, PAUL, , ,**

Mailing Address 12 WEST BELLEFONTE AVENUE

City ALEXANDRIA	State VA	Zip Code 22301
--------------------	-------------	-------------------

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

Name of Employer THE DOERRER GROUP LLC	Occupation CONSULTANT
---	--------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 17 / 2018

**Transaction ID : SA11AI.5505**

Amount of Each Receipt this Period  
1000.00

Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**FULLER, JOHN, B, , III**

Mailing Address 601 PENNSYLVANIA AVE NW

City WASHINGTON	State DC	Zip Code 20004
--------------------	-------------	-------------------

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

Name of Employer VAN SCOYOC AND ASSOCIATES	Occupation COUNSEL
---	-----------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
3700.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 10 / 2018

**Transaction ID : SA11AI.5504**

Amount of Each Receipt this Period  
500.00

Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**GODDERZ, ADAM, , ,**

Mailing Address 14608 WEDD ST

City OVERLAND PARK	State KS	Zip Code 66221
-----------------------	-------------	-------------------

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

Name of Employer KANSAS CITY SOUTHERN	Occupation VICE PRESIDENT OF LABOR RELATIONS
--	---

Receipt For:  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 04 / 13 / 2018

**Transaction ID : SA11AI.5413**

Amount of Each Receipt this Period  
500.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶	2000.00
<b>TOTAL</b> This Period (last page this line number only)..... ▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 7 OF 30	
	<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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)  
**MORAN VICTORY COMMITTEE**

**A.** Full Name (Last, First, Middle Initial)  
**LUNDY, GARY, , ,**

Mailing Address 507 W CRESTVIEW AVE

City PITTSBURG	State KS	Zip Code 66762
-------------------	-------------	-------------------

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

Name of Employer WATCO COMPANIES	Occupation EXECUTIVE VICE PRESIDENT
-------------------------------------	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
 \_\_\_\_\_ 1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 21 / 2018

**Transaction ID : SA11AI.5486**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 1000.00

Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**MCDANIEL, DEMETRIUS, , ,**

Mailing Address 7749 ESCALA DRIVE

City AUSTIN	State TX	Zip Code 78735
----------------	-------------	-------------------

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

Name of Employer GREENBERG TRAUIG	Occupation LAWYER
--------------------------------------	----------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
 \_\_\_\_\_ 2700.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 04 / 18 / 2018

**Transaction ID : SA11AI.5418**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 2700.00

Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**PORTER, ROBERT, , ,**

Mailing Address 8029 RED HOUSE ROAD

City SALAMANCA	State NY	Zip Code 14779
-------------------	-------------	-------------------

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

Name of Employer CAPITOL HILL POLICY GROUP, LLC	Occupation FEDERAL RELATIONS
--	---------------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
 \_\_\_\_\_ 2700.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 18 / 2018

**Transaction ID : SA11AI.5527**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 2700.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶	_____ 6400.00
<b>TOTAL</b> This Period (last page this line number only)..... ▶	_____

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

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

FOR LINE NUMBER: PAGE 8 OF 30  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
**MORAN VICTORY COMMITTEE**

**A.** Full Name (Last, First, Middle Initial)  
**RASHKIN, STANLEY, , ,**

Mailing Address 3451 MERCY ROAD

City: GILBERT    State: AZ    Zip Code: 85297

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

Name of Employer: AB STAFFING SOLUTIONS    Occupation: CEO

Receipt For:  Primary     General     Other (specify) ▼

Election Cycle-to-Date: 2700.00

Date of Receipt: 06 / 29 / 2018

Transaction ID : SA11AI.5524

Amount of Each Receipt this Period: 2700.00

Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**SCOTT, KURT, , ,**

Mailing Address 1025 OAK TREE DRIVE

City: LAWRENCE    State: KS    Zip Code: 66049

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

Name of Employer: KAMMCO    Occupation: INSURANCE EXECUTIVE

Receipt For:  Primary     General     Other (specify) ▼

Election Cycle-to-Date: 2700.00

Date of Receipt: 06 / 29 / 2018

Transaction ID : SA11AI.5522

Amount of Each Receipt this Period: 2700.00

Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**TRIBE OF KANSAS, KICKAPOO TRADITIONAL, , ,**

Mailing Address 2212 ROSITA VALLEY RD

City: EAGLE PASS    State: TX    Zip Code: 78852

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

Name of Employer: INDIAN TRIBE    Occupation: INDIAN TRIBE

Receipt For:  Primary     General     Other (specify) ▼

Election Cycle-to-Date: 5000.00

Date of Receipt: 04 / 30 / 2018

Transaction ID : SA11AI.5435

Amount of Each Receipt this Period: 5000.00

Memo Item

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ 10400.00

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



# SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 9 OF 30  
(check only one)  
 11a  11b  11c  11d  
12 13a 13b 14 15

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
**MORAN VICTORY COMMITTEE**

**A.** Full Name (Last, First, Middle Initial)  
**VAN SCOYOC, H. STEWART, , ,**

Mailing Address 131 YARNICK ROAD

City: GREAT FALLS State: VA Zip Code: 22066

FEC ID number of contributing federal political committee: C

Name of Employer: VAN SCOYOC ASSOCIATES Occupation: PRESIDENT & CEO

Receipt For:  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date: 500.00

Date of Receipt: 06 / 27 / 2018

Transaction ID : SA11AI.5512

Amount of Each Receipt this Period: 500.00

Memo Item

**B.** 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) ▼

Election Cycle-to-Date

Date of Receipt

Amount of Each Receipt this Period

Memo Item

**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) ▼

Election Cycle-to-Date

Date of Receipt

Amount of Each Receipt this Period

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	500.00
<b>TOTAL</b> This Period (last page this line number only).....▶	22300.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 10 OF 30	
	<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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)  
**MORAN VICTORY COMMITTEE**

**A.** Full Name (Last, First, Middle Initial)  
**ACADEMY OF NUTRITION AND DIETETICS POLITICAL ACTION COMMITTEE**

Mailing Address 1120 CONNECTICUT AVE. NW  
SUITE 480

City WASHINGTON	State DC	Zip Code 20036
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00143560

Name of Employer	Occupation
------------------	------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
05 / 07 / 2018

**Transaction ID : SA11C.5465**

Amount of Each Receipt this Period  
1000.00

Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**ADVANCE AMERICA CASH ADVANCE CENTERS INC. PAC**

Mailing Address 135 N. CHURCH STREET

City SPARTANBURG	State SC	Zip Code 29306
---------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00429001

Name of Employer	Occupation
------------------	------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
2500.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
04 / 30 / 2018

**Transaction ID : SA11C.5436**

Amount of Each Receipt this Period  
2500.00

Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**ALLIED PILOTS ASSOCIATION PAC**

Mailing Address 14600 TRINITY BLVD  
SUITE 500

City FORT WORTH	State TX	Zip Code 76155
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00267849

Name of Employer	Occupation
------------------	------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1500.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
05 / 23 / 2018

**Transaction ID : SA11C.5496**

Amount of Each Receipt this Period  
500.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶	4000.00
<b>TOTAL</b> This Period (last page this line number only)..... ▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 11 OF 30	
	<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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)  
**MORAN VICTORY COMMITTEE**

**A.** Full Name (Last, First, Middle Initial)  
**AMERICAN ASSOCIATION OF AIRPORT EXECUTIVES GOOD GOVERNMENT**

Mailing Address 601 MADISON ST.  
SUITE 400

City ALEXANDRIA	State VA	Zip Code 22314
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00176727

Name of Employer	Occupation
------------------	------------

Receipt For:  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
 \_\_\_\_\_ 2500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 23 / 2018

**Transaction ID : SA11C.5494**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 2500.00

Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**AMERICAN HEALTH CARE ASSOCIATION PAC**

Mailing Address PO BOX 75357

City WASHINGTON	State DC	Zip Code 20013
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00006080

Name of Employer	Occupation
------------------	------------

Receipt For:  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
 \_\_\_\_\_ 2500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 04 / 30 / 2018

**Transaction ID : SA11C.5443**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 2500.00

Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**AUTOMOTIVE RECYCLERS ASSOCIATION PAC**

Mailing Address 9113 CHURCH STREET

City MANASSAS	State VA	Zip Code 20110
------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00401125

Name of Employer	Occupation
------------------	------------

Receipt For:  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
 \_\_\_\_\_ 1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 07 / 2018

**Transaction ID : SA11C.5461**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 1000.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶	_____ 6000.00
<b>TOTAL</b> This Period (last page this line number only)..... ▶	_____

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 12 OF 30	
	<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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)  
**MORAN VICTORY COMMITTEE**

**A.** Full Name (Last, First, Middle Initial)  
**BLUE ORIGIN LLC PAC (BLUE ORIGIN PAC)**

Mailing Address 21218-76TH AVENUE S

City KENT	State WA	Zip Code 98032
--------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00557793

Name of Employer	Occupation
------------------	------------

Receipt For:  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
 \_\_\_\_\_ 1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 21 / 2018

**Transaction ID : SA11C.5488**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 1000.00

Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**COLLEGE OF AMERICAN PATHOLOGISTS PAC**

Mailing Address 1305 I STREET, NW SUITE 590

City WASHINGTON	State DC	Zip Code 20005
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00274944

Name of Employer	Occupation
------------------	------------

Receipt For:  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
 \_\_\_\_\_ 7000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 29 / 2018

**Transaction ID : SA11C.5500**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 1000.00

Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**COLLEGE OF AMERICAN PATHOLOGISTS PAC**

Mailing Address 1305 I STREET, NW SUITE 590

City WASHINGTON	State DC	Zip Code 20005
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00274944

Name of Employer	Occupation
------------------	------------

Receipt For:  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
 \_\_\_\_\_ 8000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 27 / 2018

**Transaction ID : SA11C.5514**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 1000.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶	_____ 3000.00
<b>TOTAL</b> This Period (last page this line number only)..... ▶	_____

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 13 OF 30	
	<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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)  
**MORAN VICTORY COMMITTEE**

**A.** Full Name (Last, First, Middle Initial)  
**DELL TECHNOLOGIES PAC**

Mailing Address 440 FIRST ST, NW  
SUITE 820

City WASHINGTON State DC Zip Code 20001

FEC ID number of contributing federal political committee. **C** C00369751

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
5000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
06 / 27 / 2018

**Transaction ID : SA11C.5515**

Amount of Each Receipt this Period  
5000.00

Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**HALLMARK CARDS PAC**

Mailing Address 2501 MCGEE  
MD #500

City KANSAS CITY State MO Zip Code 64108

FEC ID number of contributing federal political committee. **C** C00000059

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
5000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
06 / 30 / 2018

**Transaction ID : SA11C.5519**

Amount of Each Receipt this Period  
5000.00

Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**HOBBS STRAUS TRIBAL SOVEREIGNTY DEFENSE PAC**

Mailing Address 2120 L STREET NW SUITE 700

City WASHINGTON State DC Zip Code 20037

FEC ID number of contributing federal political committee. **C** C00551697

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
500.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
05 / 21 / 2018

**Transaction ID : SA11C.5484**

Amount of Each Receipt this Period  
500.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	10500.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 14 OF 30	
	<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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)  
**MORAN VICTORY COMMITTEE**

**A.** Full Name (Last, First, Middle Initial)  
INTERNATIONAL ACADEMY OF COMPOUNDING PHARMACISTS PAC (COMP PAC)

Mailing Address 4638 RIVERSTONE BLVD

City	State	Zip Code
MISSOURI CITY	TX	77459

FEC ID number of contributing federal political committee. **C** C00424143

Name of Employer	Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
 \_\_\_\_\_ 2500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 07 / 2018

**Transaction ID : SA11C.5463**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 2500.00

Memo Item

**B.** Full Name (Last, First, Middle Initial)  
INTERNATIONAL BANK OF COMMERCE COMMITTEE FOR IMPROVEMENT AND BETTERMENT OF THE COUNTRY

Mailing Address 1200 SAN BERNARDO

City	State	Zip Code
LAREDO	TX	78040

FEC ID number of contributing federal political committee. **C** C00276592

Name of Employer	Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
 \_\_\_\_\_ 2500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 04 / 16 / 2018

**Transaction ID : SA11C.5417**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 2500.00

Memo Item

**C.** Full Name (Last, First, Middle Initial)  
NATIONAL WEATHER SERVICE EMPLOYEES ORGANIZATION POLITICAL ACTION COMMITTEE

Mailing Address 601 PENNSYLVANIA AVE NW SUITE 900

City	State	Zip Code
WASHINGTON	DC	20004

FEC ID number of contributing federal political committee. **C** C00318311

Name of Employer	Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
 \_\_\_\_\_ 1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 04 / 30 / 2018

**Transaction ID : SA11C.5441**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 1000.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶	_____ 6000.00
<b>TOTAL</b> This Period (last page this line number only)..... ▶	_____

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 15 OF 30	
	<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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)  
**MORAN VICTORY COMMITTEE**

**A.** Full Name (Last, First, Middle Initial)  
**NATSO INC. NATSO PAC**

Mailing Address 1330 BRADDOCK PLACE, SUITE 501

City ALEXANDRIA	State VA	Zip Code 22314
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00097865

Name of Employer	Occupation
------------------	------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
 \_\_\_\_\_ 3000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 30 / 2018

**Transaction ID : SA11C.5517**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 3000.00

Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**NUSTAR ENERGY L.P. (NUSTAR PAC)**

Mailing Address 19003 IH-10 WEST

City SAN ANTONIO	State TX	Zip Code 78257
---------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00435321

Name of Employer	Occupation
------------------	------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
 \_\_\_\_\_ 2500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 15 / 2018

**Transaction ID : SA11C.5471**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 2500.00

Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**PETROLEUM MARKETERS ASSOCIATION OF AMERICANS\SMALL BUSINESS COMMITTEE**

Mailing Address 1901 NORTH FORT MYER DRIVE  
SUITE 500

City ARLINGTON	State VA	Zip Code 22209
-------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00035204

Name of Employer	Occupation
------------------	------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
 \_\_\_\_\_ 5000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 20 / 2018

**Transaction ID : SA11C.5508**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 5000.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶	_____ 10500.00
<b>TOTAL</b> This Period (last page this line number only)..... ▶	_____

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 16 OF 30	
	<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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)  
**MORAN VICTORY COMMITTEE**

**A.** Full Name (Last, First, Middle Initial)  
PHARMACEUTICAL RESEARCH & MANUFACTURERS OF AMERICA BETTER GOVERNMENT COMMITTEE

Mailing Address 950 F STREET, NW  
SUITE 300

City WASHINGTON	State DC	Zip Code 20004
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00021972

Name of Employer	Occupation
------------------	------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1500.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
05 / 23 / 2018

**Transaction ID : SA11C.5498**

Amount of Each Receipt this Period  
1500.00

Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**SOUTHWEST BUSINESS CORPORATION PAC**

Mailing Address 4204 GARDEDALE STE. 106

City SAN ANTONIO	State TX	Zip Code 78229
---------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00427195

Name of Employer	Occupation
------------------	------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
500.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
04 / 13 / 2018

**Transaction ID : SA11C.5411**

Amount of Each Receipt this Period  
500.00

Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**SPORTFISHINGPAC**

Mailing Address 1001 NORTH FAIRFAX ST  
SUITE 501

City ALEXANDRIA	State VA	Zip Code 22314
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00249532

Name of Employer	Occupation
------------------	------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
04 / 30 / 2018

**Transaction ID : SA11C.5440**

Amount of Each Receipt this Period  
1000.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶	3000.00
<b>TOTAL</b> This Period (last page this line number only)..... ▶	



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 17 OF 30	
	<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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)  
**MORAN VICTORY COMMITTEE**

**A.** Full Name (Last, First, Middle Initial)  
**TRUCKING PAC OF THE AMERICAN TRUCKING ASSOCIATIONS INC.**

Mailing Address 430 FIRST STREET SE

City WASHINGTON	State DC	Zip Code 20003
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00002881

Name of Employer	Occupation
------------------	------------

Receipt For:  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
5000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
05 / 09 / 2018

**Transaction ID : SA11C.5469**

Amount of Each Receipt this Period  
5000.00

Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**YUM BRANDS INC. GOOD GOVERNMENT FUND**

Mailing Address 1441 GARDINER LANE  
3RD FLOOR MAIL STOP L2230

City LOUISVILLE	State KY	Zip Code 40213
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00329474

Name of Employer	Occupation
------------------	------------

Receipt For:  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
06 / 23 / 2018

**Transaction ID : SA11C.5510**

Amount of Each Receipt this Period  
1000.00

Memo Item

**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) ▼

Election Cycle-to-Date ▼

Date of Receipt  
M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶	6000.00
<b>TOTAL</b> This Period (last page this line number only)..... ▶	49000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 18 OF 30			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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)  
**MORAN VICTORY COMMITTEE**

Full Name (Last, First, Middle Initial) <b>A. ANEDOT</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 03 / 2018
Mailing Address PO BOX 84314		FEC Identification Number C
City BATON ROUGE	State LA	Zip Code 70884
Purpose of Disbursement CREDIT CARD FEES		Amount of Each Disbursement this Period 39.30
Candidate Name	Category/ Type	Transaction ID : SB17.5423
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) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) <b>B. ANEDOT</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 18 / 2018
Mailing Address PO BOX 84314		FEC Identification Number C
City BATON ROUGE	State LA	Zip Code 70884
Purpose of Disbursement CREDIT CARD FEES		Amount of Each Disbursement this Period 105.60
Candidate Name	Category/ Type	Transaction ID : SB17.5422
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) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) <b>C. ANEDOT</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 23 / 2018
Mailing Address PO BOX 84314		FEC Identification Number C
City BATON ROUGE	State LA	Zip Code 70884
Purpose of Disbursement CREDIT CARD FEES		Amount of Each Disbursement this Period 1.08
Candidate Name	Category/ Type	Transaction ID : SB17.5456
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) ▼	<input type="checkbox"/> Memo Item
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	145.98
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 19 OF 30			
	<input checked="" type="checkbox"/> 17 <input type="checkbox"/> 20a	<input type="checkbox"/> 18 <input type="checkbox"/> 20b	<input type="checkbox"/> 19a <input type="checkbox"/> 20c	<input type="checkbox"/> 19b <input type="checkbox"/> 21	

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)  
**MORAN VICTORY COMMITTEE**

Full Name (Last, First, Middle Initial) <b>A. ANEDOT</b>			Date of Disbursement M M / D D / Y Y Y Y 05 / 10 / 2018		
Mailing Address PO BOX 84314			FEC Identification Number <b>C</b>		
City BATON ROUGE	State LA	Zip Code 70884			
Purpose of Disbursement CREDIT CARD FEES			Transaction ID : <b>SB17.5501</b>		
Candidate Name			<input type="checkbox"/> Memo Item		
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>B. ANEDOT</b>			Date of Disbursement M M / D D / Y Y Y Y 05 / 17 / 2018		
Mailing Address PO BOX 84314			FEC Identification Number <b>C</b>		
City BATON ROUGE	State LA	Zip Code 70884			
Purpose of Disbursement CREDIT CARD FEES			Transaction ID : <b>SB17.5502</b>		
Candidate Name			<input type="checkbox"/> Memo Item		
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>C. ANEDOT</b>			Date of Disbursement M M / D D / Y Y Y Y 05 / 18 / 2018		
Mailing Address PO BOX 84314			FEC Identification Number <b>C</b>		
City BATON ROUGE	State LA	Zip Code 70884			
Purpose of Disbursement CREDIT CARD FEES			Transaction ID : <b>SB17.5503</b>		
Candidate Name			<input type="checkbox"/> Memo Item		
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:					

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	164.70
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 20 OF 30	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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)  
**MORAN VICTORY COMMITTEE**

Full Name (Last, First, Middle Initial) <b>A. ANEDOT</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 29 / 2018
Mailing Address PO BOX 84314		FEC Identification Number C
City BATON ROUGE	State LA	Zip Code 70884
Purpose of Disbursement CREDIT CARD FEES		Amount of Each Disbursement this Period 211.20
Candidate Name		Transaction ID : SB17.5521
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) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) <b>B. BB&amp;T</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 02 / 2018
Mailing Address 2200 WILSON BLVD		FEC Identification Number C
City ARLINGTON	State VA	Zip Code 22202
Purpose of Disbursement BANK FEE		Amount of Each Disbursement this Period 5.00
Candidate Name		Transaction ID : SB17.5453
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) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) <b>C. BB&amp;T</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 01 / 2018
Mailing Address 2200 WILSON BLVD		FEC Identification Number C
City ARLINGTON	State VA	Zip Code 22202
Purpose of Disbursement BANK FEE		Amount of Each Disbursement this Period 5.00
Candidate Name		Transaction ID : SB17.5454
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) ▼	<input type="checkbox"/> Memo Item
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	221.20
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 21 OF 30	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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)  
**MORAN VICTORY COMMITTEE**

Full Name (Last, First, Middle Initial) <b>A. BB&amp;T</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 01 / 2018
Mailing Address 2200 WILSON BLVD		FEC Identification Number C
City ARLINGTON	State VA	Zip Code 22202
Purpose of Disbursement BANK FEE		Amount of Each Disbursement this Period 5.00
Candidate Name		Transaction ID : SB17.5526
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) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) <b>B. CONNECT STRATEGIC COMMUNICATIONS, LLC</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 07 / 2018
Mailing Address PO BOX 141251		FEC Identification Number C
City DALLAS	State TX	Zip Code 75214
Purpose of Disbursement WEBSITE EXPENSES		Amount of Each Disbursement this Period 190.00
Candidate Name		Transaction ID : SB17.5455
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) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) <b>C. GOTTSCHALK &amp; COMPANY, CPA'S, LLC</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 07 / 2018
Mailing Address 1903 N STREET		FEC Identification Number C
City BELLEVILLE	State KS	Zip Code 66935
Purpose of Disbursement ACCOUNTING FEES		Amount of Each Disbursement this Period 2873.80
Candidate Name		Transaction ID : SB17.5447
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) ▼	<input type="checkbox"/> Memo Item
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	3068.80
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 22 OF 30	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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)  
**MORAN VICTORY COMMITTEE**

**A. MASON STRATEGIES**

Full Name (Last, First, Middle Initial)  
Mailing Address C/O CARA MASON  
611 PENNSYLVANIA AVE SE, #385

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement FUNDRAISING COMMISSION

Candidate Name

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

State: District:

Date of Disbursement: 05 / 07 / 2018

FEC Identification Number: C

Amount of Each Disbursement this Period: 1327.50

Transaction ID : SB17.5446

Memo Item

**B. MASON STRATEGIES**

Full Name (Last, First, Middle Initial)  
Mailing Address C/O CARA MASON  
611 PENNSYLVANIA AVE SE, #385

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement FUNDRAISING EVENT FOOD REIMBURSEMENTS

Candidate Name

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

State: District:

Date of Disbursement: 05 / 07 / 2018

FEC Identification Number: C

Amount of Each Disbursement this Period: 1610.68

Transaction ID : SB17.5448

Memo Item

**C. CORNER BAKERY CAFE**

Full Name (Last, First, Middle Initial)  
Mailing Address 500 N CAPITOL HILL STREET NW

City WASHINGTON State DC Zip Code 20001

Purpose of Disbursement FUNDRAISING EVENT FOOD

Candidate Name

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

State: District:

Date of Disbursement: 05 / 07 / 2018

FEC Identification Number: C

Amount of Each Disbursement this Period: 392.58

Transaction ID : SB17.5448.0

Memo Item

**SUBTOTAL** of Disbursements This Page (optional).....▶ 2938.18

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 23 OF 30			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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)  
**MORAN VICTORY COMMITTEE**

Full Name (Last, First, Middle Initial) <b>A. THE MONOCLE ON CAPITOL HILL</b>			Date of Disbursement M M / D D / Y Y Y Y 05 / 07 / 2018		
Mailing Address 107 D ST NE			FEC Identification Number C		
City WASHINGTON	State DC	Zip Code 20002	Amount of Each Disbursement this Period 1218.10		
Purpose of Disbursement FUNDRAISING EVENT FOOD		Category/ Type	Transaction ID : SB17.5448.1		
Candidate Name		<input checked="" type="checkbox"/> Memo Item			
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>B. MASON STRATEGIES</b>			Date of Disbursement M M / D D / Y Y Y Y 05 / 21 / 2018		
Mailing Address C/O CARA MASON 611 PENNSYLVANIA AVE SE, #385			FEC Identification Number C		
City WASHINGTON	State DC	Zip Code 20003	Amount of Each Disbursement this Period 3705.45		
Purpose of Disbursement FUNDRAISING EVENT FOOD REIMBURSEMENTS		Category/ Type	Transaction ID : SB17.5474		
Candidate Name		<input type="checkbox"/> Memo Item			
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>C. ACQUA AL 2</b>			Date of Disbursement M M / D D / Y Y Y Y 05 / 21 / 2018		
Mailing Address 212 7TH STREET, SE			FEC Identification Number C		
City WASHINGTON	State DC	Zip Code 20003	Amount of Each Disbursement this Period 2378.55		
Purpose of Disbursement FUNDRAISING EVENT FOOD		Category/ Type	Transaction ID : SB17.5474.0		
Candidate Name		<input checked="" type="checkbox"/> Memo Item			
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:					

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	3705.45
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 24 OF 30			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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)  
**MORAN VICTORY COMMITTEE**

Full Name (Last, First, Middle Initial) <b>A. CHARLIE PALMER STEAK</b>			Date of Disbursement M M / D D / Y Y Y Y 05 / 21 / 2018		
Mailing Address 101 CONSTITUTION AVE N			FEC Identification Number C		
City WASHINGTON	State DC	Zip Code 20001	Amount of Each Disbursement this Period 1001.00		
Purpose of Disbursement FUNDRAISING EVENT FOOD		Category/ Type	Transaction ID : SB17.5474.1		
Candidate Name		<input checked="" type="checkbox"/> Memo Item			
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>B. POTBELLY</b>			Date of Disbursement M M / D D / Y Y Y Y 05 / 21 / 2018		
Mailing Address 301 TINGEY STREET, SUITE 1B			FEC Identification Number C		
City WASHINGTON	State DC	Zip Code 20003	Amount of Each Disbursement this Period 318.62		
Purpose of Disbursement FUNDRAISING EVENT FOOD		Category/ Type	Transaction ID : SB17.5474.2		
Candidate Name		<input checked="" type="checkbox"/> Memo Item			
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>C. THE CORNER MARKET</b>			Date of Disbursement M M / D D / Y Y Y Y 05 / 21 / 2018		
Mailing Address 400 E CAPITAL ST NE			FEC Identification Number C		
City WASHINGTON	State DC	Zip Code 20003	Amount of Each Disbursement this Period 7.28		
Purpose of Disbursement FUNDRAISING EVENT FOOD		Category/ Type	Transaction ID : SB17.5474.3		
Candidate Name		<input checked="" type="checkbox"/> Memo Item			
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:					

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	0.00
<b>TOTAL</b> This Period (last page this line number only).....▶	



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 25 OF 30	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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)  
**MORAN VICTORY COMMITTEE**

Full Name (Last, First, Middle Initial) <b>A. THE BROADMOOR</b>			Date of Disbursement M M / D D / Y Y Y Y 06 / 08 / 2018	
Mailing Address PO BOX 1439			FEC Identification Number C	
City COLORADO SPRINGS	State CO	Zip Code 80901	Amount of Each Disbursement this Period 28000.00	
Purpose of Disbursement FUNDRAISING EVENT VENUE DEPOSIT			Transaction ID : SB17.5507	
Candidate Name			<input type="checkbox"/> Memo Item	
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>B. THE DRISKILL</b>			Date of Disbursement M M / D D / Y Y Y Y 04 / 25 / 2018	
Mailing Address 604 BRAZOS STREET			FEC Identification Number C	
City AUSTIN	State TX	Zip Code 78701	Amount of Each Disbursement this Period 2343.14	
Purpose of Disbursement FUNDRAISING EVENT EXPENSES			Transaction ID : SB17.5429	
Candidate Name			<input checked="" type="checkbox"/> Memo Item	
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>C. THE KAM CO.</b>			Date of Disbursement M M / D D / Y Y Y Y 04 / 05 / 2018	
Mailing Address 233 W. 53RD STREET			FEC Identification Number C	
City KANSAS CITY	State MO	Zip Code 64112	Amount of Each Disbursement this Period 70.89	
Purpose of Disbursement REIMBURSEMENTS - SEE MEMO ITEMS			Transaction ID : SB17.5406	
Candidate Name			<input type="checkbox"/> Memo Item	
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:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	28070.89
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 26 OF 30	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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)  
**MORAN VICTORY COMMITTEE**

Full Name (Last, First, Middle Initial) <b>A. US POSTAL SERVICE</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 05 / 2018
Mailing Address 5242 PORT ROYAL RD		FEC Identification Number C
City SPRINGFIELD	State VA	Zip Code 22151
Purpose of Disbursement POSTAGE		Amount of Each Disbursement this Period 6.70
Candidate Name	Category/ Type	Transaction ID : SB17.5406.0
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) ▼	<input checked="" type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) <b>B. CHEAPFLOWERS.COM</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 05 / 2018
Mailing Address 514525 SW MILLIKAN, #56742		FEC Identification Number C
City BEAVERTON	State OR	Zip Code 97005
Purpose of Disbursement SYMPATHY/CONDOLENCE		Amount of Each Disbursement this Period 64.19
Candidate Name	Category/ Type	Transaction ID : SB17.5406.1
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) ▼	<input checked="" type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) <b>C. THE KAM CO.</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 07 / 2018
Mailing Address 233 W. 53RD STREET		FEC Identification Number C
City KANSAS CITY	State MO	Zip Code 64112
Purpose of Disbursement FUNDRAISING COMMISSION		Amount of Each Disbursement this Period 2742.00
Candidate Name	Category/ Type	Transaction ID : SB17.5445
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) ▼	<input type="checkbox"/> Memo Item
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	2742.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 27 OF 30	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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)  
**MORAN VICTORY COMMITTEE**

Full Name (Last, First, Middle Initial) <b>A. US POSTAL SERVICE</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 05 / 2018
Mailing Address 5242 PORT ROYAL RD		FEC Identification Number C
City SPRINGFIELD	State VA	Zip Code 22151
Purpose of Disbursement PO BOX RENT		Amount of Each Disbursement this Period 90.00
Candidate Name		Transaction ID : SB17.5405
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) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) <b>B. VISA</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 25 / 2018
Mailing Address PO BOX 4512		FEC Identification Number C
City CAROL STREAM	State IL	Zip Code 60197
Purpose of Disbursement CREDIT CARD PAYMENT - SEE MEMO ITEM		Amount of Each Disbursement this Period 2343.14
Candidate Name		Transaction ID : SB17.5426
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) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) <b>C. VISA</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 21 / 2018
Mailing Address PO BOX 4512		FEC Identification Number C
City CAROL STREAM	State IL	Zip Code 60197
Purpose of Disbursement MEALS		Amount of Each Disbursement this Period 202.52
Candidate Name		Transaction ID : SB17.5482
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) ▼	<input type="checkbox"/> Memo Item
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	2635.66
<b>TOTAL</b> This Period (last page this line number only).....▶	

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 28 OF 30	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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)  
**MORAN VICTORY COMMITTEE**

Full Name (Last, First, Middle Initial) <b>A. TOSCANA CAFE</b>			Date of Disbursement M M / D D / Y Y Y Y 05 / 21 / 2018	
Mailing Address 601 2ND ST NE			FEC Identification Number C	
City WASHINGTON	State DC	Zip Code 20002	Amount of Each Disbursement this Period 202.52	
Purpose of Disbursement MEALS		Category/ Type	Transaction ID : SB17.5482.0	
Candidate Name		<input checked="" type="checkbox"/> Memo Item		
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>B.</b>			Date of Disbursement M M / D D / Y Y Y Y	
Mailing Address			FEC Identification Number C	
City	State	Zip Code	Amount of Each Disbursement this Period	
Purpose of Disbursement		Category/ Type	Memo Item <input type="checkbox"/>	
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:				

Full Name (Last, First, Middle Initial) <b>C.</b>			Date of Disbursement M M / D D / Y Y Y Y	
Mailing Address			FEC Identification Number C	
City	State	Zip Code	Amount of Each Disbursement this Period	
Purpose of Disbursement		Category/ Type	Memo Item <input type="checkbox"/>	
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:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	0.00
<b>TOTAL</b> This Period (last page this line number only).....▶	43692.86

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 29 OF 30	
	<input type="checkbox"/> 17 20a	<input checked="" type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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)  
**MORAN VICTORY COMMITTEE**

Full Name (Last, First, Middle Initial) <b>A. MORAN FOR KANSAS</b>			Date of Disbursement M M / D D / Y Y Y Y 04 / 26 / 2018	
Mailing Address PO BOX 1151			FEC Identification Number <b>C</b> C00458315	
City HAYS	State KS	Zip Code 67601		
Purpose of Disbursement DISTRIBUTION OF NET JFC PROCEEDS			Transaction ID : <b>SB18.5431</b>	
Candidate Name				
Office Sought:	<input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: KS District: 00				

Full Name (Last, First, Middle Initial) <b>B. MORAN FOR KANSAS</b>			Date of Disbursement M M / D D / Y Y Y Y 04 / 26 / 2018	
Mailing Address PO BOX 1151			FEC Identification Number <b>C</b> C00458315	
City HAYS	State KS	Zip Code 67601		
Purpose of Disbursement DISTRIBUTION OF NET JFC PROCEEDS			Transaction ID : <b>SB18.5432</b>	
Candidate Name				
Office Sought:	<input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: KS District: 00				

Full Name (Last, First, Middle Initial) <b>C.</b>			Date of Disbursement M M / D D / Y Y Y Y	
Mailing Address			FEC Identification Number <b>C</b>	
City	State	Zip Code		
Purpose of Disbursement			<input type="checkbox"/> Memo Item	
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:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	37470.15
<b>TOTAL</b> This Period (last page this line number only).....▶	37470.15

**SCHEDULE D (FEC Form 3)**  
**DEBTS AND OBLIGATIONS**  
**Excluding Loans**

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: (check only one)  9  10

NAME OF COMMITTEE (In Full)

**MORAN VICTORY COMMITTEE**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor  
**VISA**

Nature of Debt (Purpose):  
**CREDIT CARD BILL**

Mailing Address **PO BOX 4512**

City **CAROL STREAM** State **IL** Zip Code **60197**

Outstanding Balance Beginning This Period

Transaction ID : **SD10.5410**

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Nature of Debt (Purpose):

Mailing Address

City State Zip Code

Outstanding Balance Beginning This Period

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Nature of Debt (Purpose):

Mailing Address

City State Zip Code

Outstanding Balance Beginning This Period

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period

1) **SUBTOTALS** This Period This Page (optional) .....

2) **TOTALS** This Period (last page this line number only) .....

3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only) .....

4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) .....