

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule E)

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund
FEC IDENTIFICATION NUMBER C C00053553
Check if [X] 24-hour report [ ] 48-hour report [X] New report [ ] Amends report filed on

Full Name of Payee Starboard Strategic, Inc.
Mailing Address 705 Melvin Avenue, #105
City Annapolis State MD Zip Code 21401
Purpose of Expenditure Internet Advertising Category/Type 004
Name of Federal Candidate Rep. Mike K. Simpson [X] Support [ ] Oppose
Calendar Year-To-Date Per Election for Office Sought 0.00

Date of Public Distribution/Dissemination 04 / 07 / 2014
Amount 31850.75
Transaction ID : 59155943
Date of Disbursement or Obligation
Office Sought: [X] House District: 02 [ ] President [ ] Senate State: ID
Disbursement For: [X] Primary [ ] General 2014 [ ] Other (specify)

Full Name of Payee Federal Capitol Communications Corporation
Mailing Address 950 F Street, NW, #525
City Washington State DC Zip Code 20004
Purpose of Expenditure Graphic Art Design Category/Type 004
Name of Federal Candidate Rep. Mike K. Simpson [X] Support [ ] Oppose
Calendar Year-To-Date Per Election for Office Sought 0.00

Date of Public Distribution/Dissemination 04 / 07 / 2014
Amount 750.00
Transaction ID : 59155945
Date of Disbursement or Obligation
Office Sought: [X] House District: 02 [ ] President [ ] Senate State: ID
Disbursement For: [X] Primary [ ] General 2014 [ ] Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 32600.75
(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.

Mary Rose Adkins [Electronically Filed] Date 04 / 07 / 2014
Signature

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Check if [X] 24-hour report [ ] 48-hour report [X] New report [ ] Amends report filed on

Full Name of Payee Master Print, Inc.
Mailing Address P.O. Box 1467
City Newington State VA Zip Code 22122
Purpose of Expenditure Print 4 Color Postcard Category/Type 004

Date of Public Distribution/Dissemination 04 / 07 / 2014
Amount 3628.38
Transaction ID : 59155947
Date of Disbursement or Obligation

Name of Federal Candidate Rep. Mike K. Simpson
[X] Support [ ] Oppose
Office Sought: [X] House [ ] President [ ] Senate
District: 02 State: ID
Calendar Year-To-Date Per Election for Office Sought 0.00

Disbursement For: [X] Primary [ ] General 2014
[ ] Other (specify)

Full Name of Payee Prolist Inc.
Mailing Address 8341 Beechcraft Avenue
City Gaithersburg State MD Zip Code 20879-1509
Purpose of Expenditure Postage Category/Type 004

Date of Public Distribution/Dissemination 04 / 07 / 2014
Amount 17455.68
Transaction ID : 59155949
Date of Disbursement or Obligation

Name of Federal Candidate Rep. Mike K. Simpson
[X] Support [ ] Oppose
Office Sought: [X] House [ ] President [ ] Senate
District: 02 State: ID
Calendar Year-To-Date Per Election for Office Sought 0.00

Disbursement For: [X] Primary [ ] General 2014
[ ] Other (specify)

Table with 2 columns: Description and Amount. (a) SUBTOTAL of Itemized Independent Expenditures 21084.06, (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.

Mary Rose Adkins [Electronically Filed] Date 04 / 07 / 2014
Signature

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Full Name of Payee Prolist Inc.
Mailing Address 8341 Beechcraft Avenue
City Gaithersburg State MD Zip Code 20879-1509
Purpose of Expenditure Postcards Category/Type 004
Date of Public Distribution/Dissemination 04 / 07 / 2014
Amount 1137.34
Transaction ID : 59155951
Date of Disbursement or Obligation
Name of Federal Candidate Rep. Mike K. Simpson [X] Support [ ] Oppose
Office Sought: [X] House District: 02 [ ] President [ ] Senate State: ID
Calendar Year-To-Date Per Election for Office Sought 0.00
Disbursement For: [X] Primary [ ] General 2014 [ ] Other (specify)

Full Name of Payee
Mailing Address
City State Zip Code
Purpose of Expenditure Category/Type
Date of Public Distribution/Dissemination
Amount
Date of Disbursement or Obligation
Name of Federal Candidate [ ] Support [ ] Oppose
Office Sought: [ ] House District: [ ] [ ] President [ ] Senate State: [ ]
Calendar Year-To-Date Per Election for Office Sought
Disbursement For: [ ] Primary [ ] General [ ] Other (specify)

Table with 2 columns: Description and Amount. (a) SUBTOTAL of Itemized Independent Expenditures 1137.34; (b) SUBTOTAL of Unitemized Independent Expenditures; (c) TOTAL Independent Expenditures 54822.15

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.

Mary Rose Adkins [Electronically Filed] Date 04 / 07 / 2014
Signature