SCHEDULE E

ITEMIZED INDEPENDENT EXPENDITURES

(See Reverse Side for Instructions) Nov 11 28 AM '94

Page 1 of 1 Pages

Name of Committee (in Full)	I.D. No.
NRA POLITICAL VICTORY FUND	C00053553

Full Name, Mailing Address & ZIP Code of Each Payee	Purpose of Expenditure	Date (month, day, year)	Amount	Name of Federal Candidate supported or opposed by the expenditure & office sought
Prolist Professional Suite 100 17904 Georgia Ave. Olney, MD 20832	Postage Expense	10/31/94	5,458.85	Santorium, R. PA - Senate ☒ Support ☐ Oppose
Edmonds Associates, Inc Suite 110 900 Second Street Washington, DC 20002	Radio Ad.	11/01/94	10,100.50	Sanders, B. VT - At Large ☐ Support ☒ Oppose
				☐ Support ☐ Oppose
				☐ Support ☐ Oppose
				☐ Support ☐ Oppose
				☐ Support ☐ Oppose

(a) SUBTOTAL of Itemized Independent Expenditures . . . . . $ 16,559.35

(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, concert with, or at the request or suggestion of any candidate or any authorized committee or agent of such candidate or authorized committee. Furthermore, these expenditures did not involve the financing of dissemination, distribution, or republication in whole or in part of any campaign materials prepared by the candidate, his campaign committee, or their agent.

Mary C. Johnson — Signature

11-1-94 — Date

Subscribed and sworn to before me this 1 day of Nov, 19 94

My Commission expires: 7-31-94

Kimberly Dimbolo — NOTARY PUBLIC

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Federal Election Commission

ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS

The Commission has added this page to the end of this filing to indicate how it was received.

☐	Hand Delivered	DATE OF RECEIPT
☐	First Class Mail	POSTMARKED
☑	Registered/Certified Mail	POSTMARKED 11-1-94
☐	No Postmark	
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☐	Received from the House Office of Records and Registration	DATE OF RECEIPT
☐	Received from the Senate Office of Public Records	DATE OF RECEIPT
☐	Other (Specify):	POSTMARKED and/or DATE OF RECEIPT

JMH
PREPARER

11-4-94
DATE PREPARED

FEC FORM 70-2 (12/92)

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