

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) **USE FEC MAILING LABEL OR TYPE OR PRINT** Example: If typing, type over the lines
National Rifle Association of America Political Victory Fund

ADDRESS (number and street) 11250 Waples Mill Road
 Check if different than previously reported. (ACC)
Fairfax VA 22030

2. **FEC IDENTIFICATION NUMBER** C00053553
3. IS THIS REPORT NEW (N) **OR** AMENDED (A)

4. **TYPE OF REPORT** (Choose One)
(a) Quarterly Reports:
 April 15 Quarterly Report(Q1)
 July 15 Quarterly Report(Q2)
 October 15 Quarterly Report(Q3)
 January 31 Quarterly 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 _____ in the State of _____
(d) 30-Day **Post -Election** Report for the:
 General (30G) Runoff (30R) Special (30S)
Election on 11 02 2010 in the State of _____

5. Covering Period 10 14 2010 through 11 22 2010

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 Mary Rose Adkins

Signature of Treasurer Electronically Filed by Mary Rose Adkins Date 03 03 2011

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

Office Use Only **FEC FORM 3X** (Rev. 12/2004)

A. Form/Schedule : **F3XA**

Transaction ID :

This amendment corrects a memo entry for payee OnMessage allocated to candidate Joe Sestak in the amount of \$2,123.44. This entry was posted twice. Once on page 54 of Schedule E and also on page 55. The duplicate entry on page 54 of Schedule E was deleted. This amendment also updates any employment information for Line 11, Schedule A, which has been received since the original filing.

SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS

Write or Type Committee Name
National Rifle Association of America Political Victory Fund

Report Covering the Period: From:

M	M
1	0

D	D
1	4

Y	Y	Y	Y
2	0	1	0

 To:

M	M
1	1

D	D
2	2

Y	Y	Y	Y
2	0	1	0

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>1</td><td>0</td></tr></table>	Y	Y	Y	Y	2	0	1	0		8398686.32
Y	Y	Y	Y							
2	0	1	0							
(b) Cash on Hand at Beginning of Reporting Period	7372725.93									
(c) Total Receipts (from Line 19)	130062.70	6328496.59								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	7502788.63	14727182.91								
7. Total Disbursements (from Line 31)	2710211.66	9934605.94								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	4792576.97	4792576.97								
9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D)	0.00									
10. Debts and Obligations owed BY the committee (Itemize all on Schedule C and/or Schedule D)	1831087.48									

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

Write or Type Committee Name

National Rifle Association of America Political Victory Fund

Report Covering the Period: From:

M	M
1	0

D	D
1	4

Y	Y	Y	Y
2	0	1	0

 To:

M	M
1	1

D	D
2	2

Y	Y	Y	Y
2	0	1	0

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)	21991.45	453252.92
(ii) Unitemized	107504.76	5851594.68
(iii) TOTAL (add Lines 11(a)(i) and (ii)	129496.21	6304847.60
(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)	129496.21	6304847.60
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	1265.85
16. Refunds of Contributions Made to Federal candidates and Other Political Committees	0.00	1100.00
17. Other Federal Receipts (Dividends, Interest, etc.)	566.49	21283.14
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 Transfer (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))	130062.70	6328496.59
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	130062.70	6328496.59

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Shared 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.....	165269.37	295324.77
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶	165269.37	295324.77
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	59150.00	963250.00
24. Independent Expenditure (use Schedule E)	1604503.03	5598368.33
25. Coordinated Expenditures Made by Party Committees (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.....	881289.26	3077662.84
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared 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))..	2710211.66	9934605.94
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	2710211.66	9934605.94

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

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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)	129496.21	6304847.60
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	129496.21	6304847.60
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	165269.37	295324.77
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	1265.85
38. Net Operating Expenditures (subtract Line 37 from Line 36)	165269.37	294058.92

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

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

FOR LINE NUMBER: PAGE 7 / 484

(check only one)

<input 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 checked="" type="checkbox"/> 16

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)
National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)
BB&T Bank

Mailing Address 11230 Waples Mill Road

City State Zip Code
Fairfax VA 22030

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2.65

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 9 / 2 0 1 0

Transaction ID: 37539708

Amount of Each Receipt this Period

0.27

Interest Income

B.

Full Name (Last, First, Middle Initial)
Wachovia Bank

Mailing Address 10501 Main Street

City State Zip Code
Fairfax VA 22030

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
20708.55

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 9 / 2 0 1 0

Transaction ID: 37539710

Amount of Each Receipt this Period

0.39

Interest Income

C.

Full Name (Last, First, Middle Initial)
Bank of the West

Mailing Address 224 Box Butte Avenue

City State Zip Code
Alliance NE 69301

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
6.78

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 3 1 / 2 0 1 0

Transaction ID: 37539713

Amount of Each Receipt this Period

0.67

Interest Income

SUBTOTAL of Receipts This Page (optional)

1.33

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 8 / 484
(check only one)

<input 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 checked="" type="checkbox"/>	17						

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NAME OF COMMITTEE (In Full)
National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)
Wachovia Bank

Mailing Address 10501 Main Street

City State Zip Code
Fairfax VA 22030

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
21273.71

Date of Receipt
 M M / D D / Y Y Y Y
 1 1 / 0 9 / 2 0 1 0

Transaction ID: 37711423

Amount of Each Receipt this Period
565.16

Interest Income

SUBTOTAL of Receipts This Page (optional)	▶	565.16
TOTAL This Period (last page this line number only)	▶	566.49

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

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

FOR LINE NUMBER: PAGE 9 / 484
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
National Rifle Association of America Political Victory Fund

A. Full Name (Last, First, Middle Initial)
MR LARRY KRAUS

Mailing Address PO BOX 914

City State Zip Code
SNOWFLAKE AZ 85937-0914

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

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 275.00

Date of Receipt
MM / DD / YYYY
11 / 02 / 2010

Transaction ID: 37756019

Amount of Each Receipt this Period
25.00

B. Full Name (Last, First, Middle Initial)
MR WILLIAM H COFFIN, III

Mailing Address N96W15418 COUNTY LINE RD

City State Zip Code
GERMANTOWN WI 53022-5245

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

Name of Employer Occupation
AMERICAN STATE EQUIPMENT CO MECHANIC

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 265.00

Date of Receipt
MM / DD / YYYY
10 / 14 / 2010

Transaction ID: 37756046

Amount of Each Receipt this Period
20.00

C. Full Name (Last, First, Middle Initial)
MR M OGATA

Mailing Address 2365 PALOLO AVE

City State Zip Code
HONOLULU HI 96816-3144

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

Name of Employer Occupation

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 208.00

Date of Receipt
MM / DD / YYYY
10 / 26 / 2010

Transaction ID: 37756048

Amount of Each Receipt this Period
20.00

SUBTOTAL of Receipts This Page (optional) ► 65.00

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 / 484

(check only one)

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

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR WILLIAM AULWES

Mailing Address 19983 BIRCHWOOD LOOP RD

City State Zip Code
CHUGIAK AK 99567-5821

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

Name of Employer Occupation
USA WASTE DRIVER

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 334.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 4 / 2 0 1 0

Transaction ID: 37756076

Amount of Each Receipt this Period
40.00

B.

Full Name (Last, First, Middle Initial)

MR DONALD E BARDO

Mailing Address 3143 COUCHTOWN RD

City State Zip Code
LOYSVILLE PA 17047-9676

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

Name of Employer Occupation
PA DEPT OF CORRECTIONS CORRECTIONS OFFICER

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 235.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Transaction ID: 37756099

Amount of Each Receipt this Period
20.00

C.

Full Name (Last, First, Middle Initial)

MR LYLE S COUSIN

Mailing Address 1960 AVOCET DR

City State Zip Code
AMMON ID 83406-6664

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

Name of Employer Occupation
SELF EMPLOYED AUTO BODY REPAIR

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 350.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Transaction ID: 37756109

Amount of Each Receipt this Period
100.00

SUBTOTAL of Receipts This Page (optional) ▶

160.00

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 11 / 484
(check only one)

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

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NAME OF COMMITTEE (In Full)
National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)
MR BRAD WATKINS

Mailing Address PO BOX 1938

City State Zip Code
VERNAL UT 84078-5938

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

Name of Employer Occupation
FORMER TRUCK DRIVER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 570.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Transaction ID: 37756114

Amount of Each Receipt this Period
50.00

B.

Full Name (Last, First, Middle Initial)
MR WILLIAM HENRY

Mailing Address 7024 JACKMAN RD

City State Zip Code
TEMPERANCE MI 48182-1309

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

Name of Employer Occupation
ESTES EXPRESS LINES TRUCK DRIVER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 4 / 2 0 1 0

Transaction ID: 37756130

Amount of Each Receipt this Period
500.00

C.

Full Name (Last, First, Middle Initial)
MR HOWARD J PACKER

Mailing Address 6431 LINDENHURST AVE

City State Zip Code
LOS ANGELES CA 90048-4731

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

Name of Employer Occupation

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 0 4 / 2 0 1 0

Transaction ID: 37756146

Amount of Each Receipt this Period
100.00

SUBTOTAL of Receipts This Page (optional) ► **650.00**

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 12 / 484
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
National Rifle Association of America Political Victory Fund

A. Full Name (Last, First, Middle Initial)
MR BERNARD HILLIARD

Mailing Address PO BOX 2342

City PAYSON State AZ Zip Code 85547-2342

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

Name of Employer Occupation
RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt: 10 / 19 / 2010
Transaction ID: 37756153
Amount of Each Receipt this Period: 300.00

B. Full Name (Last, First, Middle Initial)
MR MICHAEL R BERMAN

Mailing Address 2736 FISHTRAP RD NE

City OLYMPIA State WA Zip Code 98506-9611

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

Name of Employer Occupation
MODERN MACHINERY COMPANY TECHNICAL TRAINING

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 287.00

Date of Receipt: 10 / 28 / 2010
Transaction ID: 37756167
Amount of Each Receipt this Period: 29.00

C. Full Name (Last, First, Middle Initial)
MR MICHAEL R BERMAN

Mailing Address 2736 FISHTRAP RD NE

City OLYMPIA State WA Zip Code 98506-9611

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

Name of Employer Occupation
MODERN MACHINERY COMPANY TECHNICAL TRAINING

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 258.00

Date of Receipt: 10 / 18 / 2010
Transaction ID: 37756168
Amount of Each Receipt this Period: 34.00

SUBTOTAL of Receipts This Page (optional) ► 363.00

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 13 / 484

(check only one)

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

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NAME OF COMMITTEE (In Full)
National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)
MR SCOTT COLBERT

Mailing Address 18303 SETTLEMENT WAY

City State Zip Code
SAN ANTONIO TX 78258-4488

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

Name of Employer Occupation
UNIV. HEALTH SYS. PHYSICIAN ASSISTANT

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 184.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Transaction ID: 37756188

Amount of Each Receipt this Period

20.00

B.

Full Name (Last, First, Middle Initial)
MR SCOTT COLBERT

Mailing Address 18303 SETTLEMENT WAY

City State Zip Code
SAN ANTONIO TX 78258-4488

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

Name of Employer Occupation
UNIV. HEALTH SYS. PHYSICIAN ASSISTANT

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 205.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Transaction ID: 37756189

Amount of Each Receipt this Period

21.00

C.

Full Name (Last, First, Middle Initial)
MR SCOTT COLBERT

Mailing Address 18303 SETTLEMENT WAY

City State Zip Code
SAN ANTONIO TX 78258-4488

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

Name of Employer Occupation
UNIV. HEALTH SYS. PHYSICIAN ASSISTANT

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 228.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Transaction ID: 37756190

Amount of Each Receipt this Period

23.00

SUBTOTAL of Receipts This Page (optional)

64.00

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 14 / 484
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
National Rifle Association of America Political Victory Fund

A. Full Name (Last, First, Middle Initial)
MR JOSEPH N GERBERG

Mailing Address PO BOX 8

City NACHES State WA Zip Code 98937-0008

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

Name of Employer LOCKHEED-MARTIN Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 425.00

Date of Receipt: 10 / 18 / 2010
Transaction ID: 37756199
 Amount of Each Receipt this Period: 100.00

B. Full Name (Last, First, Middle Initial)
MR STEVEN J LUHN

Mailing Address PO BOX 1166

City RIDGECREST State CA Zip Code 93556-1166

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

Name of Employer US GOVT CIVIL SERVICE Occupation ELECTRONICS TECHNICIAN

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 230.00

Date of Receipt: 10 / 18 / 2010
Transaction ID: 37756209
 Amount of Each Receipt this Period: 50.00

C. Full Name (Last, First, Middle Initial)
MR LARRY R SOHLMAN

Mailing Address 200 W 34TH AVE # 678

City ANCHORAGE State AK Zip Code 99503-3969

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

Name of Employer SELF EMPLOYED Occupation SELF EMPLOYED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt: 10 / 27 / 2010
Transaction ID: 37756217
 Amount of Each Receipt this Period: 50.00

SUBTOTAL of Receipts This Page (optional) ► 200.00

TOTAL This Period (last page this line number only) ►

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 15 / 484
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
National Rifle Association of America Political Victory Fund

A. Full Name (Last, First, Middle Initial)
MR HOWARD WILLIAMS

Mailing Address PO BOX 846

City RIVERTON State UT Zip Code 84065-0846

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

Name of Employer Occupation
RETIREED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 202.00

Date of Receipt 11 / 19 / 2010
Transaction ID: 37756224
Amount of Each Receipt this Period 10.00

B. Full Name (Last, First, Middle Initial)
MR REX H PENNINGTON

Mailing Address 2309 HIWASSEE DR

City KINGSFORT State TN Zip Code 37664-3718

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

Name of Employer Occupation
EASTMAN CHEMICAL COMPANY TAX ANALYST

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 295.00

Date of Receipt 10 / 18 / 2010
Transaction ID: 37756227
Amount of Each Receipt this Period 30.00

C. Full Name (Last, First, Middle Initial)
MR JON W PARKER

Mailing Address 1031 S STEWART APT 1153

City MESA State AZ Zip Code 85202-8817

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

Name of Employer Occupation
HONEYWELL SYSTEMS ELECTRONICS TECH

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 339.00

Date of Receipt 10 / 19 / 2010
Transaction ID: 37756243
Amount of Each Receipt this Period 40.00

SUBTOTAL of Receipts This Page (optional) ► 80.00

TOTAL This Period (last page this line number only) ►

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 16 / 484
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
National Rifle Association of America Political Victory Fund

A. Full Name (Last, First, Middle Initial)
MR ALAN E HEARD

Mailing Address PO BOX 104

City ALBION State NY Zip Code 14411-0104

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

Name of Employer U.P.S. Occupation PILOT

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 295.00

Date of Receipt: 10 / 19 / 2010
Transaction ID: 37756302
Amount of Each Receipt this Period: 75.00

B. Full Name (Last, First, Middle Initial)
MR BENJAMIN WALKER

Mailing Address PO BOX 807

City WESTCLIFFE State CO Zip Code 81252-0807

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

Name of Employer Occupation RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 216.00

Date of Receipt: 10 / 18 / 2010
Transaction ID: 37756316
Amount of Each Receipt this Period: 30.00

C. Full Name (Last, First, Middle Initial)
MR JERRY P ROBISON

Mailing Address 12720 1ST AVE NW

City SEATTLE State WA Zip Code 98177-4222

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

Name of Employer RETIRED Occupation RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 209.00

Date of Receipt: 10 / 14 / 2010
Transaction ID: 37756352
Amount of Each Receipt this Period: 30.00

SUBTOTAL of Receipts This Page (optional) ► 135.00

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 17 / 484

(check only one)

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

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR MICHAEL MARCKS

Mailing Address 29900 HART OAKS DR

City State Zip Code
KEENE CA 93531-1501

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

Name of Employer Occupation

Receipt For:

Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 9 / 2 0 1 0

Transaction ID: 37756393

Amount of Each Receipt this Period

50.00

B.

Full Name (Last, First, Middle Initial)

MR ELLIOTT J J WEBER

Mailing Address 8811 RANCHO DESTINO RD

City State Zip Code
LAS VEGAS NV 89123-2959

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

Name of Employer Occupation

Receipt For:

Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Transaction ID: 37756428

Amount of Each Receipt this Period

300.00

C.

Full Name (Last, First, Middle Initial)

MR JEFFREY A CURFMAN

Mailing Address 1211 26TH AVE

City State Zip Code
ALTOONA PA 16601-2928

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

Name of Employer Occupation
OGDEN NEWSPAPERS INC PRESSMAN

Receipt For:

Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

335.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Transaction ID: 37756430

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional) ▶

450.00

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 18 / 484
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
National Rifle Association of America Political Victory Fund

A. Full Name (Last, First, Middle Initial)
MR DONALD S DITTMER

Mailing Address 371 DOGWOOD AVE

City State Zip Code
WEST HEMPSTEAD NY 11552-2836

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

Name of Employer Occupation
RETIRED WAREHOUSEMAN

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 245.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 5 / 2 0 1 0

Transaction ID: 37756435

Amount of Each Receipt this Period
50.00

B. Full Name (Last, First, Middle Initial)
MR ROBERT WATERMAN

Mailing Address 107 KENSINGTON RD

City State Zip Code
HAMPTON FALLS NH 03844-2228

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

Name of Employer Occupation

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 245.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 5 / 2 0 1 0

Transaction ID: 37756472

Amount of Each Receipt this Period
35.00

C. Full Name (Last, First, Middle Initial)
MR MARK L LOCKWOOD

Mailing Address 11603 WENSLEDALE CIR

City State Zip Code
SAN ANTONIO TX 78251-3108

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

Name of Employer Occupation
US AIR FORCE RETIRED

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 240.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Transaction ID: 37756511

Amount of Each Receipt this Period
30.00

SUBTOTAL of Receipts This Page (optional) ► **115.00**

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 19 / 484
(check only one)

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

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NAME OF COMMITTEE (In Full)
National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)
MR HAROLD HOLT

Mailing Address 400 SARAH ELIZABETH WAY

City State Zip Code
TAYLORSVILLE KY 40071-8780

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

Name of Employer Occupation
RETIRED RETIRED TEACHER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 0 8 / 2 0 1 0

Transaction ID: 37756567

Amount of Each Receipt this Period
20.00

B.

Full Name (Last, First, Middle Initial)
MR DONALD W COOPER

Mailing Address 412 MOUNTAIN VIEW AVE

City State Zip Code
PETALUMA CA 94952-5506

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

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Transaction ID: 37756572

Amount of Each Receipt this Period
20.00

C.

Full Name (Last, First, Middle Initial)
MR BRYAN MONTGOMERY

Mailing Address 3329 ROYAL VIEW ST

City State Zip Code
WILLOW PARK TX 76087-7505

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

Name of Employer Occupation
WIRELESS ACCESSORIES UNLIMITED WAREHOUSE MANAGER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 374.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 0 / 2 0 1 0

Transaction ID: 37756593

Amount of Each Receipt this Period
25.00

SUBTOTAL of Receipts This Page (optional) ► **65.00**

TOTAL This Period (last page this line number only) ►

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 20 / 484
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
National Rifle Association of America Political Victory Fund

A. Full Name (Last, First, Middle Initial)
MR RALPH STANLEY

Mailing Address PO BOX 929

City ALTO State TX Zip Code 75925-0929

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 274.00

Date of Receipt: 10 / 19 / 2010
Transaction ID: 37756595
 Amount of Each Receipt this Period: 25.00

B. Full Name (Last, First, Middle Initial)
MR JOE H HUNT

Mailing Address PMB 266 1611 S UTICA AVENUE

City TULSA State OK Zip Code 74104-4909

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

Name of Employer Occupation INSPECTOR

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt: 10 / 15 / 2010
Transaction ID: 37756601
 Amount of Each Receipt this Period: 1000.00

C. Full Name (Last, First, Middle Initial)
MR ROGER L EDDY, JR

Mailing Address 4040 BLOOD RD

City COWLESVILLE State NY Zip Code 14037-9633

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

Name of Employer Occupation RESEARCH SCIENTIST
ROSWELL PARK CANCER INSTITUTE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 346.65

Date of Receipt: 10 / 18 / 2010
Transaction ID: 37756624
 Amount of Each Receipt this Period: 40.00

SUBTOTAL of Receipts This Page (optional) ► 1065.00

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 21 / 484
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
National Rifle Association of America Political Victory Fund

A. Full Name (Last, First, Middle Initial)
MR MICHAEL K MARKHAM

Mailing Address 209 BRIARWOOD LN

City State Zip Code
BLUE JAY WV 25813-9757

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

Name of Employer Occupation
RALCO SHERIFFR DEPT POLICE OFFICER

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 205.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 1 5 / 2 0 1 0

Transaction ID: 37756628

Amount of Each Receipt this Period
30.00

B. Full Name (Last, First, Middle Initial)
W E LANG

Mailing Address 4108 OLD MISSION RD

City State Zip Code
FARMINGTON NM 87401-2346

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

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 720.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 2 1 / 2 0 1 0

Transaction ID: 37756673

Amount of Each Receipt this Period
100.00

C. Full Name (Last, First, Middle Initial)
MR DELBERT D HEUSZEL

Mailing Address 1956 S HILLSIDE RD

City State Zip Code
SOUTH HAVEN KS 67140-9035

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

Name of Employer Occupation
SELF EMPLOYED FARMER

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 211.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 2 6 / 2 0 1 0

Transaction ID: 37756678

Amount of Each Receipt this Period
20.00

SUBTOTAL of Receipts This Page (optional) ► 150.00

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 22 / 484
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
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NAME OF COMMITTEE (In Full)
National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)
MR LEE TERREY

Mailing Address 3 BACK ACRES LANE

City State Zip Code
CHADDS FORD PA 19317-9756

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

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 312.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Transaction ID: 37756690

Amount of Each Receipt this Period
40.00

B.

Full Name (Last, First, Middle Initial)
MR JERRY HIGHLAND

Mailing Address 10868 W SAGEWOOD RD

City State Zip Code
NINE MILE FALLS WA 99026-9401

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

Name of Employer Occupation
US ARMY RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 223.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 0 2 / 2 0 1 0

Transaction ID: 37756703

Amount of Each Receipt this Period
40.00

C.

Full Name (Last, First, Middle Initial)
MR RAY CARLSON

Mailing Address 111 E 7TH ST

City State Zip Code
HANFORD CA 93230-4641

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

Name of Employer Occupation
GRISWOLD, LASALLE ATTORNEY

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 421.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 0 / 2 0 1 0

Transaction ID: 37756722

Amount of Each Receipt this Period
20.00

SUBTOTAL of Receipts This Page (optional) ► **100.00**

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 23 / 484
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
National Rifle Association of America Political Victory Fund

A. Full Name (Last, First, Middle Initial)
MR DREW D LUCURELL

Mailing Address 309 E PINE ST

City State Zip Code
SEATTLE WA 98122-2028

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

Name of Employer Occupation
ADJUSTERS INTERNATIONAL PRESIDENT, PUBLIC INSURANCE AD

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 263.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 1 1 / 2 0 1 0

Transaction ID: 37756741

Amount of Each Receipt this Period
20.00

B. Full Name (Last, First, Middle Initial)
MR LEO TREMBLAY

Mailing Address 2583 CENTRE ST

City State Zip Code
BOSTON MA 02132-6221

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

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 227.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Transaction ID: 37756745

Amount of Each Receipt this Period
34.00

C. Full Name (Last, First, Middle Initial)
MR THOMAS B BRADFORD

Mailing Address 703 SW 1ST ST

City State Zip Code
CASEY IL 62420-1313

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

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 270.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 4 / 2 0 1 0

Transaction ID: 37756750

Amount of Each Receipt this Period
40.00

SUBTOTAL of Receipts This Page (optional) ► 94.00

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 24 / 484
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
National Rifle Association of America Political Victory Fund

A. Full Name (Last, First, Middle Initial)
MR RON LONGMOOR

Mailing Address 713 S POMEROY

City MESA State AZ Zip Code 85210-2537

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

Name of Employer MOTOROLA COMPUTER GROUP Occupation EMC TEST ENGINEER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt 11 / 02 / 2010
Transaction ID: 37756753
Amount of Each Receipt this Period 50.00

B. Full Name (Last, First, Middle Initial)
L L TAPSCOTT

Mailing Address PO BOX 10210

City HOUSTON State TX Zip Code 77206-0210

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

Name of Employer TABASCO RANCH, INC Occupation PRESIDENT / CEO

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt 10 / 19 / 2010
Transaction ID: 37756780
Amount of Each Receipt this Period 100.00

C. Full Name (Last, First, Middle Initial)
MR TROY B WATKINS

Mailing Address 125 E IDAHO ST STE 104

City BOISE State ID Zip Code 83712-6254

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

Name of Employer Occupation

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt 10 / 20 / 2010
Transaction ID: 37756812
Amount of Each Receipt this Period 100.00

SUBTOTAL of Receipts This Page (optional) ▶ 250.00

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 25 / 484
(check only one)

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

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NAME OF COMMITTEE (In Full)
National Rifle Association of America Political Victory Fund

A. Full Name (Last, First, Middle Initial)
MR TROY B WATKINS

Mailing Address 125 E IDAHO ST STE 104

City State Zip Code
BOISE ID 83712-6254

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt
MM / DD / YYYY
11 / 08 / 2010

Transaction ID: 37756813

Amount of Each Receipt this Period
100.00

B. Full Name (Last, First, Middle Initial)
MR JOHN MALETICH

Mailing Address 10108 ROSCOE BLVD

City State Zip Code
SUN VALLEY CA 91352-3635

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
205.00

Date of Receipt
MM / DD / YYYY
10 / 15 / 2010

Transaction ID: 37756816

Amount of Each Receipt this Period
50.00

C. Full Name (Last, First, Middle Initial)
MR WILLIAM L HOEY

Mailing Address 342 N SPRUCEWAY DR

City State Zip Code
WALDPORT OR 97394-9604

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
212.00

Date of Receipt
MM / DD / YYYY
10 / 18 / 2010

Transaction ID: 37756819

Amount of Each Receipt this Period
60.00

SUBTOTAL of Receipts This Page (optional) ► **210.00**

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 26 / 484
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
National Rifle Association of America Political Victory Fund

A. Full Name (Last, First, Middle Initial)
MR DODGE ALEXANDER
Mailing Address 5430 E EDWIN RD
City TUCSON State AZ Zip Code 85739-1924
FEC ID number of contributing federal political committee. **C**
Name of Employer RETIRED Occupation RETIRED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 230.00
Date of Receipt 10 / 15 / 2010
Transaction ID: 37756827
Amount of Each Receipt this Period 80.00

B. Full Name (Last, First, Middle Initial)
MR ROBERT WARFIELD
Mailing Address 4535 N DOUGLAS HWY
City JUNEAU State AK Zip Code 99801-9464
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation RETIRED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 475.00
Date of Receipt 10 / 26 / 2010
Transaction ID: 37756871
Amount of Each Receipt this Period 100.00

C. Full Name (Last, First, Middle Initial)
MR LOUIS B DEWITTE
Mailing Address 3826 LISA WAY
City SANTA MARIA State CA Zip Code 93455-2923
FEC ID number of contributing federal political committee. **C**
Name of Employer CALIF HWY PATROL Occupation TRAFFIC OFFICER
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 285.00
Date of Receipt 10 / 25 / 2010
Transaction ID: 37756878
Amount of Each Receipt this Period 50.00

SUBTOTAL of Receipts This Page (optional) ► 230.00
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 27 / 484
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
National Rifle Association of America Political Victory Fund

A. Full Name (Last, First, Middle Initial)
MR DUANE ENRIGHT

Mailing Address 10609 E CREEK RD

City State Zip Code
CLINTON WI 53525-8739

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

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 252.00

Date of Receipt
MM / DD / YYYY
10 / 18 / 2010

Transaction ID: 37756882

Amount of Each Receipt this Period
40.00

B. Full Name (Last, First, Middle Initial)
MR JACK N SUTTER

Mailing Address 4104 OLD PORT ISABEL RD

City State Zip Code
BROWNSVILLE TX 78526-9604

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

Name of Employer Occupation
FARMER FARMER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
MM / DD / YYYY
10 / 19 / 2010

Transaction ID: 37756883

Amount of Each Receipt this Period
100.00

C. Full Name (Last, First, Middle Initial)
MR PETER W PERCY

Mailing Address 968 OLYMPIA AVE

City State Zip Code
VENTURA CA 93004-2219

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

Name of Employer Occupation
CA DEPT OF INSURANCE CRIMINAL INVESTIGATOR

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 351.00

Date of Receipt
MM / DD / YYYY
10 / 18 / 2010

Transaction ID: 37756916

Amount of Each Receipt this Period
50.00

SUBTOTAL of Receipts This Page (optional) ► **190.00**

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 28 / 484
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
National Rifle Association of America Political Victory Fund

A. Full Name (Last, First, Middle Initial)
MR WALTER E FAHEY

Mailing Address 6380 W GREENBRIAR DR

City State Zip Code
GLENDALE AZ 85308-3610

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

Name of Employer RETIRED Occupation RETIRED

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 350.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	2	2	/	2	0	1	0

Transaction ID: 37756917
 Amount of Each Receipt this Period
 100.00

B. Full Name (Last, First, Middle Initial)
MR ROBERT GRANUCCI

Mailing Address 25 SAINT FRANCIS BLVD

City State Zip Code
SAN FRANCISCO CA 94127-1936

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

Name of Employer SELF EMPLOYED Occupation ATTORNEY

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 300.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	1	5	/	2	0	1	0

Transaction ID: 37756945
 Amount of Each Receipt this Period
 200.00

C. Full Name (Last, First, Middle Initial)
MR M DONAHOE

Mailing Address 3580 COUNTY ROAD 15

City State Zip Code
SOUTH POINT OH 45680-7595

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

Name of Employer HUNTINGTON PIPING Occupation CARPENTER

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 234.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	2	9	/	2	0	1	0

Transaction ID: 37756960
 Amount of Each Receipt this Period
 30.00

SUBTOTAL of Receipts This Page (optional) ► **330.00**

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 29 / 484

(check only one)

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

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR JOHN A BODMER

Mailing Address 12736 SOMERDOWNS CT

City

DRAPER

State

UT

Zip Code

84020-8501

FEC ID number of contributing federal political committee.

C

Name of Employer
WESTERN AIRLINES

Occupation
PILOT

Receipt For:

Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 0 4 / 2 0 1 0

Transaction ID: 37756967

Amount of Each Receipt this Period

25.00

B.

Full Name (Last, First, Middle Initial)

MR BUD BASSETT

Mailing Address PO BOX 2877

City

CHINO VALLEY

State

AZ

Zip Code

86323-2703

FEC ID number of contributing federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Transaction ID: 37756972

Amount of Each Receipt this Period

40.00

C.

Full Name (Last, First, Middle Initial)

MR JOHN POKRIOTS

Mailing Address 1210 STEINWAY AVE

City

CAMPBELL

State

CA

Zip Code

95008-6329

FEC ID number of contributing federal political committee.

C

Name of Employer

Occupation
RETIRED

Receipt For:

Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

320.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Transaction ID: 37756978

Amount of Each Receipt this Period

25.00

SUBTOTAL of Receipts This Page (optional)

90.00

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 30 / 484
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
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NAME OF COMMITTEE (In Full)
National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)
MR MICHAEL C KLEDER

Mailing Address 20957 NIGHTSHADE PL

City State Zip Code
ASHBURN VA 20147-4704

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
MM / DD / YYYY
10 / 15 / 2010

Transaction ID: 37756989

Amount of Each Receipt this Period
250.00

B.

Full Name (Last, First, Middle Initial)
MR JOHN W WOLFENDEN

Mailing Address 6020 S SHINGLE RD

City State Zip Code
SHINGLE SPRINGS CA 95682-7514

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

Name of Employer Occupation
RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
242.00

Date of Receipt
MM / DD / YYYY
10 / 18 / 2010

Transaction ID: 37757010

Amount of Each Receipt this Period
20.00

C.

Full Name (Last, First, Middle Initial)
MR CLAYTON E DUNCAN

Mailing Address 1150 PARK CIR

City State Zip Code
WEST SACRAMENTO CA 95691-3744

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

Name of Employer Occupation
RETIRED - POLICE OFFICER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
411.00

Date of Receipt
MM / DD / YYYY
10 / 18 / 2010

Transaction ID: 37757015

Amount of Each Receipt this Period
20.00

SUBTOTAL of Receipts This Page (optional) ► **290.00**

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 31 / 484
(check only one)

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

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NAME OF COMMITTEE (In Full)
National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)
MR C J MCALLISTER

Mailing Address PO BOX 498

City State Zip Code
ENCAMPMENT WY 82325-0498

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

Name of Employer Occupation
RETIREED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 2169.00

Date of Receipt
MM / DD / YYYY
10 / 19 / 2010

Transaction ID: 37757030

Amount of Each Receipt this Period
500.00

B.

Full Name (Last, First, Middle Initial)
MR GERALD E PIERCE

Mailing Address 30401 JACK SPRINGS RD

City State Zip Code
TEHACHAPI CA 93561-5114

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

Name of Employer Occupation
RETIREERD

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 274.00

Date of Receipt
MM / DD / YYYY
10 / 28 / 2010

Transaction ID: 37757071

Amount of Each Receipt this Period
39.00

C.

Full Name (Last, First, Middle Initial)
F J REICHERT

Mailing Address 7115 N GREENWOOD PL

City State Zip Code
SPOKANE WA 99208-5063

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

Name of Employer Occupation
US ARMY ENGINEER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 235.00

Date of Receipt
MM / DD / YYYY
10 / 18 / 2010

Transaction ID: 37757100

Amount of Each Receipt this Period
100.00

SUBTOTAL of Receipts This Page (optional) ▶ **639.00**

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 32 / 484
	<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)
National Rifle Association of America Political Victory Fund

A.	Full Name (Last, First, Middle Initial) MR DAVID L BALLARD	Date of Receipt MM / DD / YYYY 10 / 18 / 2010
	Mailing Address 817 HAYNES RD	Transaction ID: 37757107
	City State Zip Code VICTORIA TX 77904-4105	Amount of Each Receipt this Period 20.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation FORMOSA PLASTICS QUALITY CONTROL SUPERVISOR	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 262.00	

B.	Full Name (Last, First, Middle Initial) MR WILLIAM RIOS	Date of Receipt MM / DD / YYYY 10 / 20 / 2010
	Mailing Address 170 DREISER LOOP APT 18D	Transaction ID: 37757108
	City State Zip Code BRONX NY 10475-1910	Amount of Each Receipt this Period 100.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation GEV GROUP, INC FEDERAL COURTS / TRANSPORT OFFICER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

C.	Full Name (Last, First, Middle Initial) MR CLAY NORVELL	Date of Receipt MM / DD / YYYY 10 / 14 / 2010
	Mailing Address 414 LEE DR	Transaction ID: 37757121
	City State Zip Code HOMER AK 99603-7605	Amount of Each Receipt this Period 40.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation RETIRED RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 374.00	

SUBTOTAL of Receipts This Page (optional)	160.00
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 33 / 484
(check only one)

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

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NAME OF COMMITTEE (In Full)
National Rifle Association of America Political Victory Fund

A. Full Name (Last, First, Middle Initial)
MR WILLIAM W ROSS

Mailing Address PO BOX 1661

City State Zip Code
KODIAK AK 99615-1661

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

Name of Employer Occupation
SEALAND INC RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 247.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Transaction ID: 37757132

Amount of Each Receipt this Period
100.00

B. Full Name (Last, First, Middle Initial)
MR JOHN C RAYNOR

Mailing Address PO BOX 876095

City State Zip Code
WASILLA AK 99687-6095

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

Name of Employer Occupation
RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 4 / 2 0 1 0

Transaction ID: 37757149

Amount of Each Receipt this Period
100.00

C. Full Name (Last, First, Middle Initial)
MR DANIEL KORNBLITH

Mailing Address 14757 E TEMPLE DR

City State Zip Code
AURORA CO 80015-1215

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

Name of Employer Occupation
RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 320.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Transaction ID: 37757177

Amount of Each Receipt this Period
120.00

SUBTOTAL of Receipts This Page (optional) ► 320.00

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 34 / 484
(check only one)

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

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NAME OF COMMITTEE (In Full)
National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)
LEE R SISK

Mailing Address 1217 MAPLE DR

City State Zip Code
GRIFFIN GA 30224-5335

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

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 303.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 0 1 / 2 0 1 0

Transaction ID: 37757184

Amount of Each Receipt this Period

51.00

B.

Full Name (Last, First, Middle Initial)
MR DAVID D MORMAN

Mailing Address 911 3RD ST

City State Zip Code
FRANKLIN MN 55333-9799

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

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 300.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 2 / 2 0 1 0

Transaction ID: 37757230

Amount of Each Receipt this Period

100.00

C.

Full Name (Last, First, Middle Initial)
MR ARLEN VACURA

Mailing Address PO BOX 184

City State Zip Code
GREENBUSH MN 56726-0184

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

Name of Employer Occupation
VA RETIREMENT

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 450.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Transaction ID: 37757258

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional)

201.00

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 35 / 484
(check only one)

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

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NAME OF COMMITTEE (In Full)
National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)
MR DARREL REINKE

Mailing Address 208 JAMIESON DR

City State Zip Code
FORT PIERRE SD 57532-2313

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
225.00

Date of Receipt
MM / DD / YYYY
11 / 16 / 2010

Transaction ID: 37757262

Amount of Each Receipt this Period
100.00

B.

Full Name (Last, First, Middle Initial)
LEE R KERSHNER

Mailing Address 5715 W WOODSIDE AVE

City State Zip Code
SPOKANE WA 99208-3866

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

Name of Employer Occupation
US AIR FORCE RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
277.00

Date of Receipt
MM / DD / YYYY
10 / 18 / 2010

Transaction ID: 37757286

Amount of Each Receipt this Period
30.00

C.

Full Name (Last, First, Middle Initial)
MR DAVID E E TRAFTON

Mailing Address PO BOX 112402

City State Zip Code
TACOMA WA 98411-2402

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

Name of Employer Occupation
CITY OF TACOMA

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
246.00

Date of Receipt
MM / DD / YYYY
10 / 18 / 2010

Transaction ID: 37757293

Amount of Each Receipt this Period
25.00

SUBTOTAL of Receipts This Page (optional) ► **155.00**

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 36 / 484
(check only one)

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

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NAME OF COMMITTEE (In Full)
National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)
REBB L ALCORN

Mailing Address 5325 W RADIO RD

City State Zip Code
YOUNGSTOWN OH 44515-1823

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

Name of Employer Occupation
GENERAL MOTORS COMPANY LABOR

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 245.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Transaction ID: 37757301

Amount of Each Receipt this Period
20.00

B.

Full Name (Last, First, Middle Initial)
MR BOBBY W CLARK

Mailing Address 8048 S. FM 898

City State Zip Code
WHITEWRIGHT TX 75491-7856

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

Name of Employer Occupation
SELF EMPLOYED FARMING

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 261.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Transaction ID: 37757309

Amount of Each Receipt this Period
20.00

C.

Full Name (Last, First, Middle Initial)
MR RICHARD LICHTEN

Mailing Address 27111 REXFORD PL

City State Zip Code
VALENCIA CA 91354-2107

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

Name of Employer Occupation
SELF EMPLOYED RETIRED - CONSULTANT

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 356.67

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 1 / 2 0 1 0

Transaction ID: 37757341

Amount of Each Receipt this Period
13.00

SUBTOTAL of Receipts This Page (optional) ► **53.00**

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 37 / 484
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
National Rifle Association of America Political Victory Fund

A. Full Name (Last, First, Middle Initial)
MR RICHARD LICHTEN

Mailing Address 27111 REXFORD PL

City VALENCIA State CA Zip Code 91354-2107

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

Name of Employer SELF EMPLOYED Occupation RETIRED - CONSULTANT

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 376.67

Date of Receipt 11 / 16 / 2010
Transaction ID: 37757342
 Amount of Each Receipt this Period 20.00

B. Full Name (Last, First, Middle Initial)
MR JOSEPH L HARBISON

Mailing Address 14308 CANTERBURY DR

City EDMOND State OK Zip Code 73013-7085

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

Name of Employer Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt 10 / 29 / 2010
Transaction ID: 37757345
 Amount of Each Receipt this Period 200.00

C. Full Name (Last, First, Middle Initial)
MR ROBERT L TIMMERMAN

Mailing Address 9610 LEANING ROCK CIR

City AUSTIN State TX Zip Code 78730-2725

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

Name of Employer FINE LUMBER & PLYWOOD INC Occupation PRESIDENT

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 327.00

Date of Receipt 10 / 15 / 2010
Transaction ID: 37757377
 Amount of Each Receipt this Period 100.00

SUBTOTAL of Receipts This Page (optional) ► 320.00

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 38 / 484

(check only one)

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

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NAME OF COMMITTEE (In Full)
National Rifle Association of America Political Victory Fund

A.	Full Name (Last, First, Middle Initial) TRACY P CLARK		Date of Receipt	
	Mailing Address 6927 SUNRISE CT		M M / D D / Y Y Y Y Y 1 0 / 2 6 / 2 0 1 0	
	City	State	Zip Code	Transaction ID: 37757409
	MIDLAND	TX	79707-1414	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		1000.00	
Name of Employer FLUOR OIL & GAS CORP		Occupation GEOL		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 2000.00		

B.	Full Name (Last, First, Middle Initial) MR BRENT T LOCKWOOD		Date of Receipt	
	Mailing Address 7506 URAY DR		M M / D D / Y Y Y Y Y 1 0 / 1 8 / 2 0 1 0	
	City	State	Zip Code	Transaction ID: 37757416
	AUSTIN	TX	78724-3351	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		30.45	
Name of Employer TANDEM COMPUTERS		Occupation ELECTRONIC TECH		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 263.98		

C.	Full Name (Last, First, Middle Initial) MR VERNON WILLIS		Date of Receipt	
	Mailing Address 257 CUMBERLAND RD		M M / D D / Y Y Y Y Y 1 0 / 1 9 / 2 0 1 0	
	City	State	Zip Code	Transaction ID: 37757422
	WHEATLAND	WY	82201-9733	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		20.00	
Name of Employer RETIRED		Occupation RETIRED		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 318.00		

SUBTOTAL of Receipts This Page (optional)

1050.45

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 39 / 484
(check only one)

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

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NAME OF COMMITTEE (In Full)
National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)
MR ED MAHRS

Mailing Address PO BOX 10154

City Greensboro State NC Zip Code 27404-0154

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

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 674.00

Date of Receipt 10 / 18 / 2010
Transaction ID: 37757447
Amount of Each Receipt this Period 100.00

B.

Full Name (Last, First, Middle Initial)
MR ED MAHRS

Mailing Address PO BOX 10154

City Greensboro State NC Zip Code 27404-0154

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

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 744.00

Date of Receipt 10 / 18 / 2010
Transaction ID: 37757448
Amount of Each Receipt this Period 70.00

C.

Full Name (Last, First, Middle Initial)
MR M F CLOUGH

Mailing Address 265 CHALET AVE

City San Jose State CA Zip Code 95127-1812

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 345.00

Date of Receipt 10 / 19 / 2010
Transaction ID: 37757457
Amount of Each Receipt this Period 100.00

SUBTOTAL of Receipts This Page (optional) ► 270.00

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 40 / 484
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
National Rifle Association of America Political Victory Fund

A. Full Name (Last, First, Middle Initial)
MR JAKE REED

Mailing Address 16536 US HWY 85

City LUSK State WY Zip Code 82225-6509

FEC ID number of contributing federal political committee. C

Name of Employer SELF EMPLOYED Occupation RANCHER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt M M / D D / Y Y Y Y
11 / 02 / 2010

Transaction ID: 37757474

Amount of Each Receipt this Period 300.00

B. Full Name (Last, First, Middle Initial)
MR J W W MILLER

Mailing Address PO BOX 3041

City INCLINE VILLAGE State NV Zip Code 89450-3041

FEC ID number of contributing federal political committee. C

Name of Employer STATE OF CALIF Occupation MANAGER - RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

Date of Receipt M M / D D / Y Y Y Y
10 / 20 / 2010

Transaction ID: 37757549

Amount of Each Receipt this Period 150.00

C. Full Name (Last, First, Middle Initial)
MR WILLIAM R BRIGHAM

Mailing Address 1617A STAFFORD CT

City CLARKSTON State WA Zip Code 99403-1514

FEC ID number of contributing federal political committee. C

Name of Employer RETIRED Occupation RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 279.00

Date of Receipt M M / D D / Y Y Y Y
10 / 18 / 2010

Transaction ID: 37757570

Amount of Each Receipt this Period 30.00

SUBTOTAL of Receipts This Page (optional) 480.00

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 41 / 484
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
National Rifle Association of America Political Victory Fund

A. Full Name (Last, First, Middle Initial)
MR HAROLD R BERENSON

Mailing Address 3833 LORRAINE RD

City State Zip Code
LARKSPUR CO 80118-5616

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

Name of Employer Occupation
MICROSOFT CORPORATION ENGINEER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 2500.00

Date of Receipt
MM / DD / YYYY
10 / 21 / 2010

Transaction ID: 37757583

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
MR EDWARD L JORDAN

Mailing Address 354 RICHARD AVE APT C4

City State Zip Code
HICKSVILLE NY 11801-1240

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

Name of Employer Occupation
AT&T INFORMATION SYS SYSTEMS TECH

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 214.00

Date of Receipt
MM / DD / YYYY
10 / 19 / 2010

Transaction ID: 37757616

Amount of Each Receipt this Period
30.00

C. Full Name (Last, First, Middle Initial)
MR JERRY W WADE

Mailing Address 612 HOSPITAL DR

City State Zip Code
ANDREWS TX 79714-3615

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

Name of Employer Occupation
SELF EMPLOYED DENTIST

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

Date of Receipt
MM / DD / YYYY
11 / 08 / 2010

Transaction ID: 37757618

Amount of Each Receipt this Period
50.00

SUBTOTAL of Receipts This Page (optional) ► **580.00**

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 42 / 484
(check only one)

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

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NAME OF COMMITTEE (In Full)
National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)
MR JERRY W WADE

Mailing Address 612 HOSPITAL DR

City State Zip Code
ANDREWS TX 79714-3615

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

Name of Employer Occupation
SELF EMPLOYED DENTIST

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 5 / 2 0 1 0

Transaction ID: 37757619

Amount of Each Receipt this Period
50.00

B.

Full Name (Last, First, Middle Initial)
MR JOHN C MIKULA

Mailing Address 2824 STANBRIDGE AVE

City State Zip Code
LONG BEACH CA 90815-1059

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

Name of Employer Occupation
C.G.I. INFORMATION SYSTEMS DATA NETWORK ENGINEER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 665.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 4 / 2 0 1 0

Transaction ID: 37757625

Amount of Each Receipt this Period
100.00

C.

Full Name (Last, First, Middle Initial)
MR DAVID COX

Mailing Address 1054 SUCCESS AVE

City State Zip Code
LAKELAND FL 33803-1344

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

Name of Employer Occupation
INFORMATION REQUESTED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 220.85

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 0 2 / 2 0 1 0

Transaction ID: 37757667

Amount of Each Receipt this Period
14.00

SUBTOTAL of Receipts This Page (optional) ► **164.00**

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 43 / 484

(check only one)

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

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR MICHAEL A PRIMROSE

Mailing Address 12008 IRISH MIST RD NE

City State Zip Code
ALBUQUERQUE NM 87122-3151

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

Name of Employer Occupation
FOOR SERVICES OF AMERICA MANAGEMENT

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 281.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Transaction ID: 37757703

Amount of Each Receipt this Period

25.00

B.

Full Name (Last, First, Middle Initial)

MR M E STOW

Mailing Address 2 HILL VALE DR

City State Zip Code
HORSEHEADS NY 14845-9325

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

Name of Employer Occupation
RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 246.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Transaction ID: 37757718

Amount of Each Receipt this Period

30.00

C.

Full Name (Last, First, Middle Initial)

MR CLARENCE S REVELS

Mailing Address 3377 CHIPPEWA TRL

City State Zip Code
MONROE MI 48162-4567

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

Name of Employer Occupation
RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 314.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 4 / 2 0 1 0

Transaction ID: 37757751

Amount of Each Receipt this Period

60.00

SUBTOTAL of Receipts This Page (optional)

115.00

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 44 / 484
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
National Rifle Association of America Political Victory Fund

A. Full Name (Last, First, Middle Initial)
MR THOMAS R ZUCK

Mailing Address 7492 REID RD

City State Zip Code
SWARTZ CREEK MI 48473-9436

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
228.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	0	2	/	2	0	1	0

Transaction ID: 37757759

Amount of Each Receipt this Period
40.00

B. Full Name (Last, First, Middle Initial)
MR BRUCE WOOLLARD

Mailing Address 1208 LAUKAHI ST

City State Zip Code
HONOLULU HI 96821-1406

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

Name of Employer Occupation
UNIVERSITY OF HAWAII BLDG MAINTENANCE WORKER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
322.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	1	9	/	2	0	1	0

Transaction ID: 37757761

Amount of Each Receipt this Period
50.00

C. Full Name (Last, First, Middle Initial)
MR ED BACA

Mailing Address PO BOX 1783

City State Zip Code
SOCORRO NM 87801-1783

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
227.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	1	4	/	2	0	1	0

Transaction ID: 37757763

Amount of Each Receipt this Period
54.00

SUBTOTAL of Receipts This Page (optional) ► **144.00**

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 45 / 484

(check only one)

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

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR MARK WONDERGEM

Mailing Address 4670 TERRY DR SE

City State Zip Code
GRAND RAPIDS MI 49512-5321

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

Name of Employer Occupation
FISHER BODY GM RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 400.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 0 3 / 2 0 1 0

Transaction ID: 37757774

Amount of Each Receipt this Period

200.00

B.

Full Name (Last, First, Middle Initial)

MR WAYNE CHOATE

Mailing Address PO BOX 1227

City State Zip Code
MOUNTAIN VIEW AR 72560-1227

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

Name of Employer Occupation
RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 550.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 0 2 / 2 0 1 0

Transaction ID: 37757794

Amount of Each Receipt this Period

50.00

C.

Full Name (Last, First, Middle Initial)

MR ALBERT H BUE

Mailing Address 12123 S STATE ROAD 140

City State Zip Code
CLINTON WI 53525-8454

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

Name of Employer Occupation
RETIRED ELECTRICAL ENGINEER

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 299.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 1 / 2 0 1 0

Transaction ID: 37757797

Amount of Each Receipt this Period

20.00

SUBTOTAL of Receipts This Page (optional)

270.00

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 46 / 484

(check only one)

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

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR ANDREW C FRECHTLING

Mailing Address 1141 GREATHOUSE RD

City State Zip Code
WAXAHACHIE TX 75167-8309

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

Name of Employer Occupation
SOUTHWEST AIRLINES PILOT

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 780.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	0	4	/	2	0	1	0

Transaction ID: 37757802

Amount of Each Receipt this Period

40.00

B.

Full Name (Last, First, Middle Initial)

MR SCOTT A JACKSON

Mailing Address 13868 JANUS AVE

City State Zip Code
SPARTA WI 54656-8078

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

Name of Employer Occupation
BRENNINGER AUTO WARRANTY ADMINISTRATOR

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 351.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	2	0	/	2	0	1	0

Transaction ID: 37757809

Amount of Each Receipt this Period

40.00

C.

Full Name (Last, First, Middle Initial)

MR EARL M YONEOKA

Mailing Address 393 KAHIKINI ST

City State Zip Code
HILO HI 96720-6029

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

Name of Employer Occupation

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 287.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	1	4	/	2	0	1	0

Transaction ID: 37757819

Amount of Each Receipt this Period

40.00

SUBTOTAL of Receipts This Page (optional) ▶

120.00

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

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

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

FOR LINE NUMBER: PAGE 47 / 484
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
National Rifle Association of America Political Victory Fund

A. Full Name (Last, First, Middle Initial)
MR EARL M YONEOKA
Mailing Address 393 KAHIKINI ST
City HILO State HI Zip Code 96720-6029
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 247.00
Date of Receipt 11 / 17 / 2010
Transaction ID: 37757820
Amount of Each Receipt this Period -40.00

B. Full Name (Last, First, Middle Initial)
MR DONALD O FRIEDERICH, SR
Mailing Address 1007 N KANSAS AVE
City CHANUTE State KS Zip Code 66720-1109
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation RETIRED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 204.00
Date of Receipt 10 / 22 / 2010
Transaction ID: 37757823
Amount of Each Receipt this Period 20.00

C. Full Name (Last, First, Middle Initial)
MR KENNETH YATES
Mailing Address 1205 LAKE SEQUOYAH DR
City FAYETTEVILLE State AR Zip Code 72701-9217
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation CITY OF FAYETTEVILLE TRUCK DRIVER
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 277.00
Date of Receipt 10 / 21 / 2010
Transaction ID: 37757859
Amount of Each Receipt this Period 21.00

SUBTOTAL of Receipts This Page (optional) ► 1.00
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 48 / 484

(check only one)

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

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)
MR KENNETH YATES

Mailing Address 1205 LAKE SEQUOYAH DR

City State Zip Code
FAYETTEVILLE AR 72701-9217

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

Name of Employer Occupation
CITY OF FAYETTEVILLE TRUCK DRIVER

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 297.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 1 / 2 0 1 0

Transaction ID: 37757860

Amount of Each Receipt this Period

20.00

B.

Full Name (Last, First, Middle Initial)
MR TOM NIXON

Mailing Address PO BOX 991

City State Zip Code
LAVALETTE WV 25535-0991

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

Name of Employer Occupation
RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 217.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 1 / 2 0 1 0

Transaction ID: 37757869

Amount of Each Receipt this Period

10.00

C.

Full Name (Last, First, Middle Initial)
MR TOM NIXON

Mailing Address PO BOX 991

City State Zip Code
LAVALETTE WV 25535-0991

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

Name of Employer Occupation
RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 207.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 4 / 2 0 1 0

Transaction ID: 37757870

Amount of Each Receipt this Period

18.00

SUBTOTAL of Receipts This Page (optional)

48.00

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 49 / 484
(check only one)

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

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NAME OF COMMITTEE (In Full)
National Rifle Association of America Political Victory Fund

A. Full Name (Last, First, Middle Initial)
SVEN G JOHNSON

Mailing Address PO BOX 66

City State Zip Code
BELVIDERE NJ 07823-0066

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

Name of Employer Occupation
S. JOHNSON & SONS, INC RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 1 4 / 2 0 1 0

Transaction ID: 37757891

Amount of Each Receipt this Period
200.00

B. Full Name (Last, First, Middle Initial)
MR WILLIAM J BASON

Mailing Address 1284 BARKLEY PL S

City State Zip Code
NORTH BRUNSWICK NJ 08902-3105

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

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 260.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Transaction ID: 37757920

Amount of Each Receipt this Period
50.00

C. Full Name (Last, First, Middle Initial)
MR DONALD A VOIGT

Mailing Address 61 SCHOOL HOUSE RD

City State Zip Code
CLAYSVILLE PA 15323-2120

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

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 266.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 2 5 / 2 0 1 0

Transaction ID: 37757925

Amount of Each Receipt this Period
30.00

SUBTOTAL of Receipts This Page (optional) ► 280.00

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 50 / 484

(check only one)

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

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR RUSSELL G G SMITH

Mailing Address 2 RANDELL DR

City State Zip Code
ENOLA PA 17025-1934

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

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 361.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Transaction ID: 37757956

Amount of Each Receipt this Period

30.00

B.

Full Name (Last, First, Middle Initial)

MR GREGORY GILLESPIE

Mailing Address 2119 BRIDGE ST

City State Zip Code
PHILADELPHIA PA 19124-2025

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

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 204.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Transaction ID: 37757994

Amount of Each Receipt this Period

20.00

C.

Full Name (Last, First, Middle Initial)

T HABECKER

Mailing Address 111 SE 98TH AVE

City State Zip Code
VANCOUVER WA 98664-3913

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

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 450.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 9 / 2 0 1 0

Transaction ID: 37758028

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)

150.00

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 51 / 484
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
National Rifle Association of America Political Victory Fund

A. Full Name (Last, First, Middle Initial)
MR STEVEN PANNEMANN

Mailing Address 325 HARRISON AVE

City State Zip Code
WAUKESHA WI 53186-6129

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
216.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 5 / 2 0 1 0

Transaction ID: 37758076

Amount of Each Receipt this Period
60.00

B. Full Name (Last, First, Middle Initial)
MR ZANE JONES

Mailing Address PO BOX 1474

City State Zip Code
BELTON TX 76513-5474

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

Name of Employer Occupation
ALBERTSONS, INC. PHARMACIST

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
4000.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 7 / 2 0 1 0

Transaction ID: 37758145

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
MR STEPHEN REIMERS

Mailing Address PO BOX 85

City State Zip Code
PARK HALL MD 20667-0085

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

Name of Employer Occupation
RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
236.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 0 2 / 2 0 1 0

Transaction ID: 37758165

Amount of Each Receipt this Period
40.00

SUBTOTAL of Receipts This Page (optional) ► **1100.00**

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 52 / 484
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
National Rifle Association of America Political Victory Fund

A. Full Name (Last, First, Middle Initial)
MR RICHARD J BOYES

Mailing Address 335 EXECUTIVE MEADOWS DR

City State Zip Code
LENOIR CITY TN 37771-6779

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

Name of Employer Occupation
WACKENHUT SECURITY SECURITY POLICE OFFICER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 315.00

Date of Receipt
MM / DD / YYYY
10 / 18 / 2010

Transaction ID: 37758178

Amount of Each Receipt this Period
40.00

B. Full Name (Last, First, Middle Initial)
MR ANTHONY SENECA

Mailing Address 515 NECKAR AVE APT 7

City State Zip Code
STATEN ISLAND NY 10304-4511

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

Name of Employer Occupation
SELF EMPLOYED BUILDING CONSTRUCTION

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 319.00

Date of Receipt
MM / DD / YYYY
11 / 02 / 2010

Transaction ID: 37758191

Amount of Each Receipt this Period
40.00

C. Full Name (Last, First, Middle Initial)
MR JOHN A ELDRIDGE

Mailing Address 115 SHILOH FARM TRAIL

City State Zip Code
STATE ROAD NC 28676-9058

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

Name of Employer Occupation
RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 450.00

Date of Receipt
MM / DD / YYYY
11 / 03 / 2010

Transaction ID: 37758226

Amount of Each Receipt this Period
200.00

SUBTOTAL of Receipts This Page (optional) ► **280.00**

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 53 / 484
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
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NAME OF COMMITTEE (In Full)
National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)
MR JAMES N BRYSON

Mailing Address 151 COX FARM RD

City State Zip Code
CULLOWHEE NC 28723-6821

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

Name of Employer Occupation
DEPT OF INTERIOR RETIRED - TEACHER

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 321.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Transaction ID: 37758227

Amount of Each Receipt this Period
20.00

B.

Full Name (Last, First, Middle Initial)
MR JAMES N BRYSON

Mailing Address 151 COX FARM RD

City State Zip Code
CULLOWHEE NC 28723-6821

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

Name of Employer Occupation
DEPT OF INTERIOR RETIRED - TEACHER

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 301.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Transaction ID: 37758228

Amount of Each Receipt this Period
25.00

C.

Full Name (Last, First, Middle Initial)
MAJ JAMES P HAMILTON

Mailing Address 143 STONE RIDGE RD

City State Zip Code
LEESVILLE SC 29070-7295

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

Name of Employer Occupation
RETIRED - PILOT

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 329.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Transaction ID: 37758231

Amount of Each Receipt this Period
100.00

SUBTOTAL of Receipts This Page (optional) ► **145.00**

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 54 / 484

(check only one)

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

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR ROBERT WRIGHT

Mailing Address 13510 CLEARWOOD CT SW

City State Zip Code
OLYMPIA WA 98512-5905

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

Name of Employer Occupation
SCIENCE APPLICATIONS INTE- RNATI COMPUTER SYSTEMS ADMIN

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 550.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 0 4 / 2 0 1 0

Transaction ID: 37758250

Amount of Each Receipt this Period

50.00

B.

Full Name (Last, First, Middle Initial)

MR FARREL MIZER

Mailing Address 2522 MONROE ST

City State Zip Code
EUGENE OR 97405-2548

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

Name of Employer Occupation
STATE OF OR RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 244.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Transaction ID: 37758264

Amount of Each Receipt this Period

50.00

C.

Full Name (Last, First, Middle Initial)

MR MATT PETERS

Mailing Address 7704 SAINT CLAIR HWY

City State Zip Code
CASCO MI 48064-1522

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

Name of Employer Occupation
DES, INC. PROF. COUNSELOR

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 300.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 1 6 / 2 0 1 0

Transaction ID: 37758294

Amount of Each Receipt this Period

25.00

SUBTOTAL of Receipts This Page (optional)

125.00

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 55 / 484
(check only one)

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

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NAME OF COMMITTEE (In Full)
National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)
MR ROBERT V WILSON

Mailing Address 1135 STATE ROUTE 38 SE

City LONDON State OH Zip Code 43140-9217

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

Name of Employer Occupation RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 328.00

Date of Receipt 10 / 19 / 2010

Transaction ID: 37758308

Amount of Each Receipt this Period 39.00

B.

Full Name (Last, First, Middle Initial)
MR OBRYAN BRASHEAR

Mailing Address 389 GLENROSE ST

City VANDALIA State OH Zip Code 45377-3208

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

Name of Employer Occupation RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 204.00

Date of Receipt 10 / 18 / 2010

Transaction ID: 37758362

Amount of Each Receipt this Period 20.00

C.

Full Name (Last, First, Middle Initial)
MR MATTHEW B COBB

Mailing Address PO BOX 477

City FORT SMITH State AR Zip Code 72902-0477

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

Name of Employer Occupation REAL ESTATE MANAGER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt 10 / 22 / 2010

Transaction ID: 37758401

Amount of Each Receipt this Period 500.00

SUBTOTAL of Receipts This Page (optional) ▶ 559.00

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 56 / 484

(check only one)

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

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)
MR GLENN G PHILLIPS

Mailing Address PO BOX 191

City State Zip Code
UPPER BLACK EDDY PA 18972-0191

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

Name of Employer Occupation
NEW HOPE CRUSH STONE CRUSHER OPERATOR

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 378.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 0 1 / 2 0 1 0

Transaction ID: 37758426

Amount of Each Receipt this Period

40.00

B.

Full Name (Last, First, Middle Initial)
MR FRANKLIN L THOMPSON

Mailing Address PO BOX 195

City State Zip Code
NORTH GREECE NY 14515-0195

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

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 228.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 9 / 2 0 1 0

Transaction ID: 37758453

Amount of Each Receipt this Period

10.00

C.

Full Name (Last, First, Middle Initial)
MR MICHAEL G GRAY

Mailing Address 107 BEECHWOOD DRIVE

City State Zip Code
SIMPSONVILLE SC 29681-6000

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

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 230.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 8 / 2 0 1 0

Transaction ID: 37758456

Amount of Each Receipt this Period

25.00

SUBTOTAL of Receipts This Page (optional)

75.00

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 57 / 484
(check only one)

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

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NAME OF COMMITTEE (In Full)
National Rifle Association of America Political Victory Fund

A. Full Name (Last, First, Middle Initial)
MR HARLEY V KENNEDY

Mailing Address 9686 COUNTY HWY E

City State Zip Code
TOMAH WI 54660-8063

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

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 382.00

Date of Receipt
MM / DD / YYYY
11 / 05 / 2010

Transaction ID: 37758474

Amount of Each Receipt this Period
40.00

B. Full Name (Last, First, Middle Initial)
MR JOHN REEHLING

Mailing Address 1408 CARTER PL

City State Zip Code
WEST CHESTER PA 19382-7770

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

Name of Employer Occupation
CONRAIL RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 301.00

Date of Receipt
MM / DD / YYYY
10 / 18 / 2010

Transaction ID: 37758488

Amount of Each Receipt this Period
20.00

C. Full Name (Last, First, Middle Initial)
MR FRANZ W KAUER

Mailing Address 105 E CHURCH ST

City State Zip Code
BLANCHARDVILLE WI 53516-9349

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

Name of Employer Occupation

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 291.00

Date of Receipt
MM / DD / YYYY
10 / 26 / 2010

Transaction ID: 37758559

Amount of Each Receipt this Period
60.00

SUBTOTAL of Receipts This Page (optional) ► **120.00**

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 58 / 484
(check only one)

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

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NAME OF COMMITTEE (In Full)
National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)
COL FREDERICK E JOHNSTON, III

Mailing Address 19355 CYPRESS RIDGE TER UNIT 1

City State Zip Code
LEESBURG VA 20176-6910

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

Name of Employer Occupation
RETIREED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1500.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 6 / 2 0 1 0

Transaction ID: 37758578

Amount of Each Receipt this Period
1000.00

B.

Full Name (Last, First, Middle Initial)
MR JOSEPH N MCARDLE

Mailing Address PO BOX 316

City State Zip Code
FREEVILLE NY 13068-0316

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

Name of Employer Occupation
RETIREED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 501.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 2 / 2 0 1 0

Transaction ID: 37758601

Amount of Each Receipt this Period
100.00

C.

Full Name (Last, First, Middle Initial)
J D GRINDSTAFF

Mailing Address PO BOX 35

City State Zip Code
MILLIGAN COLLEGE TN 37682-0035

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

Name of Employer Occupation
RETIREED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 208.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 1 / 2 0 1 0

Transaction ID: 37758606

Amount of Each Receipt this Period
20.00

SUBTOTAL of Receipts This Page (optional) ► **1120.00**

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 59 / 484

(check only one)

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

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR ERNEST W BUNCE

Mailing Address 9316 MILES DR

City State Zip Code
LONE TREE CO 80124-3093

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

Name of Employer Occupation
RETIRE

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 235.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Transaction ID: 37758614

Amount of Each Receipt this Period
25.00

B.

Full Name (Last, First, Middle Initial)

MS SONDR A HUGG

Mailing Address 37091 TINY RD

City State Zip Code
SOLDOTNA AK 99669-9025

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

Name of Employer Occupation
RETIRE

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 204.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Transaction ID: 37758625

Amount of Each Receipt this Period
100.00

C.

Full Name (Last, First, Middle Initial)

MR DAVID MILNE

Mailing Address 348 PAULETTE WAY

City State Zip Code
FARMINGTON UT 84025-3239

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

Name of Employer Occupation
RETIRE

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 241.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Transaction ID: 37758635

Amount of Each Receipt this Period
40.00

SUBTOTAL of Receipts This Page (optional) ▶

165.00

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 60 / 484

(check only one)

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

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

NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)
MR ALLAN HOFLAND

Mailing Address 2S715 SUMMERFIELD CT

City State Zip Code
WHEATON IL 60189-8997

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

Name of Employer Occupation
RETIREED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 250.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 8 / 2 0 1 0

Transaction ID: 37758664

Amount of Each Receipt this Period

100.00

B.

Full Name (Last, First, Middle Initial)
MR RICHARD M GROTT

Mailing Address 3903 GREEN HILLS CT

City State Zip Code
NORMAN OK 73072-5005

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

Name of Employer Occupation
POE & ASSOCIATES, INC. CIVIL ENGINEER

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 323.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Transaction ID: 37758687

Amount of Each Receipt this Period

100.00

C.

Full Name (Last, First, Middle Initial)
MR BRADLEY WASHBURN

Mailing Address 7810 WHIPPLE TRL

City State Zip Code
GREENSBORO NC 27455-9450

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

Name of Employer Occupation

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 204.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Transaction ID: 37758710

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional) ▶

250.00

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 61 / 484

(check only one)

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

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR T ANTHONY BROOKS

Mailing Address PO BOX 819

City

TETON VILLAGE

State

WY

Zip Code

83025-0819

FEC ID number of contributing federal political committee.

C

Name of Employer

Occupation

RETIRED

Receipt For:

Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

875.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Transaction ID: 37758717

Amount of Each Receipt this Period

100.00

B.

Full Name (Last, First, Middle Initial)

MR RALPH S DEGROODT

Mailing Address 31661 WELL BOTTOM RD

City

GALENA

State

MD

Zip Code

21635-1334

FEC ID number of contributing federal political committee.

C

Name of Employer

BELL ATLANTIC

Occupation

RETIRED

Receipt For:

Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

363.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Transaction ID: 37758721

Amount of Each Receipt this Period

35.00

C.

Full Name (Last, First, Middle Initial)

MR FRANK T KOPITA

Mailing Address 3628 ELF WOOD LN

City

SHINGLE SPRINGS

State

CA

Zip Code

95682-8752

FEC ID number of contributing federal political committee.

C

Name of Employer

ATIPOK ENTERPRISES ELEGANT

Occupation

OWNER

Receipt For:

Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

226.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Transaction ID: 37758730

Amount of Each Receipt this Period

40.00

SUBTOTAL of Receipts This Page (optional)

175.00

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 62 / 484

(check only one)

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

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR RICHARD CUNNIFF

Mailing Address 767 5TH AVE STE 4701

City State Zip Code
NEW YORK NY 10153-0109

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

Name of Employer Occupation
RUANE, CUNNIFF & GOLDFARB, INC INVESTMENT MANAGER

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 300.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Transaction ID: 37758767

Amount of Each Receipt this Period

100.00

B.

Full Name (Last, First, Middle Initial)

MR JAMES L VARILEK

Mailing Address PO BOX 25965

City State Zip Code
PRESCOTT VALLEY AZ 86312-5965

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

Name of Employer Occupation
DISABLED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 900.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 0 3 / 2 0 1 0

Transaction ID: 37758810

Amount of Each Receipt this Period

200.00

C.

Full Name (Last, First, Middle Initial)

MR W O SMITH

Mailing Address 721 OVERLOOK RD N

City State Zip Code
TUSCALOOSA AL 35406-2118

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

Name of Employer Occupation
SELF EMPLOYED MEDICAL DOCTOR

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 375.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Transaction ID: 37758829

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional) ▶

400.00

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 63 / 484
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
National Rifle Association of America Political Victory Fund

A. Full Name (Last, First, Middle Initial)
MR CHUCK RYAN

Mailing Address 66 CARLYLE RD

City PORTLAND State ME Zip Code 04103-3428

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 204.00

Date of Receipt: 10 / 18 / 2010
Transaction ID: 37758849
 Amount of Each Receipt this Period: 20.00

B. Full Name (Last, First, Middle Initial)
MR THOMAS R MATTHEWS

Mailing Address PO BOX 275

City BEULAH State WY Zip Code 82712-0275

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt: 10 / 27 / 2010
Transaction ID: 37758855
 Amount of Each Receipt this Period: 500.00

C. Full Name (Last, First, Middle Initial)
MR LARRY KUEFNER

Mailing Address 2221 NW 82ND ST APT 1

City CLIVE State IA Zip Code 50325-4461

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

Name of Employer Occupation
RETIRED RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 308.00

Date of Receipt: 11 / 02 / 2010
Transaction ID: 37758865
 Amount of Each Receipt this Period: 100.00

SUBTOTAL of Receipts This Page (optional) ► 620.00

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 64 / 484
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
National Rifle Association of America Political Victory Fund

A. Full Name (Last, First, Middle Initial)
MR JAMES E CONSTANCE

Mailing Address 2328 LAKECREST DR

City MANSFIELD State OH Zip Code 44903-9264

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

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 203.00

Date of Receipt: 10 / 18 / 2010
Transaction ID: 37758889
 Amount of Each Receipt this Period: 30.00

B. Full Name (Last, First, Middle Initial)
MR WILLIAM J RUFRANO

Mailing Address 521 MORGAN DR

City LEWISTON State NY Zip Code 14092-1148

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 207.00

Date of Receipt: 10 / 18 / 2010
Transaction ID: 37758892
 Amount of Each Receipt this Period: 20.00

C. Full Name (Last, First, Middle Initial)
MR MICHAEL B ELLIOTT

Mailing Address 1323 ASHLAND AVE

City WILMETTE State IL Zip Code 60091-1607

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt: 10 / 20 / 2010
Transaction ID: 37758911
 Amount of Each Receipt this Period: 250.00

SUBTOTAL of Receipts This Page (optional) ► **300.00**

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 65 / 484
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
National Rifle Association of America Political Victory Fund

A. Full Name (Last, First, Middle Initial)
MR JAMES SCHLACHTER

Mailing Address 4625 S 49TH ST

City GREENFIELD State WI Zip Code 53220-4117

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

Name of Employer Occupation RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 285.00

Date of Receipt: 10 / 25 / 2010
Transaction ID: 37758926
Amount of Each Receipt this Period: 20.00

B. Full Name (Last, First, Middle Initial)
MR LOUIS O SPENCER

Mailing Address 1016 NE 20TH ST

City MOORE State OK Zip Code 73160-6313

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

Name of Employer Occupation RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 364.00

Date of Receipt: 10 / 25 / 2010
Transaction ID: 37758954
Amount of Each Receipt this Period: 30.00

C. Full Name (Last, First, Middle Initial)
MR CLAUDE WHATLEY

Mailing Address 560 BASIN DR

City KISSIMMEE State FL Zip Code 34744-4804

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

Name of Employer Occupation

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt: 10 / 20 / 2010
Transaction ID: 37758982
Amount of Each Receipt this Period: 500.00

SUBTOTAL of Receipts This Page (optional) ▶ 550.00

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 66 / 484

(check only one)

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

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NAME OF COMMITTEE (In Full)
National Rifle Association of America Political Victory Fund

A.	Full Name (Last, First, Middle Initial) MR ROBERT ALLEN		Date of Receipt
	Mailing Address 1621 STRATFORD AVE # A2		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 1 1 / 0 9 / 2 0 1 0
	City	State	Zip Code
	STRATFORD	CT	06615-6421
	FEC ID number of contributing federal political committee. C		Transaction ID: 37758983
Name of Employer CITY OF BRIDGEPORT		Occupation FIREFIGHTER	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 404.00	<input type="text"/> 40.00

B.	Full Name (Last, First, Middle Initial) MR ROBERT ALLEN		Date of Receipt
	Mailing Address 1621 STRATFORD AVE # A2		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 1 1 / 0 9 / 2 0 1 0
	City	State	Zip Code
	STRATFORD	CT	06615-6421
	FEC ID number of contributing federal political committee. C		Transaction ID: 37758984
Name of Employer CITY OF BRIDGEPORT		Occupation FIREFIGHTER	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 444.00	<input type="text"/> 40.00

C.	Full Name (Last, First, Middle Initial) MR ROBERT ALLEN		Date of Receipt
	Mailing Address 1621 STRATFORD AVE # A2		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 1 0 / 1 4 / 2 0 1 0
	City	State	Zip Code
	STRATFORD	CT	06615-6421
	FEC ID number of contributing federal political committee. C		Transaction ID: 37758985
Name of Employer CITY OF BRIDGEPORT		Occupation FIREFIGHTER	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 364.00	<input type="text"/> 76.00

SUBTOTAL of Receipts This Page (optional) ▶

156.00

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 67 / 484
(check only one)

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

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NAME OF COMMITTEE (In Full)
National Rifle Association of America Political Victory Fund

A. Full Name (Last, First, Middle Initial)
J R HUTCHINSON

Mailing Address 2197 KODIAK DR NE

City ATLANTA State GA Zip Code 30345-4172

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

Name of Employer SELF EMPLOYED Occupation CONSULTANT

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 262.00

Date of Receipt: 11 / 16 / 2010
Transaction ID: 37758988
Amount of Each Receipt this Period: 50.00

B. Full Name (Last, First, Middle Initial)
MR WILLIAM GOERIG

Mailing Address 1802 ANSLEY LN

City BLUE BELL State PA Zip Code 19422-3647

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

Name of Employer RETIRED / SEARS HARDWARE Occupation RETIRED / ASSOCIATE

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 254.00

Date of Receipt: 10 / 18 / 2010
Transaction ID: 37759061
Amount of Each Receipt this Period: 30.00

C. Full Name (Last, First, Middle Initial)
RONALD GASSNER

Mailing Address 9917 DERWENT DR

City PLANO State TX Zip Code 75025-6595

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

Name of Employer Occupation RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1300.00

Date of Receipt: 11 / 01 / 2010
Transaction ID: 37759069
Amount of Each Receipt this Period: 200.00

SUBTOTAL of Receipts This Page (optional) ► 280.00

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 68 / 484

(check only one)

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

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR WILLIAM HERMAN

Mailing Address 503 EVANS ST

City State Zip Code
SLOAN IA 51055-8075

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

Name of Employer Occupation
UNEMPLOYED UNEMPLOYED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 245.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Transaction ID: 37759088

Amount of Each Receipt this Period

100.00

B.

Full Name (Last, First, Middle Initial)

MR CHARLES SWAIM

Mailing Address 416 W ROOSEVELT RD

City State Zip Code
BEMENT IL 61813-1057

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

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 350.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Transaction ID: 37759091

Amount of Each Receipt this Period

50.00

C.

Full Name (Last, First, Middle Initial)

MR LARRY STOWELL

Mailing Address 932 TIMBER CREEK DR

City State Zip Code
INDIANAPOLIS IN 46239-9119

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

Name of Employer Occupation
HUBLER CHEVROLET LEASE MANAGER

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 293.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 0 1 / 2 0 1 0

Transaction ID: 37759106

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional) ▶

250.00

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 69 / 484

(check only one)

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

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NAME OF COMMITTEE (In Full)
National Rifle Association of America Political Victory Fund

A.	Full Name (Last, First, Middle Initial) MR JOE BROWN		Date of Receipt MM / DD / YYYY 10 / 26 / 2010		
	Mailing Address 817 STUCKERT DR		Transaction ID: 37759111		
	City BURLESON	State TX	Zip Code 76028-6810	Amount of Each Receipt this Period 20.00	
	FEC ID number of contributing federal political committee. C				
Name of Employer		Occupation			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 206.00			

B.	Full Name (Last, First, Middle Initial) MR DAVID B GATES		Date of Receipt MM / DD / YYYY 10 / 18 / 2010		
	Mailing Address 1145 JONATHAN CT		Transaction ID: 37759118		
	City RED BLUFF	State CA	Zip Code 96080-4200	Amount of Each Receipt this Period 20.00	
	FEC ID number of contributing federal political committee. C				
Name of Employer		Occupation DISABLED			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 248.00			

C.	Full Name (Last, First, Middle Initial) DR URSULA MAZUR, PHD		Date of Receipt MM / DD / YYYY 10 / 18 / 2010		
	Mailing Address 18351 STATE ROUTE 194		Transaction ID: 37759129		
	City PULLMAN	State WA	Zip Code 99163-8657	Amount of Each Receipt this Period 75.00	
	FEC ID number of contributing federal political committee. C				
Name of Employer		Occupation			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 225.00			

SUBTOTAL of Receipts This Page (optional) ►

115.00

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 70 / 484

(check only one)

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

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR DAVID LONG

Mailing Address 6340 HEMLOCK WAY

City State Zip Code
ROCKLIN CA 95677-3411

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

Name of Employer Occupation
STAFF RESOURCES FINANCIAL PARAPLANNER

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 300.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 7 / 2 0 1 0

Transaction ID: 37759214

Amount of Each Receipt this Period

100.00

B.

Full Name (Last, First, Middle Initial)

MR WILLIAM H MCDEVITT

Mailing Address 30 EL PORTAL

City State Zip Code
SAUSALITO CA 94965-2141

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

Name of Employer Occupation

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 212.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 6 / 2 0 1 0

Transaction ID: 37759249

Amount of Each Receipt this Period

60.00

C.

Full Name (Last, First, Middle Initial)

MR JAMES P HAGGARD

Mailing Address 8419 S KOMENSKY AVE

City State Zip Code
CHICAGO IL 60652-3115

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

Name of Employer Occupation
CITY OF CHICAGO

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 217.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 2 / 2 0 1 0

Transaction ID: 37759281

Amount of Each Receipt this Period

20.00

SUBTOTAL of Receipts This Page (optional)

180.00

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 71 / 484
(check only one)

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

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NAME OF COMMITTEE (In Full)
National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)
MR JB BOLIN, JR

Mailing Address 10050 COUNTY ROAD 1550

City ADA State OK Zip Code 74820-3368

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
MM / DD / YYYY
10 / 27 / 2010

Transaction ID: 37759290

Amount of Each Receipt this Period
250.00

B.

Full Name (Last, First, Middle Initial)
MRS BETH A HASKELL

Mailing Address 926 NE 130TH TER

City SILVER SPRINGS State FL Zip Code 34488-3738

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

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1500.00

Date of Receipt
MM / DD / YYYY
10 / 19 / 2010

Transaction ID: 37759332

Amount of Each Receipt this Period
500.00

C.

Full Name (Last, First, Middle Initial)
MR SHERMAN GOFORTH

Mailing Address 2146 MACY ISLAND RD

City KISSIMMEE State FL Zip Code 34744-6230

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

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
MM / DD / YYYY
10 / 18 / 2010

Transaction ID: 37759334

Amount of Each Receipt this Period
50.00

SUBTOTAL of Receipts This Page (optional) ► **800.00**

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 72 / 484
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
National Rifle Association of America Political Victory Fund

A. Full Name (Last, First, Middle Initial)
MR OLIN L JAY

Mailing Address 15701 MICHELLE RD

City State Zip Code
OKLAHOMA CITY OK 73165-7007

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

Name of Employer Occupation
US AIR FORCE RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 255.00

Date of Receipt
M M / D D / Y Y Y Y
10 / 15 / 2010

Transaction ID: 37759339

Amount of Each Receipt this Period
30.00

B. Full Name (Last, First, Middle Initial)
MR BARNABY OHRSTROM

Mailing Address 4811 SWEETMEADOW CIR

City State Zip Code
SARASOTA FL 34238-3320

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

Name of Employer Occupation

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
M M / D D / Y Y Y Y
10 / 19 / 2010

Transaction ID: 37759340

Amount of Each Receipt this Period
200.00

C. Full Name (Last, First, Middle Initial)
MR THOMAS H LAMOREAUX

Mailing Address 20057 BRETON RD

City State Zip Code
SPRING LAKE MI 49456-9425

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

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
M M / D D / Y Y Y Y
10 / 18 / 2010

Transaction ID: 37759357

Amount of Each Receipt this Period
1000.00

SUBTOTAL of Receipts This Page (optional) ► **1230.00**

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 73 / 484

(check only one)

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

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR SHANE P SCHMITT

Mailing Address 572 ROOSEVELT ST

City State Zip Code
CREVE COEUR IL 61610-4176

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

Name of Employer Occupation
Occupation
DISABLED VETERAN

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼
470.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Transaction ID: 37759364

Amount of Each Receipt this Period

50.00

B.

Full Name (Last, First, Middle Initial)

MR DENNIS CHILD

Mailing Address 212 S 800 E

City State Zip Code
LOGAN UT 84321-5629

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

Name of Employer Occupation
USU CHARTER CREDIT UNION
MANAGER

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 9 / 2 0 1 0

Transaction ID: 37759410

Amount of Each Receipt this Period

100.00

C.

Full Name (Last, First, Middle Initial)

MR WILLIAM E PHARIS

Mailing Address 47 BERWICK RD

City State Zip Code
ROCHESTER NY 14609-7702

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

Name of Employer Occupation
ROCHESTER GENERAL HOSPITAL
REGISTERED NURSE

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼
214.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 6 / 2 0 1 0

Transaction ID: 37759459

Amount of Each Receipt this Period

20.00

SUBTOTAL of Receipts This Page (optional)

170.00

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 74 / 484
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
National Rifle Association of America Political Victory Fund

A. Full Name (Last, First, Middle Initial)
MR TONY YOCHAM

Mailing Address 613 SQUIRE LYLE RD

City State Zip Code
SCOTTSVILLE KY 42164-8864

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
211.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 2 0 / 2 0 1 0

Transaction ID: 37759460

Amount of Each Receipt this Period
20.00

B. Full Name (Last, First, Middle Initial)
MR JERRY L BASS

Mailing Address 5941 HIGHWAY 1043

City State Zip Code
GREENSBURG LA 70441-4706

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

Name of Employer Occupation
KANORADO CORP. OPERATOR

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
226.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 1 4 / 2 0 1 0

Transaction ID: 37759466

Amount of Each Receipt this Period
40.00

C. Full Name (Last, First, Middle Initial)
MR RICHARD E JOHNSON

Mailing Address 8291 COMPASS POINTE EAS WYND N

City State Zip Code
LELAND NC 28451-6427

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

Name of Employer Occupation
RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
202.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 2 2 / 2 0 1 0

Transaction ID: 37759475

Amount of Each Receipt this Period
39.00

SUBTOTAL of Receipts This Page (optional) ► **99.00**

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 75 / 484

(check only one)

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

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

KARL KOEHRER

Mailing Address 704 SHALLOWFORD DR

City State Zip Code
MANCHESTER MO 63021-6607

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

Name of Employer Occupation
CHAMINADE COLLEGE PREP TEACHER

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 283.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 4 / 2 0 1 0

Transaction ID: 37759522

Amount of Each Receipt this Period

40.00

B.

Full Name (Last, First, Middle Initial)

DR ROBERT M DOMKE

Mailing Address 27 CHELSEAS WALK

City State Zip Code
ITHACA NY 14850-1087

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

Name of Employer Occupation
RADIOLOGY ASSOCIATES OF ITHACA PHYSICIAN

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 250.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Transaction ID: 37759524

Amount of Each Receipt this Period

25.00

C.

Full Name (Last, First, Middle Initial)

MR PAUL D WASSON

Mailing Address 4709 ROYAL OAK DR

City State Zip Code
OKLAHOMA CITY OK 73135-2029

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

Name of Employer Occupation
AFFINIA GROUP MAINTENANCE

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 433.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Transaction ID: 37759557

Amount of Each Receipt this Period

30.00

SUBTOTAL of Receipts This Page (optional) ▶

95.00

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 76 / 484
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
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NAME OF COMMITTEE (In Full)
National Rifle Association of America Political Victory Fund

A. Full Name (Last, First, Middle Initial)
MR DAVID C KRAUSE

Mailing Address 904 SCOTT DR

City ELGIN State IL Zip Code 60123-2027

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

Name of Employer Occupation RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 232.00

Date of Receipt: 10 / 19 / 2010
Transaction ID: 37759569
Amount of Each Receipt this Period: 30.00

B. Full Name (Last, First, Middle Initial)
MR DAVID W LOVELAND

Mailing Address 709 EAYRESTOWN RD

City LUMBERTON State NJ Zip Code 08048-3176

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

Name of Employer Occupation RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt: 11 / 01 / 2010
Transaction ID: 37759591
Amount of Each Receipt this Period: 50.00

C. Full Name (Last, First, Middle Initial)
MR DAVID M YOST

Mailing Address 209 STH MONROE ST
PO BOX 425

City ALDERSON State WV Zip Code 24910-0425

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

Name of Employer GREENBRIER COUNTY SCHOOLS Occupation TEACHER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 213.00

Date of Receipt: 10 / 19 / 2010
Transaction ID: 37759598
Amount of Each Receipt this Period: 20.00

SUBTOTAL of Receipts This Page (optional) ► 100.00

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 77 / 484
(check only one)

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

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NAME OF COMMITTEE (In Full)
National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)
MR ALBERT BLACKBURN

Mailing Address 4199 WOODLAND BLVD

City NORTH PORT State FL Zip Code 34291-5805

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

Name of Employer SELF EMPLOYED Occupation RANCHER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 800.00

Date of Receipt 11 / 02 / 2010
Transaction ID: 37759599
Amount of Each Receipt this Period 500.00

B.

Full Name (Last, First, Middle Initial)
MR PAUL CREEGAN

Mailing Address 176 E 81ST ST

City NEW YORK State NY Zip Code 10028-1865

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

Name of Employer CON EDISON Occupation MECHANIC

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 534.00

Date of Receipt 10 / 21 / 2010
Transaction ID: 37759607
Amount of Each Receipt this Period 60.00

C.

Full Name (Last, First, Middle Initial)
MS CAROL E CONWAY

Mailing Address 2209 REDBUD AVE

City DUNCAN State OK Zip Code 73533-2035

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 213.00

Date of Receipt 10 / 18 / 2010
Transaction ID: 37759636
Amount of Each Receipt this Period 40.00

SUBTOTAL of Receipts This Page (optional) ▶ 600.00

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 78 / 484
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
National Rifle Association of America Political Victory Fund

A. Full Name (Last, First, Middle Initial)
MR STEPHEN J MUNDET, JR
Mailing Address 4061 E MICHIGAN ST
City: ORLANDO State: FL Zip Code: 32812-5175
FEC ID number of contributing federal political committee: **C**
Name of Employer: Occupation:
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 253.00
Date of Receipt: 11 / 02 / 2010
Transaction ID: 37759640
Amount of Each Receipt this Period: 51.00

B. Full Name (Last, First, Middle Initial)
MR STEPHEN J MUNDET, JR
Mailing Address 4061 E MICHIGAN ST
City: ORLANDO State: FL Zip Code: 32812-5175
FEC ID number of contributing federal political committee: **C**
Name of Employer: Occupation:
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 202.00
Date of Receipt: 11 / 01 / 2010
Transaction ID: 37759641
Amount of Each Receipt this Period: 60.00

C. Full Name (Last, First, Middle Initial)
MR CURTIS J HARRIS
Mailing Address 2252 BALDY LN
City: EVERGREEN State: CO Zip Code: 80439-9444
FEC ID number of contributing federal political committee: **C**
Name of Employer: Occupation: RETIRED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 250.00
Date of Receipt: 10 / 19 / 2010
Transaction ID: 37759657
Amount of Each Receipt this Period: 50.00

SUBTOTAL of Receipts This Page (optional) ► 161.00
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 79 / 484
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
National Rifle Association of America Political Victory Fund

A. Full Name (Last, First, Middle Initial)
MR PHILIP HUTCHISON

Mailing Address 42321 N HARBOUR TOWN CT

City State Zip Code
ANTHEM AZ 85086-1256

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

Name of Employer Occupation
RETIREED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 313.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Transaction ID: 37759669

Amount of Each Receipt this Period
100.00

B. Full Name (Last, First, Middle Initial)
MR FRANK PAULI

Mailing Address 1915 RENFRO RD

City State Zip Code
COLLEYVILLE TX 76034-4312

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

Name of Employer Occupation

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 204.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Transaction ID: 37759674

Amount of Each Receipt this Period
100.00

C. Full Name (Last, First, Middle Initial)
MR DANIEL FULLER

Mailing Address 914 MAIN ST UNIT 1206

City State Zip Code
HOUSTON TX 77002-6207

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

Name of Employer Occupation

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 290.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 8 / 2 0 1 0

Transaction ID: 37759676

Amount of Each Receipt this Period
25.00

SUBTOTAL of Receipts This Page (optional) ► 225.00

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 80 / 484

(check only one)

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

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NAME OF COMMITTEE (In Full)
National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)
AL TOMASINO

Mailing Address 2402 S XAVIER ST

City State Zip Code
DENVER CO 80219-5087

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
XCEL ENERGY SERVICE FITTER B GAS CONTRACTOR

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 986.00

Date of Receipt MM / DD / YYYY
10 / 18 / 2010

Transaction ID: 37759685

Amount of Each Receipt this Period 100.00

B.

Full Name (Last, First, Middle Initial)
JOHN D ARMSTRONG

Mailing Address PO BOX 870186

City State Zip Code
WASILLA AK 99687-0186

FEC ID number of contributing federal political committee. C

Name of Employer Occupation

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 218.00

Date of Receipt MM / DD / YYYY
10 / 19 / 2010

Transaction ID: 37759762

Amount of Each Receipt this Period 30.00

C.

Full Name (Last, First, Middle Initial)
MR KEN M FRITSCHEL

Mailing Address 6215 BRAZOS CT

City State Zip Code
COLLEYVILLE TX 76034-5722

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
AFFILIATED COMPUTER SERVICES SALES

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 287.00

Date of Receipt MM / DD / YYYY
10 / 27 / 2010

Transaction ID: 37759766

Amount of Each Receipt this Period 100.00

SUBTOTAL of Receipts This Page (optional) 230.00

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 81 / 484

(check only one)

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

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

MR LELAND CODDING

Mailing Address 386 LONGVIEW RD

City State Zip Code
MEDINA OH 44256-1418

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
227.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 5 / 2 0 1 0

Transaction ID: 37759772

Amount of Each Receipt this Period

30.00

B.

Full Name (Last, First, Middle Initial)

MR CHARLES R ANDERSON

Mailing Address 10330 BLUE LIGHT LN

City State Zip Code
AUBURN CA 95603-9437

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

Name of Employer Occupation
RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
354.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Transaction ID: 37759779

Amount of Each Receipt this Period

100.00

C.

Full Name (Last, First, Middle Initial)

MR ROBERT B COLLIER

Mailing Address 110 GOLF VIEW DR

City State Zip Code
COHUTTA GA 30710-9385

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
290.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 2 / 2 0 1 0

Transaction ID: 37759810

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional) ▶

230.00

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 82 / 484
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
National Rifle Association of America Political Victory Fund

A. Full Name (Last, First, Middle Initial)
MR THOMAS E HENDRIX

Mailing Address 4197 SPRINGDALE RD

City ARDMORE State OK Zip Code 73401-0214

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 239.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 1 0 / 2 5 / 2 0 1 0

Transaction ID: 37759872

Amount of Each Receipt this Period
60.00

B. Full Name (Last, First, Middle Initial)
MR RALPH BLACKMAN

Mailing Address 400 E CLINTON AVE APT 1

City INDIANOLA State IA Zip Code 50125-1752

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

Name of Employer Occupation
HOME APPLIANCE APPLIANCE REPAIR

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 258.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 1 0 / 2 0 / 2 0 1 0

Transaction ID: 37759883

Amount of Each Receipt this Period
30.00

C. Full Name (Last, First, Middle Initial)
MR MICHAEL J CLOSE

Mailing Address 4951 WINDSOR PARK

City SARASOTA State FL Zip Code 34235-2610

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

Name of Employer Occupation
NLS ASSET MANAGEMENT CORP CONSULTANT & ADVISOR

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 475.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 1 0 / 2 1 / 2 0 1 0

Transaction ID: 37759890

Amount of Each Receipt this Period
50.00

SUBTOTAL of Receipts This Page (optional) ► **140.00**

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 83 / 484
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
National Rifle Association of America Political Victory Fund

A. Full Name (Last, First, Middle Initial)
MR BILL SELMER

Mailing Address PO BOX 5312

City State Zip Code
SAN BERNARDINO CA 92412-5312

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

Name of Employer Occupation
RETIREED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 224.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 2 2 / 2 0 1 0

Transaction ID: 37759952

Amount of Each Receipt this Period
50.00

B. Full Name (Last, First, Middle Initial)
MR JOHN MCLEOD

Mailing Address 1150 W G MARTINELLI BLVD

City State Zip Code
CITRUS SPRINGS FL 34434-3233

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

Name of Employer Occupation
SELF EMPLOYED CIVIL ENGINEER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 215.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Transaction ID: 37759981

Amount of Each Receipt this Period
30.00

SUBTOTAL of Receipts This Page (optional) ► **80.00**

TOTAL This Period (last page this line number only) ► **21991.45**

**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)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
National Rifle Association of America Political Victory Fund

A.	Full Name (Last, First, Middle Initial) Friends Of John McCain Inc	Transaction ID: 37158146 Date of Disbursement
	Mailing Address PO Box 16664	<input type="text" value="10"/> <input type="text" value="14"/> / <input type="text" value="20"/> <input type="text" value="10"/>
	City Arlington State VA Zip Code 22215	Amount of Each Disbursement this Period
	Purpose of Disbursement	<input type="text" value="2450.00"/>
	Candidate Name Sen. John S. McCain	<input type="text" value="011"/> Category/ Type
	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: AZ District:	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Congressional Trust 2010	Transaction ID: 37179003 Date of Disbursement
	Mailing Address 228 S. Washington St., Suite 115	<input type="text" value="10"/> <input type="text" value="15"/> / <input type="text" value="20"/> <input type="text" value="10"/>
	City Alexandria State VA Zip Code 22314	Amount of Each Disbursement this Period
	Purpose of Disbursement	<input type="text" value="15000.00"/>
	Candidate Name	<input type="text" value="011"/> Category/ Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Gene Taylor For Congress Committee	Transaction ID: 37179006 Date of Disbursement
	Mailing Address P.O. Box 3838	<input type="text" value="10"/> <input type="text" value="15"/> / <input type="text" value="20"/> <input type="text" value="10"/>
	City Bay St. Louis State MS Zip Code 39520	Amount of Each Disbursement this Period
	Purpose of Disbursement	<input type="text" value="2450.00"/>
	Candidate Name Rep. Gene Taylor	<input type="text" value="011"/> Category/ Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MS District: 04	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="19900.00"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

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 type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
National Rifle Association of America Political Victory Fund

A.	Full Name (Last, First, Middle Initial) John Koster For Congress	Transaction ID: 37207303 Date of Disbursement 10 / 19 / 2010
	Mailing Address PO Box 3595	Amount of Each Disbursement this Period 2500.00
	City Arlington State WA Zip Code 98223	
	Purpose of Disbursement	011 Category/Type
	Candidate Name Mr. John Koster	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: WA District: 02	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Washington State Republican Party	Transaction ID: 37208067 Date of Disbursement 10 / 19 / 2010
	Mailing Address 2840 Northup Way, Suite 140	Amount of Each Disbursement this Period 3000.00
	City Bellevue State WA Zip Code 98004	
	Purpose of Disbursement	011 Category/Type
	Candidate Name Washington State Republican Party	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Ortiz For Congress Committee	Transaction ID: 37343273 Date of Disbursement 10 / 25 / 2010
	Mailing Address PO Box 7806	Amount of Each Disbursement this Period 2500.00
	City Corpus Christi State TX Zip Code 78467	
	Purpose of Disbursement	011 Category/Type
	Candidate Name Rep. Solomon P. Ortiz	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: TX District: 27	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	8000.00
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)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
National Rifle Association of America Political Victory Fund

A. Full Name (Last, First, Middle Initial) Kelly For Congress <hr/> Mailing Address PO Box 89520 <hr/> City Tucson State AZ Zip Code 85752 <hr/> Purpose of Disbursement <hr/> Candidate Name Mr. Jesse Kelly <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: AZ District: 08 Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 37343274 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 5 / 2 0 1 0
	Amount of Each Disbursement this Period 2450.00
	011 Category/ Type
	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B. Full Name (Last, First, Middle Initial) Tim Walz For U.S. Congress <hr/> Mailing Address PO Box 938 <hr/> City Mankato State MN Zip Code 56002 <hr/> Purpose of Disbursement <hr/> Candidate Name Mr. Timothy Walz <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MN District: 01 Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 37351405 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 6 / 2 0 1 0
	Amount of Each Disbursement this Period 4950.00
	011 Category/ Type
	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C. Full Name (Last, First, Middle Initial) Ron Johnson For Senate Inc <hr/> Mailing Address 601 Oregon Street Suite A <hr/> City Oshkosh State WI Zip Code 54902 <hr/> Purpose of Disbursement <hr/> Candidate Name Mr. Ronald Johnson <hr/> Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: WI District: Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 37351407 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 6 / 2 0 1 0
	Amount of Each Disbursement this Period 4950.00
	011 Category/ Type
	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶

12350.00

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 type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
National Rifle Association of America Political Victory Fund

A.	Full Name (Last, First, Middle Initial) Donald A. Manzullo For Congress Mailing Address PO Box 7783 City Rockford State IL Zip Code 61126 Purpose of Disbursement 011 Candidate Name Rep. Donald A. Manzullo Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: IL District: 16	Transaction ID: 37351535 Date of Disbursement <div style="border: 1px solid black; padding: 2px;"> M M / D D / Y Y Y Y 1 0 / 2 6 / 2 0 1 0 </div> Amount of Each Disbursement this Period <div style="border: 1px solid black; padding: 2px; text-align: center;">1000.00</div>
B.	Full Name (Last, First, Middle Initial) Kind For Congress Committee Mailing Address 205 5th Avenue South Suite 428 City La Crosse State WI Zip Code 54601 Purpose of Disbursement 011 Candidate Name Rep. Ron Kind Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: WI District: 03	Transaction ID: 37379278 Date of Disbursement <div style="border: 1px solid black; padding: 2px;"> M M / D D / Y Y Y Y 1 0 / 2 9 / 2 0 1 0 </div> Amount of Each Disbursement this Period <div style="border: 1px solid black; padding: 2px; text-align: center;">2950.00</div>
C.	Full Name (Last, First, Middle Initial) People For Ben Mailing Address PO Box 31129 City Santa Fe State NM Zip Code 87594 Purpose of Disbursement 011 Candidate Name Rep. Ben Lujan, Jr. Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: NM District: 03	Transaction ID: 37379279 Date of Disbursement <div style="border: 1px solid black; padding: 2px;"> M M / D D / Y Y Y Y 1 0 / 2 9 / 2 0 1 0 </div> Amount of Each Disbursement this Period <div style="border: 1px solid black; padding: 2px; text-align: center;">2500.00</div>

SUBTOTAL of Disbursements This Page (optional)	<div style="border: 1px solid black; padding: 2px;">6450.00</div>
TOTAL This Period (last page this line number only)	<div style="border: 1px solid black; padding: 2px; height: 20px;"></div>

**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 type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
National Rifle Association of America Political Victory Fund

<p>A. Full Name (Last, First, Middle Initial) Walberg For Congress</p> <p>Mailing Address 6769 Teachout Rd.</p> <p>City Tipton State MI Zip Code 49287</p> <p>Purpose of Disbursement</p> <p>Candidate Name Mr. Timothy Walberg</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: MI District: 07</p>	<p>Transaction ID: 37379280</p> <p>Date of Disbursement 10 / 29 / 2010</p> <p>Amount of Each Disbursement this Period 4950.00</p> <p>011 Category/ Type</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>
<p>B. Full Name (Last, First, Middle Initial) Bill Flores For Congress</p> <p>Mailing Address PO Box 6207</p> <p>City Bryan State TX Zip Code 77805</p> <p>Purpose of Disbursement Debt Retirement</p> <p>Candidate Name Mr. Bill Flores</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: TX District: 17</p>	<p>Transaction ID: 37682847</p> <p>Date of Disbursement 11 / 18 / 2010</p> <p>Amount of Each Disbursement this Period 2500.00</p> <p>011 Category/ Type</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ General Debt 2010</p> <p>Debt Retirement</p>
<p>C. Full Name (Last, First, Middle Initial) Robert Hurt For Congress</p> <p>Mailing Address PO Box 2</p> <p>City Chatham State VA Zip Code 24531</p> <p>Purpose of Disbursement Debt Retirement</p> <p>Candidate Name Mr. Robert Hurt</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: VA District: 05</p>	<p>Transaction ID: 37682848</p> <p>Date of Disbursement 11 / 18 / 2010</p> <p>Amount of Each Disbursement this Period 2500.00</p> <p>011 Category/ Type</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ General Debt 2010</p> <p>Debt Retirement</p>

SUBTOTAL of Disbursements This Page (optional) ▶

9950.00

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)

PAGE 89 / 484

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

Morgan Griffith For Congress

Mailing Address PO Box 361

City
Christiansburg

State
VA

Zip Code
24068

Purpose of Disbursement
Debt Retirement

Category/
Type

Candidate Name
H Morgan Griffith

Office Sought: House
 Senate
 President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: VA District: 09

General Debt 2010

Transaction ID: 37682849

Date of Disbursement

^M <input type="text" value="1"/>	^M <input type="text" value="1"/>	/	^D <input type="text" value="1"/>	^D <input type="text" value="8"/>	/	^Y <input type="text" value="2"/>	^Y <input type="text" value="0"/>	^Y <input type="text" value="1"/>	^Y <input type="text" value="0"/>
---	---	---	---	---	---	---	---	---	---

Amount of Each Disbursement this Period

<input type="text" value="2500.00"/>

Debt Retirement

SUBTOTAL of Disbursements This Page (optional)

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)
National Rifle Association of America Political Victory Fund

A. Full Name (Last, First, Middle Initial) Wachovia Bank Mailing Address 10501 Main Street City Fairfax State VA Zip Code 22030 Purpose of Disbursement Estimated Federal Taxes Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 37160362 Date of Disbursement 10 / 15 / 2010
	Amount of Each Disbursement this Period 2498.78
	Estimated Federal Taxes
	Category/Type 001

B. Full Name (Last, First, Middle Initial) Bank of America - NY Mailing Address 671 County Route 1 City Pine Island State NY Zip Code 10969 Purpose of Disbursement Account Analysis Fees Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 37311049 Date of Disbursement 10 / 15 / 2010
	Amount of Each Disbursement this Period 756.75
	Account Analysis Fees
	Category/Type 001

C. Full Name (Last, First, Middle Initial) NJI New Media, LLC Mailing Address 201 King Street, Suite 202 City Alexandria State VA Zip Code 22134 Purpose of Disbursement Website Hosting / Service Fee Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 37511703 Date of Disbursement 11 / 04 / 2010
	Amount of Each Disbursement this Period 2600.00
	Website Hosting / Service Fee
	Category/Type 001

SUBTOTAL of Disbursements This Page (optional) ▶	5855.53
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)
National Rifle Association of America Political Victory Fund

<p>A. Full Name (Last, First, Middle Initial) National Rifle Association of America</p> <p>Mailing Address 11250 Waples Mill Road</p> <p>City Fairfax State VA Zip Code 22030</p> <p>Purpose of Disbursement Website Hosting / Service Fee</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 37511704</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="1"/> / <input type="text" value="0"/> <input type="text" value="4"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="0"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="1500.00"/></p> <p>Website Hosting / Service Fee</p>
<p>B. Full Name (Last, First, Middle Initial) Image Direct, LLC</p> <p>Mailing Address 4600 Wedgewood Blvd, Unit N</p> <p>City Frederick State MD Zip Code 21703</p> <p>Purpose of Disbursement NRA-PVF Fundraising Printing & Mailing</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 37514167</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="1"/> / <input type="text" value="0"/> <input type="text" value="4"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="0"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="47110.45"/></p> <p>NRA-PVF Fundraising Printing & Mailing</p>
<p>C. Full Name (Last, First, Middle Initial) Communications Corporation of America</p> <p>Mailing Address 13195 Freedom Way</p> <p>City Boston State VA Zip Code 22713</p> <p>Purpose of Disbursement NRA-PVF Fundraising Printing & Mailing</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 37514168</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="1"/> / <input type="text" value="0"/> <input type="text" value="4"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="0"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="33920.24"/></p> <p>NRA-PVF Fundraising Printing & Mailing</p>

<p>SUBTOTAL of Disbursements This Page (optional)</p>	<p><input type="text" value="82530.69"/></p>
<p>TOTAL This Period (last page this line number only)</p>	<p><input type="text"/></p>

**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)
National Rifle Association of America Political Victory Fund

A. Full Name (Last, First, Middle Initial) Communications Corporation of America <hr/> Mailing Address 13195 Freedom Way <hr/> City Boston State VA Zip Code 22713 <hr/> Purpose of Disbursement NRA-PVF Fundraising Printing & Mailing Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 37514169 Date of Disbursement 11 / 04 / 2010
	Amount of Each Disbursement this Period 49484.76
	Category/ Type 003
	NRA-PVF Fundraising Print- ing & Mailing

B. Full Name (Last, First, Middle Initial) Bank of America - MO <hr/> Mailing Address 1500 St. Louis Avenue <hr/> City St. Louis State MO Zip Code 63106 <hr/> Purpose of Disbursement Bank Fee Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 37531506 Date of Disbursement 10 / 29 / 2010
	Amount of Each Disbursement this Period 12.00
	Category/ Type 001
	Bank Fee

C. Full Name (Last, First, Middle Initial) American Express Company <hr/> Mailing Address P.O. Box 53852 <hr/> City Phoenix State AZ Zip Code 85072 <hr/> Purpose of Disbursement Credit Card Fees Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 37539678 Date of Disbursement 10 / 31 / 2010
	Amount of Each Disbursement this Period 190.39
	Category/ Type 001
	Credit Card Fees

SUBTOTAL of Disbursements This Page (optional) ▶	49687.15
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)

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<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)
National Rifle Association of America Political Victory Fund

A.	Full Name (Last, First, Middle Initial) PAYMENTECH, INC.	Transaction ID: 37539681 Date of Disbursement 10 / 31 / 2010
	Mailing Address 4 NORTHEASTERN BLVD	Amount of Each Disbursement this Period 1490.56
	City SALEM State NH Zip Code 03079	
	Purpose of Disbursement Credit Card Fees	001 Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		Credit Card Fees

B.	Full Name (Last, First, Middle Initial) Image Direct, LLC	Transaction ID: 37552192 Date of Disbursement 11 / 15 / 2010
	Mailing Address 4600 Wedgewood Blvd, Unit N	Amount of Each Disbursement this Period 23492.72
	City Frederick State MD Zip Code 21703	
	Purpose of Disbursement NRA-PVF Fundraising Postage	003 Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		NRA-PVF Fundraising Postage

C.	Full Name (Last, First, Middle Initial) State of Rhode Island - Internal Service Fund	Transaction ID: 37557083 Date of Disbursement 11 / 16 / 2010
	Mailing Address Board of Elections - Campaign Fina 50 Branch Avenue	Amount of Each Disbursement this Period 25.00
	City Providence State RI Zip Code 02904	
	Purpose of Disbursement Late Filing Fee	001 Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		Late Filing Fee

SUBTOTAL of Disbursements This Page (optional) ▶

25008.28

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)
National Rifle Association of America Political Victory Fund

<p>A.</p> <p>Full Name (Last, First, Middle Initial) Wachovia Bank</p> <p>Mailing Address 10501 Main Street</p> <p>City Fairfax State VA Zip Code 22030</p> <p>Purpose of Disbursement Credit Card Fees</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 37711414</p> <p>Date of Disbursement 11 / 01 / 2010</p> <p>Amount of Each Disbursement this Period 10.00</p> <p>001 Category/ Type</p> <p>Credit Card Fees</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) Wachovia Bank</p> <p>Mailing Address 10501 Main Street</p> <p>City Fairfax State VA Zip Code 22030</p> <p>Purpose of Disbursement Credit Card Fees</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 37711415</p> <p>Date of Disbursement 11 / 02 / 2010</p> <p>Amount of Each Disbursement this Period 131.43</p> <p>001 Category/ Type</p> <p>Credit Card Fees</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) American Express Company</p> <p>Mailing Address P.O. Box 53852</p> <p>City Phoenix State AZ Zip Code 85072</p> <p>Purpose of Disbursement Credit Card Fees</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 37711416</p> <p>Date of Disbursement 11 / 22 / 2010</p> <p>Amount of Each Disbursement this Period 10.79</p> <p>001 Category/ Type</p> <p>Credit Card Fees</p>

SUBTOTAL of Disbursements This Page (optional) ▶

152.22

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)

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<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)
National Rifle Association of America Political Victory Fund

A.	Full Name (Last, First, Middle Initial) PAYMENTECH, INC.	Transaction ID: 37711417 Date of Disbursement 11 / 22 / 2010
	Mailing Address 4 NORTHEASTERN BLVD	Amount of Each Disbursement this Period 62.31
	City SALEM State NH Zip Code 03079	
	Purpose of Disbursement Credit Card Fees	001 Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		Credit Card Fees

B.	Full Name (Last, First, Middle Initial) Wachovia - Account Analysis	Transaction ID: 37711418 Date of Disbursement 11 / 09 / 2010
	Mailing Address P.O. Box 2080	Amount of Each Disbursement this Period 15.24
	City Jacksonville State FL Zip Code 32231	
	Purpose of Disbursement Account Analysis Fees	001 Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		Account Analysis Fees

C.	Full Name (Last, First, Middle Initial) Wachovia - Account Analysis	Transaction ID: 37711419 Date of Disbursement 11 / 09 / 2010
	Mailing Address P.O. Box 2080	Amount of Each Disbursement this Period 920.37
	City Jacksonville State FL Zip Code 32231	
	Purpose of Disbursement Account Analysis Fees	001 Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		Account Analysis Fees

SUBTOTAL of Disbursements This Page (optional) ▶

997.92

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)

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<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)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

Wachovia - Account Analysis

Mailing Address P.O. Box 2080

City Jacksonville State FL Zip Code 32231

Purpose of Disbursement
Account Analysis Fees

Candidate Name

001
Category/
Type

Office Sought: House
 Senate
 President

State: District:

Disbursement For: Primary General
 Other (specify) ▼

Transaction ID: 37711420

Date of Disbursement

11 / 09 / 2010

Amount of Each Disbursement this Period

7.64

Account Analysis Fees

B.

Full Name (Last, First, Middle Initial)

Wachovia - Account Analysis

Mailing Address P.O. Box 2080

City Jacksonville State FL Zip Code 32231

Purpose of Disbursement
Account Analysis Fees

Candidate Name

001
Category/
Type

Office Sought: House
 Senate
 President

State: District:

Disbursement For: Primary General
 Other (specify) ▼

Transaction ID: 37711421

Date of Disbursement

11 / 09 / 2010

Amount of Each Disbursement this Period

1029.94

Account Analysis Fees

SUBTOTAL of Disbursements This Page (optional)

1037.58

TOTAL This Period (last page this line number only)

165269.37

**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 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

<p>A. Full Name (Last, First, Middle Initial) McCarthy for Iowa</p> <p>Mailing Address 5220 SE 31st Court</p> <p>City Des Moines State IA Zip Code 50320</p> <p>Purpose of Disbursement Kevin McCarthy, STATE HOUSE 67th IA</p> <p>Candidate Name IA Rep. Kevin McCarthy</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IA District: 67</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 37179007 Date of Disbursement 10 / 15 / 2010</p> <p>Amount of Each Disbursement this Period 1000.00</p> <p>Kevin McCarthy, STATE HOU- SE 67th IA</p>
<p>B. Full Name (Last, First, Middle Initial) Worthan for Iowa House</p> <p>Mailing Address 5647 105th Avenue</p> <p>City Storm Lake State IA Zip Code 50588</p> <p>Purpose of Disbursement Gary Worthan, STATE HOUSE 52nd IA</p> <p>Candidate Name IA Rep. Gary Worthan</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IA District: 52</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 37179008 Date of Disbursement 10 / 15 / 2010</p> <p>Amount of Each Disbursement this Period 250.00</p> <p>Gary Worthan, STATE HOUSE 52nd IA</p>
<p>C. Full Name (Last, First, Middle Initial) Sweeney for Statehouse</p> <p>Mailing Address 21547 Highway S27</p> <p>City Alden State IA Zip Code 50006</p> <p>Purpose of Disbursement Annette Sweeney, STATE HOUSE 44th IA</p> <p>Candidate Name IA Rep. Annette Sweeney</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IA District: 44</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 37179009 Date of Disbursement 10 / 15 / 2010</p> <p>Amount of Each Disbursement this Period 250.00</p> <p>Annette Sweeney, STATE HO- USE 44th IA</p>

SUBTOTAL of Disbursements This Page (optional) ▶

1500.00

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 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
National Rifle Association of America Political Victory Fund

A. Full Name (Last, First, Middle Initial) Swaim for House <hr/> Mailing Address 108 E. Jefferson <hr/> City Bloomfield State IA Zip Code 52537 <hr/> Purpose of Disbursement Kurt Swaim, STATE HOUSE 94th IA Candidate Name IA Rep. Kurt Swaim <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IA District: 94 <hr/> Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 37179010 Date of Disbursement 10 / 15 / 2010
	Amount of Each Disbursement this Period 500.00
	011 Category/ Type
	Kurt Swaim, STATE HOUSE 94th IA

B. Full Name (Last, First, Middle Initial) Shomshor for Iowa House <hr/> Mailing Address 3018 Avenue M <hr/> City Council Bluff State IA Zip Code 51501 <hr/> Purpose of Disbursement Paul Shomshor, STATE HOUSE 100th IA Candidate Name IA Rep. Paul Shomshor, Jr. <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IA District: 00 <hr/> Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 37179011 Date of Disbursement 10 / 15 / 2010
	Amount of Each Disbursement this Period 250.00
	011 Category/ Type
	Paul Shomshor, STATE HOUSE 100th IA

C. Full Name (Last, First, Middle Initial) Reasoner for State Representative <hr/> Mailing Address 702 New York Avenue <hr/> City Creston State IA Zip Code 50801 <hr/> Purpose of Disbursement Michael Reasoner, STATE HOUSE 95th IA Candidate Name IA Rep. Michael Reasoner <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IA District: 95 <hr/> Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 37179012 Date of Disbursement 10 / 15 / 2010
	Amount of Each Disbursement this Period 250.00
	011 Category/ Type
	Michael Reasoner, STATE HOUSE 95th IA

SUBTOTAL of Disbursements This Page (optional) ▶	1000.00
TOTAL This Period (last page this line number only) ▶	[]

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
National Rifle Association of America Political Victory Fund

<p>A. Full Name (Last, First, Middle Initial) Rayhons for Representative</p> <p>Mailing Address 610 Fair Way Circle</p> <p>City Garner State IA Zip Code 50438</p> <p>Purpose of Disbursement HENRY RAYHONS, STATE HOUSE 11th IA</p> <p>Candidate Name HENRY RAYHONS</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IA District: 11</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 37179013 Date of Disbursement 10 / 15 / 2010</p> <p>Amount of Each Disbursement this Period 250.00</p> <p>HENRY RAYHONS, STATE HOUSE 11th IA</p>
<p>B. Full Name (Last, First, Middle Initial) Raecker for Representative Committee</p> <p>Mailing Address 9011 Iltis Drive</p> <p>City Urbandale State IA Zip Code 50322</p> <p>Purpose of Disbursement SCOTT RAECKER, STATE HOUSE 63rd IA</p> <p>Candidate Name SCOTT RAECKER</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IA District: 63</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 37179014 Date of Disbursement 10 / 15 / 2010</p> <p>Amount of Each Disbursement this Period 250.00</p> <p>SCOTT RAECKER, STATE HOUSE 63rd IA</p>
<p>C. Full Name (Last, First, Middle Initial) People for Roger Thomas</p> <p>Mailing Address 17658 Domino Road</p> <p>City Elkaker State IA Zip Code 52043</p> <p>Purpose of Disbursement Roger Thomas, STATE HOUSE 24th IA</p> <p>Candidate Name IA Rep. Roger Thomas</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IA District: 24</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 37179015 Date of Disbursement 10 / 15 / 2010</p> <p>Amount of Each Disbursement this Period 250.00</p> <p>Roger Thomas, STATE HOUSE 24th IA</p>

SUBTOTAL of Disbursements This Page (optional) ▶

750.00

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)

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<input 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
National Rifle Association of America Political Victory Fund

A.	Full Name (Last, First, Middle Initial) Marek for State Representative Mailing Address 1741 Riverside Road City Riverside State IA Zip Code 52327 Purpose of Disbursement Larry Marek, STATE HOUSE 89th IA Candidate Name IA Rep. Larry Marek Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IA District: 89 Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 37179016 Date of Disbursement 10 / 15 / 2010	Amount of Each Disbursement this Period 250.00 Larry Marek, STATE HOUSE 89th IA
B.	Full Name (Last, First, Middle Initial) Jeff Kaufmann for State Representative Mailing Address 2125 Old Muscatine Road City Wilton State IA Zip Code 52778 Purpose of Disbursement Jeff Kaufmann, STATE HOUSE 79th IA Candidate Name IA Rep. Jeff Kaufmann Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IA District: 79 Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 37179017 Date of Disbursement 10 / 15 / 2010	Amount of Each Disbursement this Period 500.00 Jeff Kaufmann, STATE HOUSE 79th IA
C.	Full Name (Last, First, Middle Initial) Geri D. Huser for State Representative Mailing Address 213 7th Street, NW City Altoona State IA Zip Code 50009 Purpose of Disbursement GERI HUSER, STATE HOUSE 42nd IA Candidate Name GERI HUSER Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IA District: 42 Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 37179018 Date of Disbursement 10 / 15 / 2010	Amount of Each Disbursement this Period 250.00 GERI HUSER, STATE HOUSE 42nd IA

SUBTOTAL of Disbursements This Page (optional) ▶

1000.00

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

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

Use separate schedule(s)
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FOR LINE NUMBER:
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<input 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
National Rifle Association of America Political Victory Fund

<p>A. Full Name (Last, First, Middle Initial) Hagenow for Iowa House</p> <p>Mailing Address 1915 69th Street</p> <p>City Windsor Heights State IA Zip Code 50324</p> <p>Purpose of Disbursement Chris Hagenow, STATE HOUSE 59th IA</p> <p>Candidate Name IA Rep. Chris Hagenow</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IA District: 59</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 37179019 Date of Disbursement 10 / 15 / 2010</p> <p>Amount of Each Disbursement this Period 250.00</p> <p>Chris Hagenow, STATE HOUSE 59th IA</p>
<p>B. Full Name (Last, First, Middle Initial) Doris Kelley for State House</p> <p>Mailing Address 1922 Mayfair Street</p> <p>City Waterloo State IA Zip Code 50701</p> <p>Purpose of Disbursement Doris Kelley, STATE HOUSE 20th IA</p> <p>Candidate Name IA Rep. Doris Kelley</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IA District: 20</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 37179020 Date of Disbursement 10 / 15 / 2010</p> <p>Amount of Each Disbursement this Period 250.00</p> <p>Doris Kelley, STATE HOUSE 20th IA</p>
<p>C. Full Name (Last, First, Middle Initial) Deyoe for House</p> <p>Mailing Address 911 Shagbark Drive</p> <p>City Nevada State IA Zip Code 50201</p> <p>Purpose of Disbursement David Deyoe, STATE HOUSE 10th IA</p> <p>Candidate Name IA Rep. David Deyoe</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IA District: 10</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 37179021 Date of Disbursement 10 / 15 / 2010</p> <p>Amount of Each Disbursement this Period 500.00</p> <p>David Deyoe, STATE HOUSE 10th IA</p>

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1000.00

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SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

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NAME OF COMMITTEE (In Full)
National Rifle Association of America Political Victory Fund

<p>A. Full Name (Last, First, Middle Initial) Citizens for Gronstal</p> <p>Mailing Address 220 Bennett Avenue</p> <p>City Council Bluffs State IA Zip Code 51503</p> <p>Purpose of Disbursement MICHAEL GRONSTAL, STATE SENATE 50th IA</p> <p>Candidate Name MICHAEL GRONSTAL</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: IA District:</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 37179022 Date of Disbursement: 10 / 15 / 2010</p> <p>Amount of Each Disbursement this Period 1000.00</p> <p>011 Category/Type</p> <p>MICHAEL GRONSTAL, STATE SENATE 50th IA</p>
<p>B. Full Name (Last, First, Middle Initial) Kettering Campaign</p> <p>Mailing Address 275 Crescent Park Drive</p> <p>City Lake View State IA Zip Code 51450</p> <p>Purpose of Disbursement Steve Kettering, STATE SENATE 26th IA</p> <p>Candidate Name IA Sen. Steve Kettering</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: IA District:</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 37179023 Date of Disbursement: 10 / 15 / 2010</p> <p>Amount of Each Disbursement this Period 500.00</p> <p>011 Category/Type</p> <p>Steve Kettering, STATE SENATE 26th IA</p>
<p>C. Full Name (Last, First, Middle Initial) McKinley for Iowa</p> <p>Mailing Address 21884 483rd Lane</p> <p>City Chariton State IA Zip Code 50049</p> <p>Purpose of Disbursement PAUL McKINLEY, STATE SENATE 36th IA</p> <p>Candidate Name PAUL McKINLEY</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: IA District:</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 37179024 Date of Disbursement: 10 / 15 / 2010</p> <p>Amount of Each Disbursement this Period 1000.00</p> <p>011 Category/Type</p> <p>PAUL McKINLEY, STATE SENATE 36th IA</p>

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2500.00

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**SCHEDULE B (FEC Form 3X)
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<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
National Rifle Association of America Political Victory Fund

<p>A. Full Name (Last, First, Middle Initial) Bailey for State House</p> <p>Mailing Address P.O. Box 64</p> <p>City Webster City State IA Zip Code 50595</p> <p>Purpose of Disbursement McKinley Bailey, STATE HOUSE 9th IA</p> <p>Candidate Name IA Rep. McKinley Bailey</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IA District: 09</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 37179028 Date of Disbursement 10 / 15 / 2010</p> <p>Amount of Each Disbursement this Period 250.00</p> <p>McKinley Bailey, STATE HO- USE 9th IA</p>
<p>B. Full Name (Last, First, Middle Initial) Brian J. Quirk for State Representative</p> <p>Mailing Address 1011 Sunset Street</p> <p>City New Hampton State IA Zip Code 50659</p> <p>Purpose of Disbursement Brian Quirk, STATE HOUSE 15th IA</p> <p>Candidate Name IA Rep. Brian Quirk</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IA District: 15</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 37179029 Date of Disbursement 10 / 15 / 2010</p> <p>Amount of Each Disbursement this Period 500.00</p> <p>Brian Quirk, STATE HOUSE 15th IA</p>
<p>C. Full Name (Last, First, Middle Initial) Campaign to Elect Jim Van Engelenhoven</p> <p>Mailing Address 2309 Keokuk Drive</p> <p>City Pella State IA Zip Code 50219</p> <p>Purpose of Disbursement Jim Van Engelenhoven, STATE HOUSE 71st IA</p> <p>Candidate Name Representa Jim Van Engelenhoven</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IA District: 71</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 37179030 Date of Disbursement 10 / 15 / 2010</p> <p>Amount of Each Disbursement this Period 250.00</p> <p>Jim Van Engelenhoven, STA- TE HOUSE 71st IA</p>

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

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

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NAME OF COMMITTEE (In Full)
National Rifle Association of America Political Victory Fund

<p>A. Full Name (Last, First, Middle Initial) Committee to Elect Nathan Reichert</p> <p>Mailing Address 1155 Iowa Avenue</p> <p>City Muscatine State IA Zip Code 52761</p> <p>Purpose of Disbursement Nathan Reichert, STATE HOUSE 80th IA</p> <p>Candidate Name IA Rep. Nathan Reichert</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IA District: 80</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 37179031 Date of Disbursement 10 / 15 / 2010</p> <p>Amount of Each Disbursement this Period 250.00</p> <p>Nathan Reichert, STATE HOUSE 80th IA</p>
<p>B. Full Name (Last, First, Middle Initial) Concerned Taxpayer for Schulte</p> <p>Mailing Address 1734 Chestnut Lane, NE</p> <p>City Cedar Rapids State IA Zip Code 52402</p> <p>Purpose of Disbursement Renee Schulte, STATE HOUSE 37th IA</p> <p>Candidate Name IA Rep. Renee Schulte</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IA District: 37</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 37179032 Date of Disbursement 10 / 15 / 2010</p> <p>Amount of Each Disbursement this Period 250.00</p> <p>Renee Schulte, STATE HOUSE 37th IA</p>
<p>C. Full Name (Last, First, Middle Initial) Tom Corbett for Governor</p> <p>Mailing Address P.O. Box 1145</p> <p>City Harrisburg State PA Zip Code 17108</p> <p>Purpose of Disbursement Tom Corbett, GOVERNOR PA</p> <p>Candidate Name Tom Corbett</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 37179033 Date of Disbursement 10 / 15 / 2010</p> <p>Amount of Each Disbursement this Period 2000.00</p> <p>Tom Corbett, GOVERNOR PA</p>

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2500.00

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

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

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NAME OF COMMITTEE (In Full)
National Rifle Association of America Political Victory Fund

A.	Full Name (Last, First, Middle Initial) Beezley for House District 33 Mailing Address 2698 Creekside Drive City Erie State CO Zip Code 80023 Purpose of Disbursement Don Beezley, STATE HOUSE 33rd CO Candidate Name Don Beezley Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: CO District: 33	Transaction ID: 37179034 Date of Disbursement 10 / 15 / 2010	Amount of Each Disbursement this Period 200.00 Don Beezley, STATE HOUSE 33rd CO
B.	Full Name (Last, First, Middle Initial) Committee to Elect Keith Swerdfeger Mailing Address 1223 S. Skyline Lane City Pueblo West State CO Zip Code 81007 Purpose of Disbursement Kieth Swerdfeger, STATE HOUSE 47th CO Candidate Name Kieth Swerdfeger Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: CO District: 47	Transaction ID: 37179035 Date of Disbursement 10 / 15 / 2010	Amount of Each Disbursement this Period 200.00 Kieth Swerdfeger, STATE HOUSE 47th CO
C.	Full Name (Last, First, Middle Initial) Committee to Elect Mark Barker Mailing Address 1670-F East Cheyenne Mountain Blvd City Colorado Springs State CO Zip Code 80906 Purpose of Disbursement Mark Barker, STATE HOUSE 17th CO Candidate Name Mark Barker Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: CO District: 17	Transaction ID: 37179036 Date of Disbursement 10 / 15 / 2010	Amount of Each Disbursement this Period 200.00 Mark Barker, STATE HOUSE 17th CO

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NAME OF COMMITTEE (In Full)
National Rifle Association of America Political Victory Fund

<p>A. Full Name (Last, First, Middle Initial) Friends of Kevin Priola</p> <p>Mailing Address 12255 Ursula Street</p> <p>City Henderson State CO Zip Code 80640</p> <p>Purpose of Disbursement Kevin Priola, STATE HOUSE 30th CO</p> <p>Candidate Name Kevin Priola</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CO District: 30</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 37179037 Date of Disbursement 10 / 15 / 2010</p> <p>Amount of Each Disbursement this Period 200.00</p> <p>Kevin Priola, STATE HOUSE 30th CO</p>
<p>B. Full Name (Last, First, Middle Initial) Kathleen Conti for Colorado House</p> <p>Mailing Address 7820 S. Hill Circle</p> <p>City Littleton State CO Zip Code 80120</p> <p>Purpose of Disbursement Kathleen Conti, STATE HOUSE 38th CO</p> <p>Candidate Name Kathleen Conti</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CO District: 38</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 37179038 Date of Disbursement 10 / 15 / 2010</p> <p>Amount of Each Disbursement this Period 200.00</p> <p>Kathleen Conti, STATE HOU- SE 38th CO</p>
<p>C. Full Name (Last, First, Middle Initial) Libby Szabo for House District 27</p> <p>Mailing Address P.O. Box 746048</p> <p>City Arvada State CO Zip Code 80006</p> <p>Purpose of Disbursement Libby Szabo, STATE HOUSE 27th CO</p> <p>Candidate Name Libby Szabo</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CO District: 27</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 37179039 Date of Disbursement 10 / 15 / 2010</p> <p>Amount of Each Disbursement this Period 200.00</p> <p>Libby Szabo, STATE HOUSE 27th CO</p>

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SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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NAME OF COMMITTEE (In Full)
National Rifle Association of America Political Victory Fund

<p>A. Full Name (Last, First, Middle Initial) Ramirez for Colorado</p> <p>Mailing Address P.O. Box 740488</p> <p>City Arvada State CO Zip Code 80006-0488</p> <p>Purpose of Disbursement Robert Ramirez, STATE HOUSE 29th CO</p> <p>Candidate Name Robert Ramirez</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CO District: 29</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 37179040 Date of Disbursement: 10 / 15 / 2010</p> <p>Amount of Each Disbursement this Period 200.00</p> <p>011 Category/ Type</p> <p>Robert Ramirez, STATE HOUSE 29th CO</p>
<p>B. Full Name (Last, First, Middle Initial) Committee to Elect John Odom</p> <p>Mailing Address P.O. Box 2123</p> <p>City Wheat Ridge State CO Zip Code 80034</p> <p>Purpose of Disbursement John Odom, STATE SENATE 20th CO</p> <p>Candidate Name John Odom</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: CO District:</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 37179041 Date of Disbursement: 10 / 15 / 2010</p> <p>Amount of Each Disbursement this Period 200.00</p> <p>011 Category/ Type</p> <p>John Odom, STATE SENATE 20th CO</p>
<p>C. Full Name (Last, First, Middle Initial) Ellen Roberts for State Senate</p> <p>Mailing Address P.O. Box 3373</p> <p>City Durango State CO Zip Code 81302</p> <p>Purpose of Disbursement Ellen Roberts, STATE SENATE 6th CO</p> <p>Candidate Name Ellen Roberts</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: CO District:</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 37179042 Date of Disbursement: 10 / 15 / 2010</p> <p>Amount of Each Disbursement this Period 200.00</p> <p>011 Category/ Type</p> <p>Ellen Roberts, STATE SENATE 6th CO</p>

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600.00

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NAME OF COMMITTEE (In Full)
National Rifle Association of America Political Victory Fund

A. Full Name (Last, First, Middle Initial) Rankin for Senate Mailing Address P.O. Box 3859 City Basalt State CO Zip Code 81621 Purpose of Disbursement Bob Rankin, STATE SENATE 5th CO Candidate Name Bob Rankin Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: CO District: Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 37179043 Date of Disbursement 10 / 15 / 2010
	Amount of Each Disbursement this Period 200.00 Bob Rankin, STATE SENATE 5th CO

B. Full Name (Last, First, Middle Initial) Tim Leonard for State Senate Mailing Address P.O. Box 1175 City Kittredge State CO Zip Code 80457 Purpose of Disbursement Tim Leonard, STATE SENATE 16th CO Candidate Name Tim Leonard Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: CO District: Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 37179044 Date of Disbursement 10 / 15 / 2010
	Amount of Each Disbursement this Period 200.00 Tim Leonard, STATE SENATE 16th CO

C. Full Name (Last, First, Middle Initial) Beezley for House District 33 Mailing Address 2698 Creekside Drive City Erie State CO Zip Code 80023 Purpose of Disbursement Don Beezley, STATE HOUSE 33rd CO Candidate Name Don Beezley Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CO District: 33 Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 37179045 Date of Disbursement 10 / 15 / 2010
	Amount of Each Disbursement this Period 200.00 Don Beezley, STATE HOUSE 33rd CO

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
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NAME OF COMMITTEE (In Full)
National Rifle Association of America Political Victory Fund

<p>A. Full Name (Last, First, Middle Initial) Committee to Elect Keith Swerdfeger</p> <p>Mailing Address 1223 S. Skyline Lane</p> <p>City Pueblo West State CO Zip Code 81007</p> <p>Purpose of Disbursement Kieth Swerdfeger, STATE HOUSE 47th CO</p> <p>Candidate Name Kieth Swerdfeger</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CO District: 47</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 37179046 Date of Disbursement 10 / 15 / 2010</p> <p>Amount of Each Disbursement this Period 200.00</p> <p>Kieth Swerdfeger, STATE HOUSE 47th CO</p>
<p>B. Full Name (Last, First, Middle Initial) Committee to Elect Mark Barker</p> <p>Mailing Address 1670-F East Cheyenne Mountain Blvd</p> <p>City Colorado Springs State CO Zip Code 80906</p> <p>Purpose of Disbursement Mark Barker, STATE HOUSE 17th CO</p> <p>Candidate Name Mark Barker</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CO District: 17</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 37179047 Date of Disbursement 10 / 15 / 2010</p> <p>Amount of Each Disbursement this Period 200.00</p> <p>Mark Barker, STATE HOUSE 17th CO</p>
<p>C. Full Name (Last, First, Middle Initial) Friends of Kevin Priola</p> <p>Mailing Address 12255 Ursula Street</p> <p>City Henderson State CO Zip Code 80640</p> <p>Purpose of Disbursement Kevin Priola, STATE HOUSE 30th CO</p> <p>Candidate Name Kevin Priola</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CO District: 30</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 37179048 Date of Disbursement 10 / 15 / 2010</p> <p>Amount of Each Disbursement this Period 200.00</p> <p>Kevin Priola, STATE HOUSE 30th CO</p>

SUBTOTAL of Disbursements This Page (optional) ▶

600.00

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 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
National Rifle Association of America Political Victory Fund

A.	Full Name (Last, First, Middle Initial) Kathleen Conti for Colorado House Mailing Address 7820 S. Hill Circle City Littleton State CO Zip Code 80120 Purpose of Disbursement Kathleen Conti, STATE HOUSE 38th CO Candidate Name Kathleen Conti Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CO District: 38 Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 37179049 Date of Disbursement 10 / 15 / 2010 Amount of Each Disbursement this Period 200.00 Kathleen Conti, STATE HOUSE 38th CO	011 Category/ Type
B.	Full Name (Last, First, Middle Initial) Libby Szabo for House District 27 Mailing Address P.O. Box 746048 City Arvada State CO Zip Code 80006 Purpose of Disbursement Libby Szabo, STATE HOUSE 27th CO Candidate Name Libby Szabo Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CO District: 27 Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 37179050 Date of Disbursement 10 / 15 / 2010 Amount of Each Disbursement this Period 200.00 Libby Szabo, STATE HOUSE 27th CO	011 Category/ Type
C.	Full Name (Last, First, Middle Initial) Ramirez for Colorado Mailing Address P.O. Box 740488 City Arvada State CO Zip Code 80006-0488 Purpose of Disbursement Robert Ramirez, STATE HOUSE 29th CO Candidate Name Robert Ramirez Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CO District: 29 Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 37179051 Date of Disbursement 10 / 15 / 2010 Amount of Each Disbursement this Period 200.00 Robert Ramirez, STATE HOUSE 29th CO	011 Category/ Type

SUBTOTAL of Disbursements This Page (optional)	600.00
TOTAL This Period (last page this line number only)	

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

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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
National Rifle Association of America Political Victory Fund

<p>A. Full Name (Last, First, Middle Initial) Committee to Elect John Odom</p> <p>Mailing Address P.O. Box 2123</p> <p>City Wheat Ridge State CO Zip Code 80034</p> <p>Purpose of Disbursement John Odom, STATE SENATE 20th CO</p> <p>Candidate Name John Odom</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: CO District:</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 37179052 Date of Disbursement 10 / 15 / 2010</p> <p>Amount of Each Disbursement this Period 200.00</p> <p>John Odom, STATE SENATE 20th CO</p>
<p>B. Full Name (Last, First, Middle Initial) Ellen Roberts for State Senate</p> <p>Mailing Address P.O. Box 3373</p> <p>City Durango State CO Zip Code 81302</p> <p>Purpose of Disbursement Ellen Roberts, STATE SENATE 6th CO</p> <p>Candidate Name Ellen Roberts</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: CO District:</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 37179053 Date of Disbursement 10 / 15 / 2010</p> <p>Amount of Each Disbursement this Period 200.00</p> <p>Ellen Roberts, STATE SENA- TE 6th CO</p>
<p>C. Full Name (Last, First, Middle Initial) Rankin for Senate</p> <p>Mailing Address P.O. Box 3859</p> <p>City Basalt State CO Zip Code 81621</p> <p>Purpose of Disbursement Bob Rankin, STATE SENATE 5th CO</p> <p>Candidate Name Bob Rankin</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: CO District:</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 37179054 Date of Disbursement 10 / 15 / 2010</p> <p>Amount of Each Disbursement this Period 200.00</p> <p>Bob Rankin, STATE SENATE 5th CO</p>

SUBTOTAL of Disbursements This Page (optional) ►

600.00

TOTAL This Period (last page this line number only) ►

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
National Rifle Association of America Political Victory Fund

<p>A. Full Name (Last, First, Middle Initial) Tim Leonard for State Senate</p> <p>Mailing Address P.O. Box 1175</p> <p>City Kittredge State CO Zip Code 80457</p> <p>Purpose of Disbursement Tim Leonard, STATE SENATE 16th CO</p> <p>Candidate Name Tim Leonard</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: CO District:</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 37179055 Date of Disbursement 10 / 15 / 2010</p> <p>Amount of Each Disbursement this Period 200.00</p> <p>011 Category/ Type</p> <p>Tim Leonard, STATE SENATE 16th CO</p>
<p>B. Full Name (Last, First, Middle Initial) Master Print, Inc.</p> <p>Mailing Address P.O. Box 1467</p> <p>City Newington State VA Zip Code 22122</p> <p>Purpose of Disbursement Independent Expenditure - Print 4 Color Cards</p> <p>Candidate Name Chris Dudley</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 37179103 Date of Disbursement 10 / 15 / 2010</p> <p>Amount of Each Disbursement this Period 999.44</p> <p>011 Category/ Type</p> <p>Independent Expenditure - Print 4 Color Cards</p>
<p>C. Full Name (Last, First, Middle Initial) Prolist Inc.</p> <p>Mailing Address 8341 Beechcraft Avenue</p> <p>City Gaithersburg State MD Zip Code 20879-1509</p> <p>Purpose of Disbursement Independent Expenditure - Postage</p> <p>Candidate Name Mark Barker</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CO District: 17</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 37179106 Date of Disbursement 10 / 15 / 2010</p> <p>Amount of Each Disbursement this Period 209.00</p> <p>011 Category/ Type</p> <p>Independent Expenditure - Postage</p>

SUBTOTAL of Disbursements This Page (optional) ▶

1408.44

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

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
National Rifle Association of America Political Victory Fund

A.	Full Name (Last, First, Middle Initial) Prolist Inc.	Transaction ID: 37179107 Date of Disbursement 10 / 15 / 2010
	Mailing Address 8341 Beechcraft Avenue	Amount of Each Disbursement this Period 379.03
	City Gaithersburg State MD Zip Code 20879-1509	
	Purpose of Disbursement Independent Expenditure - Postage	011 Category/ Type
	Candidate Name Libby Szabo	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CO District: 27	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		Independent Expenditure - Postage

B.	Full Name (Last, First, Middle Initial) Prolist Inc.	Transaction ID: 37179108 Date of Disbursement 10 / 15 / 2010
	Mailing Address 8341 Beechcraft Avenue	Amount of Each Disbursement this Period 332.54
	City Gaithersburg State MD Zip Code 20879-1509	
	Purpose of Disbursement Independent Expenditure - Postage	011 Category/ Type
	Candidate Name Robert Ramirez	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CO District: 29	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		Independent Expenditure - Postage

C.	Full Name (Last, First, Middle Initial) Prolist Inc.	Transaction ID: 37179109 Date of Disbursement 10 / 15 / 2010
	Mailing Address 8341 Beechcraft Avenue	Amount of Each Disbursement this Period 363.84
	City Gaithersburg State MD Zip Code 20879-1509	
	Purpose of Disbursement Independent Expenditure - Postage	011 Category/ Type
	Candidate Name Don Beezley	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CO District: 33	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		Independent Expenditure - Postage

SUBTOTAL of Disbursements This Page (optional)	▶	1075.41
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 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)
Prolist Inc.

Transaction ID: 37179110
Date of Disbursement

Mailing Address 8341 Beechcraft Avenue

M	M	/	D	D	/	Y	Y	Y	Y
1	0		1	5		2	0	1	0

City Gaithersburg State MD Zip Code 20879-1509

Amount of Each Disbursement this Period

345.85

Purpose of Disbursement
Independent Expenditure - Postage

011

Category/
Type

Candidate Name
Kathleen Conti

Office Sought: House
 Senate
 President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: CO District: 38

Independent Expenditure -
Postage

B.

Full Name (Last, First, Middle Initial)
Prolist Inc.

Transaction ID: 37179111
Date of Disbursement

Mailing Address 8341 Beechcraft Avenue

M	M	/	D	D	/	Y	Y	Y	Y
1	0		1	5		2	0	1	0

City Gaithersburg State MD Zip Code 20879-1509

Amount of Each Disbursement this Period

398.14

Purpose of Disbursement
Independent Expenditure - Postage

011

Category/
Type

Candidate Name
Kieth Swerdfeger

Office Sought: House
 Senate
 President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: CO District: 47

Independent Expenditure -
Postage

C.

Full Name (Last, First, Middle Initial)
Prolist Inc.

Transaction ID: 37179112
Date of Disbursement

Mailing Address 8341 Beechcraft Avenue

M	M	/	D	D	/	Y	Y	Y	Y
1	0		1	5		2	0	1	0

City Gaithersburg State MD Zip Code 20879-1509

Amount of Each Disbursement this Period

243.24

Purpose of Disbursement
Independent Expenditure - Postage

011

Category/
Type

Candidate Name
Bob Boswell

Office Sought: House
 Senate
 President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: CO District: 50

Independent Expenditure -
Postage

SUBTOTAL of Disbursements This Page (optional)

987.23

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 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
National Rifle Association of America Political Victory Fund

A. Full Name (Last, First, Middle Initial) Prolist Inc. <hr/> Mailing Address 8341 Beechcraft Avenue <hr/> City Gaithersburg State MD Zip Code 20879-1509 <hr/> Purpose of Disbursement Independent Expenditure - Postage Candidate Name Bob Rankin <hr/> Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: CO District: <hr/> Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 37179113 Date of Disbursement 10 / 15 / 2010 <hr/> Amount of Each Disbursement this Period 733.15 <hr/> Independent Expenditure - Postage
	Category/Type 011
B. Full Name (Last, First, Middle Initial) Prolist Inc. <hr/> Mailing Address 8341 Beechcraft Avenue <hr/> City Gaithersburg State MD Zip Code 20879-1509 <hr/> Purpose of Disbursement Independent Expenditure - Postage Candidate Name Ellen Roberts <hr/> Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: CO District: <hr/> Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 37179114 Date of Disbursement 10 / 15 / 2010 <hr/> Amount of Each Disbursement this Period 816.64 <hr/> Independent Expenditure - Postage
	Category/Type 011
C. Full Name (Last, First, Middle Initial) Prolist Inc. <hr/> Mailing Address 8341 Beechcraft Avenue <hr/> City Gaithersburg State MD Zip Code 20879-1509 <hr/> Purpose of Disbursement Independent Expenditure - Postage Candidate Name Owen Hill <hr/> Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: CO District: <hr/> Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 37179115 Date of Disbursement 10 / 15 / 2010 <hr/> Amount of Each Disbursement this Period 309.68 <hr/> Independent Expenditure - Postage
	Category/Type 011

SUBTOTAL of Disbursements This Page (optional) ▶

1859.47

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

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

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Detailed Summary Page

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<input 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
National Rifle Association of America Political Victory Fund

A. Full Name (Last, First, Middle Initial) Prolist Inc. <hr/> Mailing Address 8341 Beechcraft Avenue <hr/> City Gaithersburg State MD Zip Code 20879-1509 Purpose of Disbursement Independent Expenditure - Postage Candidate Name Tim Leonard Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: CO District: Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 37179116 Date of Disbursement 10 / 15 / 2010 <hr/> Amount of Each Disbursement this Period 655.95 <hr/> Independent Expenditure - Postage
	Category/ Type 011
B. Full Name (Last, First, Middle Initial) Prolist Inc. <hr/> Mailing Address 8341 Beechcraft Avenue <hr/> City Gaithersburg State MD Zip Code 20879-1509 Purpose of Disbursement Independent Expenditure - Postcards Candidate Name Mark Barker Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CO District: 17 Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 37179129 Date of Disbursement 10 / 15 / 2010 <hr/> Amount of Each Disbursement this Period 111.29 <hr/> Independent Expenditure - Postcards
	Category/ Type 011
C. Full Name (Last, First, Middle Initial) Prolist Inc. <hr/> Mailing Address 8341 Beechcraft Avenue <hr/> City Gaithersburg State MD Zip Code 20879-1509 Purpose of Disbursement Independent Expenditure - Postcards Candidate Name Libby Szabo Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CO District: 27 Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 37179130 Date of Disbursement 10 / 15 / 2010 <hr/> Amount of Each Disbursement this Period 207.75 <hr/> Independent Expenditure - Postcards
	Category/ Type 011

SUBTOTAL of Disbursements This Page (optional)	974.99
TOTAL This Period (last page this line number only)	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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(check only one)

<input 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
National Rifle Association of America Political Victory Fund

A.	Full Name (Last, First, Middle Initial) Prolist Inc.	Transaction ID: 37179131	
	Mailing Address 8341 Beechcraft Avenue	Date of Disbursement 10 / 15 / 2010	
	City Gaithersburg State MD Zip Code 20879-1509	Amount of Each Disbursement this Period 181.56	
	Purpose of Disbursement Independent Expenditure - Postcards Candidate Name Robert Ramirez Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CO District: 29 Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	011 Category/ Type Independent Expenditure - Postcards	
B.	Full Name (Last, First, Middle Initial) Prolist Inc.	Transaction ID: 37179132	
	Mailing Address 8341 Beechcraft Avenue	Date of Disbursement 10 / 15 / 2010	
	City Gaithersburg State MD Zip Code 20879-1509	Amount of Each Disbursement this Period 198.98	
	Purpose of Disbursement Independent Expenditure - Postcards Candidate Name Don Beezley Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CO District: 33 Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	011 Category/ Type Independent Expenditure - Postcards	
C.	Full Name (Last, First, Middle Initial) Prolist Inc.	Transaction ID: 37179133	
	Mailing Address 8341 Beechcraft Avenue	Date of Disbursement 10 / 15 / 2010	
	City Gaithersburg State MD Zip Code 20879-1509	Amount of Each Disbursement this Period 188.83	
	Purpose of Disbursement Independent Expenditure - Postcards Candidate Name Kathleen Conti Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CO District: 38 Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	011 Category/ Type Independent Expenditure - Postcards	

SUBTOTAL of Disbursements This Page (optional) ▶

569.37

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

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

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<input 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
National Rifle Association of America Political Victory Fund

A. Full Name (Last, First, Middle Initial) Prolist Inc. <hr/> Mailing Address 8341 Beechcraft Avenue <hr/> City Gaithersburg State MD Zip Code 20879-1509 Purpose of Disbursement Independent Expenditure - Postcards Candidate Name Kieth Swerdfeger Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CO District: 47 Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 37179134 Date of Disbursement 10 / 15 / 2010
	Amount of Each Disbursement this Period 217.44
	Category/ Type 011
	Independent Expenditure - Postcards

B. Full Name (Last, First, Middle Initial) Prolist Inc. <hr/> Mailing Address 8341 Beechcraft Avenue <hr/> City Gaithersburg State MD Zip Code 20879-1509 Purpose of Disbursement Independent Expenditure - Postcards Candidate Name Bob Boswell Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CO District: 50 Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 37179135 Date of Disbursement 10 / 15 / 2010
	Amount of Each Disbursement this Period 131.19
	Category/ Type 011
	Independent Expenditure - Postcards

C. Full Name (Last, First, Middle Initial) Prolist Inc. <hr/> Mailing Address 8341 Beechcraft Avenue <hr/> City Gaithersburg State MD Zip Code 20879-1509 Purpose of Disbursement Independent Expenditure - Postcards Candidate Name Bob Rankin Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: CO District: Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 37179136 Date of Disbursement 10 / 15 / 2010
	Amount of Each Disbursement this Period 400.61
	Category/ Type 011
	Independent Expenditure - Postcards

SUBTOTAL of Disbursements This Page (optional) ▶	749.24
TOTAL This Period (last page this line number only) ▶	(Empty box)

**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)

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<input 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
National Rifle Association of America Political Victory Fund

A.	Full Name (Last, First, Middle Initial) Prolist Inc.	Transaction ID: 37179137 Date of Disbursement 10 / 15 / 2010
	Mailing Address 8341 Beechcraft Avenue	Amount of Each Disbursement this Period 449.83
	City Gaithersburg State MD Zip Code 20879-1509	
	Purpose of Disbursement Independent Expenditure - Postcards	011 Category/ Type
	Candidate Name Ellen Roberts	
	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: CO District:	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		Independent Expenditure - Postcards

B.	Full Name (Last, First, Middle Initial) Prolist Inc.	Transaction ID: 37179138 Date of Disbursement 10 / 15 / 2010
	Mailing Address 8341 Beechcraft Avenue	Amount of Each Disbursement this Period 166.44
	City Gaithersburg State MD Zip Code 20879-1509	
	Purpose of Disbursement Independent Expenditure - Postcards	011 Category/ Type
	Candidate Name Owen Hill	
	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: CO District:	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		Independent Expenditure - Postcards

C.	Full Name (Last, First, Middle Initial) Prolist Inc.	Transaction ID: 37179139 Date of Disbursement 10 / 15 / 2010
	Mailing Address 8341 Beechcraft Avenue	Amount of Each Disbursement this Period 358.79
	City Gaithersburg State MD Zip Code 20879-1509	
	Purpose of Disbursement Independent Expenditure - Postcards	011 Category/ Type
	Candidate Name Tim Leonard	
	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: CO District:	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		Independent Expenditure - Postcards

SUBTOTAL of Disbursements This Page (optional)	975.06
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)

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<input 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
National Rifle Association of America Political Victory Fund

A.	Full Name (Last, First, Middle Initial) OnMessage, Inc.	Transaction ID: 37179142 Date of Disbursement 10 / 14 / 2010
	Mailing Address 2130 Priest Bridge Drive, #11	Amount of Each Disbursement this Period 290053.12
	City Crofton State MD Zip Code 21114	
	Purpose of Disbursement Independent Expenditure - TV Advertising	011 Category/ Type
	Candidate Name Bill Brady	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Independent Expenditure - TV Advertising

B.	Full Name (Last, First, Middle Initial) OnMessage, Inc.	Transaction ID: 37179143 Date of Disbursement 10 / 14 / 2010
	Mailing Address 2130 Priest Bridge Drive, #11	Amount of Each Disbursement this Period 251785.31
	City Crofton State MD Zip Code 21114	
	Purpose of Disbursement Independent Expenditure - TV Advertising	011 Category/ Type
	Candidate Name Tom Corbett	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Independent Expenditure - TV Advertising

C.	Full Name (Last, First, Middle Initial) Paulsen for State House	Transaction ID: 37208206 Date of Disbursement 10 / 19 / 2010
	Mailing Address 1305 Cress Parkway	Amount of Each Disbursement this Period 1000.00
	City Hiawatha State IA Zip Code 52233	
	Purpose of Disbursement Kraig Paulsen, STATE HOUSE 35th IA	011 Category/ Type
	Candidate Name IA Rep. Kraig Paulsen	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: IA District: 35	Kraig Paulsen, STATE HOUSE 35th IA

SUBTOTAL of Disbursements This Page (optional)	542838.43
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)

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<input 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
National Rifle Association of America Political Victory Fund

A. Full Name (Last, First, Middle Initial) Federal Capitol Communications Corporation Mailing Address 1120 G Street, NW Suite 600 City Washington State DC Zip Code 20005 Purpose of Disbursement Independent Expenditure - Graphic Art Design Candidate Name Tom Corbett Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: 37259012 Date of Disbursement 10 / 19 / 2010 Amount of Each Disbursement this Period 437.50 011 Category/ Type Independent Expenditure - Graphic Art Design
	Full Name (Last, First, Middle Initial) Federal Capitol Communications Corporation Mailing Address 1120 G Street, NW Suite 600 City Washington State DC Zip Code 20005 Purpose of Disbursement Independent Expenditure - Graphic Art Design Candidate Name Ted Strickland Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:
C. Full Name (Last, First, Middle Initial) Federal Capitol Communications Corporation Mailing Address 1120 G Street, NW Suite 600 City Washington State DC Zip Code 20005 Purpose of Disbursement Independent Expenditure - Graphic Art Design Candidate Name Chris Dudley Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: 37259955 Date of Disbursement 10 / 19 / 2010 Amount of Each Disbursement this Period 1200.00 011 Category/ Type Independent Expenditure - Graphic Art Design

SUBTOTAL of Disbursements This Page (optional) ►

2075.00

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 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
National Rifle Association of America Political Victory Fund

A. Full Name (Last, First, Middle Initial) Federal Capitol Communications Corporation <hr/> Mailing Address 1120 G Street, NW Suite 600 <hr/> City Washington State DC Zip Code 20005 <hr/> Purpose of Disbursement Independent Expenditure - Graphic Art Design Candidate Name Bill Brady <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: 37260095 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 9 / 2 0 1 0
	Amount of Each Disbursement this Period 1200.00
	Category/ Type 011
	Independent Expenditure - Graphic Art Design
B. Full Name (Last, First, Middle Initial) Federal Capitol Communications Corporation <hr/> Mailing Address 1120 G Street, NW Suite 600 <hr/> City Washington State DC Zip Code 20005 <hr/> Purpose of Disbursement Independent Expenditure - Graphic Art Design Candidate Name Paul LaPage <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: 37260896 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 9 / 2 0 1 0
	Amount of Each Disbursement this Period 1200.00
	Category/ Type 011
	Independent Expenditure - Graphic Art Design
C. Full Name (Last, First, Middle Initial) Federal Capitol Communications Corporation <hr/> Mailing Address 1120 G Street, NW Suite 600 <hr/> City Washington State DC Zip Code 20005 <hr/> Purpose of Disbursement Independent Expenditure - Graphic Art Design Candidate Name Scott Walker <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: 37310692 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 9 / 2 0 1 0
	Amount of Each Disbursement this Period 1200.00
	Category/ Type 011
	Independent Expenditure - Graphic Art Design

SUBTOTAL of Disbursements This Page (optional) ▶	3600.00
TOTAL This Period (last page this line number only) ▶	(Empty box)

**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)

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<input 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
National Rifle Association of America Political Victory Fund

<p>A.</p> <p>Full Name (Last, First, Middle Initial) Federal Capitol Communications Corporation</p> <p>Mailing Address 1120 G Street, NW Suite 600</p> <p>City Washington State DC Zip Code 20005</p> <p>Purpose of Disbursement Independent Expenditure - Graphic Art Design</p> <p>Candidate Name Rick Scott</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: 37310761</p> <p>Date of Disbursement 10 / 19 / 2010</p> <p>Amount of Each Disbursement this Period 958.34</p> <p>011 Category/ Type</p> <p>Independent Expenditure - Graphic Art Design</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) Federal Capitol Communications Corporation</p> <p>Mailing Address 1120 G Street, NW Suite 600</p> <p>City Washington State DC Zip Code 20005</p> <p>Purpose of Disbursement TV Advertising - Credit Unused Airtime</p> <p>Candidate Name Governor Rick Perry</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: 37310988</p> <p>Date of Disbursement 10 / 20 / 2010</p> <p>Amount of Each Disbursement this Period -25301.00</p> <p>011 Category/ Type</p> <p>TV Advertising - Credit Unused Airtime</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) Federal Capitol Communications Corporation</p> <p>Mailing Address 1120 G Street, NW Suite 600</p> <p>City Washington State DC Zip Code 20005</p> <p>Purpose of Disbursement Independent Expenditure - TV & Radio Ads Production Cost - Estimated</p> <p>Candidate Name Governor Rick Perry</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: 37310990</p> <p>Date of Disbursement 10 / 20 / 2010</p> <p>Amount of Each Disbursement this Period 27375.00</p> <p>011 Category/ Type</p> <p>Independent Expenditure - TV & Radio Ads Production Cost - Estimated</p>

SUBTOTAL of Disbursements This Page (optional)	3032.34
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 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
National Rifle Association of America Political Victory Fund

A.	Full Name (Last, First, Middle Initial) Prolist Inc.	Transaction ID: 37342621 Date of Disbursement
	Mailing Address 8341 Beechcraft Avenue	<input type="text" value="10"/> / <input type="text" value="23"/> / <input type="text" value="2010"/>
	City Gaithersburg State MD Zip Code 20879-1509	Amount of Each Disbursement this Period
	Purpose of Disbursement Independent Expenditure - Postage	<input type="text" value="459.36"/>
	Candidate Name Mark Crawford	<input type="text" value="011"/> Category/ Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NC District: 15	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		Independent Expenditure - Postage

B.	Full Name (Last, First, Middle Initial) Prolist Inc.	Transaction ID: 37342622 Date of Disbursement
	Mailing Address 8341 Beechcraft Avenue	<input type="text" value="10"/> / <input type="text" value="23"/> / <input type="text" value="2010"/>
	City Gaithersburg State MD Zip Code 20879-1509	Amount of Each Disbursement this Period
	Purpose of Disbursement Independent Expenditure - Postage	<input type="text" value="502.49"/>
	Candidate Name Timothy D Moffitt	<input type="text" value="011"/> Category/ Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NC District: 16	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		Independent Expenditure - Postage

C.	Full Name (Last, First, Middle Initial) Prolist Inc.	Transaction ID: 37342623 Date of Disbursement
	Mailing Address 8341 Beechcraft Avenue	<input type="text" value="10"/> / <input type="text" value="23"/> / <input type="text" value="2010"/>
	City Gaithersburg State MD Zip Code 20879-1509	Amount of Each Disbursement this Period
	Purpose of Disbursement Independent Expenditure - Postage	<input type="text" value="716.06"/>
	Candidate Name Norman Sanderson	<input type="text" value="011"/> Category/ Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NC District: 03	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		Independent Expenditure - Postage

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="1677.91"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

**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 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
National Rifle Association of America Political Victory Fund

A. Full Name (Last, First, Middle Initial) Prolist Inc. <hr/> Mailing Address 8341 Beechcraft Avenue <hr/> City Gaithersburg State MD Zip Code 20879-1509 Purpose of Disbursement Independent Expenditure - Postage Candidate Name NC Rep. Arthur Williams, III Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NC District: 06 Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 37342624 Date of Disbursement 10 / 23 / 2010
	Amount of Each Disbursement this Period 642.50
	Category/ Type 011
	Independent Expenditure - Postage
B. Full Name (Last, First, Middle Initial) Prolist Inc. <hr/> Mailing Address 8341 Beechcraft Avenue <hr/> City Gaithersburg State MD Zip Code 20879-1509 Purpose of Disbursement Independent Expenditure - Postage Candidate Name Jeffrey L. Collins Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NC District: 25 Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 37342626 Date of Disbursement 10 / 23 / 2010
	Amount of Each Disbursement this Period 671.76
	Category/ Type 011
	Independent Expenditure - Postage
C. Full Name (Last, First, Middle Initial) Prolist Inc. <hr/> Mailing Address 8341 Beechcraft Avenue <hr/> City Gaithersburg State MD Zip Code 20879-1509 Purpose of Disbursement Independent Expenditure - Postage Candidate Name Jackie Warner Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NC District: 45 Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 37342627 Date of Disbursement 10 / 23 / 2010
	Amount of Each Disbursement this Period 422.48
	Category/ Type 011
	Independent Expenditure - Postage

SUBTOTAL of Disbursements This Page (optional) ▶

1736.74

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)

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<input 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
National Rifle Association of America Political Victory Fund

A.	Full Name (Last, First, Middle Initial) Prolist Inc.	Transaction ID: 37342628 Date of Disbursement 10 / 23 / 2010
	Mailing Address 8341 Beechcraft Avenue	Amount of Each Disbursement this Period 579.28
	City Gaithersburg State MD Zip Code 20879-1509	
	Purpose of Disbursement Independent Expenditure - Postage	011 Category/ Type
	Candidate Name Mark Hollo	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NC District: 88	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		Independent Expenditure - Postage

B.	Full Name (Last, First, Middle Initial) Prolist Inc.	Transaction ID: 37342629 Date of Disbursement 10 / 23 / 2010
	Mailing Address 8341 Beechcraft Avenue	Amount of Each Disbursement this Period 1016.31
	City Gaithersburg State MD Zip Code 20879-1509	
	Purpose of Disbursement Independent Expenditure - Postage	011 Category/ Type
	Candidate Name Louis Pate, Jr.	
	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: NC District:	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		Independent Expenditure - Postage

C.	Full Name (Last, First, Middle Initial) Prolist Inc.	Transaction ID: 37342630 Date of Disbursement 10 / 23 / 2010
	Mailing Address 8341 Beechcraft Avenue	Amount of Each Disbursement this Period 1211.59
	City Gaithersburg State MD Zip Code 20879-1509	
	Purpose of Disbursement Independent Expenditure - Postage	011 Category/ Type
	Candidate Name Thom Goolsby	
	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: NC District:	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		Independent Expenditure - Postage

SUBTOTAL of Disbursements This Page (optional)	2807.18
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 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
National Rifle Association of America Political Victory Fund

A.	Full Name (Last, First, Middle Initial) Prolist Inc.	Transaction ID: 37342631 Date of Disbursement 10 / 23 / 2010
	Mailing Address 8341 Beechcraft Avenue	Amount of Each Disbursement this Period 1320.33
	City Gaithersburg State MD Zip Code 20879-1509	
	Purpose of Disbursement Independent Expenditure - Postage Candidate Name Brent Jackson Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: NC District:	011 Category/Type
	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Independent Expenditure - Postage

B.	Full Name (Last, First, Middle Initial) Prolist Inc.	Transaction ID: 37342632 Date of Disbursement 10 / 23 / 2010
	Mailing Address 8341 Beechcraft Avenue	Amount of Each Disbursement this Period 1565.80
	City Gaithersburg State MD Zip Code 20879-1509	
	Purpose of Disbursement Independent Expenditure - Postage Candidate Name NC Sen. David Rouzer Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: NC District:	011 Category/Type
	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Independent Expenditure - Postage

C.	Full Name (Last, First, Middle Initial) Prolist Inc.	Transaction ID: 37342633 Date of Disbursement 10 / 23 / 2010
	Mailing Address 8341 Beechcraft Avenue	Amount of Each Disbursement this Period 1056.71
	City Gaithersburg State MD Zip Code 20879-1509	
	Purpose of Disbursement Independent Expenditure - Postage Candidate Name Wesley Meredith Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: NC District:	011 Category/Type
	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Independent Expenditure - Postage

SUBTOTAL of Disbursements This Page (optional)	3942.84
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)

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<input 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
National Rifle Association of America Political Victory Fund

A.	Full Name (Last, First, Middle Initial) Prolist Inc.	Transaction ID: 37342634 Date of Disbursement 10 / 23 / 2010
	Mailing Address 8341 Beechcraft Avenue	Amount of Each Disbursement this Period 1074.43
	City Gaithersburg State MD Zip Code 20879-1509	
	Purpose of Disbursement Independent Expenditure - Postage	011 Category/ Type
	Candidate Name Richard Gunn	
	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: NC District:	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Prolist Inc.	Transaction ID: 37342635 Date of Disbursement 10 / 23 / 2010
	Mailing Address 8341 Beechcraft Avenue	Amount of Each Disbursement this Period 1499.36
	City Gaithersburg State MD Zip Code 20879-1509	
	Purpose of Disbursement Independent Expenditure - Postage	011 Category/ Type
	Candidate Name Jason Phibbs	
	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: NC District:	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Prolist Inc.	Transaction ID: 37342640 Date of Disbursement 10 / 23 / 2010
	Mailing Address 8341 Beechcraft Avenue	Amount of Each Disbursement this Period 288.67
	City Gaithersburg State MD Zip Code 20879-1509	
	Purpose of Disbursement Independent Expenditure - Postcards	011 Category/ Type
	Candidate Name Mark Crawford	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NC District: 15	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	2862.46
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)

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<input 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
National Rifle Association of America Political Victory Fund

A.	Full Name (Last, First, Middle Initial) Prolist Inc.	Transaction ID: 37342641 Date of Disbursement 10 / 23 / 2010
	Mailing Address 8341 Beechcraft Avenue	Amount of Each Disbursement this Period 315.98
	City Gaithersburg State MD Zip Code 20879-1509	
	Purpose of Disbursement Independent Expenditure - Postcards	011 Category/ Type
	Candidate Name Timothy D Moffitt	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NC District: 16	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		Independent Expenditure - Postcards

B.	Full Name (Last, First, Middle Initial) Prolist Inc.	Transaction ID: 37342642 Date of Disbursement 10 / 23 / 2010
	Mailing Address 8341 Beechcraft Avenue	Amount of Each Disbursement this Period 453.28
	City Gaithersburg State MD Zip Code 20879-1509	
	Purpose of Disbursement Independent Expenditure - Postcards	011 Category/ Type
	Candidate Name Norman Sanderson	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NC District: 03	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		Independent Expenditure - Postcards

C.	Full Name (Last, First, Middle Initial) Prolist Inc.	Transaction ID: 37342643 Date of Disbursement 10 / 23 / 2010
	Mailing Address 8341 Beechcraft Avenue	Amount of Each Disbursement this Period 394.96
	City Gaithersburg State MD Zip Code 20879-1509	
	Purpose of Disbursement Independent Expenditure - Postcards	011 Category/ Type
	Candidate Name NC Rep. Arthur Williams, III	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NC District: 06	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		Independent Expenditure - Postcards

SUBTOTAL of Disbursements This Page (optional)	▶	1164.22
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 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
National Rifle Association of America Political Victory Fund

A.	Full Name (Last, First, Middle Initial) Prolist Inc.	Transaction ID: 37342644 Date of Disbursement
	Mailing Address 8341 Beechcraft Avenue	<input type="text" value="10"/> / <input type="text" value="23"/> / <input type="text" value="2010"/>
	City Gaithersburg State MD Zip Code 20879-1509	Amount of Each Disbursement this Period
	Purpose of Disbursement Independent Expenditure - Postcards	<input type="text" value="427.28"/>
	Candidate Name Jeffrey L. Collins	<input type="text" value="011"/> Category/ Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NC District: 25	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		Independent Expenditure - Postcards

B.	Full Name (Last, First, Middle Initial) Prolist Inc.	Transaction ID: 37342645 Date of Disbursement
	Mailing Address 8341 Beechcraft Avenue	<input type="text" value="10"/> / <input type="text" value="23"/> / <input type="text" value="2010"/>
	City Gaithersburg State MD Zip Code 20879-1509	Amount of Each Disbursement this Period
	Purpose of Disbursement Independent Expenditure - Postcards	<input type="text" value="270.77"/>
	Candidate Name Jackie Warner	<input type="text" value="011"/> Category/ Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NC District: 45	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		Independent Expenditure - Postcards

C.	Full Name (Last, First, Middle Initial) Prolist Inc.	Transaction ID: 37342646 Date of Disbursement
	Mailing Address 8341 Beechcraft Avenue	<input type="text" value="10"/> / <input type="text" value="23"/> / <input type="text" value="2010"/>
	City Gaithersburg State MD Zip Code 20879-1509	Amount of Each Disbursement this Period
	Purpose of Disbursement Independent Expenditure - Postcards	<input type="text" value="367.87"/>
	Candidate Name Mark Hollo	<input type="text" value="011"/> Category/ Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NC District: 88	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		Independent Expenditure - Postcards

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="1065.92"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

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 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
National Rifle Association of America Political Victory Fund

A.	Full Name (Last, First, Middle Initial) Prolist Inc.	Transaction ID: 37342647 Date of Disbursement
	Mailing Address 8341 Beechcraft Avenue	<input type="text" value="10"/> / <input type="text" value="23"/> / <input type="text" value="2010"/>
	City Gaithersburg State MD Zip Code 20879-1509	Amount of Each Disbursement this Period
	Purpose of Disbursement Independent Expenditure - Postcards	<input type="text" value="608.53"/>
	Candidate Name Louis Pate, Jr.	<input type="text" value="011"/> Category/ Type
	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: NC District:	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		Independent Expenditure - Postcards

B.	Full Name (Last, First, Middle Initial) Prolist Inc.	Transaction ID: 37342648 Date of Disbursement
	Mailing Address 8341 Beechcraft Avenue	<input type="text" value="10"/> / <input type="text" value="23"/> / <input type="text" value="2010"/>
	City Gaithersburg State MD Zip Code 20879-1509	Amount of Each Disbursement this Period
	Purpose of Disbursement Independent Expenditure - Postcards	<input type="text" value="721.44"/>
	Candidate Name Thom Goolsby	<input type="text" value="011"/> Category/ Type
	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: NC District:	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		Independent Expenditure - Postcards

C.	Full Name (Last, First, Middle Initial) Prolist Inc.	Transaction ID: 37342649 Date of Disbursement
	Mailing Address 8341 Beechcraft Avenue	<input type="text" value="10"/> / <input type="text" value="23"/> / <input type="text" value="2010"/>
	City Gaithersburg State MD Zip Code 20879-1509	Amount of Each Disbursement this Period
	Purpose of Disbursement Independent Expenditure - Postcards	<input type="text" value="768.44"/>
	Candidate Name Brent Jackson	<input type="text" value="011"/> Category/ Type
	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: NC District:	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		Independent Expenditure - Postcards

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="2098.41"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

**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)

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<input 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
National Rifle Association of America Political Victory Fund

A.	Full Name (Last, First, Middle Initial) Prolist Inc.	Transaction ID: 37342650 Date of Disbursement 10 / 23 / 2010
	Mailing Address 8341 Beechcraft Avenue	Amount of Each Disbursement this Period 937.72
	City Gaithersburg State MD Zip Code 20879-1509	
	Purpose of Disbursement Independent Expenditure - Postcards	011 Category/ Type
	Candidate Name NC Sen. David Rouzer	
	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: NC District:	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		Independent Expenditure - Postcards

B.	Full Name (Last, First, Middle Initial) Prolist Inc.	Transaction ID: 37342651 Date of Disbursement 10 / 23 / 2010
	Mailing Address 8341 Beechcraft Avenue	Amount of Each Disbursement this Period 627.42
	City Gaithersburg State MD Zip Code 20879-1509	
	Purpose of Disbursement Independent Expenditure - Postcards	011 Category/ Type
	Candidate Name Wesley Meredith	
	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: NC District:	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		Independent Expenditure - Postcards

C.	Full Name (Last, First, Middle Initial) Prolist Inc.	Transaction ID: 37342652 Date of Disbursement 10 / 23 / 2010
	Mailing Address 8341 Beechcraft Avenue	Amount of Each Disbursement this Period 629.58
	City Gaithersburg State MD Zip Code 20879-1509	
	Purpose of Disbursement Independent Expenditure - Postcards	011 Category/ Type
	Candidate Name Richard Gunn	
	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: NC District:	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		Independent Expenditure - Postcards

SUBTOTAL of Disbursements This Page (optional)	2194.72
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)

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<input 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
National Rifle Association of America Political Victory Fund

A.	Full Name (Last, First, Middle Initial) Prolist Inc.	Transaction ID: 37342653 Date of Disbursement 10 / 23 / 2010
	Mailing Address 8341 Beechcraft Avenue	Amount of Each Disbursement this Period 896.25
	City Gaithersburg State MD Zip Code 20879-1509	
	Purpose of Disbursement Independent Expenditure - Postcards	011 Category/ Type
	Candidate Name Jason Phibbs	
	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: NC District:	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		Independent Expenditure - Postcards

B.	Full Name (Last, First, Middle Initial) National Rifle Association of America	Transaction ID: 37362634 Date of Disbursement 10 / 27 / 2010
	Mailing Address 11250 Waples Mill Road	Amount of Each Disbursement this Period 563.97
	City Fairfax State VA Zip Code 22030	
	Purpose of Disbursement Independent Expenditure - Salary / Benefits	011 Category/ Type
	Candidate Name Tom Corbett	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		Independent Expenditure - Salary / Benefits

C.	Full Name (Last, First, Middle Initial) National Rifle Association of America	Transaction ID: 37362644 Date of Disbursement 10 / 27 / 2010
	Mailing Address 11250 Waples Mill Road	Amount of Each Disbursement this Period 1097.40
	City Fairfax State VA Zip Code 22030	
	Purpose of Disbursement Independent Expenditure - Salary / Benefits	011 Category/ Type
	Candidate Name Bill Brady	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		Independent Expenditure - Salary / Benefits

SUBTOTAL of Disbursements This Page (optional)	2557.62
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 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
National Rifle Association of America Political Victory Fund

<p>A. Full Name (Last, First, Middle Initial) National Rifle Association of America</p> <p>Mailing Address 11250 Waples Mill Road</p> <p>City Fairfax State VA Zip Code 22030</p> <p>Purpose of Disbursement Independent Expenditure - Salary / Benefits</p> <p>Candidate Name Scott Walker</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 37362659</p> <p>Date of Disbursement 10 / 27 / 2010</p> <p>Amount of Each Disbursement this Period 2189.26</p> <p>011 Category/ Type</p> <p>Independent Expenditure - Salary / Benefits</p>
<p>B. Full Name (Last, First, Middle Initial) Novacon Promotional Products</p> <p>Mailing Address 11100 Pulaski Highway</p> <p>City White Marsh State MD Zip Code 21162</p> <p>Purpose of Disbursement Independent Expenditure - Bumper Stickers</p> <p>Candidate Name Ted Strickland</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 37362696</p> <p>Date of Disbursement 10 / 28 / 2010</p> <p>Amount of Each Disbursement this Period 582.56</p> <p>011 Category/ Type</p> <p>Independent Expenditure - Bumper Stickers</p>
<p>C. Full Name (Last, First, Middle Initial) Novacon Promotional Products</p> <p>Mailing Address 11100 Pulaski Highway</p> <p>City White Marsh State MD Zip Code 21162</p> <p>Purpose of Disbursement Independent Expenditure - Bumper Stickers</p> <p>Candidate Name Scott Walker</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 37362702</p> <p>Date of Disbursement 10 / 28 / 2010</p> <p>Amount of Each Disbursement this Period 240.93</p> <p>011 Category/ Type</p> <p>Independent Expenditure - Bumper Stickers</p>

SUBTOTAL of Disbursements This Page (optional) ▶

3012.75

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)

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<input 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
National Rifle Association of America Political Victory Fund

A.	Full Name (Last, First, Middle Initial) Prolist Inc.	Transaction ID: 37376228 Date of Disbursement 10 / 28 / 2010
	Mailing Address 8341 Beechcraft Avenue	Amount of Each Disbursement this Period 293.11
	City Gaithersburg State MD Zip Code 20879-1509	
	Purpose of Disbursement Independent Expenditure - Phone Data Matching	011 Category/ Type
	Candidate Name Chris Dudley	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Independent Expenditure - Phone Data Matching

B.	Full Name (Last, First, Middle Initial) Prolist Inc.	Transaction ID: 37376229 Date of Disbursement 10 / 28 / 2010
	Mailing Address 8341 Beechcraft Avenue	Amount of Each Disbursement this Period 293.11
	City Gaithersburg State MD Zip Code 20879-1509	
	Purpose of Disbursement Independent Expenditure - Phone Data Matching	011 Category/ Type
	Candidate Name John Kitzhaber	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Independent Expenditure - Phone Data Matching

C.	Full Name (Last, First, Middle Initial) Connection Strategy, LLC	Transaction ID: 37376238 Date of Disbursement 10 / 28 / 2010
	Mailing Address P.O. Box 2192	Amount of Each Disbursement this Period 1004.19
	City Arlington State VA Zip Code 22202	
	Purpose of Disbursement Independent Expenditure - Phone Bank	011 Category/ Type
	Candidate Name Chris Dudley	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Independent Expenditure - Phone Bank

SUBTOTAL of Disbursements This Page (optional)	1590.41
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)

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<input 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
National Rifle Association of America Political Victory Fund

A.	Full Name (Last, First, Middle Initial) Connection Strategy, LLC	Transaction ID: 37376239 Date of Disbursement 10 / 28 / 2010
	Mailing Address P.O. Box 2192	Amount of Each Disbursement this Period 1004.19
	City Arlington State VA Zip Code 22202	
	Purpose of Disbursement Independent Expenditure - Phone Bank	011 Category/ Type
	Candidate Name John Kitzhaber	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Independent Expenditure - Phone Bank
	State: District:	

B.	Full Name (Last, First, Middle Initial) Master Print, Inc.	Transaction ID: 37379220 Date of Disbursement 10 / 29 / 2010
	Mailing Address P.O. Box 1467	Amount of Each Disbursement this Period 4944.90
	City Newington State VA Zip Code 22122	
	Purpose of Disbursement Independent Expenditure - Print 4 Color Cards	011 Category/ Type
	Candidate Name Chris Dudley	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Independent Expenditure - Print 4 Color Cards
	State: District:	

C.	Full Name (Last, First, Middle Initial) Prolist Inc.	Transaction ID: 37379223 Date of Disbursement 10 / 29 / 2010
	Mailing Address 8341 Beechcraft Avenue	Amount of Each Disbursement this Period 33735.87
	City Gaithersburg State MD Zip Code 20879-1509	
	Purpose of Disbursement Independent Expenditure - Postage	011 Category/ Type
	Candidate Name Chris Dudley	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Independent Expenditure - Postage
	State: District:	

SUBTOTAL of Disbursements This Page (optional)	39684.96
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 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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

NAME OF COMMITTEE (In Full)
National Rifle Association of America Political Victory Fund

A.	Full Name (Last, First, Middle Initial) Prolist Inc.	Transaction ID: 37379225 Date of Disbursement 10 / 29 / 2010
	Mailing Address 8341 Beechcraft Avenue	Amount of Each Disbursement this Period 2320.00
	City Gaithersburg State MD Zip Code 20879-1509	Independent Expenditure - Postcards
	Purpose of Disbursement Independent Expenditure - Postcards Candidate Name Chris Dudley Category/Type 011	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	

B.	Full Name (Last, First, Middle Initial) Prolist Inc.	Transaction ID: 37379228 Date of Disbursement 10 / 29 / 2010
	Mailing Address 8341 Beechcraft Avenue	Amount of Each Disbursement this Period 155.69
	City Gaithersburg State MD Zip Code 20879-1509	Independent Expenditure - Postage
	Purpose of Disbursement Independent Expenditure - Postage Candidate Name John R. Pastor Category/Type 011	
	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: MI District:	

C.	Full Name (Last, First, Middle Initial) Prolist Inc.	Transaction ID: 37379229 Date of Disbursement 10 / 29 / 2010
	Mailing Address 8341 Beechcraft Avenue	Amount of Each Disbursement this Period 270.68
	City Gaithersburg State MD Zip Code 20879-1509	Independent Expenditure - Postage
	Purpose of Disbursement Independent Expenditure - Postage Candidate Name Patrick Colbeck Category/Type 011	
	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: MI District:	

SUBTOTAL of Disbursements This Page (optional)	2746.37
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 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
National Rifle Association of America Political Victory Fund

A.	Full Name (Last, First, Middle Initial) Prolist Inc.	Transaction ID: 37379231 Date of Disbursement 10 / 29 / 2010
	Mailing Address 8341 Beechcraft Avenue	Amount of Each Disbursement this Period 144.22
	City Gaithersburg State MD Zip Code 20879-1509	
	Purpose of Disbursement Independent Expenditure - Postage	011 Category/ Type
	Candidate Name MI Rep. Tory Rocca	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MI District: 30	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		Independent Expenditure - Postage

B.	Full Name (Last, First, Middle Initial) Prolist Inc.	Transaction ID: 37379232 Date of Disbursement 10 / 29 / 2010
	Mailing Address 8341 Beechcraft Avenue	Amount of Each Disbursement this Period 379.58
	City Gaithersburg State MD Zip Code 20879-1509	
	Purpose of Disbursement Independent Expenditure - Postage	011 Category/ Type
	Candidate Name MIKE GREEN	
	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: MI District:	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		Independent Expenditure - Postage

C.	Full Name (Last, First, Middle Initial) Prolist Inc.	Transaction ID: 37379233 Date of Disbursement 10 / 29 / 2010
	Mailing Address 8341 Beechcraft Avenue	Amount of Each Disbursement this Period 428.12
	City Gaithersburg State MD Zip Code 20879-1509	
	Purpose of Disbursement Independent Expenditure - Postage	011 Category/ Type
	Candidate Name Tom Casperson	
	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: MI District:	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		Independent Expenditure - Postage

SUBTOTAL of Disbursements This Page (optional)	951.92
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)

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<input 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
National Rifle Association of America Political Victory Fund

A. Full Name (Last, First, Middle Initial) Prolist Inc. <hr/> Mailing Address 8341 Beechcraft Avenue <hr/> City Gaithersburg State MD Zip Code 20879-1509 <hr/> Purpose of Disbursement Independent Expenditure - Postcards Candidate Name John R. Pastor <hr/> Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: MI District: <hr/> Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 37379235 Date of Disbursement 10 / 29 / 2010
	Amount of Each Disbursement this Period 128.68
	Category/ Type 011
	Independent Expenditure - Postcards
B. Full Name (Last, First, Middle Initial) Prolist Inc. <hr/> Mailing Address 8341 Beechcraft Avenue <hr/> City Gaithersburg State MD Zip Code 20879-1509 <hr/> Purpose of Disbursement Independent Expenditure - Postcards Candidate Name Patrick Colbeck <hr/> Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: MI District: <hr/> Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 37379236 Date of Disbursement 10 / 29 / 2010
	Amount of Each Disbursement this Period 229.23
	Category/ Type 011
	Independent Expenditure - Postcards
C. Full Name (Last, First, Middle Initial) Prolist Inc. <hr/> Mailing Address 8341 Beechcraft Avenue <hr/> City Gaithersburg State MD Zip Code 20879-1509 <hr/> Purpose of Disbursement Independent Expenditure - Postcards Candidate Name MI Rep. Tory Rocca <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MI District: 30 <hr/> Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 37379237 Date of Disbursement 10 / 29 / 2010
	Amount of Each Disbursement this Period 121.79
	Category/ Type 011
	Independent Expenditure - Postcards

SUBTOTAL of Disbursements This Page (optional) ▶

479.70

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)

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<input 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
National Rifle Association of America Political Victory Fund

A. Full Name (Last, First, Middle Initial) Prolist Inc. <hr/> Mailing Address 8341 Beechcraft Avenue <hr/> City Gaithersburg State MD Zip Code 20879-1509 <hr/> Purpose of Disbursement Independent Expenditure - Postcards Candidate Name MIKE GREEN <hr/> Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: MI District: <hr/> Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 37379238 Date of Disbursement 10 / 29 / 2010
	Amount of Each Disbursement this Period 318.16
	Category/ Type 011
	Independent Expenditure - Postcards
B. Full Name (Last, First, Middle Initial) Prolist Inc. <hr/> Mailing Address 8341 Beechcraft Avenue <hr/> City Gaithersburg State MD Zip Code 20879-1509 <hr/> Purpose of Disbursement Independent Expenditure - Postcards Candidate Name Tom Casperson <hr/> Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: MI District: <hr/> Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 37379239 Date of Disbursement 10 / 29 / 2010
	Amount of Each Disbursement this Period 374.43
	Category/ Type 011
	Independent Expenditure - Postcards
C. Full Name (Last, First, Middle Initial) Prolist Inc. <hr/> Mailing Address 8341 Beechcraft Avenue <hr/> City Gaithersburg State MD Zip Code 20879-1509 <hr/> Purpose of Disbursement Independent Expenditure - Postage Candidate Name Stefani Carter <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: TX District: 02 <hr/> Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 37379324 Date of Disbursement 10 / 29 / 2010
	Amount of Each Disbursement this Period 208.48
	Category/ Type 011
	Independent Expenditure - Postage

SUBTOTAL of Disbursements This Page (optional) ▶

901.07

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 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
National Rifle Association of America Political Victory Fund

A. Full Name (Last, First, Middle Initial) Prolist Inc. <hr/> Mailing Address 8341 Beechcraft Avenue <hr/> City Gaithersburg State MD Zip Code 20879-1509 <hr/> Purpose of Disbursement Independent Expenditure - Postage Candidate Name TX Rep. Linda Harper-Brown <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: TX District: 05 <hr/> Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 37379325 Date of Disbursement 10 / 29 / 2010
	Amount of Each Disbursement this Period 189.63
	Category/ Type 011
	Independent Expenditure - Postage

B. Full Name (Last, First, Middle Initial) Prolist Inc. <hr/> Mailing Address 8341 Beechcraft Avenue <hr/> City Gaithersburg State MD Zip Code 20879-1509 <hr/> Purpose of Disbursement Independent Expenditure - Postage Candidate Name JOE DRIVER <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: TX District: 13 <hr/> Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 37379326 Date of Disbursement 10 / 29 / 2010
	Amount of Each Disbursement this Period 259.70
	Category/ Type 011
	Independent Expenditure - Postage

C. Full Name (Last, First, Middle Initial) Prolist Inc. <hr/> Mailing Address 8341 Beechcraft Avenue <hr/> City Gaithersburg State MD Zip Code 20879-1509 <hr/> Purpose of Disbursement Independent Expenditure - Postage Candidate Name TX Rep. Jim Murphy <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: TX District: 33 <hr/> Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 37379327 Date of Disbursement 10 / 29 / 2010
	Amount of Each Disbursement this Period 181.93
	Category/ Type 011
	Independent Expenditure - Postage

SUBTOTAL of Disbursements This Page (optional) ▶	631.26
TOTAL This Period (last page this line number only) ▶	(Empty box)

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 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
National Rifle Association of America Political Victory Fund

A.	Full Name (Last, First, Middle Initial) Prolist Inc.	Transaction ID: 37379328
	Mailing Address 8341 Beechcraft Avenue	Date of Disbursement 10 / 29 / 2010
	City Gaithersburg State MD Zip Code 20879-1509	Amount of Each Disbursement this Period 224.57
	Purpose of Disbursement Independent Expenditure - Postage Candidate Name TX Rep. Dwayne Bohac Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: TX District: 38 Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Category/Type 011	Independent Expenditure - Postage
B.	Full Name (Last, First, Middle Initial) Prolist Inc.	Transaction ID: 37379329
	Mailing Address 8341 Beechcraft Avenue	Date of Disbursement 10 / 29 / 2010
	City Gaithersburg State MD Zip Code 20879-1509	Amount of Each Disbursement this Period 397.71
	Purpose of Disbursement Independent Expenditure - Postage Candidate Name TX Rep. Stephen Frost Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: TX District: 01 Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Category/Type 011	Independent Expenditure - Postage
C.	Full Name (Last, First, Middle Initial) Prolist Inc.	Transaction ID: 37379330
	Mailing Address 8341 Beechcraft Avenue	Date of Disbursement 10 / 29 / 2010
	City Gaithersburg State MD Zip Code 20879-1509	Amount of Each Disbursement this Period 479.19
	Purpose of Disbursement Independent Expenditure - Postage Candidate Name Tim Kleinschmidt Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: TX District: 17 Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Category/Type 011	Independent Expenditure - Postage

SUBTOTAL of Disbursements This Page (optional)	1101.47
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 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
National Rifle Association of America Political Victory Fund

A.	Full Name (Last, First, Middle Initial) Prolist Inc.	Transaction ID: 37379331 Date of Disbursement 10 / 29 / 2010
	Mailing Address 8341 Beechcraft Avenue	Amount of Each Disbursement this Period 437.23
	City Gaithersburg State MD Zip Code 20879-1509	
	Purpose of Disbursement Independent Expenditure - Postage	011 Category/ Type
	Candidate Name Paul Workman	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: TX District: 47	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		Independent Expenditure - Postage

B.	Full Name (Last, First, Middle Initial) Prolist Inc.	Transaction ID: 37379332 Date of Disbursement 10 / 29 / 2010
	Mailing Address 8341 Beechcraft Avenue	Amount of Each Disbursement this Period 416.53
	City Gaithersburg State MD Zip Code 20879-1509	
	Purpose of Disbursement Independent Expenditure - Postage	011 Category/ Type
	Candidate Name Dan Neil	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: TX District: 48	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		Independent Expenditure - Postage

C.	Full Name (Last, First, Middle Initial) Prolist Inc.	Transaction ID: 37379333 Date of Disbursement 10 / 29 / 2010
	Mailing Address 8341 Beechcraft Avenue	Amount of Each Disbursement this Period 330.13
	City Gaithersburg State MD Zip Code 20879-1509	
	Purpose of Disbursement Independent Expenditure - Postage	011 Category/ Type
	Candidate Name Larry Gonzales	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: TX District: 52	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		Independent Expenditure - Postage

SUBTOTAL of Disbursements This Page (optional)	1183.89
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 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
National Rifle Association of America Political Victory Fund

A.	Full Name (Last, First, Middle Initial) Prolist Inc.	Transaction ID: 37379334 Date of Disbursement 10 / 29 / 2010
	Mailing Address 8341 Beechcraft Avenue	Amount of Each Disbursement this Period 435.17
	City Gaithersburg State MD Zip Code 20879-1509	
	Purpose of Disbursement Independent Expenditure - Postage	011 Category/ Type
	Candidate Name TX Rep. Charles Anderson	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: TX District: 56	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		Independent Expenditure - Postage

B.	Full Name (Last, First, Middle Initial) Prolist Inc.	Transaction ID: 37379335 Date of Disbursement 10 / 29 / 2010
	Mailing Address 8341 Beechcraft Avenue	Amount of Each Disbursement this Period 340.74
	City Gaithersburg State MD Zip Code 20879-1509	
	Purpose of Disbursement Independent Expenditure - Postage	011 Category/ Type
	Candidate Name TX Rep. Bill Zedler	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: TX District: 96	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		Independent Expenditure - Postage

C.	Full Name (Last, First, Middle Initial) Prolist Inc.	Transaction ID: 37379336 Date of Disbursement 10 / 29 / 2010
	Mailing Address 8341 Beechcraft Avenue	Amount of Each Disbursement this Period 736.83
	City Gaithersburg State MD Zip Code 20879-1509	
	Purpose of Disbursement Independent Expenditure - Postage	011 Category/ Type
	Candidate Name Governor Rick Perry	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		Independent Expenditure - Postage

SUBTOTAL of Disbursements This Page (optional)	1512.74
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 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
National Rifle Association of America Political Victory Fund

A.	Full Name (Last, First, Middle Initial) Prolist Inc.	Transaction ID: 37379338 Date of Disbursement 10 / 29 / 2010
	Mailing Address 8341 Beechcraft Avenue	Amount of Each Disbursement this Period 167.63
	City Gaithersburg State MD Zip Code 20879-1509	
	Purpose of Disbursement Independent Expenditure - Postcards	011 Category/ Type
	Candidate Name Stefani Carter	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: TX District: 02	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		Independent Expenditure - Postcards

B.	Full Name (Last, First, Middle Initial) Prolist Inc.	Transaction ID: 37379339 Date of Disbursement 10 / 29 / 2010
	Mailing Address 8341 Beechcraft Avenue	Amount of Each Disbursement this Period 132.94
	City Gaithersburg State MD Zip Code 20879-1509	
	Purpose of Disbursement Independent Expenditure - Postcards	011 Category/ Type
	Candidate Name TX Rep. Linda Harper-Brown	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: TX District: 05	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		Independent Expenditure - Postcards

C.	Full Name (Last, First, Middle Initial) Prolist Inc.	Transaction ID: 37379340 Date of Disbursement 10 / 29 / 2010
	Mailing Address 8341 Beechcraft Avenue	Amount of Each Disbursement this Period 237.82
	City Gaithersburg State MD Zip Code 20879-1509	
	Purpose of Disbursement Independent Expenditure - Postcards	011 Category/ Type
	Candidate Name JOE DRIVER	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: TX District: 13	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		Independent Expenditure - Postcards

SUBTOTAL of Disbursements This Page (optional)	538.39
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)

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<input 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
National Rifle Association of America Political Victory Fund

A. Full Name (Last, First, Middle Initial) Prolist Inc. <hr/> Mailing Address 8341 Beechcraft Avenue <hr/> City Gaithersburg State MD Zip Code 20879-1509 Purpose of Disbursement Independent Expenditure - Postcards Candidate Name TX Rep. Jim Murphy Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: TX District: 33	Transaction ID: 37379341 Date of Disbursement 10 / 29 / 2010
	Amount of Each Disbursement this Period 146.82 Independent Expenditure - Postcards
B. Full Name (Last, First, Middle Initial) Prolist Inc. <hr/> Mailing Address 8341 Beechcraft Avenue <hr/> City Gaithersburg State MD Zip Code 20879-1509 Purpose of Disbursement Independent Expenditure - Postcards Candidate Name TX Rep. Dwayne Bohac Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: TX District: 38	Transaction ID: 37379342 Date of Disbursement 10 / 29 / 2010
	Amount of Each Disbursement this Period 180.77 Independent Expenditure - Postcards
C. Full Name (Last, First, Middle Initial) Prolist Inc. <hr/> Mailing Address 8341 Beechcraft Avenue <hr/> City Gaithersburg State MD Zip Code 20879-1509 Purpose of Disbursement Independent Expenditure - Postcards Candidate Name TX Rep. Stephen Frost Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: TX District: 01	Transaction ID: 37379343 Date of Disbursement 10 / 29 / 2010
	Amount of Each Disbursement this Period 362.43 Independent Expenditure - Postcards

SUBTOTAL of Disbursements This Page (optional)	690.02
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)

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<input 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
National Rifle Association of America Political Victory Fund

A.	Full Name (Last, First, Middle Initial) Prolist Inc.	Transaction ID: 37379344 Date of Disbursement 10 / 29 / 2010
	Mailing Address 8341 Beechcraft Avenue	Amount of Each Disbursement this Period 429.59
	City Gaithersburg State MD Zip Code 20879-1509	
	Purpose of Disbursement Independent Expenditure - Postcards	011 Category/ Type
	Candidate Name Tim Kleinschmidt	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: TX District: 17	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		Independent Expenditure - Postcards

B.	Full Name (Last, First, Middle Initial) Prolist Inc.	Transaction ID: 37379345 Date of Disbursement 10 / 29 / 2010
	Mailing Address 8341 Beechcraft Avenue	Amount of Each Disbursement this Period 397.10
	City Gaithersburg State MD Zip Code 20879-1509	
	Purpose of Disbursement Independent Expenditure - Postcards	011 Category/ Type
	Candidate Name Paul Workman	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: TX District: 47	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		Independent Expenditure - Postcards

C.	Full Name (Last, First, Middle Initial) Prolist Inc.	Transaction ID: 37379346 Date of Disbursement 10 / 29 / 2010
	Mailing Address 8341 Beechcraft Avenue	Amount of Each Disbursement this Period 367.07
	City Gaithersburg State MD Zip Code 20879-1509	
	Purpose of Disbursement Independent Expenditure - Postcards	011 Category/ Type
	Candidate Name Dan Neil	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: TX District: 48	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		Independent Expenditure - Postcards

SUBTOTAL of Disbursements This Page (optional)	1193.76
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 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
National Rifle Association of America Political Victory Fund

A.	Full Name (Last, First, Middle Initial) Prolist Inc.	Transaction ID: 37379347 Date of Disbursement 10 / 29 / 2010
	Mailing Address 8341 Beechcraft Avenue	Amount of Each Disbursement this Period 298.21
	City Gaithersburg State MD Zip Code 20879-1509	Independent Expenditure - Postcards
	Purpose of Disbursement Independent Expenditure - Postcards Candidate Name Larry Gonzales Category/Type 011	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: TX District: 52 Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

B.	Full Name (Last, First, Middle Initial) Prolist Inc.	Transaction ID: 37379348 Date of Disbursement 10 / 29 / 2010
	Mailing Address 8341 Beechcraft Avenue	Amount of Each Disbursement this Period 396.83
	City Gaithersburg State MD Zip Code 20879-1509	Independent Expenditure - Postcards
	Purpose of Disbursement Independent Expenditure - Postcards Candidate Name TX Rep. Charles Anderson Category/Type 011	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: TX District: 56 Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

C.	Full Name (Last, First, Middle Initial) Prolist Inc.	Transaction ID: 37379349 Date of Disbursement 10 / 29 / 2010
	Mailing Address 8341 Beechcraft Avenue	Amount of Each Disbursement this Period 309.38
	City Gaithersburg State MD Zip Code 20879-1509	Independent Expenditure - Postcards
	Purpose of Disbursement Independent Expenditure - Postcards Candidate Name TX Rep. Bill Zedler Category/Type 011	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: TX District: 96 Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional)	1004.42
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)

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<input 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
National Rifle Association of America Political Victory Fund

A. Full Name (Last, First, Middle Initial) Prolist Inc. <hr/> Mailing Address 8341 Beechcraft Avenue <hr/> City Gaithersburg State MD Zip Code 20879-1509 Purpose of Disbursement Independent Expenditure - Postcards Candidate Name Governor Rick Perry Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 37379350 Date of Disbursement 10 / 29 / 2010
	Amount of Each Disbursement this Period 584.39 Independent Expenditure - Postcards
B. Full Name (Last, First, Middle Initial) Prolist Inc. <hr/> Mailing Address 8341 Beechcraft Avenue <hr/> City Gaithersburg State MD Zip Code 20879-1509 Purpose of Disbursement Independent Expenditure - Postage Candidate Name Sal Esquivel Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: OR District: 06 Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 37379352 Date of Disbursement 10 / 29 / 2010
	Amount of Each Disbursement this Period 141.56 Independent Expenditure - Postage
C. Full Name (Last, First, Middle Initial) Prolist Inc. <hr/> Mailing Address 8341 Beechcraft Avenue <hr/> City Gaithersburg State MD Zip Code 20879-1509 Purpose of Disbursement Independent Expenditure - Postage Candidate Name Andy Olson Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: OR District: 15 Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 37379353 Date of Disbursement 10 / 29 / 2010
	Amount of Each Disbursement this Period 232.19 Independent Expenditure - Postage

SUBTOTAL of Disbursements This Page (optional) ▶

958.14

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 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
National Rifle Association of America Political Victory Fund

A.	Full Name (Last, First, Middle Initial) Prolist Inc.	Transaction ID: 37379354 Date of Disbursement 10 / 29 / 2010
	Mailing Address 8341 Beechcraft Avenue	Amount of Each Disbursement this Period 271.39
	City Gaithersburg State MD Zip Code 20879-1509	
	Purpose of Disbursement Independent Expenditure - Postage	011 Category/ Type
	Candidate Name OR Rep. Vic Gilliam	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: OR District: 18	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		Independent Expenditure - Postage

B.	Full Name (Last, First, Middle Initial) Prolist Inc.	Transaction ID: 37379355 Date of Disbursement 10 / 29 / 2010
	Mailing Address 8341 Beechcraft Avenue	Amount of Each Disbursement this Period 167.48
	City Gaithersburg State MD Zip Code 20879-1509	
	Purpose of Disbursement Independent Expenditure - Postage	011 Category/ Type
	Candidate Name OR Rep. Kevin Cameron	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: OR District: 19	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		Independent Expenditure - Postage

C.	Full Name (Last, First, Middle Initial) Prolist Inc.	Transaction ID: 37379356 Date of Disbursement 10 / 29 / 2010
	Mailing Address 8341 Beechcraft Avenue	Amount of Each Disbursement this Period 67.62
	City Gaithersburg State MD Zip Code 20879-1509	
	Purpose of Disbursement Independent Expenditure - Postage	011 Category/ Type
	Candidate Name Kathy LeCompte	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: OR District: 22	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		Independent Expenditure - Postage

SUBTOTAL of Disbursements This Page (optional)	506.49
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 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
National Rifle Association of America Political Victory Fund

A.	Full Name (Last, First, Middle Initial) Prolist Inc.	Transaction ID: 37379357 Date of Disbursement 10 / 29 / 2010
	Mailing Address 8341 Beechcraft Avenue	Amount of Each Disbursement this Period 425.18
	City Gaithersburg State MD Zip Code 20879-1509	
	Purpose of Disbursement Independent Expenditure - Postage Candidate Name Jim Thompson Category/Type 011	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: OR District: 23	Independent Expenditure - Postage

B.	Full Name (Last, First, Middle Initial) Prolist Inc.	Transaction ID: 37379358 Date of Disbursement 10 / 29 / 2010
	Mailing Address 8341 Beechcraft Avenue	Amount of Each Disbursement this Period 425.18
	City Gaithersburg State MD Zip Code 20879-1509	
	Purpose of Disbursement Independent Expenditure - Postage Candidate Name Jim Weidner Category/Type 011	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: OR District: 24	Independent Expenditure - Postage

C.	Full Name (Last, First, Middle Initial) Prolist Inc.	Transaction ID: 37379359 Date of Disbursement 10 / 29 / 2010
	Mailing Address 8341 Beechcraft Avenue	Amount of Each Disbursement this Period 184.69
	City Gaithersburg State MD Zip Code 20879-1509	
	Purpose of Disbursement Independent Expenditure - Postage Candidate Name Matt Wingard Category/Type 011	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: OR District: 26	Independent Expenditure - Postage

SUBTOTAL of Disbursements This Page (optional)	1035.05
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 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
National Rifle Association of America Political Victory Fund

A.	Full Name (Last, First, Middle Initial) Prolist Inc.	Transaction ID: 37379360 Date of Disbursement 10 / 29 / 2010
	Mailing Address 8341 Beechcraft Avenue	Amount of Each Disbursement this Period 204.67
	City Gaithersburg State MD Zip Code 20879-1509	
	Purpose of Disbursement Independent Expenditure - Postage	011 Category/ Type
	Candidate Name Katie Eyre Brewer	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: OR District: 29	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		Independent Expenditure - Postage

B.	Full Name (Last, First, Middle Initial) Prolist Inc.	Transaction ID: 37379361 Date of Disbursement 10 / 29 / 2010
	Mailing Address 8341 Beechcraft Avenue	Amount of Each Disbursement this Period 204.67
	City Gaithersburg State MD Zip Code 20879-1509	
	Purpose of Disbursement Independent Expenditure - Postage	011 Category/ Type
	Candidate Name Shawn Lindsay	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: OR District: 30	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		Independent Expenditure - Postage

C.	Full Name (Last, First, Middle Initial) Prolist Inc.	Transaction ID: 37379362 Date of Disbursement 10 / 29 / 2010
	Mailing Address 8341 Beechcraft Avenue	Amount of Each Disbursement this Period 148.40
	City Gaithersburg State MD Zip Code 20879-1509	
	Purpose of Disbursement Independent Expenditure - Postage	011 Category/ Type
	Candidate Name Julie Parrish	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: OR District: 37	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		Independent Expenditure - Postage

SUBTOTAL of Disbursements This Page (optional)	557.74
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)

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<input 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
National Rifle Association of America Political Victory Fund

A. Full Name (Last, First, Middle Initial) Prolist Inc. <hr/> Mailing Address 8341 Beechcraft Avenue <hr/> City Gaithersburg State MD Zip Code 20879-1509 <hr/> Purpose of Disbursement Independent Expenditure - Postage Candidate Name Bill Kennemer <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: OR District: 39 <hr/> Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 37379363 Date of Disbursement 10 / 29 / 2010
	Amount of Each Disbursement this Period 241.65
	Category/ Type 011
	Independent Expenditure - Postage
B. Full Name (Last, First, Middle Initial) Prolist Inc. <hr/> Mailing Address 8341 Beechcraft Avenue <hr/> City Gaithersburg State MD Zip Code 20879-1509 <hr/> Purpose of Disbursement Independent Expenditure - Postage Candidate Name Matthew Wand <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: OR District: 49 <hr/> Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 37379364 Date of Disbursement 10 / 29 / 2010
	Amount of Each Disbursement this Period 115.80
	Category/ Type 011
	Independent Expenditure - Postage
C. Full Name (Last, First, Middle Initial) Prolist Inc. <hr/> Mailing Address 8341 Beechcraft Avenue <hr/> City Gaithersburg State MD Zip Code 20879-1509 <hr/> Purpose of Disbursement Independent Expenditure - Postage Candidate Name Andre Wang <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: OR District: 50 <hr/> Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 37379365 Date of Disbursement 10 / 29 / 2010
	Amount of Each Disbursement this Period 139.35
	Category/ Type 011
	Independent Expenditure - Postage

SUBTOTAL of Disbursements This Page (optional) ▶

496.80

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 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)
Prolist Inc.

Mailing Address 8341 Beechcraft Avenue

City Gaithersburg State MD Zip Code 20879-1509

Purpose of Disbursement
Independent Expenditure - Postage

Candidate Name
Patrick Sheehan

011
Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: OR District: 51

Transaction ID: 37379366
Date of Disbursement

10 / 29 / 2010

Amount of Each Disbursement this Period

411.75

Independent Expenditure -
Postage

B.

Full Name (Last, First, Middle Initial)
Prolist Inc.

Mailing Address 8341 Beechcraft Avenue

City Gaithersburg State MD Zip Code 20879-1509

Purpose of Disbursement
Independent Expenditure - Postage

Candidate Name
Mark Johnson

011
Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: OR District: 52

Transaction ID: 37379367
Date of Disbursement

10 / 29 / 2010

Amount of Each Disbursement this Period

411.75

Independent Expenditure -
Postage

C.

Full Name (Last, First, Middle Initial)
Prolist Inc.

Mailing Address 8341 Beechcraft Avenue

City Gaithersburg State MD Zip Code 20879-1509

Purpose of Disbursement
Independent Expenditure - Postage

Candidate Name
Jason Conger

011
Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: OR District: 54

Transaction ID: 37379368
Date of Disbursement

10 / 29 / 2010

Amount of Each Disbursement this Period

254.08

Independent Expenditure -
Postage

SUBTOTAL of Disbursements This Page (optional) ▶

1077.58

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 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
National Rifle Association of America Political Victory Fund

A.	Full Name (Last, First, Middle Initial) Prolist Inc.	Transaction ID: 37379369 Date of Disbursement 10 / 29 / 2010
	Mailing Address 8341 Beechcraft Avenue	Amount of Each Disbursement this Period 287.09
	City Gaithersburg State MD Zip Code 20879-1509	
	Purpose of Disbursement Independent Expenditure - Postage	011 Category/ Type
	Candidate Name Dave Dottererr	
	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: OR District:	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		Independent Expenditure - Postage

B.	Full Name (Last, First, Middle Initial) Prolist Inc.	Transaction ID: 37379370 Date of Disbursement 10 / 29 / 2010
	Mailing Address 8341 Beechcraft Avenue	Amount of Each Disbursement this Period 470.97
	City Gaithersburg State MD Zip Code 20879-1509	
	Purpose of Disbursement Independent Expenditure - Postage	011 Category/ Type
	Candidate Name Marilyn Kittelman	
	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: OR District:	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		Independent Expenditure - Postage

C.	Full Name (Last, First, Middle Initial) Prolist Inc.	Transaction ID: 37379371 Date of Disbursement 10 / 29 / 2010
	Mailing Address 8341 Beechcraft Avenue	Amount of Each Disbursement this Period 314.75
	City Gaithersburg State MD Zip Code 20879-1509	
	Purpose of Disbursement Independent Expenditure - Postage	011 Category/ Type
	Candidate Name OR Sen. Jackie Winters	
	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: OR District:	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		Independent Expenditure - Postage

SUBTOTAL of Disbursements This Page (optional)	1072.81
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)

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<input 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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

NAME OF COMMITTEE (In Full)
National Rifle Association of America Political Victory Fund

A.	Full Name (Last, First, Middle Initial) Prolist Inc.	Transaction ID: 37379372 Date of Disbursement 10 / 29 / 2010
	Mailing Address 8341 Beechcraft Avenue	Amount of Each Disbursement this Period 425.18
	City Gaithersburg State MD Zip Code 20879-1509	
	Purpose of Disbursement Independent Expenditure - Postage	011 Category/ Type
	Candidate Name Michael Forest	
	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: OR District:	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		Independent Expenditure - Postage

B.	Full Name (Last, First, Middle Initial) Prolist Inc.	Transaction ID: 37379373 Date of Disbursement 10 / 29 / 2010
	Mailing Address 8341 Beechcraft Avenue	Amount of Each Disbursement this Period 204.67
	City Gaithersburg State MD Zip Code 20879-1509	
	Purpose of Disbursement Independent Expenditure - Postage	011 Category/ Type
	Candidate Name Bruce Starr	
	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: OR District:	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		Independent Expenditure - Postage

C.	Full Name (Last, First, Middle Initial) Prolist Inc.	Transaction ID: 37379374 Date of Disbursement 10 / 29 / 2010
	Mailing Address 8341 Beechcraft Avenue	Amount of Each Disbursement this Period 261.73
	City Gaithersburg State MD Zip Code 20879-1509	
	Purpose of Disbursement Independent Expenditure - Postage	011 Category/ Type
	Candidate Name Mary Kremer	
	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: OR District:	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		Independent Expenditure - Postage

SUBTOTAL of Disbursements This Page (optional)	891.58
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)

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<input 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
National Rifle Association of America Political Victory Fund

A.	Full Name (Last, First, Middle Initial) Prolist Inc.	Transaction ID: 37379375 Date of Disbursement 10 / 29 / 2010
	Mailing Address 8341 Beechcraft Avenue	Amount of Each Disbursement this Period 401.55
	City Gaithersburg State MD Zip Code 20879-1509	
	Purpose of Disbursement Independent Expenditure - Postage	011 Category/ Type
	Candidate Name Alan Olsen	
	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: OR District:	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		Independent Expenditure - Postage

B.	Full Name (Last, First, Middle Initial) Prolist Inc.	Transaction ID: 37379376 Date of Disbursement 10 / 29 / 2010
	Mailing Address 8341 Beechcraft Avenue	Amount of Each Disbursement this Period 213.55
	City Gaithersburg State MD Zip Code 20879-1509	
	Purpose of Disbursement Independent Expenditure - Postage	011 Category/ Type
	Candidate Name Rob Wheeler	
	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: OR District:	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		Independent Expenditure - Postage

C.	Full Name (Last, First, Middle Initial) Prolist Inc.	Transaction ID: 37379377 Date of Disbursement 10 / 29 / 2010
	Mailing Address 8341 Beechcraft Avenue	Amount of Each Disbursement this Period 411.75
	City Gaithersburg State MD Zip Code 20879-1509	
	Purpose of Disbursement Independent Expenditure - Postage	011 Category/ Type
	Candidate Name Chuck Thomsen	
	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: OR District:	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		Independent Expenditure - Postage

SUBTOTAL of Disbursements This Page (optional)	1026.85
TOTAL This Period (last page this line number only)	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<input 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
National Rifle Association of America Political Victory Fund

A. Full Name (Last, First, Middle Initial) Prolist Inc. <hr/> Mailing Address 8341 Beechcraft Avenue <hr/> City Gaithersburg State MD Zip Code 20879-1509 <hr/> Purpose of Disbursement Independent Expenditure - Postage Candidate Name Chris Dudley <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 37379378 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 9 / 2 0 1 0
	Amount of Each Disbursement this Period 4955.35
	Category/ Type 011
	Independent Expenditure - Postage
B. Full Name (Last, First, Middle Initial) Prolist Inc. <hr/> Mailing Address 8341 Beechcraft Avenue <hr/> City Gaithersburg State MD Zip Code 20879-1509 <hr/> Purpose of Disbursement Independent Expenditure - Postcards Candidate Name Sal Esquivel <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: OR District: 06 <hr/> Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 37379380 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 9 / 2 0 1 0
	Amount of Each Disbursement this Period 126.98
	Category/ Type 011
	Independent Expenditure - Postcards
C. Full Name (Last, First, Middle Initial) Prolist Inc. <hr/> Mailing Address 8341 Beechcraft Avenue <hr/> City Gaithersburg State MD Zip Code 20879-1509 <hr/> Purpose of Disbursement Independent Expenditure - Postcards Candidate Name Andy Olson <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: OR District: 15 <hr/> Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 37379381 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 9 / 2 0 1 0
	Amount of Each Disbursement this Period 207.25
	Category/ Type 011
	Independent Expenditure - Postcards

SUBTOTAL of Disbursements This Page (optional) ▶

5289.58

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)

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<input 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
National Rifle Association of America Political Victory Fund

A. Full Name (Last, First, Middle Initial) Prolist Inc. <hr/> Mailing Address 8341 Beechcraft Avenue <hr/> City Gaithersburg State MD Zip Code 20879-1509 Purpose of Disbursement Independent Expenditure - Postcards Candidate Name OR Rep. Vic Gilliam Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: OR District: 18	Transaction ID: 37379382 Date of Disbursement 10 / 29 / 2010
	Amount of Each Disbursement this Period 238.60 Independent Expenditure - Postcards
B. Full Name (Last, First, Middle Initial) Prolist Inc. <hr/> Mailing Address 8341 Beechcraft Avenue <hr/> City Gaithersburg State MD Zip Code 20879-1509 Purpose of Disbursement Independent Expenditure - Postcards Candidate Name OR Rep. Kevin Cameron Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: OR District: 19	Transaction ID: 37379383 Date of Disbursement 10 / 29 / 2010
	Amount of Each Disbursement this Period 148.50 Independent Expenditure - Postcards
C. Full Name (Last, First, Middle Initial) Prolist Inc. <hr/> Mailing Address 8341 Beechcraft Avenue <hr/> City Gaithersburg State MD Zip Code 20879-1509 Purpose of Disbursement Independent Expenditure - Postcards Candidate Name Kathy LeCompte Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: OR District: 22	Transaction ID: 37379384 Date of Disbursement 10 / 29 / 2010
	Amount of Each Disbursement this Period 59.58 Independent Expenditure - Postcards

SUBTOTAL of Disbursements This Page (optional) ▶

446.68

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 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
National Rifle Association of America Political Victory Fund

A. Full Name (Last, First, Middle Initial) Prolist Inc. <hr/> Mailing Address 8341 Beechcraft Avenue <hr/> City Gaithersburg State MD Zip Code 20879-1509 Purpose of Disbursement Independent Expenditure - Postcards Candidate Name Jim Thompson Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: OR District: 23 Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 37379385 Date of Disbursement 10 / 29 / 2010
	Amount of Each Disbursement this Period 229.50 Independent Expenditure - Postcards

B. Full Name (Last, First, Middle Initial) Prolist Inc. <hr/> Mailing Address 8341 Beechcraft Avenue <hr/> City Gaithersburg State MD Zip Code 20879-1509 Purpose of Disbursement Independent Expenditure - Postcards Candidate Name Jim Weidner Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: OR District: 24 Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 37379386 Date of Disbursement 10 / 29 / 2010
	Amount of Each Disbursement this Period 229.50 Independent Expenditure - Postcards

C. Full Name (Last, First, Middle Initial) Prolist Inc. <hr/> Mailing Address 8341 Beechcraft Avenue <hr/> City Gaithersburg State MD Zip Code 20879-1509 Purpose of Disbursement Independent Expenditure - Postcards Candidate Name Matt Wingard Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: OR District: 26 Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 37379387 Date of Disbursement 10 / 29 / 2010
	Amount of Each Disbursement this Period 161.74 Independent Expenditure - Postcards

SUBTOTAL of Disbursements This Page (optional) ▶	620.74
TOTAL This Period (last page this line number only) ▶	(Empty box)

**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)

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<input 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
National Rifle Association of America Political Victory Fund

A.	Full Name (Last, First, Middle Initial) Prolist Inc.	Transaction ID: 37379388 Date of Disbursement 10 / 29 / 2010
	Mailing Address 8341 Beechcraft Avenue	Amount of Each Disbursement this Period 111.35
	City Gaithersburg State MD Zip Code 20879-1509	
	Purpose of Disbursement Independent Expenditure - Postcards	011 Category/ Type
	Candidate Name Katie Eyre Brewer	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: OR District: 29	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		Independent Expenditure - Postcards

B.	Full Name (Last, First, Middle Initial) Prolist Inc.	Transaction ID: 37379389 Date of Disbursement 10 / 29 / 2010
	Mailing Address 8341 Beechcraft Avenue	Amount of Each Disbursement this Period 111.35
	City Gaithersburg State MD Zip Code 20879-1509	
	Purpose of Disbursement Independent Expenditure - Postcards	011 Category/ Type
	Candidate Name Shawn Lindsay	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: OR District: 30	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		Independent Expenditure - Postcards

C.	Full Name (Last, First, Middle Initial) Prolist Inc.	Transaction ID: 37379390 Date of Disbursement 10 / 29 / 2010
	Mailing Address 8341 Beechcraft Avenue	Amount of Each Disbursement this Period 131.95
	City Gaithersburg State MD Zip Code 20879-1509	
	Purpose of Disbursement Independent Expenditure - Postcards	011 Category/ Type
	Candidate Name Julie Parrish	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: OR District: 37	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		Independent Expenditure - Postcards

SUBTOTAL of Disbursements This Page (optional)	354.65
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)

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<input 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
National Rifle Association of America Political Victory Fund

A.	Full Name (Last, First, Middle Initial) Prolist Inc.	Transaction ID: 37379391 Date of Disbursement 10 / 29 / 2010
	Mailing Address 8341 Beechcraft Avenue	Amount of Each Disbursement this Period 215.62
	City Gaithersburg State MD Zip Code 20879-1509	
	Purpose of Disbursement Independent Expenditure - Postcards	011 Category/ Type
	Candidate Name Bill Kennemer	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: OR District: 39	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		Independent Expenditure - Postcards

B.	Full Name (Last, First, Middle Initial) Prolist Inc.	Transaction ID: 37379392 Date of Disbursement 10 / 29 / 2010
	Mailing Address 8341 Beechcraft Avenue	Amount of Each Disbursement this Period 103.63
	City Gaithersburg State MD Zip Code 20879-1509	
	Purpose of Disbursement Independent Expenditure - Postcards	011 Category/ Type
	Candidate Name Matthew Wand	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: OR District: 49	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		Independent Expenditure - Postcards

C.	Full Name (Last, First, Middle Initial) Prolist Inc.	Transaction ID: 37379393 Date of Disbursement 10 / 29 / 2010
	Mailing Address 8341 Beechcraft Avenue	Amount of Each Disbursement this Period 123.95
	City Gaithersburg State MD Zip Code 20879-1509	
	Purpose of Disbursement Independent Expenditure - Postcards	011 Category/ Type
	Candidate Name Andre Wang	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: OR District: 50	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		Independent Expenditure - Postcards

SUBTOTAL of Disbursements This Page (optional)	443.20
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)

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<input 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
National Rifle Association of America Political Victory Fund

<p>A. Full Name (Last, First, Middle Initial) Prolist Inc.</p> <p>Mailing Address 8341 Beechcraft Avenue</p> <p>City Gaithersburg State MD Zip Code 20879-1509</p> <p>Purpose of Disbursement Independent Expenditure - Postcards</p> <p>Candidate Name Patrick Sheehan</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: OR District: 51</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 37379394 Date of Disbursement 10 / 29 / 2010</p> <p>Amount of Each Disbursement this Period 224.08</p> <p>011 Category/ Type</p> <p>Independent Expenditure - Postcards</p>
<p>B. Full Name (Last, First, Middle Initial) Prolist Inc.</p> <p>Mailing Address 8341 Beechcraft Avenue</p> <p>City Gaithersburg State MD Zip Code 20879-1509</p> <p>Purpose of Disbursement Independent Expenditure - Postcards</p> <p>Candidate Name Mark Johnson</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: OR District: 52</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 37379395 Date of Disbursement 10 / 29 / 2010</p> <p>Amount of Each Disbursement this Period 224.08</p> <p>011 Category/ Type</p> <p>Independent Expenditure - Postcards</p>
<p>C. Full Name (Last, First, Middle Initial) Prolist Inc.</p> <p>Mailing Address 8341 Beechcraft Avenue</p> <p>City Gaithersburg State MD Zip Code 20879-1509</p> <p>Purpose of Disbursement Independent Expenditure - Postcards</p> <p>Candidate Name Jason Conger</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: OR District: 54</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 37379396 Date of Disbursement 10 / 29 / 2010</p> <p>Amount of Each Disbursement this Period 226.93</p> <p>011 Category/ Type</p> <p>Independent Expenditure - Postcards</p>

SUBTOTAL of Disbursements This Page (optional) ▶

675.09

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 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
National Rifle Association of America Political Victory Fund

A.	Full Name (Last, First, Middle Initial) Prolist Inc.	Transaction ID: 37379397
	Mailing Address 8341 Beechcraft Avenue	Date of Disbursement 10 / 29 / 2010
	City Gaithersburg State MD Zip Code 20879-1509	Amount of Each Disbursement this Period 255.89
	Purpose of Disbursement Independent Expenditure - Postcards	011 Category/ Type
	Candidate Name Dave Dottererr	
	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: OR District:	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		Independent Expenditure - Postcards

B.	Full Name (Last, First, Middle Initial) Prolist Inc.	Transaction ID: 37379398
	Mailing Address 8341 Beechcraft Avenue	Date of Disbursement 10 / 29 / 2010
	City Gaithersburg State MD Zip Code 20879-1509	Amount of Each Disbursement this Period 416.25
	Purpose of Disbursement Independent Expenditure - Postcards	011 Category/ Type
	Candidate Name Marilyn Kittelman	
	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: OR District:	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		Independent Expenditure - Postcards

C.	Full Name (Last, First, Middle Initial) Prolist Inc.	Transaction ID: 37379399
	Mailing Address 8341 Beechcraft Avenue	Date of Disbursement 10 / 29 / 2010
	City Gaithersburg State MD Zip Code 20879-1509	Amount of Each Disbursement this Period 281.27
	Purpose of Disbursement Independent Expenditure - Postcards	011 Category/ Type
	Candidate Name OR Sen. Jackie Winters	
	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: OR District:	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		Independent Expenditure - Postcards

SUBTOTAL of Disbursements This Page (optional)	953.41
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)

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<input 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
National Rifle Association of America Political Victory Fund

A.	Full Name (Last, First, Middle Initial) Prolist Inc.	Transaction ID: 37379400 Date of Disbursement 10 / 29 / 2010
	Mailing Address 8341 Beechcraft Avenue	Amount of Each Disbursement this Period 229.50
	City Gaithersburg State MD Zip Code 20879-1509	
	Purpose of Disbursement Independent Expenditure - Postcards	011 Category/ Type
	Candidate Name Michael Forest	
	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: OR District:	Independent Expenditure - Postcards

B.	Full Name (Last, First, Middle Initial) Prolist Inc.	Transaction ID: 37379401 Date of Disbursement 10 / 29 / 2010
	Mailing Address 8341 Beechcraft Avenue	Amount of Each Disbursement this Period 111.35
	City Gaithersburg State MD Zip Code 20879-1509	
	Purpose of Disbursement Independent Expenditure - Postcards	011 Category/ Type
	Candidate Name Bruce Starr	
	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: OR District:	Independent Expenditure - Postcards

C.	Full Name (Last, First, Middle Initial) Prolist Inc.	Transaction ID: 37379402 Date of Disbursement 10 / 29 / 2010
	Mailing Address 8341 Beechcraft Avenue	Amount of Each Disbursement this Period 233.55
	City Gaithersburg State MD Zip Code 20879-1509	
	Purpose of Disbursement Independent Expenditure - Postcards	011 Category/ Type
	Candidate Name Mary Kremer	
	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: OR District:	Independent Expenditure - Postcards

SUBTOTAL of Disbursements This Page (optional)	574.40
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)

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<input 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
National Rifle Association of America Political Victory Fund

A.	Full Name (Last, First, Middle Initial) Prolist Inc.	Transaction ID: 37379403 Date of Disbursement 10 / 29 / 2010
	Mailing Address 8341 Beechcraft Avenue	Amount of Each Disbursement this Period 358.60
	City Gaithersburg State MD Zip Code 20879-1509	
	Purpose of Disbursement Independent Expenditure - Postcards	011 Category/ Type
	Candidate Name Alan Olsen	
	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: OR District:	Independent Expenditure - Postcards

B.	Full Name (Last, First, Middle Initial) Prolist Inc.	Transaction ID: 37379404 Date of Disbursement 10 / 29 / 2010
	Mailing Address 8341 Beechcraft Avenue	Amount of Each Disbursement this Period 189.96
	City Gaithersburg State MD Zip Code 20879-1509	
	Purpose of Disbursement Independent Expenditure - Postcards	011 Category/ Type
	Candidate Name Rob Wheeler	
	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: OR District:	Independent Expenditure - Postcards

C.	Full Name (Last, First, Middle Initial) Prolist Inc.	Transaction ID: 37379405 Date of Disbursement 10 / 29 / 2010
	Mailing Address 8341 Beechcraft Avenue	Amount of Each Disbursement this Period 224.08
	City Gaithersburg State MD Zip Code 20879-1509	
	Purpose of Disbursement Independent Expenditure - Postcards	011 Category/ Type
	Candidate Name Chuck Thomsen	
	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: OR District:	Independent Expenditure - Postcards

SUBTOTAL of Disbursements This Page (optional)	772.64
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 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
National Rifle Association of America Political Victory Fund

A.	Full Name (Last, First, Middle Initial) Prolist Inc.	Transaction ID: 37379406 Date of Disbursement 10 / 29 / 2010
	Mailing Address 8341 Beechcraft Avenue	Amount of Each Disbursement this Period 4045.13
	City Gaithersburg State MD Zip Code 20879-1509	Independent Expenditure - Postcards
	Purpose of Disbursement Independent Expenditure - Postcards Candidate Name Chris Dudley Category/Type 011	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Prolist Inc.	Transaction ID: 37380661 Date of Disbursement 10 / 29 / 2010
	Mailing Address 8341 Beechcraft Avenue	Amount of Each Disbursement this Period 72.18
	City Gaithersburg State MD Zip Code 20879-1509	Independent Expenditure - Postage
	Purpose of Disbursement Independent Expenditure - Postage Candidate Name Mark A. Hunt Category/Type 011	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: WV District: 30	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Prolist Inc.	Transaction ID: 37380662 Date of Disbursement 10 / 29 / 2010
	Mailing Address 8341 Beechcraft Avenue	Amount of Each Disbursement this Period 72.18
	City Gaithersburg State MD Zip Code 20879-1509	Independent Expenditure - Postage
	Purpose of Disbursement Independent Expenditure - Postage Candidate Name SHARON SPENCER Category/Type 011	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: WV District: 30	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	4189.49
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)

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<input 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
National Rifle Association of America Political Victory Fund

A.	Full Name (Last, First, Middle Initial) Prolist Inc.	Transaction ID: 37380663 Date of Disbursement 10 / 29 / 2010
	Mailing Address 8341 Beechcraft Avenue	Amount of Each Disbursement this Period 72.18
	City Gaithersburg State MD Zip Code 20879-1509	
	Purpose of Disbursement Independent Expenditure - Postage	011 Category/ Type
	Candidate Name MIKE HALL	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: WV District: 30	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		Independent Expenditure - Postage

B.	Full Name (Last, First, Middle Initial) Prolist Inc.	Transaction ID: 37380664 Date of Disbursement 10 / 29 / 2010
	Mailing Address 8341 Beechcraft Avenue	Amount of Each Disbursement this Period 72.18
	City Gaithersburg State MD Zip Code 20879-1509	
	Purpose of Disbursement Independent Expenditure - Postage	011 Category/ Type
	Candidate Name WV Del. Douglas Skaff, Jr.	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: WV District: 30	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		Independent Expenditure - Postage

C.	Full Name (Last, First, Middle Initial) Prolist Inc.	Transaction ID: 37380665 Date of Disbursement 10 / 29 / 2010
	Mailing Address 8341 Beechcraft Avenue	Amount of Each Disbursement this Period 72.18
	City Gaithersburg State MD Zip Code 20879-1509	
	Purpose of Disbursement Independent Expenditure - Postage	011 Category/ Type
	Candidate Name Daniel Barnett	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: WV District: 30	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		Independent Expenditure - Postage

SUBTOTAL of Disbursements This Page (optional)	▶	216.54
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)

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<input 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
National Rifle Association of America Political Victory Fund

A.	Full Name (Last, First, Middle Initial) Prolist Inc.	Transaction ID: 37380666 Date of Disbursement 10 / 29 / 2010
	Mailing Address 8341 Beechcraft Avenue	Amount of Each Disbursement this Period 72.18
	City Gaithersburg State MD Zip Code 20879-1509	
	Purpose of Disbursement Independent Expenditure - Postage	011 Category/Type
	Candidate Name Fred Joseph	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: WV District: 30	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		Independent Expenditure - Postage

B.	Full Name (Last, First, Middle Initial) Prolist Inc.	Transaction ID: 37380667 Date of Disbursement 10 / 29 / 2010
	Mailing Address 8341 Beechcraft Avenue	Amount of Each Disbursement this Period 67.71
	City Gaithersburg State MD Zip Code 20879-1509	
	Purpose of Disbursement Independent Expenditure - Postage	011 Category/Type
	Candidate Name Delegate Samuel Cann, Sr.	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: WV District: 41	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		Independent Expenditure - Postage

C.	Full Name (Last, First, Middle Initial) Prolist Inc.	Transaction ID: 37380668 Date of Disbursement 10 / 29 / 2010
	Mailing Address 8341 Beechcraft Avenue	Amount of Each Disbursement this Period 67.71
	City Gaithersburg State MD Zip Code 20879-1509	
	Purpose of Disbursement Independent Expenditure - Postage	011 Category/Type
	Candidate Name WV Del. Richard Iaquina	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: WV District: 41	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		Independent Expenditure - Postage

SUBTOTAL of Disbursements This Page (optional)	207.60
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)

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<input 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
National Rifle Association of America Political Victory Fund

A.	Full Name (Last, First, Middle Initial) Prolist Inc.	Transaction ID: 37380669 Date of Disbursement 10 / 29 / 2010
	Mailing Address 8341 Beechcraft Avenue	Amount of Each Disbursement this Period 67.71
	City Gaithersburg State MD Zip Code 20879-1509	
	Purpose of Disbursement Independent Expenditure - Postage	011 Category/ Type
	Candidate Name WV Del. Timothy Miley	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: WV District: 41	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		Independent Expenditure - Postage

B.	Full Name (Last, First, Middle Initial) Prolist Inc.	Transaction ID: 37380670 Date of Disbursement 10 / 29 / 2010
	Mailing Address 8341 Beechcraft Avenue	Amount of Each Disbursement this Period 67.71
	City Gaithersburg State MD Zip Code 20879-1509	
	Purpose of Disbursement Independent Expenditure - Postage	011 Category/ Type
	Candidate Name WV Del. Ron Fragale	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: WV District: 41	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		Independent Expenditure - Postage

C.	Full Name (Last, First, Middle Initial) Prolist Inc.	Transaction ID: 37380671 Date of Disbursement 10 / 29 / 2010
	Mailing Address 8341 Beechcraft Avenue	Amount of Each Disbursement this Period 47.39
	City Gaithersburg State MD Zip Code 20879-1509	
	Purpose of Disbursement Independent Expenditure - Postage	011 Category/ Type
	Candidate Name WV Del. Charlene Marshall	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: WV District: 44	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		Independent Expenditure - Postage

SUBTOTAL of Disbursements This Page (optional)	182.81
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 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
National Rifle Association of America Political Victory Fund

A. Full Name (Last, First, Middle Initial) Prolist Inc. <hr/> Mailing Address 8341 Beechcraft Avenue <hr/> City Gaithersburg State MD Zip Code 20879-1509 Purpose of Disbursement Independent Expenditure - Postage Candidate Name Kevin Scott Poe Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: WV District: 44 Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 37380672 Date of Disbursement 10 / 29 / 2010
	Amount of Each Disbursement this Period 47.39
	Category/ Type 011
	Independent Expenditure - Postage

B. Full Name (Last, First, Middle Initial) Prolist Inc. <hr/> Mailing Address 8341 Beechcraft Avenue <hr/> City Gaithersburg State MD Zip Code 20879-1509 Purpose of Disbursement Independent Expenditure - Postage Candidate Name Chris W. Walters Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: WV District: 44 Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 37380673 Date of Disbursement 10 / 29 / 2010
	Amount of Each Disbursement this Period 47.39
	Category/ Type 011
	Independent Expenditure - Postage

C. Full Name (Last, First, Middle Initial) Prolist Inc. <hr/> Mailing Address 8341 Beechcraft Avenue <hr/> City Gaithersburg State MD Zip Code 20879-1509 Purpose of Disbursement Independent Expenditure - Postage Candidate Name Charles Minimah Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: WV District: Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 37380674 Date of Disbursement 10 / 29 / 2010
	Amount of Each Disbursement this Period 636.87
	Category/ Type 011
	Independent Expenditure - Postage

SUBTOTAL of Disbursements This Page (optional) ► **731.65**

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 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
National Rifle Association of America Political Victory Fund

A. Full Name (Last, First, Middle Initial) Prolist Inc. <hr/> Mailing Address 8341 Beechcraft Avenue <hr/> City Gaithersburg State MD Zip Code 20879-1509 Purpose of Disbursement Independent Expenditure - Postage Candidate Name Elloit Simon Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: WV District: 57 Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 37380675 Date of Disbursement 10 / 29 / 2010
	Amount of Each Disbursement this Period 35.02
	Category/ Type 011
	Independent Expenditure - Postage
B. Full Name (Last, First, Middle Initial) Prolist Inc. <hr/> Mailing Address 8341 Beechcraft Avenue <hr/> City Gaithersburg State MD Zip Code 20879-1509 Purpose of Disbursement Independent Expenditure - Postage Candidate Name WV Sen. Mike Green Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: WV District: Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 37380676 Date of Disbursement 10 / 29 / 2010
	Amount of Each Disbursement this Period 428.95
	Category/ Type 011
	Independent Expenditure - Postage
C. Full Name (Last, First, Middle Initial) Prolist Inc. <hr/> Mailing Address 8341 Beechcraft Avenue <hr/> City Gaithersburg State MD Zip Code 20879-1509 Purpose of Disbursement Independent Expenditure - Postage Candidate Name Kevin Patrick Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: WV District: 44 Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 37380677 Date of Disbursement 10 / 29 / 2010
	Amount of Each Disbursement this Period 47.39
	Category/ Type 011
	Independent Expenditure - Postage

SUBTOTAL of Disbursements This Page (optional) ▶	511.36
TOTAL This Period (last page this line number only) ▶	(Empty box)

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 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
National Rifle Association of America Political Victory Fund

A.	Full Name (Last, First, Middle Initial) Prolist Inc.	Transaction ID: 37380679 Date of Disbursement 10 / 29 / 2010
	Mailing Address 8341 Beechcraft Avenue	Amount of Each Disbursement this Period 55.71
	City Gaithersburg State MD Zip Code 20879-1509	
	Purpose of Disbursement Independent Expenditure - Postcards	011 Category/ Type
	Candidate Name Mark A. Hunt	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: WV District: 30	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		Independent Expenditure - Postcards

B.	Full Name (Last, First, Middle Initial) Prolist Inc.	Transaction ID: 37380680 Date of Disbursement 10 / 29 / 2010
	Mailing Address 8341 Beechcraft Avenue	Amount of Each Disbursement this Period 55.71
	City Gaithersburg State MD Zip Code 20879-1509	
	Purpose of Disbursement Independent Expenditure - Postcards	011 Category/ Type
	Candidate Name SHARON SPENCER	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: WV District: 30	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		Independent Expenditure - Postcards

C.	Full Name (Last, First, Middle Initial) Prolist Inc.	Transaction ID: 37380681 Date of Disbursement 10 / 29 / 2010
	Mailing Address 8341 Beechcraft Avenue	Amount of Each Disbursement this Period 55.71
	City Gaithersburg State MD Zip Code 20879-1509	
	Purpose of Disbursement Independent Expenditure - Postcards	011 Category/ Type
	Candidate Name MIKE HALL	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: WV District: 30	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		Independent Expenditure - Postcards

SUBTOTAL of Disbursements This Page (optional)	▶	167.13
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)

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<input 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
National Rifle Association of America Political Victory Fund

A. Full Name (Last, First, Middle Initial) Prolist Inc. <hr/> Mailing Address 8341 Beechcraft Avenue <hr/> City Gaithersburg State MD Zip Code 20879-1509 Purpose of Disbursement Independent Expenditure - Postcards Candidate Name WV Del. Douglas Skaff, Jr. Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: WV District: 30 Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 37380682 Date of Disbursement 10 / 29 / 2010 <hr/> Amount of Each Disbursement this Period 55.71 <hr/> Independent Expenditure - Postcards
	Category/Type 011
B. Full Name (Last, First, Middle Initial) Prolist Inc. <hr/> Mailing Address 8341 Beechcraft Avenue <hr/> City Gaithersburg State MD Zip Code 20879-1509 Purpose of Disbursement Independent Expenditure - Postcards Candidate Name Daniel Barnett Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: WV District: 30 Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 37380683 Date of Disbursement 10 / 29 / 2010 <hr/> Amount of Each Disbursement this Period 55.71 <hr/> Independent Expenditure - Postcards
	Category/Type 011
C. Full Name (Last, First, Middle Initial) Prolist Inc. <hr/> Mailing Address 8341 Beechcraft Avenue <hr/> City Gaithersburg State MD Zip Code 20879-1509 Purpose of Disbursement Independent Expenditure - Postcards Candidate Name Fred Joseph Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: WV District: 30 Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 37380684 Date of Disbursement 10 / 29 / 2010 <hr/> Amount of Each Disbursement this Period 55.71 <hr/> Independent Expenditure - Postcards
	Category/Type 011

SUBTOTAL of Disbursements This Page (optional)	167.13
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 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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

NAME OF COMMITTEE (In Full)
National Rifle Association of America Political Victory Fund

A. Full Name (Last, First, Middle Initial) Prolist Inc. <hr/> Mailing Address 8341 Beechcraft Avenue <hr/> City Gaithersburg State MD Zip Code 20879-1509 Purpose of Disbursement Independent Expenditure - Postcards Candidate Name Delegate Samuel Cann, Sr. Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: WV District: 41 Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 37380685 Date of Disbursement 10 / 29 / 2010
	Amount of Each Disbursement this Period 52.27
	Category/ Type 011
	Independent Expenditure - Postcards
B. Full Name (Last, First, Middle Initial) Prolist Inc. <hr/> Mailing Address 8341 Beechcraft Avenue <hr/> City Gaithersburg State MD Zip Code 20879-1509 Purpose of Disbursement Independent Expenditure - Postcards Candidate Name WV Del. Richard Iaquina Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: WV District: 41 Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 37380686 Date of Disbursement 10 / 29 / 2010
	Amount of Each Disbursement this Period 52.27
	Category/ Type 011
	Independent Expenditure - Postcards
C. Full Name (Last, First, Middle Initial) Prolist Inc. <hr/> Mailing Address 8341 Beechcraft Avenue <hr/> City Gaithersburg State MD Zip Code 20879-1509 Purpose of Disbursement Independent Expenditure - Postcards Candidate Name WV Del. Timothy Miley Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: WV District: 41 Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 37380687 Date of Disbursement 10 / 29 / 2010
	Amount of Each Disbursement this Period 52.27
	Category/ Type 011
	Independent Expenditure - Postcards

SUBTOTAL of Disbursements This Page (optional) ▶	156.81
TOTAL This Period (last page this line number only) ▶	(Empty box)

**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 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
National Rifle Association of America Political Victory Fund

A. Full Name (Last, First, Middle Initial) Prolist Inc. <hr/> Mailing Address 8341 Beechcraft Avenue <hr/> City Gaithersburg State MD Zip Code 20879-1509 Purpose of Disbursement Independent Expenditure - Postcards Candidate Name WV Del. Ron Fragale Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: WV District: 41 Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 37380688 Date of Disbursement 10 / 29 / 2010 <hr/> Amount of Each Disbursement this Period 52.27 <hr/> Independent Expenditure - Postcards
	011 Category/ Type

B. Full Name (Last, First, Middle Initial) Prolist Inc. <hr/> Mailing Address 8341 Beechcraft Avenue <hr/> City Gaithersburg State MD Zip Code 20879-1509 Purpose of Disbursement Independent Expenditure - Postcards Candidate Name WV Del. Charlene Marshall Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: WV District: 44 Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 37380689 Date of Disbursement 10 / 29 / 2010 <hr/> Amount of Each Disbursement this Period 36.59 <hr/> Independent Expenditure - Postcards
	011 Category/ Type

C. Full Name (Last, First, Middle Initial) Prolist Inc. <hr/> Mailing Address 8341 Beechcraft Avenue <hr/> City Gaithersburg State MD Zip Code 20879-1509 Purpose of Disbursement Independent Expenditure - Postcards Candidate Name Kevin Scott Poe Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: WV District: 44 Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 37380690 Date of Disbursement 10 / 29 / 2010 <hr/> Amount of Each Disbursement this Period 36.59 <hr/> Independent Expenditure - Postcards
	011 Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	125.45
TOTAL This Period (last page this line number only) ▶	(Empty box)

**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)

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<input 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
National Rifle Association of America Political Victory Fund

A.	Full Name (Last, First, Middle Initial) Prolist Inc.	Transaction ID: 37380691 Date of Disbursement 10 / 29 / 2010
	Mailing Address 8341 Beechcraft Avenue	Amount of Each Disbursement this Period 36.59
	City Gaithersburg State MD Zip Code 20879-1509	
	Purpose of Disbursement Independent Expenditure - Postcards	011 Category/ Type
	Candidate Name Kevin Patrick	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: WV District: 44	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		Independent Expenditure - Postcards

B.	Full Name (Last, First, Middle Initial) Prolist Inc.	Transaction ID: 37380692 Date of Disbursement 10 / 29 / 2010
	Mailing Address 8341 Beechcraft Avenue	Amount of Each Disbursement this Period 36.59
	City Gaithersburg State MD Zip Code 20879-1509	
	Purpose of Disbursement Independent Expenditure - Postcards	011 Category/ Type
	Candidate Name Chris W. Walters	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: WV District: 44	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		Independent Expenditure - Postcards

C.	Full Name (Last, First, Middle Initial) Prolist Inc.	Transaction ID: 37380693 Date of Disbursement 10 / 29 / 2010
	Mailing Address 8341 Beechcraft Avenue	Amount of Each Disbursement this Period 491.61
	City Gaithersburg State MD Zip Code 20879-1509	
	Purpose of Disbursement Independent Expenditure - Postcards	011 Category/ Type
	Candidate Name Charles Minimah	
	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: WV District:	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		Independent Expenditure - Postcards

SUBTOTAL of Disbursements This Page (optional)	564.79
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 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
National Rifle Association of America Political Victory Fund

A. Full Name (Last, First, Middle Initial) Prolist Inc. <hr/> Mailing Address 8341 Beechcraft Avenue <hr/> City Gaithersburg State MD Zip Code 20879-1509 Purpose of Disbursement Independent Expenditure - Postcards Candidate Name Elloit Simon Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: WV District: 57 Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 37380694 Date of Disbursement 10 / 29 / 2010
	Amount of Each Disbursement this Period 27.03 Independent Expenditure - Postcards

B. Full Name (Last, First, Middle Initial) Prolist Inc. <hr/> Mailing Address 8341 Beechcraft Avenue <hr/> City Gaithersburg State MD Zip Code 20879-1509 Purpose of Disbursement Independent Expenditure - Postcards Candidate Name WV Sen. Mike Green Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: WV District: Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 37380695 Date of Disbursement 10 / 29 / 2010
	Amount of Each Disbursement this Period 331.12 Independent Expenditure - Postcards

C. Full Name (Last, First, Middle Initial) Master Print, Inc. <hr/> Mailing Address P.O. Box 1467 <hr/> City Newington State VA Zip Code 22122 Purpose of Disbursement Independent Expenditure - Print 4 Color Cards Candidate Name Ted Strickland Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 37380728 Date of Disbursement 10 / 30 / 2010
	Amount of Each Disbursement this Period 2739.45 Independent Expenditure - Print 4 Color Cards

SUBTOTAL of Disbursements This Page (optional) ▶	3097.60
TOTAL This Period (last page this line number only) ▶	(Empty box)

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 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
National Rifle Association of America Political Victory Fund

A. Full Name (Last, First, Middle Initial) Prolist Inc. <hr/> Mailing Address 8341 Beechcraft Avenue <hr/> City Gaithersburg State MD Zip Code 20879-1509 <hr/> Purpose of Disbursement Independent Expenditure - Postage Candidate Name Ted Strickland <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 37380751 Date of Disbursement 10 / 30 / 2010
	Amount of Each Disbursement this Period 20950.72
	Category/ Type 011
	Independent Expenditure - Postage
B. Full Name (Last, First, Middle Initial) Prolist Inc. <hr/> Mailing Address 8341 Beechcraft Avenue <hr/> City Gaithersburg State MD Zip Code 20879-1509 <hr/> Purpose of Disbursement Independent Expenditure - Postcards Candidate Name Ted Strickland <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 37380770 Date of Disbursement 10 / 30 / 2010
	Amount of Each Disbursement this Period 1452.98
	Category/ Type 011
	Independent Expenditure - Postcards
C. Full Name (Last, First, Middle Initial) Prolist Inc. <hr/> Mailing Address 8341 Beechcraft Avenue <hr/> City Gaithersburg State MD Zip Code 20879-1509 <hr/> Purpose of Disbursement Independent Expenditure - Postage Candidate Name Representa Vida Miller <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: SC District: 08 <hr/> Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 37384665 Date of Disbursement 10 / 30 / 2010
	Amount of Each Disbursement this Period 58.47
	Category/ Type 011
	Independent Expenditure - Postage

SUBTOTAL of Disbursements This Page (optional) ▶

22462.17

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 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
National Rifle Association of America Political Victory Fund

A. Full Name (Last, First, Middle Initial) Prolist Inc. <hr/> Mailing Address 8341 Beechcraft Avenue <hr/> City Gaithersburg State MD Zip Code 20879-1509 Purpose of Disbursement Independent Expenditure - Postage Candidate Name SC Rep. Anne Hutto Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: SC District: 15 Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 37384719 Date of Disbursement 10 / 30 / 2010 <hr/> Amount of Each Disbursement this Period 49.98 <hr/> Independent Expenditure - Postage
	Category/Type 011
B. Full Name (Last, First, Middle Initial) Prolist Inc. <hr/> Mailing Address 8341 Beechcraft Avenue <hr/> City Gaithersburg State MD Zip Code 20879-1509 Purpose of Disbursement Independent Expenditure - Postage Candidate Name JENNINGS MCABEE Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: SC District: 12 Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 37384725 Date of Disbursement 10 / 30 / 2010 <hr/> Amount of Each Disbursement this Period 44.66 <hr/> Independent Expenditure - Postage
	Category/Type 011
C. Full Name (Last, First, Middle Initial) Prolist Inc. <hr/> Mailing Address 8341 Beechcraft Avenue <hr/> City Gaithersburg State MD Zip Code 20879-1509 Purpose of Disbursement Independent Expenditure - Postage Candidate Name SC Rep. Wendy Nanney Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: SC District: 22 Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 37384732 Date of Disbursement 10 / 30 / 2010 <hr/> Amount of Each Disbursement this Period 36.26 <hr/> Independent Expenditure - Postage
	Category/Type 011

SUBTOTAL of Disbursements This Page (optional) ▶

130.90

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)

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<input 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
National Rifle Association of America Political Victory Fund

A.	Full Name (Last, First, Middle Initial) Prolist Inc.	Transaction ID: 37384733 Date of Disbursement 10 / 30 / 2010
	Mailing Address 8341 Beechcraft Avenue	Amount of Each Disbursement this Period 68.18
	City Gaithersburg State MD Zip Code 20879-1509	
	Purpose of Disbursement Independent Expenditure - Postage	011 Category/ Type
	Candidate Name SC Rep. Deborah Long	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: SC District: 45	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		Independent Expenditure - Postage

B.	Full Name (Last, First, Middle Initial) Prolist Inc.	Transaction ID: 37384734 Date of Disbursement 10 / 30 / 2010
	Mailing Address 8341 Beechcraft Avenue	Amount of Each Disbursement this Period 63.98
	City Gaithersburg State MD Zip Code 20879-1509	
	Purpose of Disbursement Independent Expenditure - Postage	011 Category/ Type
	Candidate Name SC Rep. Phillip Lowe	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: SC District: 60	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		Independent Expenditure - Postage

C.	Full Name (Last, First, Middle Initial) Prolist Inc.	Transaction ID: 37384736 Date of Disbursement 10 / 30 / 2010
	Mailing Address 8341 Beechcraft Avenue	Amount of Each Disbursement this Period 160.77
	City Gaithersburg State MD Zip Code 20879-1509	
	Purpose of Disbursement Independent Expenditure - Postage	011 Category/ Type
	Candidate Name Alan Wilson	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		Independent Expenditure - Postage

SUBTOTAL of Disbursements This Page (optional)	▶	292.93
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 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
National Rifle Association of America Political Victory Fund

A. Full Name (Last, First, Middle Initial) Prolist Inc. <hr/> Mailing Address 8341 Beechcraft Avenue <hr/> City Gaithersburg State MD Zip Code 20879-1509 <hr/> Purpose of Disbursement Independent Expenditure - Postage Candidate Name Richard Eckstrom <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 37384737 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 3 0 / 2 0 1 0
	Amount of Each Disbursement this Period 160.76 <hr/> Independent Expenditure - Postage
B. Full Name (Last, First, Middle Initial) Prolist Inc. <hr/> Mailing Address 8341 Beechcraft Avenue <hr/> City Gaithersburg State MD Zip Code 20879-1509 <hr/> Purpose of Disbursement Independent Expenditure - Postcards Candidate Name Representa Vida Miller <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: SC District: 08 <hr/> Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 37385379 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 3 0 / 2 0 1 0
	Amount of Each Disbursement this Period 79.02 <hr/> Independent Expenditure - Postcards
C. Full Name (Last, First, Middle Initial) Prolist Inc. <hr/> Mailing Address 8341 Beechcraft Avenue <hr/> City Gaithersburg State MD Zip Code 20879-1509 <hr/> Purpose of Disbursement Independent Expenditure - Postcards Candidate Name SC Rep. Anne Hutto <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: SC District: 15 <hr/> Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 37385380 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 3 0 / 2 0 1 0
	Amount of Each Disbursement this Period 51.86 <hr/> Independent Expenditure - Postcards

SUBTOTAL of Disbursements This Page (optional) ▶

291.64

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)

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<input 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
National Rifle Association of America Political Victory Fund

A.	Full Name (Last, First, Middle Initial) Prolist Inc.	Transaction ID: 37385381 Date of Disbursement 10 / 30 / 2010
	Mailing Address 8341 Beechcraft Avenue	Amount of Each Disbursement this Period 46.34
	City Gaithersburg State MD Zip Code 20879-1509	
	Purpose of Disbursement Independent Expenditure - Postcards	011 Category/ Type
	Candidate Name JENNINGS MCABEE	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: SC District: 12	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		Independent Expenditure - Postcards

B.	Full Name (Last, First, Middle Initial) Prolist Inc.	Transaction ID: 37385382 Date of Disbursement 10 / 30 / 2010
	Mailing Address 8341 Beechcraft Avenue	Amount of Each Disbursement this Period 37.62
	City Gaithersburg State MD Zip Code 20879-1509	
	Purpose of Disbursement Independent Expenditure - Postcards	011 Category/ Type
	Candidate Name SC Rep. Wendy Nanney	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: SC District: 22	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		Independent Expenditure - Postcards

C.	Full Name (Last, First, Middle Initial) Prolist Inc.	Transaction ID: 37385383 Date of Disbursement 10 / 30 / 2010
	Mailing Address 8341 Beechcraft Avenue	Amount of Each Disbursement this Period 70.74
	City Gaithersburg State MD Zip Code 20879-1509	
	Purpose of Disbursement Independent Expenditure - Postcards	011 Category/ Type
	Candidate Name SC Rep. Deborah Long	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: SC District: 45	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		Independent Expenditure - Postcards

SUBTOTAL of Disbursements This Page (optional)	154.70
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 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
National Rifle Association of America Political Victory Fund

A.	Full Name (Last, First, Middle Initial) Prolist Inc.	Transaction ID: 37385384 Date of Disbursement 10 / 30 / 2010
	Mailing Address 8341 Beechcraft Avenue	Amount of Each Disbursement this Period 66.38
	City Gaithersburg State MD Zip Code 20879-1509	
	Purpose of Disbursement Independent Expenditure - Postcards	011 Category/ Type
	Candidate Name SC Rep. Phillip Lowe	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: SC District: 60	Independent Expenditure - Postcards

B.	Full Name (Last, First, Middle Initial) Prolist Inc.	Transaction ID: 37385385 Date of Disbursement 10 / 30 / 2010
	Mailing Address 8341 Beechcraft Avenue	Amount of Each Disbursement this Period 175.99
	City Gaithersburg State MD Zip Code 20879-1509	
	Purpose of Disbursement Independent Expenditure - Postcards	011 Category/ Type
	Candidate Name Alan Wilson	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	Independent Expenditure - Postcards

C.	Full Name (Last, First, Middle Initial) Prolist Inc.	Transaction ID: 37385386 Date of Disbursement 10 / 30 / 2010
	Mailing Address 8341 Beechcraft Avenue	Amount of Each Disbursement this Period 175.99
	City Gaithersburg State MD Zip Code 20879-1509	
	Purpose of Disbursement Independent Expenditure - Postcards	011 Category/ Type
	Candidate Name Richard Eckstrom	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	Independent Expenditure - Postcards

SUBTOTAL of Disbursements This Page (optional)	418.36
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 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
National Rifle Association of America Political Victory Fund

A.	Full Name (Last, First, Middle Initial) Prolist Inc.	Transaction ID: 37385434 Date of Disbursement 10 / 30 / 2010
	Mailing Address 8341 Beechcraft Avenue	Amount of Each Disbursement this Period 36.54
	City Gaithersburg State MD Zip Code 20879-1509	
	Purpose of Disbursement Independent Expenditure - Postage Candidate Name KS Rep. William Wolf Category/Type 011	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: KS District: 12	Independent Expenditure - Postage

B.	Full Name (Last, First, Middle Initial) Prolist Inc.	Transaction ID: 37385435 Date of Disbursement 10 / 30 / 2010
	Mailing Address 8341 Beechcraft Avenue	Amount of Each Disbursement this Period 42.56
	City Gaithersburg State MD Zip Code 20879-1509	
	Purpose of Disbursement Independent Expenditure - Postage Candidate Name Kyle Hoffman Category/Type 011	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: KS District: 16	Independent Expenditure - Postage

C.	Full Name (Last, First, Middle Initial) Prolist Inc.	Transaction ID: 37385440 Date of Disbursement 10 / 30 / 2010
	Mailing Address 8341 Beechcraft Avenue	Amount of Each Disbursement this Period 55.37
	City Gaithersburg State MD Zip Code 20879-1509	
	Purpose of Disbursement Independent Expenditure - Postage Candidate Name Terri Gregory Category/Type 011	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: KS District: 10	Independent Expenditure - Postage

SUBTOTAL of Disbursements This Page (optional)	▶	134.47
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)

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<input 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
National Rifle Association of America Political Victory Fund

A. Full Name (Last, First, Middle Initial) Prolist Inc. <hr/> Mailing Address 8341 Beechcraft Avenue <hr/> City Gaithersburg State MD Zip Code 20879-1509 <hr/> Purpose of Disbursement Independent Expenditure - Postage Candidate Name Amanda Grosserode <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: KS District: 16 <hr/> Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 37385450 Date of Disbursement 10 / 30 / 2010
	Amount of Each Disbursement this Period 65.65
	Category/ Type 011
	Independent Expenditure - Postage
B. Full Name (Last, First, Middle Initial) Prolist Inc. <hr/> Mailing Address 8341 Beechcraft Avenue <hr/> City Gaithersburg State MD Zip Code 20879-1509 <hr/> Purpose of Disbursement Independent Expenditure - Postage Candidate Name Kelly Meigs <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: KS District: 17 <hr/> Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 37385451 Date of Disbursement 10 / 30 / 2010
	Amount of Each Disbursement this Period 94.61
	Category/ Type 011
	Independent Expenditure - Postage
C. Full Name (Last, First, Middle Initial) Prolist Inc. <hr/> Mailing Address 8341 Beechcraft Avenue <hr/> City Gaithersburg State MD Zip Code 20879-1509 <hr/> Purpose of Disbursement Independent Expenditure - Postage Candidate Name John Rubin <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: KS District: 18 <hr/> Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 37385452 Date of Disbursement 10 / 30 / 2010
	Amount of Each Disbursement this Period 97.18
	Category/ Type 011
	Independent Expenditure - Postage

SUBTOTAL of Disbursements This Page (optional) ▶

257.44

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 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
National Rifle Association of America Political Victory Fund

A. Full Name (Last, First, Middle Initial) Prolist Inc. <hr/> Mailing Address 8341 Beechcraft Avenue <hr/> City Gaithersburg State MD Zip Code 20879-1509 Purpose of Disbursement Independent Expenditure - Postage Candidate Name Rob Bruchman Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: KS District: 20 Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 37385453 Date of Disbursement 10 / 30 / 2010
	Amount of Each Disbursement this Period 79.37 Independent Expenditure - Postage

B. Full Name (Last, First, Middle Initial) Prolist Inc. <hr/> Mailing Address 8341 Beechcraft Avenue <hr/> City Gaithersburg State MD Zip Code 20879-1509 Purpose of Disbursement Independent Expenditure - Postage Candidate Name Greg Smith Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: KS District: 22 Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 37385454 Date of Disbursement 10 / 30 / 2010
	Amount of Each Disbursement this Period 61.32 Independent Expenditure - Postage

C. Full Name (Last, First, Middle Initial) Prolist Inc. <hr/> Mailing Address 8341 Beechcraft Avenue <hr/> City Gaithersburg State MD Zip Code 20879-1509 Purpose of Disbursement Independent Expenditure - Postage Candidate Name KS Rep. Anthony Brown Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: KS District: 38 Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 37385455 Date of Disbursement 10 / 30 / 2010
	Amount of Each Disbursement this Period 125.49 Independent Expenditure - Postage

SUBTOTAL of Disbursements This Page (optional) ▶	266.18
TOTAL This Period (last page this line number only) ▶	(Empty box)

**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 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
National Rifle Association of America Political Victory Fund

A. Full Name (Last, First, Middle Initial) Prolist Inc. <hr/> Mailing Address 8341 Beechcraft Avenue <hr/> City Gaithersburg State MD Zip Code 20879-1509 Purpose of Disbursement Independent Expenditure - Postage Candidate Name Jana Goodman Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: KS District: 41 Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 37385456 Date of Disbursement 10 / 30 / 2010 <hr/> Amount of Each Disbursement this Period 38.50 <hr/> Independent Expenditure - Postage
	Category/Type 011

B. Full Name (Last, First, Middle Initial) Prolist Inc. <hr/> Mailing Address 8341 Beechcraft Avenue <hr/> City Gaithersburg State MD Zip Code 20879-1509 Purpose of Disbursement Independent Expenditure - Postage Candidate Name Lana Gordon Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: KS District: 52 Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 37385457 Date of Disbursement 10 / 30 / 2010 <hr/> Amount of Each Disbursement this Period 45.64 <hr/> Independent Expenditure - Postage
	Category/Type 011

C. Full Name (Last, First, Middle Initial) Prolist Inc. <hr/> Mailing Address 8341 Beechcraft Avenue <hr/> City Gaithersburg State MD Zip Code 20879-1509 Purpose of Disbursement Independent Expenditure - Postage Candidate Name Bruce Williamson Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: KS District: 55 Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 37385458 Date of Disbursement 10 / 30 / 2010 <hr/> Amount of Each Disbursement this Period 23.80 <hr/> Independent Expenditure - Postage
	Category/Type 011

SUBTOTAL of Disbursements This Page (optional) ▶	107.94
TOTAL This Period (last page this line number only) ▶	(Empty box)

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 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
National Rifle Association of America Political Victory Fund

A. Full Name (Last, First, Middle Initial) Prolist Inc. <hr/> Mailing Address 8341 Beechcraft Avenue <hr/> City Gaithersburg State MD Zip Code 20879-1509 Purpose of Disbursement Independent Expenditure - Postage Candidate Name Becky Nioce Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: KS District: 56 Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 37385459 Date of Disbursement 10 / 30 / 2010 <hr/> Amount of Each Disbursement this Period 26.32 <hr/> Independent Expenditure - Postage
	Category/Type 011
B. Full Name (Last, First, Middle Initial) Prolist Inc. <hr/> Mailing Address 8341 Beechcraft Avenue <hr/> City Gaithersburg State MD Zip Code 20879-1509 Purpose of Disbursement Independent Expenditure - Postage Candidate Name Lee Modesitt Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: KS District: 66 Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 37385460 Date of Disbursement 10 / 30 / 2010 <hr/> Amount of Each Disbursement this Period 25.06 <hr/> Independent Expenditure - Postage
	Category/Type 011
C. Full Name (Last, First, Middle Initial) Prolist Inc. <hr/> Mailing Address 8341 Beechcraft Avenue <hr/> City Gaithersburg State MD Zip Code 20879-1509 Purpose of Disbursement Independent Expenditure - Postage Candidate Name Tom Arpke Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: KS District: 69 Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 37385461 Date of Disbursement 10 / 30 / 2010 <hr/> Amount of Each Disbursement this Period 26.74 <hr/> Independent Expenditure - Postage
	Category/Type 011

SUBTOTAL of Disbursements This Page (optional) ▶	78.12
TOTAL This Period (last page this line number only) ▶	(Empty box)

**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 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
National Rifle Association of America Political Victory Fund

A.	Full Name (Last, First, Middle Initial) Prolist Inc.	Transaction ID: 37385462 Date of Disbursement 10 / 30 / 2010
	Mailing Address 8341 Beechcraft Avenue	Amount of Each Disbursement this Period 12.87
	City Gaithersburg State MD Zip Code 20879-1509	
	Purpose of Disbursement Independent Expenditure - Postage	011 Category/ Type
	Candidate Name John Stevens	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: KS District: 86	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		Independent Expenditure - Postage

B.	Full Name (Last, First, Middle Initial) Prolist Inc.	Transaction ID: 37385463 Date of Disbursement 10 / 30 / 2010
	Mailing Address 8341 Beechcraft Avenue	Amount of Each Disbursement this Period 27.44
	City Gaithersburg State MD Zip Code 20879-1509	
	Purpose of Disbursement Independent Expenditure - Postage	011 Category/ Type
	Candidate Name KS Rep. Phil Hermanson	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: KS District: 96	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		Independent Expenditure - Postage

C.	Full Name (Last, First, Middle Initial) Prolist Inc.	Transaction ID: 37385464 Date of Disbursement 10 / 30 / 2010
	Mailing Address 8341 Beechcraft Avenue	Amount of Each Disbursement this Period 442.24
	City Gaithersburg State MD Zip Code 20879-1509	
	Purpose of Disbursement Independent Expenditure - Postage	011 Category/ Type
	Candidate Name Sam Brownback	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		Independent Expenditure - Postage

SUBTOTAL of Disbursements This Page (optional)	482.55
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 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
National Rifle Association of America Political Victory Fund

A.	Full Name (Last, First, Middle Initial) Prolist Inc.	Transaction ID: 37385465 Date of Disbursement 10 / 30 / 2010
	Mailing Address 8341 Beechcraft Avenue	Amount of Each Disbursement this Period 442.21
	City Gaithersburg State MD Zip Code 20879-1509	
	Purpose of Disbursement Independent Expenditure - Postage	011 Category/Type
	Candidate Name Kris Kobach	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		Independent Expenditure - Postage

B.	Full Name (Last, First, Middle Initial) Prolist Inc.	Transaction ID: 37385467 Date of Disbursement 10 / 30 / 2010
	Mailing Address 8341 Beechcraft Avenue	Amount of Each Disbursement this Period 34.81
	City Gaithersburg State MD Zip Code 20879-1509	
	Purpose of Disbursement Independent Expenditure - Postcards	011 Category/Type
	Candidate Name KS Rep. William Wolf	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: KS District: 12	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		Independent Expenditure - Postcards

C.	Full Name (Last, First, Middle Initial) Prolist Inc.	Transaction ID: 37385468 Date of Disbursement 10 / 30 / 2010
	Mailing Address 8341 Beechcraft Avenue	Amount of Each Disbursement this Period 40.55
	City Gaithersburg State MD Zip Code 20879-1509	
	Purpose of Disbursement Independent Expenditure - Postcards	011 Category/Type
	Candidate Name Kyle Hoffman	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: KS District: 16	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		Independent Expenditure - Postcards

SUBTOTAL of Disbursements This Page (optional)	517.57
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 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
National Rifle Association of America Political Victory Fund

A.	Full Name (Last, First, Middle Initial) Prolist Inc.	Transaction ID: 37385469 Date of Disbursement 10 / 30 / 2010
	Mailing Address 8341 Beechcraft Avenue	Amount of Each Disbursement this Period 67.76
	City Gaithersburg State MD Zip Code 20879-1509	
	Purpose of Disbursement Independent Expenditure - Postcards	011 Category/ Type
	Candidate Name Terri Gregory	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: KS District: 10	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		Independent Expenditure - Postcards

B.	Full Name (Last, First, Middle Initial) Prolist Inc.	Transaction ID: 37385470 Date of Disbursement 10 / 30 / 2010
	Mailing Address 8341 Beechcraft Avenue	Amount of Each Disbursement this Period 83.63
	City Gaithersburg State MD Zip Code 20879-1509	
	Purpose of Disbursement Independent Expenditure - Postcards	011 Category/ Type
	Candidate Name Amanda Grosserode	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: KS District: 16	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		Independent Expenditure - Postcards

C.	Full Name (Last, First, Middle Initial) Prolist Inc.	Transaction ID: 37385471 Date of Disbursement 10 / 30 / 2010
	Mailing Address 8341 Beechcraft Avenue	Amount of Each Disbursement this Period 123.11
	City Gaithersburg State MD Zip Code 20879-1509	
	Purpose of Disbursement Independent Expenditure - Postcards	011 Category/ Type
	Candidate Name Kelly Meigs	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: KS District: 17	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		Independent Expenditure - Postcards

SUBTOTAL of Disbursements This Page (optional)	274.50
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)

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<input 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
National Rifle Association of America Political Victory Fund

A.	Full Name (Last, First, Middle Initial) Prolist Inc.	Transaction ID: 37385472 Date of Disbursement 10 / 30 / 2010
	Mailing Address 8341 Beechcraft Avenue	Amount of Each Disbursement this Period 125.51
	City Gaithersburg State MD Zip Code 20879-1509	
	Purpose of Disbursement Independent Expenditure - Postcards	011 Category/ Type
	Candidate Name John Rubin	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: KS District: 18	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		Independent Expenditure - Postcards

B.	Full Name (Last, First, Middle Initial) Prolist Inc.	Transaction ID: 37385473 Date of Disbursement 10 / 30 / 2010
	Mailing Address 8341 Beechcraft Avenue	Amount of Each Disbursement this Period 101.64
	City Gaithersburg State MD Zip Code 20879-1509	
	Purpose of Disbursement Independent Expenditure - Postcards	011 Category/ Type
	Candidate Name Rob Bruchman	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: KS District: 20	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		Independent Expenditure - Postcards

C.	Full Name (Last, First, Middle Initial) Prolist Inc.	Transaction ID: 37385474 Date of Disbursement 10 / 30 / 2010
	Mailing Address 8341 Beechcraft Avenue	Amount of Each Disbursement this Period 58.42
	City Gaithersburg State MD Zip Code 20879-1509	
	Purpose of Disbursement Independent Expenditure - Postcards	011 Category/ Type
	Candidate Name Greg Smith	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: KS District: 22	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		Independent Expenditure - Postcards

SUBTOTAL of Disbursements This Page (optional)	▶	285.57
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 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
National Rifle Association of America Political Victory Fund

A.	Full Name (Last, First, Middle Initial) Prolist Inc.	Transaction ID: 37385475 Date of Disbursement 10 / 30 / 2010
	Mailing Address 8341 Beechcraft Avenue	Amount of Each Disbursement this Period 161.52
	City Gaithersburg State MD Zip Code 20879-1509	
	Purpose of Disbursement Independent Expenditure - Postcards	011 Category/ Type
	Candidate Name KS Rep. Anthony Brown	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: KS District: 38	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		Independent Expenditure - Postcards

B.	Full Name (Last, First, Middle Initial) Prolist Inc.	Transaction ID: 37385476 Date of Disbursement 10 / 30 / 2010
	Mailing Address 8341 Beechcraft Avenue	Amount of Each Disbursement this Period 36.68
	City Gaithersburg State MD Zip Code 20879-1509	
	Purpose of Disbursement Independent Expenditure - Postcards	011 Category/ Type
	Candidate Name Jana Goodman	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: KS District: 41	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		Independent Expenditure - Postcards

C.	Full Name (Last, First, Middle Initial) Prolist Inc.	Transaction ID: 37385477 Date of Disbursement 10 / 30 / 2010
	Mailing Address 8341 Beechcraft Avenue	Amount of Each Disbursement this Period 43.48
	City Gaithersburg State MD Zip Code 20879-1509	
	Purpose of Disbursement Independent Expenditure - Postcards	011 Category/ Type
	Candidate Name Lana Gordon	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: KS District: 52	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		Independent Expenditure - Postcards

SUBTOTAL of Disbursements This Page (optional)	▶	241.68
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 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
National Rifle Association of America Political Victory Fund

A.	Full Name (Last, First, Middle Initial) Prolist Inc.	Transaction ID: 37385478 Date of Disbursement 10 / 30 / 2010
	Mailing Address 8341 Beechcraft Avenue	Amount of Each Disbursement this Period 22.67
	City Gaithersburg State MD Zip Code 20879-1509	
	Purpose of Disbursement Independent Expenditure - Postcards	011 Category/ Type
	Candidate Name Bruce Williamson	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: KS District: 55	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		Independent Expenditure - Postcards

B.	Full Name (Last, First, Middle Initial) Prolist Inc.	Transaction ID: 37385479 Date of Disbursement 10 / 30 / 2010
	Mailing Address 8341 Beechcraft Avenue	Amount of Each Disbursement this Period 25.08
	City Gaithersburg State MD Zip Code 20879-1509	
	Purpose of Disbursement Independent Expenditure - Postcards	011 Category/ Type
	Candidate Name Becky Nioce	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: KS District: 56	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		Independent Expenditure - Postcards

C.	Full Name (Last, First, Middle Initial) Prolist Inc.	Transaction ID: 37385480 Date of Disbursement 10 / 30 / 2010
	Mailing Address 8341 Beechcraft Avenue	Amount of Each Disbursement this Period 23.88
	City Gaithersburg State MD Zip Code 20879-1509	
	Purpose of Disbursement Independent Expenditure - Postcards	011 Category/ Type
	Candidate Name Lee Modesitt	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: KS District: 66	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		Independent Expenditure - Postcards

SUBTOTAL of Disbursements This Page (optional)	71.63
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)

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<input 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
National Rifle Association of America Political Victory Fund

A. Full Name (Last, First, Middle Initial) Prolist Inc. <hr/> Mailing Address 8341 Beechcraft Avenue <hr/> City Gaithersburg State MD Zip Code 20879-1509 Purpose of Disbursement Independent Expenditure - Postcards Candidate Name Tom Arpke Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: KS District: 69 Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 37385481 Date of Disbursement 10 / 30 / 2010
	Amount of Each Disbursement this Period 25.47 Independent Expenditure - Postcards

B. Full Name (Last, First, Middle Initial) Prolist Inc. <hr/> Mailing Address 8341 Beechcraft Avenue <hr/> City Gaithersburg State MD Zip Code 20879-1509 Purpose of Disbursement Independent Expenditure - Postcards Candidate Name John Stevens Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: KS District: 86 Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 37385482 Date of Disbursement 10 / 30 / 2010
	Amount of Each Disbursement this Period 12.27 Independent Expenditure - Postcards

C. Full Name (Last, First, Middle Initial) Prolist Inc. <hr/> Mailing Address 8341 Beechcraft Avenue <hr/> City Gaithersburg State MD Zip Code 20879-1509 Purpose of Disbursement Independent Expenditure - Postcards Candidate Name KS Rep. Phil Hermanson Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: KS District: 96 Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 37385483 Date of Disbursement 10 / 30 / 2010
	Amount of Each Disbursement this Period 26.14 Independent Expenditure - Postcards

SUBTOTAL of Disbursements This Page (optional) ▶	63.88
TOTAL This Period (last page this line number only) ▶	(Empty box)

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 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
National Rifle Association of America Political Victory Fund

A. Full Name (Last, First, Middle Initial) Prolist Inc. <hr/> Mailing Address 8341 Beechcraft Avenue <hr/> City Gaithersburg State MD Zip Code 20879-1509 <hr/> Purpose of Disbursement Independent Expenditure - Postcards Candidate Name Sam Brownback <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 37385484 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 3 0 / 2 0 1 0
	Amount of Each Disbursement this Period 506.34 Independent Expenditure - Postcards
B. Full Name (Last, First, Middle Initial) Prolist Inc. <hr/> Mailing Address 8341 Beechcraft Avenue <hr/> City Gaithersburg State MD Zip Code 20879-1509 <hr/> Purpose of Disbursement Independent Expenditure - Postcards Candidate Name Kris Kobach <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 37385485 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 3 0 / 2 0 1 0
	Amount of Each Disbursement this Period 506.30 Independent Expenditure - Postcards
C. Full Name (Last, First, Middle Initial) Prolist Inc. <hr/> Mailing Address 8341 Beechcraft Avenue <hr/> City Gaithersburg State MD Zip Code 20879-1509 <hr/> Purpose of Disbursement Independent Expenditure - Postage Candidate Name Chris Dudley <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 37386536 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 3 0 / 2 0 1 0
	Amount of Each Disbursement this Period 8132.10 Independent Expenditure - Postage

SUBTOTAL of Disbursements This Page (optional) ▶

9144.74

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 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
National Rifle Association of America Political Victory Fund

<p>A. Full Name (Last, First, Middle Initial) Prolist Inc.</p> <p>Mailing Address 8341 Beechcraft Avenue</p> <p>City Gaithersburg State MD Zip Code 20879-1509</p> <p>Purpose of Disbursement Independent Expenditure - Postcards</p> <p>Candidate Name Chris Dudley</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 37386550 Date of Disbursement 10 / 30 / 2010</p> <p>Amount of Each Disbursement this Period 520.34</p> <p>011 Category/ Type</p> <p>Independent Expenditure - Postcards</p>
<p>B. Full Name (Last, First, Middle Initial) Simone Gordon for State Representative</p> <p>Mailing Address 251 W. Broadway #113</p> <p>City Eugene State OR Zip Code 97401</p> <p>Purpose of Disbursement Void - Simone Gordon for State Representative</p> <p>Candidate Name Simone Gordon</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: OR District: 08</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 37539617 Date of Disbursement 10 / 31 / 2010</p> <p>Amount of Each Disbursement this Period -500.00</p> <p>011 Category/ Type</p> <p>Void - Simone Gordon for State Representative</p>
<p>C. Full Name (Last, First, Middle Initial) Lyle Larson for State Representative</p> <p>Mailing Address P.O. Box 171148</p> <p>City San Antonio State TX Zip Code 78217</p> <p>Purpose of Disbursement Void - Lyle Larson for State Representative</p> <p>Candidate Name Lyle Larson</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: TX District: 22</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 37539619 Date of Disbursement 10 / 31 / 2010</p> <p>Amount of Each Disbursement this Period -500.00</p> <p>011 Category/ Type</p> <p>Void - Lyle Larson for St- ate Representative</p>

SUBTOTAL of Disbursements This Page (optional) ▶

-479.66

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

-

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
National Rifle Association of America Political Victory Fund

<p>A. Full Name (Last, First, Middle Initial) Jim McReynolds Campaign</p> <p>Mailing Address P.O. Box 155056</p> <p>City Lufkin State TX Zip Code 75915</p> <p>Purpose of Disbursement Void - Jim McReynolds Campaign</p> <p>Candidate Name Jim McReynolds</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: TX District: 12</p>	<p>Transaction ID: 37539621</p> <p>Date of Disbursement 10 / 31 / 2010</p> <p>Amount of Each Disbursement this Period -500.00</p> <p>011 Category/ Type</p> <p>Void - Jim McReynolds Cam- paign</p>
<p>B. Full Name (Last, First, Middle Initial) Committee to Elect Marc Gergely</p> <p>Mailing Address P.O. Box 221</p> <p>City McKeesport State PA Zip Code 15134</p> <p>Purpose of Disbursement Void - Committee to Elect Marc Gergely</p> <p>Candidate Name PA Rep. Marc Gergely</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: PA District: 35</p>	<p>Transaction ID: 37539623</p> <p>Date of Disbursement 10 / 31 / 2010</p> <p>Amount of Each Disbursement this Period -250.00</p> <p>011 Category/ Type</p> <p>Void - Committee to Elect Marc Gergely</p>
<p>C. Full Name (Last, First, Middle Initial) Federal Capitol Communications Corporation</p> <p>Mailing Address 1120 G Street, NW Suite 600</p> <p>City Washington State DC Zip Code 20005</p> <p>Purpose of Disbursement Independent Expenditure - TV & Radio Advertising</p> <p>Candidate Name Scott Walker</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: 37561001</p> <p>Date of Disbursement 11 / 16 / 2010</p> <p>Amount of Each Disbursement this Period 142118.13</p> <p>011 Category/ Type</p> <p>Independent Expenditure - TV & Radio Advertising</p>

SUBTOTAL of Disbursements This Page (optional) ▶

141368.13

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)

PAGE 201 / 484

<input 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
National Rifle Association of America Political Victory Fund

<p>A.</p> <p>Full Name (Last, First, Middle Initial) Federal Capitol Communications Corporation</p> <p>Mailing Address 1120 G Street, NW Suite 600</p> <p>City Washington State DC Zip Code 20005</p> <p>Purpose of Disbursement Independent Expenditure - TV Ad Production</p> <p>Candidate Name Scott Walker</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: 37561005 Date of Disbursement 11 / 16 / 2010</p> <p>Amount of Each Disbursement this Period 16125.00</p> <p>011 Category/ Type</p> <p>Independent Expenditure - TV Ad Production</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) Federal Capitol Communications Corporation</p> <p>Mailing Address 1120 G Street, NW Suite 600</p> <p>City Washington State DC Zip Code 20005</p> <p>Purpose of Disbursement Independent Expenditure - Radio Ad Production</p> <p>Candidate Name Scott Walker</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: 37561006 Date of Disbursement 11 / 16 / 2010</p> <p>Amount of Each Disbursement this Period 3250.00</p> <p>011 Category/ Type</p> <p>Independent Expenditure - Radio Ad Production</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) Prolist Inc.</p> <p>Mailing Address 8341 Beechcraft Avenue</p> <p>City Gaithersburg State MD Zip Code 20879-1509</p> <p>Purpose of Disbursement Independent Expenditure - Postage</p> <p>Candidate Name Kent Sorenson</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: IA District:</p>	<p>Transaction ID: 37681252 Date of Disbursement 11 / 17 / 2010</p> <p>Amount of Each Disbursement this Period 701.54</p> <p>011 Category/ Type</p> <p>Independent Expenditure - Postage</p>

SUBTOTAL of Disbursements This Page (optional) ▶

20076.54

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 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
National Rifle Association of America Political Victory Fund

A. Full Name (Last, First, Middle Initial) Prolist Inc. <hr/> Mailing Address 8341 Beechcraft Avenue <hr/> City Gaithersburg State MD Zip Code 20879-1509 <hr/> Purpose of Disbursement Independent Expenditure - Postage Candidate Name Brenna Findley <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 37681254 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 1 7 / 2 0 1 0
	Amount of Each Disbursement this Period 350.77
	Category/ Type 011
	Independent Expenditure - Postage

B. Full Name (Last, First, Middle Initial) Prolist Inc. <hr/> Mailing Address 8341 Beechcraft Avenue <hr/> City Gaithersburg State MD Zip Code 20879-1509 <hr/> Purpose of Disbursement Independent Expenditure - Postcards Candidate Name Kent Sorenson <hr/> Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: IA District: <hr/> Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 37681257 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 1 7 / 2 0 1 0
	Amount of Each Disbursement this Period 269.44
	Category/ Type 011
	Independent Expenditure - Postcards

C. Full Name (Last, First, Middle Initial) Prolist Inc. <hr/> Mailing Address 8341 Beechcraft Avenue <hr/> City Gaithersburg State MD Zip Code 20879-1509 <hr/> Purpose of Disbursement Independent Expenditure - Postcards Candidate Name Brenna Findley <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 37681258 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 1 7 / 2 0 1 0
	Amount of Each Disbursement this Period 134.71
	Category/ Type 011
	Independent Expenditure - Postcards

SUBTOTAL of Disbursements This Page (optional) ▶	754.92
TOTAL This Period (last page this line number only) ▶	(Empty box)

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 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
National Rifle Association of America Political Victory Fund

A.	Full Name (Last, First, Middle Initial) NRA Institute for Legislative Action	Transaction ID: 37681362 Date of Disbursement 11 / 17 / 2010
	Mailing Address 11250 Waples Mill Road	Amount of Each Disbursement this Period 37.15
	City Fairfax State VA Zip Code 22030	
	Purpose of Disbursement In-Kind - NRA Logo Items	011 Category/ Type
	Candidate Name TX Rep. Dan Flynn	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: TX District: 02	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		In-Kind - NRA Logo Items

B.	Full Name (Last, First, Middle Initial) NRA Institute for Legislative Action	Transaction ID: 37681363 Date of Disbursement 11 / 17 / 2010
	Mailing Address 11250 Waples Mill Road	Amount of Each Disbursement this Period 36.89
	City Fairfax State VA Zip Code 22030	
	Purpose of Disbursement In-Kind - Shipping & Handling	011 Category/ Type
	Candidate Name TX Rep. Dan Flynn	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: TX District: 02	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		In-Kind - Shipping & Handling

C.	Full Name (Last, First, Middle Initial) David Conte	Transaction ID: 37682851 Date of Disbursement 11 / 18 / 2010
	Mailing Address 47485 Meadow Ridge Court	Amount of Each Disbursement this Period 180.00
	City Potomac Falls State VA Zip Code 20165	
	Purpose of Disbursement Travel Expense	002 Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		Travel Expense

SUBTOTAL of Disbursements This Page (optional)	254.04
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)

PAGE 204 / 484

<input 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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

NAME OF COMMITTEE (In Full)
National Rifle Association of America Political Victory Fund

A.	Full Name (Last, First, Middle Initial) NRA Institute for Legislative Action	Transaction ID: 37683250 Date of Disbursement 11 / 16 / 2010
	Mailing Address 11250 Waples Mill Road	Amount of Each Disbursement this Period 62.40
	City Fairfax State VA Zip Code 22030	
	Purpose of Disbursement Independent Expenditure - Travel Expense	011 Category/ Type
	Candidate Name Scott Walker	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Independent Expenditure - Travel Expense
	State: District:	

B.	Full Name (Last, First, Middle Initial) Brent Gardner	Transaction ID: 37683255 Date of Disbursement 11 / 16 / 2010
	Mailing Address 11250 Waples Mill Road	Amount of Each Disbursement this Period 78.00
	City Fairfax State VA Zip Code 22030	
	Purpose of Disbursement Independent Expenditure - Travel Expense	011 Category/ Type
	Candidate Name Scott Walker	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Independent Expenditure - Travel Expense
	State: District:	

C.	Full Name (Last, First, Middle Initial) Brooks for Assembly	Transaction ID: 37711422 Date of Disbursement 11 / 22 / 2010
	Mailing Address S. 4311 Grote Hill Road	Amount of Each Disbursement this Period -500.00
	City Reedsburg State WI Zip Code 53959	
	Purpose of Disbursement Void - Brooks for Assembly	011 Category/ Type
	Candidate Name WI Rep. Edward Brooks	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Void - Brooks for Assembly
	State: WI District: 50	

SUBTOTAL of Disbursements This Page (optional)	-359.60
TOTAL This Period (last page this line number only)	881289.26

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 205 / 484
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)
National Rifle Association of America Political Victory Fund

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Master Print, Inc.	Nature of Debt (Purpose): Print 4 Color Postcards
Mailing Address P.O. Box 1467	
City State ZIP Code Newington VA 22122	

Outstanding Balance Beginning This Period 29820.98	Transaction ID: 39069633	
Amount Incurred This Period 140993.78	Payment This Period 29820.98	Outstanding Balance at Close of This Period 140993.78

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Prolist, Inc.	Nature of Debt (Purpose): Postage
Mailing Address 8341 Beechcraft Avenue	
City State ZIP Code Gaithersburg MD 20879	

Outstanding Balance Beginning This Period 13023.85	Transaction ID: 39069634	
Amount Incurred This Period 1306132.53	Payment This Period 9033.20	Outstanding Balance at Close of This Period 1310123.18

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Prolist, Inc.	Nature of Debt (Purpose): Postcards
Mailing Address 8341 Beechcraft Avenue	
City State ZIP Code Gaithersburg MD 20879	

Outstanding Balance Beginning This Period 7977.77	Transaction ID: 39069635	
Amount Incurred This Period 66317.16	Payment This Period 5182.09	Outstanding Balance at Close of This Period 69112.84

1) SUBTOTALS This Period This Page (optional).....	1520229.80
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)	

SCHEDULE D (FEC Form 3X)

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)
National Rifle Association of America Political Victory Fund

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Master Print, Inc.			Nature of Debt (Purpose): Print 4 Color Flyers
Mailing Address P.O. Box 1467			
City Newington	State VA	ZIP Code 22122	

Outstanding Balance Beginning This Period <input type="text" value="2153.00"/>		Transaction ID: 39069636	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="2153.00"/>	Outstanding Balance at Close of This Period <input type="text" value="0.00"/>	

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Novacon Promotional Products			Nature of Debt (Purpose): Bumper Stickers
Mailing Address 11100 Pulaski Highway			
City White Marsh	State MD	ZIP Code 21162	

Outstanding Balance Beginning This Period <input type="text" value="512.80"/>		Transaction ID: 39069637	
Amount Incurred This Period <input type="text" value="69.76"/>	Payment This Period <input type="text" value="582.56"/>	Outstanding Balance at Close of This Period <input type="text" value="0.00"/>	

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Federal Capitol Communications Corporation			Nature of Debt (Purpose): Radio Ad Production Cost
Mailing Address 1120 G Street, NW Suite 600			
City Washington	State DC	ZIP Code 20005	

Outstanding Balance Beginning This Period <input type="text" value="11000.00"/>		Transaction ID: 39069638	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="11000.00"/>	

1) SUBTOTALS This Period This Page (optional).....	<input type="text" value="11000.00"/>
2) TOTALS This Period (last page this line number only).....	<input type="text"/>
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	<input type="text"/>
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	<input type="text"/>

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 207 / 484
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)
National Rifle Association of America Political Victory Fund

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor BlueFront Strategies, LLC	Nature of Debt (Purpose): On Line Advertisng
Mailing Address 44 Canal Center Plaza, G1	
City State ZIP Code Alexandria VA 22314	

Outstanding Balance Beginning This Period 190622.00	Transaction ID: 39069639	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 190622.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor OnMessage, Inc.	Nature of Debt (Purpose): TV Ad Production - Estimated Cost
Mailing Address 815 Slaters Lane	
City State ZIP Code Alexandria VA 22314	

Outstanding Balance Beginning This Period 0.00	Transaction ID: 39069640	
Amount Incurred This Period 40277.81	Payment This Period 0.00	Outstanding Balance at Close of This Period 40277.81

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Prolist, Inc.	Nature of Debt (Purpose): E-Mail Alert
Mailing Address 8341 Beechcraft Avenue	
City State ZIP Code Gaithersburg MD 20879	

Outstanding Balance Beginning This Period 0.00	Transaction ID: 39069641	
Amount Incurred This Period 1834.26	Payment This Period 0.00	Outstanding Balance at Close of This Period 1834.26

1) SUBTOTALS This Period This Page (optional).....	▶	232734.07
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)	▶	

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 208 / 484
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)
National Rifle Association of America Political Victory Fund

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Prolist, Inc.	Nature of Debt (Purpose): Postage
Mailing Address 8341 Beechcraft Avenue	
City Gaithersburg State MD ZIP Code 20879	

Outstanding Balance Beginning This Period 0.00	Transaction ID: 39069642	
Amount Incurred This Period 36481.28	Payment This Period 0.00	Outstanding Balance at Close of This Period 36481.28

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Prolist, Inc.	Nature of Debt (Purpose): Postcards
Mailing Address 8341 Beechcraft Avenue	
City Gaithersburg State MD ZIP Code 20879	

Outstanding Balance Beginning This Period 0.00	Transaction ID: 39069643	
Amount Incurred This Period 30642.33	Payment This Period 0.00	Outstanding Balance at Close of This Period 30642.33

1) SUBTOTALS This Period This Page (optional).....	67123.61
2) TOTALS This Period (last page this line number only).....	1831087.48
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	0.00
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	1831087.48

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund	FEC IDENTIFICATION NUMBER C C00053553
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
Federal Capitol Communications Corporation

Mailing Address
1120 G Street, NW Suite 600

City State Zip Code
Washington DC 20005

Purpose of Expenditure Category/Type
Radio Advertising 004

Name of Federal Candidate supported or Opposed by expenditure:
Sandy Adams

Calendar Year-To-Date Per Election for Office Sought 21775.00

Date
MM / DD / YYYY
10 / 18 / 2010

Amount
10637.50

Transaction ID: 37227951

Office Sought: House State: FL
 Senate District: 24
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010
[MEMO ITEM]
Radio Advertising

Full Name (Last, First, Middle, Initial) of Payee
Federal Capitol Communications Corporation

Mailing Address
1120 G Street, NW Suite 600

City State Zip Code
Washington DC 20005

Purpose of Expenditure Category/Type
Radio Ad Production - Estimated Cost 004

Name of Federal Candidate supported or Opposed by expenditure:
Sandy Adams

Calendar Year-To-Date Per Election for Office Sought 22275.00

Date
MM / DD / YYYY
10 / 18 / 2010

Amount
500.00

Transaction ID: 37228250

Office Sought: House State: FL
 Senate District: 24
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010
[MEMO ITEM]
Radio Ad Production - Estimated Cost

(a) SUBTOTAL of Itemized Independent Expenditures	0.00
(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.

Mary Rose Adkins
Signature

Date MM / DD / YYYY
03 / 03 / 2011

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund		FEC IDENTIFICATION NUMBER C C00053553
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice		

Full Name (Last, First, Middle, Initial) of Payee
Federal Capitol Communications Corporation

Mailing Address
1120 G Street, NW Suite 600

City Washington	State DC	Zip Code 20005
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Purpose of Expenditure Radio Advertising	Category/ Type 004
---	--------------------------

Name of Federal Candidate supported or Opposed by expenditure:
Mr. Robert Schilling

Calendar Year-To-Date Per Election for Office Sought	39538.57
---	----------

Date
M M / D D / Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Amount
18962.50

Transaction ID: 37228341

Office Sought: House State: IL
 Senate District: 17
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

[MEMO ITEM]
Radio Advertising

Full Name (Last, First, Middle, Initial) of Payee
Federal Capitol Communications Corporation

Mailing Address
1120 G Street, NW Suite 600

City Washington	State DC	Zip Code 20005
--------------------	-------------	-------------------

Purpose of Expenditure Radio Ad Production - Estimated Cost	Category/ Type 004
--	--------------------------

Name of Federal Candidate supported or Opposed by expenditure:
Mr. Robert Schilling

Calendar Year-To-Date Per Election for Office Sought	40038.57
---	----------

Date
M M / D D / Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Amount
500.00

Transaction ID: 37228438

Office Sought: House State: IL
 Senate District: 17
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

[MEMO ITEM]
Radio Ad Production - Estimated Cost

(a) SUBTOTAL of Itemized Independent Expenditures	0.00
(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.

Mary Rose Adkins
Signature

Date M M / D D / Y Y Y Y
0 3 / 0 3 / 2 0 1 1

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund	FEC IDENTIFICATION NUMBER C C00053553
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
Federal Capitol Communications Corporation

Mailing Address
1120 G Street, NW Suite 600

City State Zip Code
Washington DC 20005

Purpose of Expenditure Category/Type
Radio Advertising 004

Name of Federal Candidate supported or Opposed by expenditure:
Rep. Russ Carnahan

Calendar Year-To-Date Per Election for Office Sought 66787.21

Date
MM / DD / YYYY
10 / 18 / 2010

Amount
30525.00

Transaction ID: 37228682

Office Sought: House State: MO
 Senate District: 03
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010
[MEMO ITEM]
Radio Advertising

Full Name (Last, First, Middle, Initial) of Payee
Federal Capitol Communications Corporation

Mailing Address
1120 G Street, NW Suite 600

City State Zip Code
Washington DC 20005

Purpose of Expenditure Category/Type
Radio Ad Production - Estimated Cost 004

Name of Federal Candidate supported or Opposed by expenditure:
Rep. Russ Carnahan

Calendar Year-To-Date Per Election for Office Sought 69287.21

Date
MM / DD / YYYY
10 / 18 / 2010

Amount
2500.00

Transaction ID: 37228820

Office Sought: House State: MO
 Senate District: 03
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010
[MEMO ITEM]
Radio Ad Production - Estimated Cost

(a) SUBTOTAL of Itemized Independent Expenditures	0.00
(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.

Mary Rose Adkins
Signature

Date MM / DD / YYYY
03 / 03 / 2011

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund	FEC IDENTIFICATION NUMBER C C00053553
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
Federal Capitol Communications Corporation

Mailing Address
1120 G Street, NW Suite 600

City State Zip Code
Washington DC 20005

Purpose of Expenditure Category/Type
Graphic Art Design 004

Name of Federal Candidate supported or Opposed by expenditure:
Mr. John Boozman

Calendar Year-To-Date Per Election for Office Sought 642.82

Date
M M / D D / Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Amount
642.82

Transaction ID: 37253899

Office Sought: House State: AR
 Senate District: _____
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

Full Name (Last, First, Middle, Initial) of Payee
Federal Capitol Communications Corporation

Mailing Address
1120 G Street, NW Suite 600

City State Zip Code
Washington DC 20005

Purpose of Expenditure Category/Type
Graphic Art Design 004

Name of Federal Candidate supported or Opposed by expenditure:
Mr. Sam Caligiuri

Calendar Year-To-Date Per Election for Office Sought 642.86

Date
M M / D D / Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Amount
642.86

Transaction ID: 37253953

Office Sought: House State: CT
 Senate District: 05
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

(a) SUBTOTAL of Itemized Independent Expenditures	1285.68
(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
Signature

Date M M / D D / Y Y Y Y
0 3 / 0 3 / 2 0 1 1

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund		FEC IDENTIFICATION NUMBER C C00053553
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice		

Full Name (Last, First, Middle, Initial) of Payee
Federal Capitol Communications Corporation

Mailing Address
1120 G Street, NW Suite 600

City Washington	State DC	Zip Code 20005
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Purpose of Expenditure Graphic Art Design	Category/ Type 004
--	--------------------------

Name of Federal Candidate supported or Opposed by expenditure:
Sen. Richard M. Burr

Calendar Year-To-Date Per Election for Office Sought	31089.07
---	----------

Date
M M / D D / Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Amount
642.82

Transaction ID: 37254079

Office Sought: House State: NC
 Senate District: _____
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

Full Name (Last, First, Middle, Initial) of Payee
Federal Capitol Communications Corporation

Mailing Address
1120 G Street, NW Suite 600

City Washington	State DC	Zip Code 20005
--------------------	-------------	-------------------

Purpose of Expenditure Graphic Art Design	Category/ Type 004
--	--------------------------

Name of Federal Candidate supported or Opposed by expenditure:
Mr. Dennis Ross

Calendar Year-To-Date Per Election for Office Sought	642.86
---	--------

Date
M M / D D / Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Amount
642.86

Transaction ID: 37254189

Office Sought: House State: FL
 Senate District: 12
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

(a) SUBTOTAL of Itemized Independent Expenditures	1285.68
(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
Signature

Date M M / D D / Y Y Y Y
0 3 / 0 3 / 2 0 1 1

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund	FEC IDENTIFICATION NUMBER C C00053553
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
Federal Capitol Communications Corporation

Mailing Address
1120 G Street, NW Suite 600

City State Zip Code
Washington DC 20005

Purpose of Expenditure Category/Type
Graphic Art Design 004

Name of Federal Candidate supported or Opposed by expenditure:
Mr. David Schweikert

Calendar Year-To-Date Per Election for Office Sought
101069.13

Date
MM / DD / YYYY
10 / 19 / 2010

Amount
642.86

Transaction ID: 37254222

Office Sought: House State: AZ
 Senate District: 05
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

Full Name (Last, First, Middle, Initial) of Payee
Federal Capitol Communications Corporation

Mailing Address
1120 G Street, NW Suite 600

City State Zip Code
Washington DC 20005

Purpose of Expenditure Category/Type
Graphic Art Design 004

Name of Federal Candidate supported or Opposed by expenditure:
Mr. Jesse Kelly

Calendar Year-To-Date Per Election for Office Sought
54229.16

Date
MM / DD / YYYY
10 / 19 / 2010

Amount
642.86

Transaction ID: 37254256

Office Sought: House State: AZ
 Senate District: 08
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

(a) SUBTOTAL of Itemized Independent Expenditures	1285.72
(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
Signature

Date MM / DD / YYYY
03 / 03 / 2011

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund	FEC IDENTIFICATION NUMBER C C00053553
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
Federal Capitol Communications Corporation

Mailing Address
1120 G Street, NW Suite 600

City Washington	State DC	Zip Code 20005
--------------------	-------------	-------------------

Purpose of Expenditure Graphic Art Design	Category/ Type 004
--	--------------------------

Name of Federal Candidate supported or Opposed by expenditure:
Mr. Ryan Frazier

Calendar Year-To-Date Per Election for Office Sought	4804.59
---	---------

Date
M M / D D / Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Amount
642.86

Transaction ID: 37254287

Office Sought: House State: CO
 Senate District: 07
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

Full Name (Last, First, Middle, Initial) of Payee
Federal Capitol Communications Corporation

Mailing Address
1120 G Street, NW Suite 600

City Washington	State DC	Zip Code 20005
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Purpose of Expenditure Graphic Art Design	Category/ Type 004
--	--------------------------

Name of Federal Candidate supported or Opposed by expenditure:
Mr. Allen West

Calendar Year-To-Date Per Election for Office Sought	642.86
---	--------

Date
M M / D D / Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Amount
642.86

Transaction ID: 37254324

Office Sought: House State: FL
 Senate District: 22
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

(a) SUBTOTAL of Itemized Independent Expenditures	1285.72
(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
Signature

Date M M / D D / Y Y Y Y
0 3 / 0 3 / 2 0 1 1

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund	FEC IDENTIFICATION NUMBER C C00053553
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
Federal Capitol Communications Corporation

Mailing Address
1120 G Street, NW Suite 600

City State Zip Code
Washington DC 20005

Purpose of Expenditure Category/Type
Graphic Art Design 004

Name of Federal Candidate supported or Opposed by expenditure:
Sandy Adams

Calendar Year-To-Date Per Election for Office Sought 22917.86

Date
M M / D D / Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Amount
642.86

Transaction ID: 37254367

Office Sought: House State: FL
 Senate District: 24
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

Full Name (Last, First, Middle, Initial) of Payee
Federal Capitol Communications Corporation

Mailing Address
1120 G Street, NW Suite 600

City State Zip Code
Washington DC 20005

Purpose of Expenditure Category/Type
Graphic Art Design 004

Name of Federal Candidate supported or Opposed by expenditure:
Mr. David Rivera

Calendar Year-To-Date Per Election for Office Sought 14067.67

Date
M M / D D / Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Amount
642.86

Transaction ID: 37254400

Office Sought: House State: FL
 Senate District: 25
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

(a) SUBTOTAL of Itemized Independent Expenditures	1285.72
(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
Signature

Date M M / D D / Y Y Y Y
0 3 / 0 3 / 2 0 1 1

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

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund	FEC IDENTIFICATION NUMBER C C00053553
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
Federal Capitol Communications Corporation

Date
M M / D D / Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Mailing Address
1120 G Street, NW Suite 600

Amount
642.86

City State Zip Code
Washington DC 20005

Transaction ID: 37254431

Purpose of Expenditure
Graphic Art Design

Category/Type
004

Office Sought: House State: FL
 Senate District: 08
 Presidential

Name of Federal Candidate supported or Opposed by expenditure:
Mr. Daniel Webster

Check One: Support Oppose

Calendar Year-To-Date Per Election for Office Sought
642.86

Disbursement For: Primary General
 Other (specify) : _____
2010

Full Name (Last, First, Middle, Initial) of Payee
Federal Capitol Communications Corporation

Date
M M / D D / Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Mailing Address
1120 G Street, NW Suite 600

Amount
642.86

City State Zip Code
Washington DC 20005

Transaction ID: 37254458

Purpose of Expenditure
Graphic Art Design

Category/Type
004

Office Sought: House State: HI
 Senate District: 01
 Presidential

Name of Federal Candidate supported or Opposed by expenditure:
Mr. Charles Djou

Check One: Support Oppose

Calendar Year-To-Date Per Election for Office Sought
6880.77

Disbursement For: Primary General
 Other (specify) : _____
2010

(a) SUBTOTAL of Itemized Independent Expenditures	1285.72
(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
Signature

Date M M / D D / Y Y Y Y
0 3 / 0 3 / 2 0 1 1

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund	FEC IDENTIFICATION NUMBER C C00053553
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
Federal Capitol Communications Corporation

Date
M M / D D / Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Mailing Address
1120 G Street, NW Suite 600

Amount
642.86

City State Zip Code
Washington DC 20005

Transaction ID: 37254484
Office Sought: House State: IL
 Senate District: 17
 Presidential

Purpose of Expenditure Category/Type
Graphic Art Design 004

Name of Federal Candidate supported or Opposed by expenditure:
Mr. Robert Schilling

Check One: Support Oppose

Calendar Year-To-Date Per Election for Office Sought
40681.43

Disbursement For: Primary General
 Other (specify) : _____
2010

Full Name (Last, First, Middle, Initial) of Payee
Federal Capitol Communications Corporation

Date
M M / D D / Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Mailing Address
1120 G Street, NW Suite 600

Amount
642.86

City State Zip Code
Washington DC 20005

Transaction ID: 37254529
Office Sought: House State: KS
 Senate District: 03
 Presidential

Purpose of Expenditure Category/Type
Graphic Art Design 004

Name of Federal Candidate supported or Opposed by expenditure:
Mr. Kevin Yoder

Check One: Support Oppose

Calendar Year-To-Date Per Election for Office Sought
16299.66

Disbursement For: Primary General
 Other (specify) : _____
2010

(a) SUBTOTAL of Itemized Independent Expenditures	1285.72
(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
Signature

Date M M / D D / Y Y Y Y
0 3 / 0 3 / 2 0 1 1

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund	FEC IDENTIFICATION NUMBER C C00053553
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
Federal Capitol Communications Corporation

Date
M M / D D / Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Mailing Address
1120 G Street, NW Suite 600

Amount
642.86

City State Zip Code
Washington DC 20005

Transaction ID: 37254651

Purpose of Expenditure Category/Type
Graphic Art Design 004

Office Sought: House State: KS
 Senate District: 04
 Presidential

Name of Federal Candidate supported or Opposed by expenditure:
Mike Pompeo

Check One: Support Oppose

Calendar Year-To-Date Per Election for Office Sought
642.86

Disbursement For: Primary General
 Other (specify) : _____
2010

Full Name (Last, First, Middle, Initial) of Payee
Federal Capitol Communications Corporation

Date
M M / D D / Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Mailing Address
1120 G Street, NW Suite 600

Amount
642.86

City State Zip Code
Washington DC 20005

Transaction ID: 37254725

Purpose of Expenditure Category/Type
Graphic Art Design 004

Office Sought: House State: MA
 Senate District: 10
 Presidential

Name of Federal Candidate supported or Opposed by expenditure:
Mr. Jeffrey Perry

Check One: Support Oppose

Calendar Year-To-Date Per Election for Office Sought
642.86

Disbursement For: Primary General
 Other (specify) : _____
2010

(a) SUBTOTAL of Itemized Independent Expenditures	1285.72
(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
Signature

Date M M / D D / Y Y Y Y
0 3 / 0 3 / 2 0 1 1

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund	FEC IDENTIFICATION NUMBER C C00053553
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
Federal Capitol Communications Corporation

Mailing Address
1120 G Street, NW Suite 600

City Washington	State DC	Zip Code 20005
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Purpose of Expenditure Graphic Art Design	Category/Type 004
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Name of Federal Candidate supported or Opposed by expenditure:
Mr. Timothy Walberg

Calendar Year-To-Date Per Election for Office Sought	642.86
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Date
M M / D D / Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Amount
642.86

Transaction ID: 37254790

Office Sought: House State: MI
 Senate District: 07
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

Full Name (Last, First, Middle, Initial) of Payee
Federal Capitol Communications Corporation

Mailing Address
1120 G Street, NW Suite 600

City Washington	State DC	Zip Code 20005
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Purpose of Expenditure Graphic Art Design	Category/Type 004
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Name of Federal Candidate supported or Opposed by expenditure:
Rep. Lee Terry

Calendar Year-To-Date Per Election for Office Sought	642.86
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Date
M M / D D / Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Amount
642.86

Transaction ID: 37254906

Office Sought: House State: NE
 Senate District: 02
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

(a) SUBTOTAL of Itemized Independent Expenditures	1285.72
(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
Signature

Date M M / D D / Y Y Y Y
0 3 / 0 3 / 2 0 1 1

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund	FEC IDENTIFICATION NUMBER C C00053553
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
Federal Capitol Communications Corporation

Date
M M / D D / Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Mailing Address
1120 G Street, NW Suite 600

Amount
642.86

City State Zip Code
Washington DC 20005

Transaction ID: 37254977

Purpose of Expenditure Category/Type
Graphic Art Design 004

Office Sought: House State: NH
 Senate District: 01
 Presidential

Name of Federal Candidate supported or Opposed by expenditure:
Mr. Frank Guinta

Check One: Support Oppose

Calendar Year-To-Date Per Election for Office Sought
7263.41

Disbursement For: Primary General
 Other (specify) : _____
2010

Full Name (Last, First, Middle, Initial) of Payee
Federal Capitol Communications Corporation

Date
M M / D D / Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Mailing Address
1120 G Street, NW Suite 600

Amount
642.86

City State Zip Code
Washington DC 20005

Transaction ID: 37255029

Purpose of Expenditure Category/Type
Graphic Art Design 004

Office Sought: House State: NH
 Senate District: 02
 Presidential

Name of Federal Candidate supported or Opposed by expenditure:
Rep. Charles F. Bass

Check One: Support Oppose

Calendar Year-To-Date Per Election for Office Sought
154828.97

Disbursement For: Primary General
 Other (specify) : _____
2010

(a) SUBTOTAL of Itemized Independent Expenditures	1285.72
(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
Signature

Date M M / D D / Y Y Y Y
0 3 / 0 3 / 2 0 1 1

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund	FEC IDENTIFICATION NUMBER C C00053553
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
Federal Capitol Communications Corporation

Mailing Address
1120 G Street, NW Suite 600

City Washington	State DC	Zip Code 20005
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Purpose of Expenditure Graphic Art Design	Category/ Type 004
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Name of Federal Candidate supported or Opposed by expenditure:
Mr. Jon Runyan

Calendar Year-To-Date Per Election for Office Sought	642.86
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Date
M M / D D / Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Amount
642.86

Transaction ID: 37255070

Office Sought: House State: NJ
 Senate District: 03
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

Full Name (Last, First, Middle, Initial) of Payee
Federal Capitol Communications Corporation

Mailing Address
1120 G Street, NW Suite 600

City Washington	State DC	Zip Code 20005
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Purpose of Expenditure Graphic Art Design	Category/ Type 004
--	--------------------------

Name of Federal Candidate supported or Opposed by expenditure:
Mr. Joe Heck

Calendar Year-To-Date Per Election for Office Sought	1541.85
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Date
M M / D D / Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Amount
642.86

Transaction ID: 37255109

Office Sought: House State: NV
 Senate District: 03
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

(a) SUBTOTAL of Itemized Independent Expenditures	1285.72
(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
Signature

Date M M / D D / Y Y Y Y
0 3 / 0 3 / 2 0 1 1

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund	FEC IDENTIFICATION NUMBER C C00053553
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
Federal Capitol Communications Corporation

Mailing Address
1120 G Street, NW Suite 600

City State Zip Code
Washington DC 20005

Purpose of Expenditure Category/Type
Graphic Art Design 004

Name of Federal Candidate supported or Opposed by expenditure:
Mr. Randolph Altschuler

Calendar Year-To-Date Per Election for Office Sought 9836.98

Date
M M / D D / Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Amount
642.86

Transaction ID: 37255144

Office Sought: House State: NY
 Senate District: 01
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

Full Name (Last, First, Middle, Initial) of Payee
Federal Capitol Communications Corporation

Mailing Address
1120 G Street, NW Suite 600

City State Zip Code
Washington DC 20005

Purpose of Expenditure Category/Type
Graphic Art Design 004

Name of Federal Candidate supported or Opposed by expenditure:
Ms. Nan Hayworth

Calendar Year-To-Date Per Election for Office Sought 5792.16

Date
M M / D D / Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Amount
642.86

Transaction ID: 37255174

Office Sought: House State: NY
 Senate District: 19
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

(a) SUBTOTAL of Itemized Independent Expenditures	1285.72
(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
Signature

Date M M / D D / Y Y Y Y
0 3 / 0 3 / 2 0 1 1

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund	FEC IDENTIFICATION NUMBER C C00053553
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
Federal Capitol Communications Corporation

Mailing Address
1120 G Street, NW Suite 600

City Washington	State DC	Zip Code 20005
--------------------	-------------	-------------------

Purpose of Expenditure Graphic Art Design	Category/ Type 004
--	--------------------------

Name of Federal Candidate supported or Opposed by expenditure:
Mr. Francis Becker

Calendar Year-To-Date Per Election for Office Sought	642.86
---	--------

Date
M M / D D / Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Amount
642.86

Transaction ID: 37255254

Office Sought: House State: NY
 Senate District: 04
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

Full Name (Last, First, Middle, Initial) of Payee
Federal Capitol Communications Corporation

Mailing Address
1120 G Street, NW Suite 600

City Washington	State DC	Zip Code 20005
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Purpose of Expenditure Graphic Art Design	Category/ Type 004
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Name of Federal Candidate supported or Opposed by expenditure:
Mr. Carson Adcock

Calendar Year-To-Date Per Election for Office Sought	642.86
---	--------

Date
M M / D D / Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Amount
642.86

Transaction ID: 37255380

Office Sought: House State: PA
 Senate District: 13
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

(a) SUBTOTAL of Itemized Independent Expenditures	1285.72
(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
Signature

Date M M / D D / Y Y Y Y
0 3 / 0 3 / 2 0 1 1

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund	FEC IDENTIFICATION NUMBER C C00053553
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
Federal Capitol Communications Corporation

Date
M M / D D / Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Mailing Address
1120 G Street, NW Suite 600

Amount
642.86

City State Zip Code
Washington DC 20005

Transaction ID: 37255464

Purpose of Expenditure
Graphic Art Design

Category/Type
004

Office Sought: House State: SC
 Senate District: 05
 Presidential

Name of Federal Candidate supported or Opposed by expenditure:
Mr. John Mulvaney

Check One: Support Oppose

Calendar Year-To-Date Per Election for Office Sought
127611.94

Disbursement For: Primary General
 Other (specify) : _____
2010

Full Name (Last, First, Middle, Initial) of Payee
Federal Capitol Communications Corporation

Date
M M / D D / Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Mailing Address
1120 G Street, NW Suite 600

Amount
642.86

City State Zip Code
Washington DC 20005

Transaction ID: 37255515

Purpose of Expenditure
Graphic Art Design

Category/Type
004

Office Sought: House State: VA
 Senate District: 11
 Presidential

Name of Federal Candidate supported or Opposed by expenditure:
Mr. Keith Fimian

Check One: Support Oppose

Calendar Year-To-Date Per Election for Office Sought
8506.96

Disbursement For: Primary General
 Other (specify) : _____
2010

(a) SUBTOTAL of Itemized Independent Expenditures	1285.72
(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
Signature

Date M M / D D / Y Y Y Y
0 3 / 0 3 / 2 0 1 1

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund	FEC IDENTIFICATION NUMBER C C00053553
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
Federal Capitol Communications Corporation

Mailing Address
1120 G Street, NW Suite 600

City State Zip Code
Washington DC 20005

Purpose of Expenditure Category/Type
Graphic Art Design 004

Name of Federal Candidate supported or Opposed by expenditure:
Mr. David Harmer

Calendar Year-To-Date Per Election for Office Sought 88212.77

Date
M M / D D / Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Amount
283.33

Transaction ID: 37255980

Office Sought: House State: CA
 Senate District: 11
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

Full Name (Last, First, Middle, Initial) of Payee
Federal Capitol Communications Corporation

Mailing Address
1120 G Street, NW Suite 600

City State Zip Code
Washington DC 20005

Purpose of Expenditure Category/Type
Graphic Art Design 004

Name of Federal Candidate supported or Opposed by expenditure:
Mr. James Vidak

Calendar Year-To-Date Per Election for Office Sought 153457.45

Date
M M / D D / Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Amount
283.33

Transaction ID: 37256018

Office Sought: House State: CA
 Senate District: 20
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

(a) SUBTOTAL of Itemized Independent Expenditures	566.66
(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
Signature

Date M M / D D / Y Y Y Y
0 3 / 0 3 / 2 0 1 1

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund		FEC IDENTIFICATION NUMBER C C00053553
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice		

Full Name (Last, First, Middle, Initial) of Payee
Federal Capitol Communications Corporation

Mailing Address
1120 G Street, NW Suite 600

City Washington	State DC	Zip Code 20005
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Purpose of Expenditure Graphic Art Design	Category/ Type 004
--	--------------------------

Name of Federal Candidate supported or Opposed by expenditure:
Rep. Daniel Lungren

Calendar Year-To-Date Per Election for Office Sought	812.39
---	--------

Date
M M / D D / Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Amount
283.33

Transaction ID: 37256057

Office Sought: House State: CA
 Senate District: 03
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

Full Name (Last, First, Middle, Initial) of Payee
Federal Capitol Communications Corporation

Mailing Address
1120 G Street, NW Suite 600

City Washington	State DC	Zip Code 20005
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Purpose of Expenditure Graphic Art Design	Category/ Type 004
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Name of Federal Candidate supported or Opposed by expenditure:
Ms. Carly Fiorina

Calendar Year-To-Date Per Election for Office Sought	276635.39
---	-----------

Date
M M / D D / Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Amount
850.00

Transaction ID: 37256111

Office Sought: House State: CA
 Senate District: _____
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

(a) SUBTOTAL of Itemized Independent Expenditures	1133.33
(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
Signature

Date M M / D D / Y Y Y Y
0 3 / 0 3 / 2 0 1 1

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund	FEC IDENTIFICATION NUMBER C C00053553
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
Federal Capitol Communications Corporation

Date
M M / D D / Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Mailing Address
1120 G Street, NW Suite 600

Amount
283.33

City State Zip Code
Washington DC 20005

Transaction ID: 37256136
Office Sought: House State: IA
 Senate District: 01
 Presidential

Purpose of Expenditure Category/Type
Graphic Art Design 004

Name of Federal Candidate supported or Opposed by expenditure:
Mr. Benjamin Lange

Check One: Support Oppose

Calendar Year-To-Date Per Election for Office Sought
44003.89

Disbursement For: Primary General
 Other (specify) : _____
2010

Full Name (Last, First, Middle, Initial) of Payee
Federal Capitol Communications Corporation

Date
M M / D D / Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Mailing Address
1120 G Street, NW Suite 600

Amount
283.33

City State Zip Code
Washington DC 20005

Transaction ID: 37256267
Office Sought: House State: IA
 Senate District: 02
 Presidential

Purpose of Expenditure Category/Type
Graphic Art Design 004

Name of Federal Candidate supported or Opposed by expenditure:
Mariannette Miller-Meeks

Check One: Support Oppose

Calendar Year-To-Date Per Election for Office Sought
44605.76

Disbursement For: Primary General
 Other (specify) : _____
2010

(a) SUBTOTAL of Itemized Independent Expenditures	566.66
(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
Signature

Date M M / D D / Y Y Y Y
0 3 / 0 3 / 2 0 1 1

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund	FEC IDENTIFICATION NUMBER C C00053553
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
Federal Capitol Communications Corporation

Date
 M M / D D / Y Y Y Y
 1 0 / 1 9 / 2 0 1 0

Mailing Address
1120 G Street, NW Suite 600

Amount
566.67

City State Zip Code
Washington DC 20005

Transaction ID: 37256307

Purpose of Expenditure
Graphic Art Design

Category/Type 004

Office Sought: House State: IA
 Senate District: _____
 Presidential

Name of Federal Candidate supported or Opposed by expenditure:
Sen. Charles E. Grassley

Check One: Support Oppose

Calendar Year-To-Date Per Election for Office Sought
95384.65

Disbursement For: Primary General
 Other (specify) : _____
2010

Full Name (Last, First, Middle, Initial) of Payee
Federal Capitol Communications Corporation

Date
 M M / D D / Y Y Y Y
 1 0 / 1 9 / 2 0 1 0

Mailing Address
1120 G Street, NW Suite 600

Amount
283.34

City State Zip Code
Washington DC 20005

Transaction ID: 37256387

Purpose of Expenditure
Graphic Art Design

Category/Type 004

Office Sought: House State: MO
 Senate District: 03
 Presidential

Name of Federal Candidate supported or Opposed by expenditure:
Mr. Edward Martin

Check One: Support Oppose

Calendar Year-To-Date Per Election for Office Sought
69570.55

Disbursement For: Primary General
 Other (specify) : _____
2010

(a) SUBTOTAL of Itemized Independent Expenditures	850.01
(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
Signature

Date M M / D D / Y Y Y Y
0 3 / 0 3 / 2 0 1 1

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund	FEC IDENTIFICATION NUMBER C C00053553
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
Federal Capitol Communications Corporation

Date
M M / D D / Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Mailing Address
1120 G Street, NW Suite 600

Amount
283.34

City State Zip Code
Washington DC 20005

Transaction ID: 37256529

Purpose of Expenditure
Graphic Art Design

Category/Type
004

Office Sought: House State: MO
 Senate District: _____
 Presidential

Name of Federal Candidate supported or Opposed by expenditure:
Mr. Roy Blunt

Check One: Support Oppose

Calendar Year-To-Date Per Election
for Office Sought 2442387.44

Disbursement For: Primary General
 Other (specify) : _____
2010

Full Name (Last, First, Middle, Initial) of Payee
Federal Capitol Communications Corporation

Date
M M / D D / Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Mailing Address
1120 G Street, NW Suite 600

Amount
283.34

City State Zip Code
Washington DC 20005

Transaction ID: 37256616

Purpose of Expenditure
Graphic Art Design

Category/Type
004

Office Sought: House State: OH
 Senate District: 01
 Presidential

Name of Federal Candidate supported or Opposed by expenditure:
Rep. Steve Chabot

Check One: Support Oppose

Calendar Year-To-Date Per Election
for Office Sought 6569.56

Disbursement For: Primary General
 Other (specify) : _____
2010

(a) SUBTOTAL of Itemized Independent Expenditures	566.68
(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
Signature

Date M M / D D / Y Y Y Y
0 3 / 0 3 / 2 0 1 1

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund	FEC IDENTIFICATION NUMBER C C00053553
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
Federal Capitol Communications Corporation

Mailing Address
1120 G Street, NW Suite 600

City Washington	State DC	Zip Code 20005
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Purpose of Expenditure Graphic Art Design	Category/ Type 004
--	--------------------------

Name of Federal Candidate supported or Opposed by expenditure:
Rep. Patrick J. Tiberi

Calendar Year-To-Date Per Election for Office Sought	3749.80
---	---------

Date
M M / D D / Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Amount
283.34

Transaction ID: 37256669

Office Sought: House State: OH
 Senate District: 12
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

Full Name (Last, First, Middle, Initial) of Payee
Federal Capitol Communications Corporation

Mailing Address
1120 G Street, NW Suite 600

City Washington	State DC	Zip Code 20005
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Purpose of Expenditure Graphic Art Design	Category/ Type 004
--	--------------------------

Name of Federal Candidate supported or Opposed by expenditure:
Mr. Thomas Ganley

Calendar Year-To-Date Per Election for Office Sought	6656.33
---	---------

Date
M M / D D / Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Amount
283.34

Transaction ID: 37256710

Office Sought: House State: OH
 Senate District: 13
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

(a) SUBTOTAL of Itemized Independent Expenditures	566.68
(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
Signature

Date M M / D D / Y Y Y Y
0 3 / 0 3 / 2 0 1 1

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund	FEC IDENTIFICATION NUMBER C C00053553
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
Federal Capitol Communications Corporation

Mailing Address
1120 G Street, NW Suite 600

City Washington	State DC	Zip Code 20005
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Purpose of Expenditure Graphic Art Design	Category/ Type 004
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Name of Federal Candidate supported or Opposed by expenditure:
Mr. Steve Stivers

Calendar Year-To-Date Per Election for Office Sought	5053.36
---	---------

Date
M M / D D / Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Amount
283.34

Transaction ID: 37256744

Office Sought: House State: OH
 Senate District: 15
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

Full Name (Last, First, Middle, Initial) of Payee
Federal Capitol Communications Corporation

Mailing Address
1120 G Street, NW Suite 600

City Washington	State DC	Zip Code 20005
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Purpose of Expenditure Graphic Art Design	Category/ Type 004
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Name of Federal Candidate supported or Opposed by expenditure:
Mr. Rob Portman

Calendar Year-To-Date Per Election for Office Sought	1184709.13
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Date
M M / D D / Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Amount
1133.33

Transaction ID: 37256775

Office Sought: House State: OH
 Senate District: _____
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

(a) SUBTOTAL of Itemized Independent Expenditures	1416.67
(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
Signature

Date M M / D D / Y Y Y Y
0 3 / 0 3 / 2 0 1 1

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund	FEC IDENTIFICATION NUMBER ▼ C C00053553
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee Federal Capitol Communications Corporation		
Mailing Address 1120 G Street, NW Suite 600		
City Washington	State DC	Zip Code 20005
Purpose of Expenditure Graphic Art Design	Category/ Type 004	
Name of Federal Candidate supported or Opposed by expenditure: Mr. Charles Dent		
Calendar Year-To-Date Per Election for Office Sought		16974.39

Date <table style="width:100%; border-collapse: collapse;"> <tr> <td style="border: 1px solid black; padding: 2px;">M 1</td> <td style="border: 1px solid black; padding: 2px;">M 0</td> <td style="padding: 0 5px;">/</td> <td style="border: 1px solid black; padding: 2px;">D 1</td> <td style="border: 1px solid black; padding: 2px;">D 9</td> <td style="padding: 0 5px;">/</td> <td style="border: 1px solid black; padding: 2px;">Y 2</td> <td style="border: 1px solid black; padding: 2px;">Y 0</td> <td style="border: 1px solid black; padding: 2px;">Y 1</td> <td style="border: 1px solid black; padding: 2px;">Y 0</td> </tr> </table>	M 1	M 0	/	D 1	D 9	/	Y 2	Y 0	Y 1	Y 0
M 1	M 0	/	D 1	D 9	/	Y 2	Y 0	Y 1	Y 0	
Amount 283.33										
Transaction ID: 37256815										
Office Sought: <input checked="" type="checkbox"/> House State: <u>PA</u> <input type="checkbox"/> Senate District: <u>15</u> <input type="checkbox"/> Presidential										
Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose										
Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____ 2010										

Full Name (Last, First, Middle, Initial) of Payee Federal Capitol Communications Corporation		
Mailing Address 1120 G Street, NW Suite 600		
City Washington	State DC	Zip Code 20005
Purpose of Expenditure Graphic Art Design	Category/ Type 004	
Name of Federal Candidate supported or Opposed by expenditure: Mr. Jim Gerlach		
Calendar Year-To-Date Per Election for Office Sought		283.33

Date <table style="width:100%; border-collapse: collapse;"> <tr> <td style="border: 1px solid black; padding: 2px;">M 1</td> <td style="border: 1px solid black; padding: 2px;">M 0</td> <td style="padding: 0 5px;">/</td> <td style="border: 1px solid black; padding: 2px;">D 1</td> <td style="border: 1px solid black; padding: 2px;">D 9</td> <td style="padding: 0 5px;">/</td> <td style="border: 1px solid black; padding: 2px;">Y 2</td> <td style="border: 1px solid black; padding: 2px;">Y 0</td> <td style="border: 1px solid black; padding: 2px;">Y 1</td> <td style="border: 1px solid black; padding: 2px;">Y 0</td> </tr> </table>	M 1	M 0	/	D 1	D 9	/	Y 2	Y 0	Y 1	Y 0
M 1	M 0	/	D 1	D 9	/	Y 2	Y 0	Y 1	Y 0	
Amount 283.33										
Transaction ID: 37256852										
Office Sought: <input checked="" type="checkbox"/> House State: <u>PA</u> <input type="checkbox"/> Senate District: <u>06</u> <input type="checkbox"/> Presidential										
Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose										
Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____ 2010										

(a) SUBTOTAL of Itemized Independent Expenditures	566.66
(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
Signature

Date M
03 / D
03 / Y
2011

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund	FEC IDENTIFICATION NUMBER ▼ C C00053553
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee Federal Capitol Communications Corporation		
Mailing Address 1120 G Street, NW Suite 600		
City Washington	State DC	Zip Code 20005
Purpose of Expenditure Graphic Art Design	Category/ Type 004	
Name of Federal Candidate supported or Opposed by expenditure: Mr. Patrick Meehan		
Calendar Year-To-Date Per Election for Office Sought		6594.77

Date <table style="width:100%; border-collapse: collapse;"> <tr> <td style="border: 1px solid black; padding: 2px;">M 1</td> <td style="border: 1px solid black; padding: 2px;">M 0</td> <td style="padding: 0 5px;">/</td> <td style="border: 1px solid black; padding: 2px;">D 1</td> <td style="border: 1px solid black; padding: 2px;">D 9</td> <td style="padding: 0 5px;">/</td> <td style="border: 1px solid black; padding: 2px;">Y 2</td> <td style="border: 1px solid black; padding: 2px;">Y 0</td> <td style="border: 1px solid black; padding: 2px;">Y 1</td> <td style="border: 1px solid black; padding: 2px;">Y 0</td> </tr> </table>	M 1	M 0	/	D 1	D 9	/	Y 2	Y 0	Y 1	Y 0
M 1	M 0	/	D 1	D 9	/	Y 2	Y 0	Y 1	Y 0	
Amount 283.33										
Transaction ID: 37256890										
Office Sought: <input checked="" type="checkbox"/> House State: <u>PA</u> <input type="checkbox"/> Senate District: <u>07</u> <input type="checkbox"/> Presidential										
Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose										
Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____ 2010										

Full Name (Last, First, Middle, Initial) of Payee Federal Capitol Communications Corporation		
Mailing Address 1120 G Street, NW Suite 600		
City Washington	State DC	Zip Code 20005
Purpose of Expenditure Graphic Art Design	Category/ Type 004	
Name of Federal Candidate supported or Opposed by expenditure: Mr. Michael Fitzpatrick		
Calendar Year-To-Date Per Election for Office Sought		1751.18

Date <table style="width:100%; border-collapse: collapse;"> <tr> <td style="border: 1px solid black; padding: 2px;">M 1</td> <td style="border: 1px solid black; padding: 2px;">M 0</td> <td style="padding: 0 5px;">/</td> <td style="border: 1px solid black; padding: 2px;">D 1</td> <td style="border: 1px solid black; padding: 2px;">D 9</td> <td style="padding: 0 5px;">/</td> <td style="border: 1px solid black; padding: 2px;">Y 2</td> <td style="border: 1px solid black; padding: 2px;">Y 0</td> <td style="border: 1px solid black; padding: 2px;">Y 1</td> <td style="border: 1px solid black; padding: 2px;">Y 0</td> </tr> </table>	M 1	M 0	/	D 1	D 9	/	Y 2	Y 0	Y 1	Y 0
M 1	M 0	/	D 1	D 9	/	Y 2	Y 0	Y 1	Y 0	
Amount 283.33										
Transaction ID: 37256916										
Office Sought: <input checked="" type="checkbox"/> House State: <u>PA</u> <input type="checkbox"/> Senate District: <u>08</u> <input type="checkbox"/> Presidential										
Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose										
Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____ 2010										

(a) SUBTOTAL of Itemized Independent Expenditures	566.66
(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
Signature

Date M
0M
3 / D
03 / Y
2011

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund	FEC IDENTIFICATION NUMBER C C00053553
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
Federal Capitol Communications Corporation

Mailing Address
1120 G Street, NW Suite 600

City Washington	State DC	Zip Code 20005
--------------------	-------------	-------------------

Purpose of Expenditure Graphic Art Design	Category/ Type 004
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Name of Federal Candidate supported or Opposed by expenditure:
Mr. Patrick Toomey

Calendar Year-To-Date Per Election for Office Sought	1948725.75
---	------------

Date
M M / D D / Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Amount
1133.33

Transaction ID: 37256950

Office Sought: House State: PA
 Senate District: _____
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

Full Name (Last, First, Middle, Initial) of Payee
Federal Capitol Communications Corporation

Mailing Address
1120 G Street, NW Suite 600

City Washington	State DC	Zip Code 20005
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Purpose of Expenditure Graphic Art Design	Category/ Type 004
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Name of Federal Candidate supported or Opposed by expenditure:
Jaime Herrera

Calendar Year-To-Date Per Election for Office Sought	143628.67
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Date
M M / D D / Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Amount
283.33

Transaction ID: 37256978

Office Sought: House State: WA
 Senate District: 03
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

(a) SUBTOTAL of Itemized Independent Expenditures	1416.66
(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
Signature

Date M M / D D / Y Y Y Y
0 3 / 0 3 / 2 0 1 1

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund	FEC IDENTIFICATION NUMBER C C00053553
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
Federal Capitol Communications Corporation

Mailing Address
1120 G Street, NW Suite 600

City Washington	State DC	Zip Code 20005
--------------------	-------------	-------------------

Purpose of Expenditure Graphic Art Design	Category/ Type 004
--	--------------------------

Name of Federal Candidate supported or Opposed by expenditure:
Mr. Dino Rossi

Calendar Year-To-Date Per Election for Office Sought	586143.08
---	-----------

Date
M M / D D / Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Amount
283.33

Transaction ID: 37257034

Office Sought: House State: WA
 Senate District: _____
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

Full Name (Last, First, Middle, Initial) of Payee
Federal Capitol Communications Corporation

Mailing Address
1120 G Street, NW Suite 600

City Washington	State DC	Zip Code 20005
--------------------	-------------	-------------------

Purpose of Expenditure Graphic Art Design	Category/ Type 004
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Name of Federal Candidate supported or Opposed by expenditure:
Rep. Allen Boyd

Calendar Year-To-Date Per Election for Office Sought	531.25
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Date
M M / D D / Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Amount
531.25

Transaction ID: 37257179

Office Sought: House State: FL
 Senate District: 02
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

(a) SUBTOTAL of Itemized Independent Expenditures	814.58
(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
Signature

Date M M / D D / Y Y Y Y
0 3 / 0 3 / 2 0 1 1

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund	FEC IDENTIFICATION NUMBER C C00053553
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
Federal Capitol Communications Corporation

Mailing Address
1120 G Street, NW Suite 600

City Washington	State DC	Zip Code 20005
--------------------	-------------	-------------------

Purpose of Expenditure Graphic Art Design	Category/ Type 004
--	--------------------------

Name of Federal Candidate supported or Opposed by expenditure:
Rep. John D. Dingell

Calendar Year-To-Date Per Election for Office Sought	531.25
---	--------

Date
M M / D D / Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Amount
531.25

Transaction ID: 37257227

Office Sought: House State: MI
 Senate District: 15
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

Full Name (Last, First, Middle, Initial) of Payee
Federal Capitol Communications Corporation

Mailing Address
1120 G Street, NW Suite 600

City Washington	State DC	Zip Code 20005
--------------------	-------------	-------------------

Purpose of Expenditure Graphic Art Design	Category/ Type 004
--	--------------------------

Name of Federal Candidate supported or Opposed by expenditure:
Mr. Travis Childers

Calendar Year-To-Date Per Election for Office Sought	531.25
---	--------

Date
M M / D D / Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Amount
531.25

Transaction ID: 37257319

Office Sought: House State: MS
 Senate District: 01
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

(a) SUBTOTAL of Itemized Independent Expenditures	1062.50
(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
Signature

Date M M / D D / Y Y Y Y
0 3 / 0 3 / 2 0 1 1

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund	FEC IDENTIFICATION NUMBER C C00053553
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
Federal Capitol Communications Corporation

Date
M M / D D / Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Mailing Address
1120 G Street, NW Suite 600

Amount
531.25

City State Zip Code
Washington DC 20005

Transaction ID: 37257365

Purpose of Expenditure
Graphic Art Design

Category/Type
004

Office Sought: House State: MS
 Senate District: 04
 Presidential

Name of Federal Candidate supported or Opposed by expenditure:
Rep. Gene Taylor

Check One: Support Oppose

Calendar Year-To-Date Per Election for Office Sought
531.25

Disbursement For: Primary General
 Other (specify) : _____
2010

Full Name (Last, First, Middle, Initial) of Payee
Federal Capitol Communications Corporation

Date
M M / D D / Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Mailing Address
1120 G Street, NW Suite 600

Amount
531.25

City State Zip Code
Washington DC 20005

Transaction ID: 37257419

Purpose of Expenditure
Graphic Art Design

Category/Type
004

Office Sought: House State: UT
 Senate District: 02
 Presidential

Name of Federal Candidate supported or Opposed by expenditure:
Rep. James D. Matheson

Check One: Support Oppose

Calendar Year-To-Date Per Election for Office Sought
531.25

Disbursement For: Primary General
 Other (specify) : _____
2010

(a) SUBTOTAL of Itemized Independent Expenditures	1062.50
(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
Signature

Date M M / D D / Y Y Y Y
0 3 / 0 3 / 2 0 1 1

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund	FEC IDENTIFICATION NUMBER C C00053553
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
Federal Capitol Communications Corporation

Mailing Address
1120 G Street, NW Suite 600

City Washington	State DC	Zip Code 20005
--------------------	-------------	-------------------

Purpose of Expenditure Graphic Art Design	Category/ Type 004
--	--------------------------

Name of Federal Candidate supported or Opposed by expenditure:
Rep. Michael Avery Ross

Calendar Year-To-Date Per Election for Office Sought	531.25
---	--------

Date
M M / D D / Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Amount
531.25

Transaction ID: 37257463

Office Sought: House State: AR
 Senate District: 04
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

Full Name (Last, First, Middle, Initial) of Payee
Federal Capitol Communications Corporation

Mailing Address
1120 G Street, NW Suite 600

City Washington	State DC	Zip Code 20005
--------------------	-------------	-------------------

Purpose of Expenditure Graphic Art Design	Category/ Type 004
--	--------------------------

Name of Federal Candidate supported or Opposed by expenditure:
Rep. Daniel Boren

Calendar Year-To-Date Per Election for Office Sought	531.25
---	--------

Date
M M / D D / Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Amount
531.25

Transaction ID: 37257830

Office Sought: House State: OK
 Senate District: 02
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

(a) SUBTOTAL of Itemized Independent Expenditures	1062.50
(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
Signature

Date M M / D D / Y Y Y Y
0 3 / 0 3 / 2 0 1 1

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund	FEC IDENTIFICATION NUMBER C C00053553
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
Federal Capitol Communications Corporation

Mailing Address
1120 G Street, NW Suite 600

City Washington	State DC	Zip Code 20005
--------------------	-------------	-------------------

Purpose of Expenditure Graphic Art Design	Category/ Type 004
--	--------------------------

Name of Federal Candidate supported or Opposed by expenditure:
Rep. Heath Shuler

Calendar Year-To-Date Per Election for Office Sought	531.25
---	--------

Date
M M / D D / Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Amount
531.25

Transaction ID: 37258331

Office Sought: House State: NC
 Senate District: 11
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

Full Name (Last, First, Middle, Initial) of Payee
Federal Capitol Communications Corporation

Mailing Address
1120 G Street, NW Suite 600

City Washington	State DC	Zip Code 20005
--------------------	-------------	-------------------

Purpose of Expenditure Graphic Art Design	Category/ Type 004
--	--------------------------

Name of Federal Candidate supported or Opposed by expenditure:
Rep. Jason Altmire

Calendar Year-To-Date Per Election for Office Sought	531.25
---	--------

Date
M M / D D / Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Amount
531.25

Transaction ID: 37258378

Office Sought: House State: PA
 Senate District: 04
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

(a) SUBTOTAL of Itemized Independent Expenditures	1062.50
(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
Signature

Date M M / D D / Y Y Y Y
0 3 / 0 3 / 2 0 1 1

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund	FEC IDENTIFICATION NUMBER C C00053553
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
Federal Capitol Communications Corporation

Mailing Address
1120 G Street, NW Suite 600

City Washington	State DC	Zip Code 20005
--------------------	-------------	-------------------

Purpose of Expenditure Graphic Art Design	Category/ Type 004
--	--------------------------

Name of Federal Candidate supported or Opposed by expenditure:
Rep. Tim Holden

Calendar Year-To-Date Per Election for Office Sought	531.25
---	--------

Date
M M / D D / Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Amount
531.25

Transaction ID: 37258462

Office Sought: House State: PA
 Senate District: 17
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

Full Name (Last, First, Middle, Initial) of Payee
Federal Capitol Communications Corporation

Mailing Address
1120 G Street, NW Suite 600

City Washington	State DC	Zip Code 20005
--------------------	-------------	-------------------

Purpose of Expenditure Graphic Art Design	Category/ Type 004
--	--------------------------

Name of Federal Candidate supported or Opposed by expenditure:
Rep. Lincoln Davis

Calendar Year-To-Date Per Election for Office Sought	531.25
---	--------

Date
M M / D D / Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Amount
531.25

Transaction ID: 37258518

Office Sought: House State: TN
 Senate District: 04
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

(a) SUBTOTAL of Itemized Independent Expenditures	1062.50
(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
Signature

Date M M / D D / Y Y Y Y
0 3 / 0 3 / 2 0 1 1

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund	FEC IDENTIFICATION NUMBER C C00053553
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
Federal Capitol Communications Corporation

Mailing Address
1120 G Street, NW Suite 600

City Washington	State DC	Zip Code 20005
--------------------	-------------	-------------------

Purpose of Expenditure Graphic Art Design	Category/ Type 004
--	--------------------------

Name of Federal Candidate supported or Opposed by expenditure:
Ms. Deborah Halvorson

Calendar Year-To-Date Per Election for Office Sought	531.25
---	--------

Date
M M / D D / Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Amount
531.25

Transaction ID: 37258570

Office Sought: House State: IL
 Senate District: 11
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

Full Name (Last, First, Middle, Initial) of Payee
Federal Capitol Communications Corporation

Mailing Address
1120 G Street, NW Suite 600

City Washington	State DC	Zip Code 20005
--------------------	-------------	-------------------

Purpose of Expenditure Graphic Art Design	Category/ Type 004
--	--------------------------

Name of Federal Candidate supported or Opposed by expenditure:
Rep. Ike Skelton

Calendar Year-To-Date Per Election for Office Sought	531.25
---	--------

Date
M M / D D / Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Amount
531.25

Transaction ID: 37258600

Office Sought: House State: MO
 Senate District: 04
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

(a) SUBTOTAL of Itemized Independent Expenditures	1062.50
(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
Signature

Date M M / D D / Y Y Y Y
0 3 / 0 3 / 2 0 1 1

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

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund	FEC IDENTIFICATION NUMBER ▼ C C00053553
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee Federal Capitol Communications Corporation		
Mailing Address 1120 G Street, NW Suite 600		
City Washington	State DC	Zip Code 20005
Purpose of Expenditure Graphic Art Design	Category/ Type 004	
Name of Federal Candidate supported or Opposed by expenditure: Rep. Dennis A. Cardoza		
Calendar Year-To-Date Per Election for Office Sought		531.25

Date <table style="width:100%; border-collapse: collapse;"> <tr> <td style="border: 1px solid black; padding: 2px;">M 1</td> <td style="border: 1px solid black; padding: 2px;">M 0</td> <td style="padding: 0 5px;">/</td> <td style="border: 1px solid black; padding: 2px;">D 1</td> <td style="border: 1px solid black; padding: 2px;">D 9</td> <td style="padding: 0 5px;">/</td> <td style="border: 1px solid black; padding: 2px;">Y 2</td> <td style="border: 1px solid black; padding: 2px;">Y 0</td> <td style="border: 1px solid black; padding: 2px;">Y 1</td> <td style="border: 1px solid black; padding: 2px;">Y 0</td> </tr> </table>	M 1	M 0	/	D 1	D 9	/	Y 2	Y 0	Y 1	Y 0
M 1	M 0	/	D 1	D 9	/	Y 2	Y 0	Y 1	Y 0	
Amount 531.25										
Transaction ID: 37258658										
Office Sought: <input checked="" type="checkbox"/> House State: <u>CA</u> <input type="checkbox"/> Senate District: <u>18</u> <input type="checkbox"/> Presidential										
Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose										
Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____ 2010										

Full Name (Last, First, Middle, Initial) of Payee Federal Capitol Communications Corporation		
Mailing Address 1120 G Street, NW Suite 600		
City Washington	State DC	Zip Code 20005
Purpose of Expenditure Graphic Art Design	Category/ Type 004	
Name of Federal Candidate supported or Opposed by expenditure: Rep. Nick Joe Rahall, II		
Calendar Year-To-Date Per Election for Office Sought		531.25

Date <table style="width:100%; border-collapse: collapse;"> <tr> <td style="border: 1px solid black; padding: 2px;">M 1</td> <td style="border: 1px solid black; padding: 2px;">M 0</td> <td style="padding: 0 5px;">/</td> <td style="border: 1px solid black; padding: 2px;">D 1</td> <td style="border: 1px solid black; padding: 2px;">D 9</td> <td style="padding: 0 5px;">/</td> <td style="border: 1px solid black; padding: 2px;">Y 2</td> <td style="border: 1px solid black; padding: 2px;">Y 0</td> <td style="border: 1px solid black; padding: 2px;">Y 1</td> <td style="border: 1px solid black; padding: 2px;">Y 0</td> </tr> </table>	M 1	M 0	/	D 1	D 9	/	Y 2	Y 0	Y 1	Y 0
M 1	M 0	/	D 1	D 9	/	Y 2	Y 0	Y 1	Y 0	
Amount 531.25										
Transaction ID: 37258721										
Office Sought: <input checked="" type="checkbox"/> House State: <u>WV</u> <input type="checkbox"/> Senate District: <u>03</u> <input type="checkbox"/> Presidential										
Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose										
Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____ 2010										

(a) SUBTOTAL of Itemized Independent Expenditures	1062.50
(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
Signature

Date 03 / 03 / 2011

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund	FEC IDENTIFICATION NUMBER C C00053553
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
Federal Capitol Communications Corporation

Mailing Address
1120 G Street, NW Suite 600

City Washington	State DC	Zip Code 20005
--------------------	-------------	-------------------

Purpose of Expenditure Graphic Art Design	Category/ Type 004
--	--------------------------

Name of Federal Candidate supported or Opposed by expenditure:
Rep. Stephanie Herseth Sandlin

Calendar Year-To-Date Per Election for Office Sought	531.25
---	--------

Date
M M / D D / Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Amount
531.25

Transaction ID: 37258773

Office Sought: House State: SD
 Senate District: 01
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

Full Name (Last, First, Middle, Initial) of Payee
Federal Capitol Communications Corporation

Mailing Address
1120 G Street, NW Suite 600

City Washington	State DC	Zip Code 20005
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Purpose of Expenditure Graphic Art Design	Category/ Type 004
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Name of Federal Candidate supported or Opposed by expenditure:
Mr. Patrick Toomey

Calendar Year-To-Date Per Election for Office Sought	1949163.25
---	------------

Date
M M / D D / Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Amount
437.50

Transaction ID: 37258825

Office Sought: House State: PA
 Senate District: _____
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

(a) SUBTOTAL of Itemized Independent Expenditures	968.75
(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
Signature

Date M M / D D / Y Y Y Y
0 3 / 0 3 / 2 0 1 1

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

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund		FEC IDENTIFICATION NUMBER C C00053553
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice		

Full Name (Last, First, Middle, Initial) of Payee
Federal Capitol Communications Corporation

Date
M M / D D / Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Mailing Address
1120 G Street, NW Suite 600

Amount
437.50

City State Zip Code
Washington DC 20005

Transaction ID: 37259380

Purpose of Expenditure
Graphic Art Design

Category/Type
004

Office Sought: House State: OH
 Senate District: 18
 Presidential

Name of Federal Candidate supported or Opposed by expenditure:
Rep. Zachary T. Space

Check One: Support Oppose

Calendar Year-To-Date Per Election for Office Sought
437.50

Disbursement For: Primary General
 Other (specify) : _____
2010

Full Name (Last, First, Middle, Initial) of Payee
Federal Capitol Communications Corporation

Date
M M / D D / Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Mailing Address
1120 G Street, NW Suite 600

Amount
958.33

City State Zip Code
Washington DC 20005

Transaction ID: 37260913

Purpose of Expenditure
Graphic Art Design

Category/Type
004

Office Sought: House State: WI
 Senate District: _____
 Presidential

Name of Federal Candidate supported or Opposed by expenditure:
Mr. Ronald Johnson

Check One: Support Oppose

Calendar Year-To-Date Per Election for Office Sought
795380.34

Disbursement For: Primary General
 Other (specify) : _____
2010

(a) SUBTOTAL of Itemized Independent Expenditures	1395.83
(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
Signature

Date M M / D D / Y Y Y Y
0 3 / 0 3 / 2 0 1 1

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund	FEC IDENTIFICATION NUMBER C C00053553
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
Federal Capitol Communications Corporation

Mailing Address
1120 G Street, NW Suite 600

City Washington	State DC	Zip Code 20005
--------------------	-------------	-------------------

Purpose of Expenditure Graphic Art Design	Category/ Type 004
--	--------------------------

Name of Federal Candidate supported or Opposed by expenditure:
Mr. Dino Rossi

Calendar Year-To-Date Per Election for Office Sought	587101.41
---	-----------

Date
M M / D D / Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Amount
958.33

Transaction ID: 37260925

Office Sought: House State: WA
 Senate District: _____
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

Full Name (Last, First, Middle, Initial) of Payee
Federal Capitol Communications Corporation

Mailing Address
1120 G Street, NW Suite 600

City Washington	State DC	Zip Code 20005
--------------------	-------------	-------------------

Purpose of Expenditure Graphic Art Design	Category/ Type 004
--	--------------------------

Name of Federal Candidate supported or Opposed by expenditure:
Ms. Christine O'Donnell

Calendar Year-To-Date Per Election for Office Sought	164406.67
---	-----------

Date
M M / D D / Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Amount
958.34

Transaction ID: 37260939

Office Sought: House State: DE
 Senate District: _____
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

(a) SUBTOTAL of Itemized Independent Expenditures	1916.67
(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
Signature

Date M M / D D / Y Y Y Y
0 3 / 0 3 / 2 0 1 1

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund	FEC IDENTIFICATION NUMBER C C00053553
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
Federal Capitol Communications Corporation

Mailing Address
1120 G Street, NW Suite 600

City State Zip Code
Washington DC 20005

Purpose of Expenditure Category/Type
Graphic Art Design 004

Name of Federal Candidate supported or Opposed by expenditure:
Ms. Carly Fiorina

Calendar Year-To-Date Per Election for Office Sought 277593.72

Date
MM / DD / YYYY
10 / 19 / 2010

Amount
958.33

Transaction ID: 37260956

Office Sought: House State: CA
 Senate District: _____
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

Full Name (Last, First, Middle, Initial) of Payee
Federal Capitol Communications Corporation

Mailing Address
1120 G Street, NW Suite 600

City State Zip Code
Washington DC 20005

Purpose of Expenditure Category/Type
Graphic Art Design 004

Name of Federal Candidate supported or Opposed by expenditure:
Mr. Richard Blumenthal

Calendar Year-To-Date Per Election for Office Sought 19031.43

Date
MM / DD / YYYY
10 / 19 / 2010

Amount
958.33

Transaction ID: 37261020

Office Sought: House State: CT
 Senate District: _____
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

(a) SUBTOTAL of Itemized Independent Expenditures	1916.66
(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
Signature

Date MM / DD / YYYY
03 / 03 / 2011

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund	FEC IDENTIFICATION NUMBER C C00053553
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
Federal Capitol Communications Corporation

Date
M M / D D / Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Mailing Address
1120 G Street, NW Suite 600

Amount
875.00

City State Zip Code
Washington DC 20005

Transaction ID: 37261190

Purpose of Expenditure
Graphic Art Design

Category/Type
004

Office Sought: House State: MO
 Senate District: _____
 Presidential

Name of Federal Candidate supported or Opposed by expenditure:
Mr. Roy Blunt

Check One: Support Oppose

Calendar Year-To-Date Per Election for Office Sought
2443262.44

Disbursement For: Primary General
 Other (specify) : _____
2010

Full Name (Last, First, Middle, Initial) of Payee
Federal Capitol Communications Corporation

Date
M M / D D / Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Mailing Address
1120 G Street, NW Suite 600

Amount
875.00

City State Zip Code
Washington DC 20005

Transaction ID: 37261245

Purpose of Expenditure
Graphic Art Design

Category/Type
004

Office Sought: House State: OH
 Senate District: _____
 Presidential

Name of Federal Candidate supported or Opposed by expenditure:
Mr. Rob Portman

Check One: Support Oppose

Calendar Year-To-Date Per Election for Office Sought
1185584.13

Disbursement For: Primary General
 Other (specify) : _____
2010

(a) SUBTOTAL of Itemized Independent Expenditures	1750.00
(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.

Mary Rose Adkins
Signature

Date M M / D D / Y Y Y Y
0 3 / 0 3 / 2 0 1 1

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund	FEC IDENTIFICATION NUMBER C C00053553
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
Federal Capitol Communications Corporation

Mailing Address
1120 G Street, NW Suite 600

City Washington	State DC	Zip Code 20005
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Purpose of Expenditure Graphic Art Design	Category/Type 004
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Name of Federal Candidate supported or Opposed by expenditure:
Mr. Kenneth Buck

Calendar Year-To-Date Per Election for Office Sought	842434.64
--	-----------

Date
M M / D D / Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Amount
875.00

Transaction ID: 37261273

Office Sought: House State: CO
 Senate District: _____
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

Full Name (Last, First, Middle, Initial) of Payee
Federal Capitol Communications Corporation

Mailing Address
1120 G Street, NW Suite 600

City Washington	State DC	Zip Code 20005
--------------------	-------------	-------------------

Purpose of Expenditure TV & Radio Ad Production - Estimated Cos	Category/Type 004
--	----------------------

Name of Federal Candidate supported or Opposed by expenditure:
Mr. John Mulvaney

Calendar Year-To-Date Per Election for Office Sought	138611.94
--	-----------

Date
M M / D D / Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Amount
11000.00

Transaction ID: 37310954

Office Sought: House State: SC
 Senate District: 05
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

[MEMO ITEM]
TV & Radio Ad Production - Estimated Cost

(a) SUBTOTAL of Itemized Independent Expenditures	875.00
(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.

Mary Rose Adkins
Signature

Date M M / D D / Y Y Y Y
0 3 / 0 3 / 2 0 1 1

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund	FEC IDENTIFICATION NUMBER C C00053553
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
Federal Capitol Communications Corporation

Mailing Address
1120 G Street, NW Suite 600

City State Zip Code
Washington DC 20005

Purpose of Expenditure Category/Type
Graphic Art Design 004

Name of Federal Candidate supported or Opposed by expenditure:
Ms. Ann Buerkle

Calendar Year-To-Date Per Election for Office Sought 250.00

Date
M M / D D / Y Y Y Y
1 0 / 2 0 / 2 0 1 0

Amount
250.00

Transaction ID: 37310971

Office Sought: House State: NY
 Senate District: 25
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

Full Name (Last, First, Middle, Initial) of Payee
Federal Capitol Communications Corporation

Mailing Address
1120 G Street, NW Suite 600

City State Zip Code
Washington DC 20005

Purpose of Expenditure Category/Type
Graphic Art Design 004

Name of Federal Candidate supported or Opposed by expenditure:
Mr. Michael Grimm

Calendar Year-To-Date Per Election for Office Sought 250.00

Date
M M / D D / Y Y Y Y
1 0 / 2 0 / 2 0 1 0

Amount
250.00

Transaction ID: 37310972

Office Sought: House State: NY
 Senate District: 13
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

(a) SUBTOTAL of Itemized Independent Expenditures	500.00
(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.

Mary Rose Adkins
Signature

Date M M / D D / Y Y Y Y
0 3 / 0 3 / 2 0 1 1

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund	FEC IDENTIFICATION NUMBER C C00053553
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
Federal Capitol Communications Corporation

Mailing Address
1120 G Street, NW Suite 600

City Washington	State DC	Zip Code 20005
--------------------	-------------	-------------------

Purpose of Expenditure Graphic Art Design	Category/ Type 004
--	--------------------------

Name of Federal Candidate supported or Opposed by expenditure:
Van Tran

Calendar Year-To-Date Per Election for Office Sought	250.00
---	--------

Date
M M / D D / Y Y Y Y
1 0 / 2 0 / 2 0 1 0

Amount
250.00

Transaction ID: 37310974

Office Sought: House State: CA
 Senate District: 47
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

Full Name (Last, First, Middle, Initial) of Payee
Federal Capitol Communications Corporation

Mailing Address
1120 G Street, NW Suite 600

City Washington	State DC	Zip Code 20005
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Purpose of Expenditure Graphic Art Design	Category/ Type 004
--	--------------------------

Name of Federal Candidate supported or Opposed by expenditure:
Sen. Barbara Boxer

Calendar Year-To-Date Per Election for Office Sought	279443.72
---	-----------

Date
M M / D D / Y Y Y Y
1 0 / 2 0 / 2 0 1 0

Amount
1850.00

Transaction ID: 37310975

Office Sought: House State: CA
 Senate District: _____
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

(a) SUBTOTAL of Itemized Independent Expenditures	2100.00
(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.

Mary Rose Adkins
Signature

Date M M / D D / Y Y Y Y
0 3 / 0 3 / 2 0 1 1

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund	FEC IDENTIFICATION NUMBER C C00053553
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
Federal Capitol Communications Corporation

Mailing Address
1120 G Street, NW Suite 600

City Washington	State DC	Zip Code 20005
--------------------	-------------	-------------------

Purpose of Expenditure Radio Advertising	Category/ Type 004
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Name of Federal Candidate supported or Opposed by expenditure:
Rep. Heath Shuler

Calendar Year-To-Date Per Election for Office Sought	18106.25
---	----------

Date
M M / D D / Y Y Y Y
1 0 / 2 0 / 2 0 1 0

Amount
17575.00

Transaction ID: 37310981

Office Sought: House State: NC
 Senate District: 11
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

Full Name (Last, First, Middle, Initial) of Payee
Federal Capitol Communications Corporation

Mailing Address
1120 G Street, NW Suite 600

City Washington	State DC	Zip Code 20005
--------------------	-------------	-------------------

Purpose of Expenditure Radio Ad Production - Estimated Cost	Category/ Type 004
--	--------------------------

Name of Federal Candidate supported or Opposed by expenditure:
Rep. Heath Shuler

Calendar Year-To-Date Per Election for Office Sought	21706.25
---	----------

Date
M M / D D / Y Y Y Y
1 0 / 2 0 / 2 0 1 0

Amount
3600.00

Transaction ID: 37310982

Office Sought: House State: NC
 Senate District: 11
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

(a) SUBTOTAL of Itemized Independent Expenditures	21175.00
(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.

Mary Rose Adkins
Signature

Date M M / D D / Y Y Y Y
0 3 / 0 3 / 2 0 1 1

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund	FEC IDENTIFICATION NUMBER ▼ C C00053553
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee Federal Capitol Communications Corporation	
Mailing Address 1120 G Street, NW Suite 600	
City Washington	State DC
Zip Code 20005	
Purpose of Expenditure TV Advertising	Category/ Type 004
Name of Federal Candidate supported or Opposed by expenditure: Mr. Ronald Johnson	
Calendar Year-To-Date Per Election for Office Sought	857817.84

Date M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 1 0
Amount 62437.50
Transaction ID: 37310984
Office Sought: <input type="checkbox"/> House State: WI <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> Presidential
Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____ 2010

Full Name (Last, First, Middle, Initial) of Payee Federal Capitol Communications Corporation	
Mailing Address 1120 G Street, NW Suite 600	
City Washington	State DC
Zip Code 20005	
Purpose of Expenditure TV Ad Production - Estimated Cost	Category/ Type 004
Name of Federal Candidate supported or Opposed by expenditure: Mr. Ronald Johnson	
Calendar Year-To-Date Per Election for Office Sought	885192.84

Date M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 1 0
Amount 27375.00
Transaction ID: 37310985
Office Sought: <input type="checkbox"/> House State: WI <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> Presidential
Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____ 2010

(a) SUBTOTAL of Itemized Independent Expenditures	89812.50
(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
Signature

Date M M / D D / Y Y Y Y
0 3 / 0 3 / 2 0 1 1

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund	FEC IDENTIFICATION NUMBER C C00053553
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
Federal Capitol Communications Corporation

Mailing Address
1120 G Street, NW Suite 600

City Washington	State DC	Zip Code 20005
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Purpose of Expenditure TV & Radio Ad Production - Estimated Cos	Category/Type 004
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Name of Federal Candidate supported or Opposed by expenditure:
Mr. John Mulvaney

Calendar Year-To-Date Per Election for Office Sought	154954.11
--	-----------

Date
M M / D D / Y Y Y Y
1 0 / 2 0 / 2 0 1 0

Amount
11000.00

Transaction ID: 37310994

Office Sought: House State: SC
 Senate District: 05
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

Full Name (Last, First, Middle, Initial) of Payee
Federal Capitol Communications Corporation

Mailing Address
1120 G Street, NW Suite 600

City Washington	State DC	Zip Code 20005
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Purpose of Expenditure Radio Advertising	Category/Type 004
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Name of Federal Candidate supported or Opposed by expenditure:
Rep. Heath Shuler

Calendar Year-To-Date Per Election for Office Sought	39281.25
--	----------

Date
M M / D D / Y Y Y Y
1 0 / 2 0 / 2 0 1 0

Amount
17575.00

Transaction ID: 37331647

Office Sought: House State: NC
 Senate District: 11
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

[MEMO ITEM]
Radio Advertising

(a) SUBTOTAL of Itemized Independent Expenditures	11000.00
(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.

Mary Rose Adkins
Signature

Date M M / D D / Y Y Y Y
0 3 / 0 3 / 2 0 1 1

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund	FEC IDENTIFICATION NUMBER C C00053553
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
Federal Capitol Communications Corporation

Date
M M / D D / Y Y Y Y
1 0 / 2 0 / 2 0 1 0

Mailing Address
1120 G Street, NW Suite 600

Amount
3600.00

Transaction ID: 37331648

City State Zip Code
Washington DC 20005

Office Sought: House State: NC
 Senate District: 11
 Presidential

Purpose of Expenditure
Radio Ad Production - Estimated Cost

Category/Type 004

Check One: Support Oppose

Name of Federal Candidate supported or Opposed by expenditure:
Rep. Heath Shuler

Disbursement For: Primary General
 Other (specify) : _____

Calendar Year-To-Date Per Election for Office Sought
42881.25

2010
[MEMO ITEM]
Radio Ad Production - Estimated Cost

Full Name (Last, First, Middle, Initial) of Payee
Federal Capitol Communications Corporation

Date
M M / D D / Y Y Y Y
1 0 / 2 1 / 2 0 1 0

Mailing Address
1120 G Street, NW Suite 600

Amount
62437.50

Transaction ID: 37342387

City State Zip Code
Washington DC 20005

Office Sought: House State: WI
 Senate District: _____
 Presidential

Purpose of Expenditure
TV Advertising

Category/Type 004

Check One: Support Oppose

Name of Federal Candidate supported or Opposed by expenditure:
Mr. Ronald Johnson

Disbursement For: Primary General
 Other (specify) : _____

Calendar Year-To-Date Per Election for Office Sought
947630.34

2010
[MEMO ITEM]
TV Advertising

(a) SUBTOTAL of Itemized Independent Expenditures	0.00
(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.

Mary Rose Adkins
Signature

Date M M / D D / Y Y Y Y
0 3 / 0 3 / 2 0 1 1

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund	FEC IDENTIFICATION NUMBER C C00053553
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
Federal Capitol Communications Corporation

Mailing Address
1120 G Street, NW Suite 600

City State Zip Code
Washington DC 20005

Purpose of Expenditure Category/Type
TV Ad Production Cost 004

Name of Federal Candidate supported or Opposed by expenditure:
Mr. Ronald Johnson

Calendar Year-To-Date Per Election for Office Sought 975005.34

Date
MM / DD / YYYY
10 / 21 / 2010

Amount
27375.00

Transaction ID: 37342388

Office Sought: House State: WI
 Senate District: _____
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010
[MEMO ITEM]
TV Ad Production Cost

Full Name (Last, First, Middle, Initial) of Payee
Federal Capitol Communications Corporation

Mailing Address
1120 G Street, NW Suite 600

City State Zip Code
Washington DC 20005

Purpose of Expenditure Category/Type
Radio Advertising 004

Name of Federal Candidate supported or Opposed by expenditure:
Mr. Charles Dent

Calendar Year-To-Date Per Election for Office Sought 30253.38

Date
MM / DD / YYYY
10 / 25 / 2010

Amount
10637.50

Transaction ID: 37352381

Office Sought: House State: PA
 Senate District: 15
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010
[MEMO ITEM]
Radio Advertising

(a) SUBTOTAL of Itemized Independent Expenditures	0.00
(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.

Mary Rose Adkins
Signature

Date MM / DD / YYYY
03 / 03 / 2011

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund	FEC IDENTIFICATION NUMBER C C00053553
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
Federal Capitol Communications Corporation

Date
M M / D D / Y Y Y Y
1 0 / 2 5 / 2 0 1 0

Mailing Address
1120 G Street, NW Suite 600

Amount
500.00

City State Zip Code
Washington DC 20005

Transaction ID: 37352382

Purpose of Expenditure
Radio Ad Production - Estimated Cost

Category/Type
004

Office Sought: House State: PA
 Senate District: 15
 Presidential

Name of Federal Candidate supported or Opposed by expenditure:
Mr. Charles Dent

Check One: Support Oppose

Calendar Year-To-Date Per Election for Office Sought
30753.38

Disbursement For: Primary General
 Other (specify) : _____
2010

[MEMO ITEM]
Radio Ad Production - Estimated Cost

Full Name (Last, First, Middle, Initial) of Payee
Cathy Nugent

Date
M M / D D / Y Y Y Y
1 0 / 2 7 / 2 0 1 0

Mailing Address
15047 Oxford Street

Amount
50.00

City State Zip Code
Leawood KS 66224

Transaction ID: 37362683

Purpose of Expenditure
Booth Rental

Category/Type
001

Office Sought: House State: KS
 Senate District: 03
 Presidential

Name of Federal Candidate supported or Opposed by expenditure:
Mr. Kevin Yoder

Check One: Support Oppose

Calendar Year-To-Date Per Election for Office Sought
16349.66

Disbursement For: Primary General
 Other (specify) : _____
2010

(a) SUBTOTAL of Itemized Independent Expenditures	50.00
(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.

Mary Rose Adkins
Signature

Date
M M / D D / Y Y Y Y
0 3 / 0 3 / 2 0 1 1

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund	FEC IDENTIFICATION NUMBER C C00053553
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
Novacon Promotional Products

Date
M M / D D / Y Y Y Y
1 0 / 1 4 / 2 0 1 0

Mailing Address
11100 Pulaski Highway

Amount
243.65

City State Zip Code
White Marsh MD 21162

Transaction ID: 37177554

Purpose of Expenditure
Bumper Stickers - Estimated Cost

Category/Type 004

Office Sought: House State: VA
 Senate District: 11
 Presidential

Name of Federal Candidate supported or Opposed by expenditure:
Mr. Keith Fimian

Check One: Support Oppose

Calendar Year-To-Date Per Election for Office Sought
7248.96

Disbursement For: Primary General
 Other (specify) : _____
2010

Full Name (Last, First, Middle, Initial) of Payee
Novacon Promotional Products

[MEMO ITEM]
Bumper Stickers - Estimated Cost

Mailing Address
11100 Pulaski Highway

Date
M M / D D / Y Y Y Y
1 0 / 1 4 / 2 0 1 0

City State Zip Code
White Marsh MD 21162

Amount
243.65

Purpose of Expenditure
Bumper Stickers - Estimated Cost

Category/Type 004

Transaction ID: 37177555

Name of Federal Candidate supported or Opposed by expenditure:
Rep. Steve Chabot

Office Sought: House State: OH
 Senate District: 01
 Presidential

Calendar Year-To-Date Per Election for Office Sought
6093.98

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

[MEMO ITEM]
Bumper Stickers - Estimated Cost

(a) SUBTOTAL of Itemized Independent Expenditures	0.00
(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.

Mary Rose Adkins
Signature

Date M M / D D / Y Y Y Y
0 3 / 0 3 / 2 0 1 1

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund	FEC IDENTIFICATION NUMBER C C00053553
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
Novacon Promotional Products

Mailing Address
11100 Pulaski Highway

City White Marsh	State MD	Zip Code 21162
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Purpose of Expenditure Bumper Stickers	Category/ Type 004
---	--------------------------

Name of Federal Candidate supported or Opposed by expenditure:
Mr. Keith Fimian

Calendar Year-To-Date Per Election for Office Sought	11365.22
---	----------

Date
M M / D D / Y Y Y Y
1 0 / 2 8 / 2 0 1 0

Amount
481.87

Transaction ID: 37362698

Office Sought: House State: VA
 Senate District: 11
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

Full Name (Last, First, Middle, Initial) of Payee
Novacon Promotional Products

Mailing Address
11100 Pulaski Highway

City White Marsh	State MD	Zip Code 21162
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Purpose of Expenditure Bumper Stickers	Category/ Type 004
---	--------------------------

Name of Federal Candidate supported or Opposed by expenditure:
Rep. Steve Chabot

Calendar Year-To-Date Per Election for Office Sought	8713.36
---	---------

Date
M M / D D / Y Y Y Y
1 0 / 2 8 / 2 0 1 0

Amount
240.94

Transaction ID: 37362699

Office Sought: House State: OH
 Senate District: 01
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

(a) SUBTOTAL of Itemized Independent Expenditures	722.81
(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
Signature

Date M M / D D / Y Y Y Y
0 3 / 0 3 / 2 0 1 1

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund	FEC IDENTIFICATION NUMBER C C00053553
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
OnMessage, Inc.

Mailing Address
2130 Priest Bridge Drive, #11

City Crofton	State MD	Zip Code 21114
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Purpose of Expenditure TV Advertising	Category/Type 004
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Name of Federal Candidate supported or Opposed by expenditure:
Mr. Roy Blunt

Calendar Year-To-Date Per Election for Office Sought
2264083.27

Date
M M / D D / Y Y Y Y
1 0 / 1 4 / 2 0 1 0

Amount
10198.12

Transaction ID: 37160427

Office Sought: House State: MO
 Senate District: _____
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

[MEMO ITEM]
TV Advertising

Full Name (Last, First, Middle, Initial) of Payee
OnMessage, Inc.

Mailing Address
2130 Priest Bridge Drive, #11

City Crofton	State MD	Zip Code 21114
-----------------	-------------	-------------------

Purpose of Expenditure TV Advertising	Category/Type 004
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Name of Federal Candidate supported or Opposed by expenditure:
Mr. Joseph Sestak

Calendar Year-To-Date Per Election for Office Sought
1332556.02

Date
M M / D D / Y Y Y Y
1 0 / 1 4 / 2 0 1 0

Amount
253251.56

Transaction ID: 37179144

Office Sought: House State: PA
 Senate District: _____
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

(a) SUBTOTAL of Itemized Independent Expenditures	253251.56
(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
Signature

Date M M / D D / Y Y Y Y
0 3 / 0 3 / 2 0 1 1

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund	FEC IDENTIFICATION NUMBER C C00053553
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
OnMessage, Inc.

Mailing Address
2130 Priest Bridge Drive, #11

City State Zip Code
Crofton MD 21114

Purpose of Expenditure Category/Type
TV Advertising 004

Name of Federal Candidate supported or Opposed by expenditure:
Mr. Roy Blunt

Calendar Year-To-Date Per Election for Office Sought
2274281.39

Date
MM / DD / YYYY
10 / 14 / 2010

Amount
10198.12

Transaction ID: 37179145

Office Sought: House State: MO
 Senate District: _____
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

Full Name (Last, First, Middle, Initial) of Payee
OnMessage, Inc.

Mailing Address
2130 Priest Bridge Drive, #11

City State Zip Code
Crofton MD 21114

Purpose of Expenditure Category/Type
TV Advertising 004

Name of Federal Candidate supported or Opposed by expenditure:
Mr. Patrick Toomey

Calendar Year-To-Date Per Election for Office Sought
1434773.52

Date
MM / DD / YYYY
10 / 14 / 2010

Amount
102217.50

Transaction ID: 37342449

Office Sought: House State: PA
 Senate District: _____
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

(a) SUBTOTAL of Itemized Independent Expenditures	112415.62
(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
Signature

Date MM / DD / YYYY
03 / 03 / 2011

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund	FEC IDENTIFICATION NUMBER C C00053553
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
OnMessage, Inc.

Date
M M / D D / Y Y Y Y
1 0 / 1 4 / 2 0 1 0

Mailing Address
2130 Priest Bridge Drive, #11

Amount
102217.50

City State Zip Code
Crofton MD 21114

Transaction ID: 37342450

Purpose of Expenditure Category/Type
TV Advertising 004

Office Sought: House State: PA
 Senate District: _____
 Presidential

Name of Federal Candidate supported or Opposed by expenditure:
Mr. Joseph Sestak

Check One: Support Oppose

Calendar Year-To-Date Per Election for Office Sought
1536991.02

Disbursement For: Primary General
 Other (specify) : _____
2010

Full Name (Last, First, Middle, Initial) of Payee
OnMessage, Inc.

Date
M M / D D / Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Mailing Address
2130 Priest Bridge Drive, #11

Amount
253251.56

City State Zip Code
Crofton MD 21114

Transaction ID: 37231501

Purpose of Expenditure Category/Type
TV Advertising 004

Office Sought: House State: PA
 Senate District: _____
 Presidential

Name of Federal Candidate supported or Opposed by expenditure:
Mr. Joseph Sestak

Check One: Support Oppose

Calendar Year-To-Date Per Election for Office Sought
1800973.71

Disbursement For: Primary General
 Other (specify) : _____
2010

[MEMO ITEM]
TV Advertising

(a) SUBTOTAL of Itemized Independent Expenditures	102217.50
(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
Signature

Date M M / D D / Y Y Y Y
0 3 / 0 3 / 2 0 1 1

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund	FEC IDENTIFICATION NUMBER C C00053553
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
OnMessage, Inc.

Date
M M / D D / Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Mailing Address
2130 Priest Bridge Drive, #11

Amount
2123.44

City State Zip Code
Crofton MD 21114

Transaction ID: 37231605

Purpose of Expenditure
TV Advertising

Category/Type
004

Office Sought: House State: PA
 Senate District: _____
 Presidential

Name of Federal Candidate supported or Opposed by expenditure:
Mr. Joseph Sestak

Check One: Support Oppose

Calendar Year-To-Date Per Election for Office Sought
1803097.15

Disbursement For: Primary General
 Other (specify) : _____
2010
[MEMO ITEM]

Full Name (Last, First, Middle, Initial) of Payee
OnMessage, Inc.

Date
M M / D D / Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Mailing Address
2130 Priest Bridge Drive, #11

Amount
30000.00

City State Zip Code
Crofton MD 21114

Transaction ID: 37231729

Purpose of Expenditure
TV Ad Production - Estimated Cost

Category/Type
004

Office Sought: House State: PA
 Senate District: _____
 Presidential

Name of Federal Candidate supported or Opposed by expenditure:
Mr. Joseph Sestak

Check One: Support Oppose

Calendar Year-To-Date Per Election for Office Sought
1833097.15

Disbursement For: Primary General
 Other (specify) : _____
2010
[MEMO ITEM]

(a) SUBTOTAL of Itemized Independent Expenditures	0.00
(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.

Mary Rose Adkins
Signature

Date M M / D D / Y Y Y Y
0 3 / 0 3 / 2 0 1 1

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund		FEC IDENTIFICATION NUMBER C C00053553
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice		

Full Name (Last, First, Middle, Initial) of Payee
OnMessage, Inc.

Mailing Address
2130 Priest Bridge Drive, #11

City Crofton	State MD	Zip Code 21114
-----------------	-------------	-------------------

Purpose of Expenditure Radio Advertising	Category/ Type 004
---	--------------------------

Name of Federal Candidate supported or Opposed by expenditure:
Mr. Kenneth Buck

Calendar Year-To-Date Per Election for Office Sought	1104091.53
---	------------

Date
M M / D D / Y Y Y Y
1 0 / 2 5 / 2 0 1 0

Amount
37771.88

Transaction ID: 37343888

Office Sought: House State: CO
 Senate District: _____
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

Full Name (Last, First, Middle, Initial) of Payee
OnMessage, Inc.

Mailing Address
2130 Priest Bridge Drive, #11

City Crofton	State MD	Zip Code 21114
-----------------	-------------	-------------------

Purpose of Expenditure Radio Advertising	Category/ Type 004
---	--------------------------

Name of Federal Candidate supported or Opposed by expenditure:
Mr. Michael Bennet

Calendar Year-To-Date Per Election for Office Sought	1141863.40
---	------------

Date
M M / D D / Y Y Y Y
1 0 / 2 5 / 2 0 1 0

Amount
37771.87

Transaction ID: 37343894

Office Sought: House State: CO
 Senate District: _____
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

(a) SUBTOTAL of Itemized Independent Expenditures	75543.75
(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
Signature

Date M M / D D / Y Y Y Y
0 3 / 0 3 / 2 0 1 1

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund	FEC IDENTIFICATION NUMBER C C00053553
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
OnMessage, Inc.

Date
M M / D D / Y Y Y Y
1 0 / 2 5 / 2 0 1 0

Mailing Address
2130 Priest Bridge Drive, #11

Amount
37771.88

City State Zip Code
Crofton MD 21114

Transaction ID: 37343903

Purpose of Expenditure
Radio Advertising

Category/Type
004

Office Sought: House State: CO
 Senate District: _____
 Presidential

Name of Federal Candidate supported or Opposed by expenditure:
Mr. Kenneth Buck

Check One: Support Oppose

Calendar Year-To-Date Per Election for Office Sought
1179635.28

Disbursement For: Primary General
 Other (specify) : _____
2010
[MEMO ITEM]
Radio Advertising

Full Name (Last, First, Middle, Initial) of Payee
OnMessage, Inc.

Date
M M / D D / Y Y Y Y
1 0 / 2 5 / 2 0 1 0

Mailing Address
2130 Priest Bridge Drive, #11

Amount
1500.00

City State Zip Code
Crofton MD 21114

Transaction ID: 37343904

Purpose of Expenditure
Radio Ad Production - Estimated Cost

Category/Type
004

Office Sought: House State: CO
 Senate District: _____
 Presidential

Name of Federal Candidate supported or Opposed by expenditure:
Mr. Kenneth Buck

Check One: Support Oppose

Calendar Year-To-Date Per Election for Office Sought
1181135.28

Disbursement For: Primary General
 Other (specify) : _____
2010
[MEMO ITEM]
Radio Ad Production - Estimated Cost

(a) SUBTOTAL of Itemized Independent Expenditures	0.00
(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.

Mary Rose Adkins
Signature

Date M M / D D / Y Y Y Y
0 3 / 0 3 / 2 0 1 1

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund	FEC IDENTIFICATION NUMBER C C00053553
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
OnMessage, Inc.

Date
M M / D D / Y Y Y Y
1 0 / 2 5 / 2 0 1 0

Mailing Address
2130 Priest Bridge Drive, #11

Amount
37771.87

City State Zip Code
Crofton MD 21114

Transaction ID: 37343918

Purpose of Expenditure
Radio Advertising

Category/Type
004

Office Sought: House State: CO
 Senate District: _____
 Presidential

Name of Federal Candidate supported or Opposed by expenditure:
Mr. Michael Bennet

Check One: Support Oppose

Calendar Year-To-Date Per Election
for Office Sought 1218907.15

Disbursement For: Primary General
 Other (specify) : _____
2010
[MEMO ITEM]

Radio Advertising

Full Name (Last, First, Middle, Initial) of Payee
OnMessage, Inc.

Date
M M / D D / Y Y Y Y
1 0 / 2 5 / 2 0 1 0

Mailing Address
2130 Priest Bridge Drive, #11

Amount
1500.00

City State Zip Code
Crofton MD 21114

Transaction ID: 37343920

Purpose of Expenditure
Radio Ad Production - Estimated Cost

Category/Type
004

Office Sought: House State: CO
 Senate District: _____
 Presidential

Name of Federal Candidate supported or Opposed by expenditure:
Mr. Michael Bennet

Check One: Support Oppose

Calendar Year-To-Date Per Election
for Office Sought 1220407.15

Disbursement For: Primary General
 Other (specify) : _____
2010
[MEMO ITEM]

Radio Ad Production - Estimated Cost

(a) SUBTOTAL of Itemized Independent Expenditures	0.00
(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.

Mary Rose Adkins
Signature

Date M M / D D / Y Y Y Y
0 3 / 0 3 / 2 0 1 1

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund	FEC IDENTIFICATION NUMBER C C00053553
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
OnMessage, Inc.

Date
M M / D D / Y Y Y Y
1 0 / 2 5 / 2 0 1 0

Mailing Address
2130 Priest Bridge Drive, #11

Amount
102217.50

City State Zip Code
Crofton MD 21114

Transaction ID: 37352375

Purpose of Expenditure
TV Advertising

Category/Type
004

Office Sought: House State: PA
 Senate District: _____
 Presidential

Name of Federal Candidate supported or Opposed by expenditure:
Mr. Patrick Toomey

Check One: Support Oppose

Calendar Year-To-Date Per Election for Office Sought
2094902.43

Disbursement For: Primary General
 Other (specify) : _____
2010
[MEMO ITEM]

Full Name (Last, First, Middle, Initial) of Payee
OnMessage, Inc.

Date
M M / D D / Y Y Y Y
1 0 / 2 5 / 2 0 1 0

Mailing Address
2130 Priest Bridge Drive, #11

Amount
12500.00

City State Zip Code
Crofton MD 21114

Transaction ID: 37352376

Purpose of Expenditure
TV Ad Production - Estimated Cost

Category/Type
004

Office Sought: House State: PA
 Senate District: _____
 Presidential

Name of Federal Candidate supported or Opposed by expenditure:
Mr. Patrick Toomey

Check One: Support Oppose

Calendar Year-To-Date Per Election for Office Sought
2107402.43

Disbursement For: Primary General
 Other (specify) : _____
2010
[MEMO ITEM]

(a) SUBTOTAL of Itemized Independent Expenditures	0.00
(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.

Mary Rose Adkins
Signature

Date M M / D D / Y Y Y Y
0 3 / 0 3 / 2 0 1 1

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund	FEC IDENTIFICATION NUMBER C C00053553
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
OnMessage, Inc.

Mailing Address
2130 Priest Bridge Drive, #11

City Crofton	State MD	Zip Code 21114
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Purpose of Expenditure TV Advertising	Category/Type 004
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Name of Federal Candidate supported or Opposed by expenditure:
Mr. Joseph Sestak

Calendar Year-To-Date Per Election for Office Sought	2209619.93
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Date
M M / D D / Y Y Y Y
1 0 / 2 5 / 2 0 1 0

Amount
102217.50

Transaction ID: 37352377

Office Sought: House State: PA
 Senate District: _____
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

[MEMO ITEM]
TV Advertising

Full Name (Last, First, Middle, Initial) of Payee
OnMessage, Inc.

Mailing Address
2130 Priest Bridge Drive, #11

City Crofton	State MD	Zip Code 21114
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Purpose of Expenditure TV Ad Production - Estimated Cost	Category/Type 004
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Name of Federal Candidate supported or Opposed by expenditure:
Mr. Joseph Sestak

Calendar Year-To-Date Per Election for Office Sought	2222119.93
--	------------

Date
M M / D D / Y Y Y Y
1 0 / 2 5 / 2 0 1 0

Amount
12500.00

Transaction ID: 37352378

Office Sought: House State: PA
 Senate District: _____
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

[MEMO ITEM]
TV Ad Production - Estimated Cost

(a) SUBTOTAL of Itemized Independent Expenditures	0.00
(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.

Mary Rose Adkins
Signature

Date M M / D D / Y Y Y Y
0 3 / 0 3 / 2 0 1 1

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund	FEC IDENTIFICATION NUMBER C C00053553
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
Prolist Inc.

Date

M M	/	D D	/	Y Y Y Y
1 0		1 4		2 0 1 0

Mailing Address
8341 Beechcraft Avenue

Amount
406.74

Transaction ID: 37176933

City State Zip Code
Gaithersburg MD 20879-1509

Office Sought: House State: CA
 Senate District: 03
 Presidential

Purpose of Expenditure
Postage

Category/Type 004

Name of Federal Candidate supported or Opposed by expenditure:
Rep. Daniel Lungren

Check One: Support Oppose

Calendar Year-To-Date Per Election for Office Sought
455.27

Disbursement For: Primary General
 Other (specify) : _____
 2010
[MEMO ITEM]
 Postage

Full Name (Last, First, Middle, Initial) of Payee
Prolist Inc.

Date

M M	/	D D	/	Y Y Y Y
1 0		1 4		2 0 1 0

Mailing Address
8341 Beechcraft Avenue

Amount
25.27

Transaction ID: 37176934

City State Zip Code
Gaithersburg MD 20879-1509

Office Sought: House State: CA
 Senate District: 03
 Presidential

Purpose of Expenditure
Postcards

Category/Type 004

Name of Federal Candidate supported or Opposed by expenditure:
Rep. Daniel Lungren

Check One: Support Oppose

Calendar Year-To-Date Per Election for Office Sought
480.54

Disbursement For: Primary General
 Other (specify) : _____
 2010
[MEMO ITEM]
 Postcards

(a) SUBTOTAL of Itemized Independent Expenditures	0.00
(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.

Mary Rose Adkins
Signature

Date

M M	/	D D	/	Y Y Y Y
0 3		0 3		2 0 1 1

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund	FEC IDENTIFICATION NUMBER C C00053553
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
Prolist Inc.

Mailing Address
8341 Beechcraft Avenue

City Gaithersburg	State MD	Zip Code 20879-1509
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Purpose of Expenditure Postage	Category/ Type 004
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Name of Federal Candidate supported or Opposed by expenditure:
Mr. David Harmer

Calendar Year-To-Date Per Election for Office Sought	86733.21
---	----------

Date
M M / D D / Y Y Y Y
1 0 / 1 4 / 2 0 1 0

Amount
6247.75

Transaction ID: 37176935

Office Sought: House State: CA
 Senate District: 11
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010
[MEMO ITEM]

Postage

Full Name (Last, First, Middle, Initial) of Payee
Prolist Inc.

Mailing Address
8341 Beechcraft Avenue

City Gaithersburg	State MD	Zip Code 20879-1509
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Purpose of Expenditure Postcards	Category/ Type 004
-------------------------------------	--------------------------

Name of Federal Candidate supported or Opposed by expenditure:
Mr. David Harmer

Calendar Year-To-Date Per Election for Office Sought	87144.02
---	----------

Date
M M / D D / Y Y Y Y
1 0 / 1 4 / 2 0 1 0

Amount
410.81

Transaction ID: 37176936

Office Sought: House State: CA
 Senate District: 11
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010
[MEMO ITEM]

Postcards

(a) SUBTOTAL of Itemized Independent Expenditures	0.00
(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.

Mary Rose Adkins
Signature

Date M M / D D / Y Y Y Y
0 3 / 0 3 / 2 0 1 1

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund		FEC IDENTIFICATION NUMBER C C00053553
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice		

Full Name (Last, First, Middle, Initial) of Payee
Prolist Inc.

Date
M M / D D / Y Y Y Y
1 0 / 1 4 / 2 0 1 0

Mailing Address
8341 Beechcraft Avenue

Amount
6654.49
Transaction ID: 37176937

City State Zip Code
Gaithersburg MD 20879-1509

Office Sought: House State: CA
 Senate District: _____
 Presidential

Purpose of Expenditure
Postage Category/Type 004

Check One: Support Oppose

Name of Federal Candidate supported or Opposed by expenditure:
Ms. Carly Fiorina

Disbursement For: Primary General
 Other (specify) : _____

Calendar Year-To-Date Per Election for Office Sought 247046.85

2010 [MEMO ITEM]
Postage

Full Name (Last, First, Middle, Initial) of Payee
Prolist Inc.

Date
M M / D D / Y Y Y Y
1 0 / 1 4 / 2 0 1 0

Mailing Address
8341 Beechcraft Avenue

Amount
436.08
Transaction ID: 37176938

City State Zip Code
Gaithersburg MD 20879-1509

Office Sought: House State: CA
 Senate District: _____
 Presidential

Purpose of Expenditure
Postcards Category/Type 004

Check One: Support Oppose

Name of Federal Candidate supported or Opposed by expenditure:
Ms. Carly Fiorina

Disbursement For: Primary General
 Other (specify) : _____

Calendar Year-To-Date Per Election for Office Sought 247482.93

2010 [MEMO ITEM]
Postcards

(a) SUBTOTAL of Itemized Independent Expenditures	0.00
(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.

Mary Rose Adkins
Signature

Date M M / D D / Y Y Y Y
0 3 / 0 3 / 2 0 1 1

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund	FEC IDENTIFICATION NUMBER C C00053553
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
Prolist Inc.

Mailing Address
8341 Beechcraft Avenue

City Gaithersburg	State MD	Zip Code 20879-1509
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Purpose of Expenditure Postage	Category/ Type 004
-----------------------------------	--------------------------

Name of Federal Candidate supported or Opposed by expenditure:
Mr. Charles Djou

Date
M M / D D / Y Y Y Y
1 0 / 1 4 / 2 0 1 0

Amount
4730.71

Transaction ID: 37176939

Office Sought: House State: HI
 Senate District: 01
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

[MEMO ITEM]

Postage

Calendar Year-To-Date Per Election
for Office Sought 5328.68

Full Name (Last, First, Middle, Initial) of Payee
Prolist Inc.

Mailing Address
8341 Beechcraft Avenue

City Gaithersburg	State MD	Zip Code 20879-1509
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Purpose of Expenditure Postcards	Category/ Type 004
-------------------------------------	--------------------------

Name of Federal Candidate supported or Opposed by expenditure:
Mr. Charles Djou

Date
M M / D D / Y Y Y Y
1 0 / 1 4 / 2 0 1 0

Amount
311.30

Transaction ID: 37176940

Office Sought: House State: HI
 Senate District: 01
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

[MEMO ITEM]

Postcards

(a) SUBTOTAL of Itemized Independent Expenditures	0.00
(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.

Mary Rose Adkins _____ Date M M / D D / Y Y Y Y
Signature 0 3 / 0 3 / 2 0 1 1

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund	FEC IDENTIFICATION NUMBER C C00053553
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
Prolist Inc.

Mailing Address
8341 Beechcraft Avenue

City State Zip Code
Gaithersburg MD 20879-1509

Purpose of Expenditure Category/Type
Postage 004

Name of Federal Candidate supported or Opposed by expenditure:
Mr. Joe Heck

Calendar Year-To-Date Per Election for Office Sought 774.04

Date
M M / D D / Y Y Y Y
1 0 / 1 4 / 2 0 1 0

Amount
691.87

Transaction ID: 37176941

Office Sought: House State: NV
 Senate District: 03
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010
[MEMO ITEM]

Postage

Full Name (Last, First, Middle, Initial) of Payee
Prolist Inc.

Mailing Address
8341 Beechcraft Avenue

City State Zip Code
Gaithersburg MD 20879-1509

Purpose of Expenditure Category/Type
Postcards 004

Name of Federal Candidate supported or Opposed by expenditure:
Mr. Joe Heck

Calendar Year-To-Date Per Election for Office Sought 816.82

Date
M M / D D / Y Y Y Y
1 0 / 1 4 / 2 0 1 0

Amount
42.78

Transaction ID: 37176942

Office Sought: House State: NV
 Senate District: 03
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010
[MEMO ITEM]

Postcards

(a) SUBTOTAL of Itemized Independent Expenditures	0.00
(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.

Mary Rose Adkins
Signature

Date M M / D D / Y Y Y Y
0 3 / 0 3 / 2 0 1 1

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund	FEC IDENTIFICATION NUMBER C C00053553
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
Prolist Inc.

Mailing Address
8341 Beechcraft Avenue

City Gaithersburg	State MD	Zip Code 20879-1509
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Purpose of Expenditure Postage	Category/ Type 004
-----------------------------------	--------------------------

Name of Federal Candidate supported or Opposed by expenditure:
Ms. Carly Fiorina

Calendar Year-To-Date Per Election for Office Sought	274623.34
---	-----------

Date
M M / D D / Y Y Y Y
1 0 / 1 5 / 2 0 1 0

Amount
23628.21

Transaction ID: 37179063

Office Sought: House State: CA
 Senate District: _____
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010
[MEMO ITEM]

Postage

Full Name (Last, First, Middle, Initial) of Payee
Prolist Inc.

Mailing Address
8341 Beechcraft Avenue

City Gaithersburg	State MD	Zip Code 20879-1509
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Purpose of Expenditure Postcards	Category/ Type 004
-------------------------------------	--------------------------

Name of Federal Candidate supported or Opposed by expenditure:
Ms. Carly Fiorina

Calendar Year-To-Date Per Election for Office Sought	275785.39
---	-----------

Date
M M / D D / Y Y Y Y
1 0 / 1 5 / 2 0 1 0

Amount
1162.05

Transaction ID: 37179064

Office Sought: House State: CA
 Senate District: _____
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010
[MEMO ITEM]

Postcards

(a) SUBTOTAL of Itemized Independent Expenditures	0.00
(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.

Mary Rose Adkins
Signature

Date M M / D D / Y Y Y Y
0 3 / 0 3 / 2 0 1 1

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund	FEC IDENTIFICATION NUMBER C C00053553
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
Prolist Inc.

Mailing Address
8341 Beechcraft Avenue

City Gaithersburg	State MD	Zip Code 20879-1509
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Purpose of Expenditure Postage	Category/ Type 004
-----------------------------------	--------------------------

Name of Federal Candidate supported or Opposed by expenditure:
Mr. Roy Blunt

Calendar Year-To-Date Per Election for Office Sought	2434674.37
---	------------

Date
M M / D D / Y Y Y Y
1 0 / 1 5 / 2 0 1 0

Amount
145946.56

Transaction ID: 37179065

Office Sought: House State: MO
 Senate District: _____
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____

2010 **[MEMO ITEM]**

Postage

Full Name (Last, First, Middle, Initial) of Payee
Prolist Inc.

Mailing Address
8341 Beechcraft Avenue

City Gaithersburg	State MD	Zip Code 20879-1509
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Purpose of Expenditure Postcards	Category/ Type 004
-------------------------------------	--------------------------

Name of Federal Candidate supported or Opposed by expenditure:
Mr. Roy Blunt

Calendar Year-To-Date Per Election for Office Sought	2442104.10
---	------------

Date
M M / D D / Y Y Y Y
1 0 / 1 5 / 2 0 1 0

Amount
7429.73

Transaction ID: 37179066

Office Sought: House State: MO
 Senate District: _____
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____

2010 **[MEMO ITEM]**

Postcards

(a) SUBTOTAL of Itemized Independent Expenditures	0.00
(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.

Mary Rose Adkins
Signature

Date M M / D D / Y Y Y Y
0 3 / 0 3 / 2 0 1 1

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund	FEC IDENTIFICATION NUMBER C C00053553
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
Prolist Inc.

Mailing Address
8341 Beechcraft Avenue

City Gaithersburg	State MD	Zip Code 20879-1509
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Purpose of Expenditure Postage	Category/ Type 004
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Name of Federal Candidate supported or Opposed by expenditure:
Mr. Ronald Johnson

Calendar Year-To-Date Per Election for Office Sought
786734.27

Date
M M / D D / Y Y Y Y
1 0 / 1 5 / 2 0 1 0

Amount
150557.65

Transaction ID: 37179067

Office Sought: House State: WI
 Senate District: _____
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010
[MEMO ITEM]

Postage

Full Name (Last, First, Middle, Initial) of Payee
Prolist Inc.

Mailing Address
8341 Beechcraft Avenue

City Gaithersburg	State MD	Zip Code 20879-1509
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Purpose of Expenditure Postcards	Category/ Type 004
-------------------------------------	--------------------------

Name of Federal Candidate supported or Opposed by expenditure:
Mr. Ronald Johnson

Calendar Year-To-Date Per Election for Office Sought
794422.01

Date
M M / D D / Y Y Y Y
1 0 / 1 5 / 2 0 1 0

Amount
7687.74

Transaction ID: 37179068

Office Sought: House State: WI
 Senate District: _____
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010
[MEMO ITEM]

Postcards

(a) SUBTOTAL of Itemized Independent Expenditures	0.00
(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.

Mary Rose Adkins
Signature

Date M M / D D / Y Y Y Y
0 3 / 0 3 / 2 0 1 1

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund	FEC IDENTIFICATION NUMBER ▼ C C00053553
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
Prolist Inc.

Mailing Address
8341 Beechcraft Avenue

City Gaithersburg	State MD	Zip Code 20879-1509
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Purpose of Expenditure Postage	Category/ Type 004
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Name of Federal Candidate supported or Opposed by expenditure:
Mr. Kenneth Buck

Calendar Year-To-Date Per Election for Office Sought	838946.94
---	---

Date

M M	/	D D	/	Y Y Y Y
1 0		1 5		2 0 1 0

Amount
4787.06

Transaction ID: 37179117

Office Sought: House State: CO
 Senate District: _____
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
 2010

Full Name (Last, First, Middle, Initial) of Payee
Prolist Inc.

Mailing Address
8341 Beechcraft Avenue

City Gaithersburg	State MD	Zip Code 20879-1509
----------------------	-------------	------------------------

Purpose of Expenditure Postcards	Category/ Type 004
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Name of Federal Candidate supported or Opposed by expenditure:
Mr. Kenneth Buck

Calendar Year-To-Date Per Election for Office Sought	841559.64
---	---

Date

M M	/	D D	/	Y Y Y Y
1 0		1 5		2 0 1 0

Amount
2612.70

Transaction ID: 37179140

Office Sought: House State: CO
 Senate District: _____
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
 2010

(a) SUBTOTAL of Itemized Independent Expenditures	7399.76
(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
Signature

Date

M M	/	D D	/	Y Y Y Y
0 3		0 3		2 0 1 1

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund	FEC IDENTIFICATION NUMBER C C00053553
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
Prolist Inc.

Mailing Address
8341 Beechcraft Avenue

City Gaithersburg	State MD	Zip Code 20879-1509
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Purpose of Expenditure Postage	Category/ Type 004
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Name of Federal Candidate supported or Opposed by expenditure:
Mr. Patrick Toomey

Calendar Year-To-Date Per Election for Office Sought	1942073.45
---	------------

Date
M M / D D / Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Amount
108976.30

Transaction ID: 37233711

Office Sought: House State: PA
 Senate District: _____
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010
[MEMO ITEM]

Postage

Full Name (Last, First, Middle, Initial) of Payee
Prolist Inc.

Mailing Address
8341 Beechcraft Avenue

City Gaithersburg	State MD	Zip Code 20879-1509
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Purpose of Expenditure Postcards	Category/ Type 004
-------------------------------------	--------------------------

Name of Federal Candidate supported or Opposed by expenditure:
Mr. Patrick Toomey

Calendar Year-To-Date Per Election for Office Sought	1947592.42
---	------------

Date
M M / D D / Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Amount
5518.97

Transaction ID: 37233781

Office Sought: House State: PA
 Senate District: _____
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010
[MEMO ITEM]

Postcards

(a) SUBTOTAL of Itemized Independent Expenditures	0.00
(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.

Mary Rose Adkins
Signature

Date M M / D D / Y Y Y Y
0 3 / 0 3 / 2 0 1 1

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund	FEC IDENTIFICATION NUMBER C C00053553
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
Prolist Inc.

Mailing Address
8341 Beechcraft Avenue

City Gaithersburg	State MD	Zip Code 20879-1509
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Purpose of Expenditure Postage	Category/ Type 004
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Name of Federal Candidate supported or Opposed by expenditure:
Mr. David Rivera

Calendar Year-To-Date Per Election for Office Sought	12811.55
---	----------

Date
M M / D D / Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Amount
11223.87

Transaction ID: 37233892

Office Sought: House State: FL
 Senate District: 25
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

[MEMO ITEM]

Postage

Full Name (Last, First, Middle, Initial) of Payee
Prolist Inc.

Mailing Address
8341 Beechcraft Avenue

City Gaithersburg	State MD	Zip Code 20879-1509
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Purpose of Expenditure Postcards	Category/ Type 004
-------------------------------------	--------------------------

Name of Federal Candidate supported or Opposed by expenditure:
Mr. David Rivera

Calendar Year-To-Date Per Election for Office Sought	13424.81
---	----------

Date
M M / D D / Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Amount
613.26

Transaction ID: 37233945

Office Sought: House State: FL
 Senate District: 25
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

[MEMO ITEM]

Postcards

(a) SUBTOTAL of Itemized Independent Expenditures	0.00
(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.

Mary Rose Adkins _____ Date M M / D D / Y Y Y Y
Signature 0 3 / 0 3 / 2 0 1 1

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund	FEC IDENTIFICATION NUMBER ▼ C C00053553
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
Prolist Inc.

Mailing Address
8341 Beechcraft Avenue

City Gaithersburg	State MD	Zip Code 20879-1509
Purpose of Expenditure Postage		Category/ Type 004

Name of Federal Candidate supported or Opposed by expenditure:
Mr. Benjamin Lange

Calendar Year-To-Date Per Election for Office Sought	43411.91
---	--

Date

M M 1 0	/	D D 1 8	/	Y Y Y Y 2 0 1 0
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Amount
5647.85

Transaction ID: 37234125

Office Sought: House State: IA
 Senate District: 01
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
 2010 **[MEMO ITEM]**

Postage

Full Name (Last, First, Middle, Initial) of Payee
Prolist Inc.

Mailing Address
8341 Beechcraft Avenue

City Gaithersburg	State MD	Zip Code 20879-1509
Purpose of Expenditure Postcards		Category/ Type 004

Name of Federal Candidate supported or Opposed by expenditure:
Mr. Benjamin Lange

Calendar Year-To-Date Per Election for Office Sought	43720.56
---	--

Date

M M 1 0	/	D D 1 8	/	Y Y Y Y 2 0 1 0
------------	---	------------	---	--------------------

Amount
308.65

Transaction ID: 37234242

Office Sought: House State: IA
 Senate District: 01
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
 2010 **[MEMO ITEM]**

Postcards

(a) SUBTOTAL of Itemized Independent Expenditures	0.00
(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.

Mary Rose Adkins
Signature

Date

M M 0 3	/	D D 0 3	/	Y Y Y Y 2 0 1 1
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SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund		FEC IDENTIFICATION NUMBER C C00053553
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice		

Full Name (Last, First, Middle, Initial) 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
M M / D D / Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Amount
11798.66

Transaction ID: 37234546

Office Sought: House State: IA
 Senate District: _____
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____

2010 **[MEMO ITEM]**

Postage

Name of Federal Candidate supported or Opposed by expenditure:
Sen. Charles E. Grassley

Calendar Year-To-Date Per Election
for Office Sought 94173.14

Full Name (Last, First, Middle, Initial) 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
M M / D D / Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Amount
644.84

Transaction ID: 37234602

Office Sought: House State: IA
 Senate District: _____
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____

2010 **[MEMO ITEM]**

Postcards

Name of Federal Candidate supported or Opposed by expenditure:
Sen. Charles E. Grassley

Calendar Year-To-Date Per Election
for Office Sought 94817.98

(a) SUBTOTAL of Itemized Independent Expenditures	0.00
(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.

Mary Rose Adkins
Signature

Date M M / D D / Y Y Y Y
0 3 / 0 3 / 2 0 1 1

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund	FEC IDENTIFICATION NUMBER C C00053553
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
 Prolist Inc.

Date
 M M / D D / Y Y Y Y
 1 0 / 1 8 / 2 0 1 0

Mailing Address
 8341 Beechcraft Avenue

Amount
 6150.81

City State Zip Code
 Gaithersburg MD 20879-1509

Transaction ID: 37234788

Purpose of Expenditure
 Postage

Category/Type
 004

Office Sought: House State: IA
 Senate District: 02
 Presidential

Name of Federal Candidate supported or Opposed by expenditure:
 Mariannette Miller-Meeks

Check One: Support Oppose

Calendar Year-To-Date Per Election for Office Sought
 43986.23

Disbursement For: Primary General
 Other (specify) : _____
 2010
[MEMO ITEM]

Full Name (Last, First, Middle, Initial) of Payee
 Prolist Inc.

Date
 M M / D D / Y Y Y Y
 1 0 / 1 8 / 2 0 1 0

Mailing Address
 8341 Beechcraft Avenue

Amount
 336.20

City State Zip Code
 Gaithersburg MD 20879-1509

Transaction ID: 37234877

Purpose of Expenditure
 Postcards

Category/Type
 004

Office Sought: House State: IA
 Senate District: 02
 Presidential

Name of Federal Candidate supported or Opposed by expenditure:
 Mariannette Miller-Meeks

Check One: Support Oppose

Calendar Year-To-Date Per Election for Office Sought
 44322.43

Disbursement For: Primary General
 Other (specify) : _____
 2010
[MEMO ITEM]

(a) SUBTOTAL of Itemized Independent Expenditures	<input style="width:100%;" type="text" value="0.00"/>
(b) SUBTOTAL of Unitemized Independent Expenditures	<input style="width:100%;" type="text"/>
(c) TOTAL Independent Expenditures	<input style="width:100%;" type="text"/>

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
 Signature

Date M M / D D / Y Y Y Y
 0 3 / 0 3 / 2 0 1 1

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund	FEC IDENTIFICATION NUMBER C C00053553
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
Prolist Inc.

Mailing Address
8341 Beechcraft Avenue

City Gaithersburg	State MD	Zip Code 20879-1509
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Purpose of Expenditure Postage	Category/ Type 004
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Date
M M / D D / Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Amount
6612.06

Transaction ID: 37234961

Office Sought: House State: KS
 Senate District: 03
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
 2010 **[MEMO ITEM]**

Postage

Name of Federal Candidate supported or Opposed by expenditure:
Mr. Kevin Yoder

Calendar Year-To-Date Per Election
for Office Sought 15295.84

Full Name (Last, First, Middle, Initial) of Payee
Prolist Inc.

Mailing Address
8341 Beechcraft Avenue

City Gaithersburg	State MD	Zip Code 20879-1509
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Purpose of Expenditure Postcards	Category/ Type 004
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Date
M M / D D / Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Amount
360.96

Transaction ID: 37235002

Office Sought: House State: KS
 Senate District: 03
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
 2010 **[MEMO ITEM]**

Postcards

Name of Federal Candidate supported or Opposed by expenditure:
Mr. Kevin Yoder

Calendar Year-To-Date Per Election
for Office Sought 15656.80

(a) SUBTOTAL of Itemized Independent Expenditures	0.00
(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.

Mary Rose Adkins
Signature

Date M M / D D / Y Y Y Y
0 3 / 0 3 / 2 0 1 1

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund	FEC IDENTIFICATION NUMBER C C00053553
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
Prolist Inc.

Mailing Address
8341 Beechcraft Avenue

City Gaithersburg	State MD	Zip Code 20879-1509
----------------------	-------------	------------------------

Purpose of Expenditure Postage	Category/ Type 004
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Name of Federal Candidate supported or Opposed by expenditure:
Mr. Randolph Altschuler

Calendar Year-To-Date Per Election for Office Sought	8776.08
---	---------

Date
M M / D D / Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Amount
7693.79

Transaction ID: 37235037

Office Sought: House State: NY
 Senate District: 01
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

[MEMO ITEM]

Postage

Full Name (Last, First, Middle, Initial) of Payee
Prolist Inc.

Mailing Address
8341 Beechcraft Avenue

City Gaithersburg	State MD	Zip Code 20879-1509
----------------------	-------------	------------------------

Purpose of Expenditure Postcards	Category/ Type 004
-------------------------------------	--------------------------

Name of Federal Candidate supported or Opposed by expenditure:
Mr. Randolph Altschuler

Calendar Year-To-Date Per Election for Office Sought	9194.12
---	---------

Date
M M / D D / Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Amount
418.04

Transaction ID: 37235095

Office Sought: House State: NY
 Senate District: 01
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

[MEMO ITEM]

Postcards

(a) SUBTOTAL of Itemized Independent Expenditures	0.00
(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.

Mary Rose Adkins
Signature

Date M M / D D / Y Y Y Y
0 3 / 0 3 / 2 0 1 1

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund	FEC IDENTIFICATION NUMBER C C00053553
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
Prolist Inc.

Mailing Address
8341 Beechcraft Avenue

City Gaithersburg	State MD	Zip Code 20879-1509
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Purpose of Expenditure Postage	Category/ Type 004
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Name of Federal Candidate supported or Opposed by expenditure:
Ms. Ruth McClung

Calendar Year-To-Date Per Election for Office Sought	1415.22
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Date
M M / D D / Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Amount
1248.61

Transaction ID: 37235155

Office Sought: House State: AZ
 Senate District: 07
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

[MEMO ITEM]

Postage

Full Name (Last, First, Middle, Initial) of Payee
Prolist Inc.

Mailing Address
8341 Beechcraft Avenue

City Gaithersburg	State MD	Zip Code 20879-1509
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Purpose of Expenditure Postcards	Category/ Type 004
-------------------------------------	--------------------------

Name of Federal Candidate supported or Opposed by expenditure:
Ms. Ruth McClung

Calendar Year-To-Date Per Election for Office Sought	1481.53
---	---------

Date
M M / D D / Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Amount
66.31

Transaction ID: 37235206

Office Sought: House State: AZ
 Senate District: 07
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

[MEMO ITEM]

Postcards

(a) SUBTOTAL of Itemized Independent Expenditures	0.00
(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.

Mary Rose Adkins
Signature

Date M M / D D / Y Y Y Y
0 3 / 0 3 / 2 0 1 1

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund	FEC IDENTIFICATION NUMBER C C00053553
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
Prolist Inc.

Mailing Address
8341 Beechcraft Avenue

City Gaithersburg	State MD	Zip Code 20879-1509
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Purpose of Expenditure Postage	Category/ Type 004
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Name of Federal Candidate supported or Opposed by expenditure:
Mr. Richard Blumenthal

Date
M M / D D / Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Amount
15189.75

Transaction ID: 37235299

Office Sought: House State: CT
 Senate District: _____
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____

2010 **[MEMO ITEM]**

Postage

Calendar Year-To-Date Per Election
for Office Sought 17252.28

Full Name (Last, First, Middle, Initial) of Payee
Prolist Inc.

Mailing Address
8341 Beechcraft Avenue

City Gaithersburg	State MD	Zip Code 20879-1509
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Purpose of Expenditure Postcards	Category/ Type 004
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Name of Federal Candidate supported or Opposed by expenditure:
Mr. Richard Blumenthal

Date
M M / D D / Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Amount
820.82

Transaction ID: 37235382

Office Sought: House State: CT
 Senate District: _____
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____

2010 **[MEMO ITEM]**

Postcards

(a) SUBTOTAL of Itemized Independent Expenditures	0.00
(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.

Mary Rose Adkins _____ Date M M / D D / Y Y Y Y
Signature 0 3 / 0 3 / 2 0 1 1

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund	FEC IDENTIFICATION NUMBER C C00053553
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
Prolist Inc.

Date
M M / D D / Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Mailing Address
8341 Beechcraft Avenue

Amount
4473.35

City State Zip Code
Gaithersburg MD 20879-1509

Transaction ID: 37235443

Purpose of Expenditure
Postage

Category/Type 004

Office Sought: House State: DE
 Senate District: _____
 Presidential

Name of Federal Candidate supported or Opposed by expenditure:
Ms. Christine O'Donnell

Check One: Support Oppose

Calendar Year-To-Date Per Election for Office Sought
163205.65

Disbursement For: Primary General
 Other (specify) : _____
2010
[MEMO ITEM]

Full Name (Last, First, Middle, Initial) of Payee
Prolist Inc.

Date
M M / D D / Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Mailing Address
8341 Beechcraft Avenue

Amount
242.68

City State Zip Code
Gaithersburg MD 20879-1509

Transaction ID: 37235497

Purpose of Expenditure
Postcards

Category/Type 004

Office Sought: House State: DE
 Senate District: _____
 Presidential

Name of Federal Candidate supported or Opposed by expenditure:
Ms. Christine O'Donnell

Check One: Support Oppose

Calendar Year-To-Date Per Election for Office Sought
163448.33

Disbursement For: Primary General
 Other (specify) : _____
2010
[MEMO ITEM]

(a) SUBTOTAL of Itemized Independent Expenditures	0.00
(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.

Mary Rose Adkins
Signature

Date M M / D D / Y Y Y Y
0 3 / 0 3 / 2 0 1 1

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund	FEC IDENTIFICATION NUMBER C C00053553
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
Prolist Inc.

Date
M M / D D / Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Mailing Address
8341 Beechcraft Avenue

Amount
14455.20

City State Zip Code
Gaithersburg MD 20879-1509

Transaction ID: 37235572

Purpose of Expenditure
Postage

Category/Type 004

Office Sought: House State: NC
 Senate District: _____
 Presidential

Name of Federal Candidate supported or Opposed by expenditure:
Sen. Richard M. Burr

Check One: Support Oppose

Calendar Year-To-Date Per Election for Office Sought
29688.65

Disbursement For: Primary General
 Other (specify) : _____
2010
[MEMO ITEM]

Full Name (Last, First, Middle, Initial) of Payee
Prolist Inc.

Date
M M / D D / Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Mailing Address
8341 Beechcraft Avenue

Amount
757.60

City State Zip Code
Gaithersburg MD 20879-1509

Transaction ID: 37235634

Purpose of Expenditure
Postcards

Category/Type 004

Office Sought: House State: NC
 Senate District: _____
 Presidential

Name of Federal Candidate supported or Opposed by expenditure:
Sen. Richard M. Burr

Check One: Support Oppose

Calendar Year-To-Date Per Election for Office Sought
30446.25

Disbursement For: Primary General
 Other (specify) : _____
2010
[MEMO ITEM]

(a) SUBTOTAL of Itemized Independent Expenditures	0.00
(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.

Mary Rose Adkins
Signature

Date M M / D D / Y Y Y Y
0 3 / 0 3 / 2 0 1 1

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund	FEC IDENTIFICATION NUMBER ▼ C C00053553
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
Prolist Inc.

Mailing Address
8341 Beechcraft Avenue

City Gaithersburg	State MD	Zip Code 20879-1509
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Purpose of Expenditure Postage	Category/ Type 004
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Name of Federal Candidate supported or Opposed by expenditure:
Mr. George Kelly

Calendar Year-To-Date Per Election for Office Sought	10545.08
---	--

Date

M M / D D / Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Amount
9282.39

Transaction ID: 37235754

Office Sought: House State: PA
 Senate District: 03
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
 2010 **[MEMO ITEM]**

Postage

Full Name (Last, First, Middle, Initial) of Payee
Prolist Inc.

Mailing Address
8341 Beechcraft Avenue

City Gaithersburg	State MD	Zip Code 20879-1509
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Purpose of Expenditure Postcards	Category/ Type 004
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Name of Federal Candidate supported or Opposed by expenditure:
Mr. George Kelly

Calendar Year-To-Date Per Election for Office Sought	11047.59
---	--

Date

M M / D D / Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Amount
502.51

Transaction ID: 37235822

Office Sought: House State: PA
 Senate District: 03
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
 2010 **[MEMO ITEM]**

Postcards

(a) SUBTOTAL of Itemized Independent Expenditures	0.00
(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.

Mary Rose Adkins
Signature

Date

M M	D D	Y Y Y Y
0 3	0 3	2 0 1 1

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund	FEC IDENTIFICATION NUMBER C C00053553
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
Prolist Inc.

Date
M M / D D / Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Mailing Address
8341 Beechcraft Avenue

Amount
9728.95

City State Zip Code
Gaithersburg MD 20879-1509

Transaction ID: 37266615

Purpose of Expenditure
Postage

Category/Type
004

Office Sought: House State: CT
 Senate District: 05
 Presidential

Name of Federal Candidate supported or Opposed by expenditure:
Mr. Sam Caligiuri

Check One: Support Oppose

Calendar Year-To-Date Per Election for Office Sought
11745.46

Disbursement For: Primary General
 Other (specify) : _____
2010
[MEMO ITEM]

Full Name (Last, First, Middle, Initial) of Payee
Prolist Inc.

Date
M M / D D / Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Mailing Address
8341 Beechcraft Avenue

Amount
530.59

City State Zip Code
Gaithersburg MD 20879-1509

Transaction ID: 37266638

Purpose of Expenditure
Postcards

Category/Type
004

Office Sought: House State: CT
 Senate District: 05
 Presidential

Name of Federal Candidate supported or Opposed by expenditure:
Mr. Sam Caligiuri

Check One: Support Oppose

Calendar Year-To-Date Per Election for Office Sought
12276.05

Disbursement For: Primary General
 Other (specify) : _____
2010
[MEMO ITEM]

(a) SUBTOTAL of Itemized Independent Expenditures	0.00
(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.

Mary Rose Adkins
Signature

Date M M / D D / Y Y Y Y
0 3 / 0 3 / 2 0 1 1

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

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund	FEC IDENTIFICATION NUMBER C C00053553
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
Prolist Inc.

Mailing Address
8341 Beechcraft Avenue

City Gaithersburg	State MD	Zip Code 20879-1509
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Purpose of Expenditure Postage	Category/ Type 004
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Name of Federal Candidate supported or Opposed by expenditure:
Sandy Adams

Calendar Year-To-Date Per Election for Office Sought	24843.54
---	----------

Date
M M / D D / Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Amount
1693.95

Transaction ID: 37266687

Office Sought: House State: FL
 Senate District: 24
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

[MEMO ITEM]

Postage

Full Name (Last, First, Middle, Initial) of Payee
Prolist Inc.

Mailing Address
8341 Beechcraft Avenue

City Gaithersburg	State MD	Zip Code 20879-1509
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Purpose of Expenditure Postcards	Category/ Type 004
-------------------------------------	--------------------------

Name of Federal Candidate supported or Opposed by expenditure:
Sandy Adams

Calendar Year-To-Date Per Election for Office Sought	24933.05
---	----------

Date
M M / D D / Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Amount
89.51

Transaction ID: 37266742

Office Sought: House State: FL
 Senate District: 24
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

[MEMO ITEM]

Postcards

(a) SUBTOTAL of Itemized Independent Expenditures	0.00
(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.

Mary Rose Adkins
Signature

Date M M / D D / Y Y Y Y
0 3 / 0 3 / 2 0 1 1

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund	FEC IDENTIFICATION NUMBER C C00053553
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
Prolist Inc.

Date
M M / D D / Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Mailing Address
8341 Beechcraft Avenue

Amount
17247.88

City State Zip Code
Gaithersburg MD 20879-1509

Transaction ID: 37266770

Purpose of Expenditure
Postage

Category/Type
004

Office Sought: House State: IL
 Senate District: 17
 Presidential

Name of Federal Candidate supported or Opposed by expenditure:
Mr. Robert Schilling

Check One: Support Oppose

Calendar Year-To-Date Per Election for Office Sought
60358.35

Disbursement For: Primary General
 Other (specify) : _____
2010
[MEMO ITEM]

Full Name (Last, First, Middle, Initial) of Payee
Prolist Inc.

Date
M M / D D / Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Mailing Address
8341 Beechcraft Avenue

Amount
938.24

City State Zip Code
Gaithersburg MD 20879-1509

Transaction ID: 37266793

Purpose of Expenditure
Postcards

Category/Type
004

Office Sought: House State: IL
 Senate District: 17
 Presidential

Name of Federal Candidate supported or Opposed by expenditure:
Mr. Robert Schilling

Check One: Support Oppose

Calendar Year-To-Date Per Election for Office Sought
61296.59

Disbursement For: Primary General
 Other (specify) : _____
2010
[MEMO ITEM]

(a) SUBTOTAL of Itemized Independent Expenditures	0.00
(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.

Mary Rose Adkins
Signature

Date
M M / D D / Y Y Y Y
0 3 / 0 3 / 2 0 1 1

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund	FEC IDENTIFICATION NUMBER C C00053553
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
Prolist Inc.

Date

M	M	/	D	D	/	Y	Y	Y	Y
1	0		1	9		2	0	1	0

Mailing Address
8341 Beechcraft Avenue

Amount
668.11

Transaction ID: 37266879

City State Zip Code
Gaithersburg MD 20879-1509

Office Sought: House State: KS
 Senate District: 04
 Presidential

Purpose of Expenditure
Postage

Category/Type **004**

Check One: Support Oppose

Name of Federal Candidate supported or Opposed by expenditure:
Mike Pompeo

Disbursement For: Primary General

Calendar Year-To-Date Per Election for Office Sought
1399.27

Other (specify) : _____
2010
[MEMO ITEM]
Postage

Full Name (Last, First, Middle, Initial) of Payee
Prolist Inc.

Date

M	M	/	D	D	/	Y	Y	Y	Y
1	0		1	9		2	0	1	0

Mailing Address
8341 Beechcraft Avenue

Amount
34.11

Transaction ID: 37266922

City State Zip Code
Gaithersburg MD 20879-1509

Office Sought: House State: KS
 Senate District: 04
 Presidential

Purpose of Expenditure
Postcards

Category/Type **004**

Check One: Support Oppose

Name of Federal Candidate supported or Opposed by expenditure:
Mike Pompeo

Disbursement For: Primary General

Calendar Year-To-Date Per Election for Office Sought
1433.38

Other (specify) : _____
2010
[MEMO ITEM]
Postcards

(a) SUBTOTAL of Itemized Independent Expenditures	0.00
(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.

Mary Rose Adkins
Signature

Date

M	M	/	D	D	/	Y	Y	Y	Y
0	3		0	3		2	0	1	1

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund	FEC IDENTIFICATION NUMBER C C00053553
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
Prolist Inc.

Mailing Address
8341 Beechcraft Avenue

City State Zip Code
Gaithersburg MD 20879-1509

Purpose of Expenditure Category/Type
Postage 004

Name of Federal Candidate supported or Opposed by expenditure:
Mr. Jeffrey Perry

Calendar Year-To-Date Per Election for Office Sought 25847.38

Date
M M / D D / Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Amount
22083.86
Transaction ID: 37266988

Office Sought: House State: MA
 Senate District: 10
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010 [MEMO ITEM]

Postage

Full Name (Last, First, Middle, Initial) of Payee
Prolist Inc.

Mailing Address
8341 Beechcraft Avenue

City State Zip Code
Gaithersburg MD 20879-1509

Purpose of Expenditure Category/Type
Postcards 004

Name of Federal Candidate supported or Opposed by expenditure:
Mr. Jeffrey Perry

Calendar Year-To-Date Per Election for Office Sought 27052.76

Date
M M / D D / Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Amount
1205.38
Transaction ID: 37267018

Office Sought: House State: MA
 Senate District: 10
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010 [MEMO ITEM]

Postcards

(a) SUBTOTAL of Itemized Independent Expenditures	0.00
(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.

Mary Rose Adkins
Signature

Date M M / D D / Y Y Y Y
0 3 / 0 3 / 2 0 1 1

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund	FEC IDENTIFICATION NUMBER C C00053553
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
Prolist Inc.

Mailing Address
8341 Beechcraft Avenue

City Gaithersburg	State MD	Zip Code 20879-1509
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Purpose of Expenditure Postage	Category/ Type 004
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Name of Federal Candidate supported or Opposed by expenditure:
Mr. Timothy Walberg

Calendar Year-To-Date Per Election for Office Sought	25392.62
---	----------

Date
M M / D D / Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Amount
21683.85

Transaction ID: 37267086

Office Sought: House State: MI
 Senate District: 07
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

[MEMO ITEM]

Postage

Full Name (Last, First, Middle, Initial) of Payee
Prolist Inc.

Mailing Address
8341 Beechcraft Avenue

City Gaithersburg	State MD	Zip Code 20879-1509
----------------------	-------------	------------------------

Purpose of Expenditure Postcards	Category/ Type 004
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Name of Federal Candidate supported or Opposed by expenditure:
Mr. Timothy Walberg

Calendar Year-To-Date Per Election for Office Sought	26576.85
---	----------

Date
M M / D D / Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Amount
1184.23

Transaction ID: 37267153

Office Sought: House State: MI
 Senate District: 07
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

[MEMO ITEM]

Postcards

(a) SUBTOTAL of Itemized Independent Expenditures	0.00
(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.

Mary Rose Adkins
Signature

Date M M / D D / Y Y Y Y
0 3 / 0 3 / 2 0 1 1

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund	FEC IDENTIFICATION NUMBER ▼ C C00053553
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
 Prolist Inc.

Mailing Address
 8341 Beechcraft Avenue

City Gaithersburg	State MD	Zip Code 20879-1509
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Purpose of Expenditure Postage	Category/ Type 004
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Name of Federal Candidate supported or Opposed by expenditure:
 Mr. Roy Blunt

Calendar Year-To-Date Per Election for Office Sought	2448384.12
---	--

Date

M M / D D / Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Amount
4488.18

Transaction ID: 37267240

Office Sought: House State: MO
 Senate District: _____
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
 2010 **[MEMO ITEM]**

Postage

Full Name (Last, First, Middle, Initial) of Payee
 Prolist Inc.

Mailing Address
 8341 Beechcraft Avenue

City Gaithersburg	State MD	Zip Code 20879-1509
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Purpose of Expenditure Postcards	Category/ Type 004
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Name of Federal Candidate supported or Opposed by expenditure:
 Mr. Roy Blunt

Calendar Year-To-Date Per Election for Office Sought	2448628.81
---	--

Date

M M / D D / Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Amount
244.69

Transaction ID: 37267313

Office Sought: House State: MO
 Senate District: _____
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
 2010 **[MEMO ITEM]**

Postcards

(a) SUBTOTAL of Itemized Independent Expenditures	0.00
(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.

Mary Rose Adkins

 Signature

Date

M M	D D	Y Y Y Y
0 3	0 3	2 0 1 1

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund		FEC IDENTIFICATION NUMBER C C00053553
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice		

Full Name (Last, First, Middle, Initial) of Payee
Prolist Inc.

Mailing Address
8341 Beechcraft Avenue

City State Zip Code
Gaithersburg MD 20879-1509

Purpose of Expenditure Category/Type
Postage 004

Name of Federal Candidate supported or Opposed by expenditure:
Mr. Edward Martin

Calendar Year-To-Date Per Election for Office Sought 74692.23

Date
M M / D D / Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Amount
4488.18

Transaction ID: 37267349

Office Sought: House State: MO
 Senate District: 03
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010 [MEMO ITEM]

Full Name (Last, First, Middle, Initial) of Payee
Prolist Inc.

Mailing Address
8341 Beechcraft Avenue

City State Zip Code
Gaithersburg MD 20879-1509

Purpose of Expenditure Category/Type
Postcards 004

Name of Federal Candidate supported or Opposed by expenditure:
Mr. Edward Martin

Calendar Year-To-Date Per Election for Office Sought 74936.92

Date
M M / D D / Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Amount
244.69

Transaction ID: 37267385

Office Sought: House State: MO
 Senate District: 03
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010 [MEMO ITEM]

(a) SUBTOTAL of Itemized Independent Expenditures	0.00
(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.

Mary Rose Adkins
Signature

Date M M / D D / Y Y Y Y
0 3 / 0 3 / 2 0 1 1

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund	FEC IDENTIFICATION NUMBER C C00053553
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
Prolist Inc.

Mailing Address
8341 Beechcraft Avenue

City State Zip Code
Gaithersburg MD 20879-1509

Purpose of Expenditure Category/Type
Postage 004

Name of Federal Candidate supported or Opposed by expenditure:
Rep. Lee Terry

Calendar Year-To-Date Per Election for Office Sought 5296.80

Date
M M / D D / Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Amount
4078.18
Transaction ID: 37267435

Office Sought: House State: NE
 Senate District: 02
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010 [MEMO ITEM]

Postage

Full Name (Last, First, Middle, Initial) of Payee
Prolist Inc.

Mailing Address
8341 Beechcraft Avenue

City State Zip Code
Gaithersburg MD 20879-1509

Purpose of Expenditure Category/Type
Postcards 004

Name of Federal Candidate supported or Opposed by expenditure:
Rep. Lee Terry

Calendar Year-To-Date Per Election for Office Sought 5519.19

Date
M M / D D / Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Amount
222.39
Transaction ID: 37267478

Office Sought: House State: NE
 Senate District: 02
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010 [MEMO ITEM]

Postcards

(a) SUBTOTAL of Itemized Independent Expenditures	0.00
(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.

Mary Rose Adkins
Signature

Date M M / D D / Y Y Y Y
0 3 / 0 3 / 2 0 1 1

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund	FEC IDENTIFICATION NUMBER ▼ C C00053553
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
 Prolist Inc.

Mailing Address
 8341 Beechcraft Avenue

City State Zip Code
 Gaithersburg MD 20879-1509

Purpose of Expenditure Category/Type
 Postage 004

Name of Federal Candidate supported or Opposed by expenditure:
 Mr. Frank Guinta

Calendar Year-To-Date Per Election for Office Sought
 10898.84

Date
 M M / D D / Y Y Y Y
 1 0 / 1 9 / 2 0 1 0

Amount
 3198.45
Transaction ID: 37267519

Office Sought: House State: NH
 Senate District: 01
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
 2010 **[MEMO ITEM]**

Postage

Full Name (Last, First, Middle, Initial) of Payee
 Prolist Inc.

Mailing Address
 8341 Beechcraft Avenue

City State Zip Code
 Gaithersburg MD 20879-1509

Purpose of Expenditure Category/Type
 Postcards 004

Name of Federal Candidate supported or Opposed by expenditure:
 Mr. Frank Guinta

Calendar Year-To-Date Per Election for Office Sought
 11067.63

Date
 M M / D D / Y Y Y Y
 1 0 / 1 9 / 2 0 1 0

Amount
 168.79
Transaction ID: 37267570

Office Sought: House State: NH
 Senate District: 01
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
 2010 **[MEMO ITEM]**

Postcards

(a) SUBTOTAL of Itemized Independent Expenditures	<input style="width:100%;" type="text" value="0.00"/>
(b) SUBTOTAL of Unitemized Independent Expenditures	<input style="width:100%;" type="text"/>
(c) TOTAL Independent Expenditures	<input style="width:100%;" type="text"/>

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
 Signature

Date M M / D D / Y Y Y Y
 0 3 / 0 3 / 2 0 1 1

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund	FEC IDENTIFICATION NUMBER C C00053553
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
Prolist Inc.

Date
M M / D D / Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Mailing Address
8341 Beechcraft Avenue

Amount
5278.97

City State Zip Code
Gaithersburg MD 20879-1509

Transaction ID: 37267608

Purpose of Expenditure
Postage

Category/Type
004

Office Sought: House State: NH
 Senate District: 02
 Presidential

Name of Federal Candidate supported or Opposed by expenditure:
Rep. Charles F. Bass

Check One: Support Oppose

Calendar Year-To-Date Per Election for Office Sought
160836.99

Disbursement For: Primary General
 Other (specify) : _____
2010
[MEMO ITEM]

Full Name (Last, First, Middle, Initial) of Payee
Prolist Inc.

Date
M M / D D / Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Mailing Address
8341 Beechcraft Avenue

Amount
281.60

City State Zip Code
Gaithersburg MD 20879-1509

Transaction ID: 37267652

Purpose of Expenditure
Postcards

Category/Type
004

Office Sought: House State: NH
 Senate District: 02
 Presidential

Name of Federal Candidate supported or Opposed by expenditure:
Rep. Charles F. Bass

Check One: Support Oppose

Calendar Year-To-Date Per Election for Office Sought
161118.59

Disbursement For: Primary General
 Other (specify) : _____
2010
[MEMO ITEM]

(a) SUBTOTAL of Itemized Independent Expenditures	0.00
(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.

Mary Rose Adkins
Signature

Date M M / D D / Y Y Y Y
0 3 / 0 3 / 2 0 1 1

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund	FEC IDENTIFICATION NUMBER C C00053553
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
Prolist Inc.

Date
M M / D D / Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Mailing Address
8341 Beechcraft Avenue

Amount
372.93

City State Zip Code
Gaithersburg MD 20879-1509

Transaction ID: 37267705

Purpose of Expenditure
Postage

Category/Type 004

Office Sought: House State: NY
 Senate District: 04
 Presidential

Name of Federal Candidate supported or Opposed by expenditure:
Mr. Francis Becker

Check One: Support Oppose

Calendar Year-To-Date Per Election for Office Sought
1065.28

Disbursement For: Primary General
 Other (specify) : _____
2010
[MEMO ITEM]

Full Name (Last, First, Middle, Initial) of Payee
Prolist Inc.

Date
M M / D D / Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Mailing Address
8341 Beechcraft Avenue

Amount
19.11

City State Zip Code
Gaithersburg MD 20879-1509

Transaction ID: 37267740

Purpose of Expenditure
Postcards

Category/Type 004

Office Sought: House State: NY
 Senate District: 04
 Presidential

Name of Federal Candidate supported or Opposed by expenditure:
Mr. Francis Becker

Check One: Support Oppose

Calendar Year-To-Date Per Election for Office Sought
1084.39

Disbursement For: Primary General
 Other (specify) : _____
2010
[MEMO ITEM]

(a) SUBTOTAL of Itemized Independent Expenditures	0.00
(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.

Mary Rose Adkins
Signature

Date M M / D D / Y Y Y Y
0 3 / 0 3 / 2 0 1 1

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund	FEC IDENTIFICATION NUMBER ▼ C C00053553
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
Prolist Inc.

Date
M M / D D / Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Mailing Address
8341 Beechcraft Avenue

Amount
14717.63

City State Zip Code
Gaithersburg MD 20879-1509

Transaction ID: 37267785
Office Sought: House State: NY
 Senate District: 19
 Presidential

Purpose of Expenditure Category/Type
Postage 004

Name of Federal Candidate supported or Opposed by expenditure:
Ms. Nan Hayworth

Check One: Support Oppose

Calendar Year-To-Date Per Election for Office Sought
22586.54

Disbursement For: Primary General
 Other (specify) : _____
2010
[MEMO ITEM]

Full Name (Last, First, Middle, Initial) of Payee
Prolist Inc.

Date
M M / D D / Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Mailing Address
8341 Beechcraft Avenue

Amount
802.16

City State Zip Code
Gaithersburg MD 20879-1509

Transaction ID: 37267831
Office Sought: House State: NY
 Senate District: 19
 Presidential

Purpose of Expenditure Category/Type
Postcards 004

Name of Federal Candidate supported or Opposed by expenditure:
Ms. Nan Hayworth

Check One: Support Oppose

Calendar Year-To-Date Per Election for Office Sought
23388.70

Disbursement For: Primary General
 Other (specify) : _____
2010
[MEMO ITEM]

(a) SUBTOTAL of Itemized Independent Expenditures	0.00
(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.

Mary Rose Adkins
Signature

Date M M / D D / Y Y Y Y
0 3 / 0 3 / 2 0 1 1

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund	FEC IDENTIFICATION NUMBER C C00053553
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
Prolist Inc.

Mailing Address
8341 Beechcraft Avenue

City Gaithersburg	State MD	Zip Code 20879-1509
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Purpose of Expenditure Postage	Category/ Type 004
-----------------------------------	--------------------------

Name of Federal Candidate supported or Opposed by expenditure:
Rep. Steve Chabot

Calendar Year-To-Date Per Election for Office Sought	6853.90
---	---------

Date
M M / D D / Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Amount
250.20

Transaction ID: 37267882

Office Sought: House State: OH
 Senate District: 01
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

[MEMO ITEM]

Postage

Full Name (Last, First, Middle, Initial) of Payee
Prolist Inc.

Mailing Address
8341 Beechcraft Avenue

City Gaithersburg	State MD	Zip Code 20879-1509
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Purpose of Expenditure Postcards	Category/ Type 004
-------------------------------------	--------------------------

Name of Federal Candidate supported or Opposed by expenditure:
Rep. Steve Chabot

Calendar Year-To-Date Per Election for Office Sought	6867.09
---	---------

Date
M M / D D / Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Amount
13.19

Transaction ID: 37267914

Office Sought: House State: OH
 Senate District: 01
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

[MEMO ITEM]

Postcards

(a) SUBTOTAL of Itemized Independent Expenditures	0.00
(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.

Mary Rose Adkins
Signature

Date M M / D D / Y Y Y Y
0 3 / 0 3 / 2 0 1 1

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund	FEC IDENTIFICATION NUMBER C C00053553
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
Prolist Inc.

Date
M M / D D / Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Mailing Address
8341 Beechcraft Avenue

Amount
664.88

City State Zip Code
Gaithersburg MD 20879-1509

Transaction ID: 37267987

Purpose of Expenditure
Postage

Category/Type 004

Office Sought: House State: OH
 Senate District: _____
 Presidential

Name of Federal Candidate supported or Opposed by expenditure:
Mr. Rob Portman

Check One: Support Oppose

Calendar Year-To-Date Per Election for Office Sought
1186340.06

Disbursement For: Primary General
 Other (specify) : _____
2010
[MEMO ITEM]

Full Name (Last, First, Middle, Initial) of Payee
Prolist Inc.

Date
M M / D D / Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Mailing Address
8341 Beechcraft Avenue

Amount
35.17

City State Zip Code
Gaithersburg MD 20879-1509

Transaction ID: 37268025

Purpose of Expenditure
Postcards

Category/Type 004

Office Sought: House State: OH
 Senate District: _____
 Presidential

Name of Federal Candidate supported or Opposed by expenditure:
Mr. Rob Portman

Check One: Support Oppose

Calendar Year-To-Date Per Election for Office Sought
1186375.23

Disbursement For: Primary General
 Other (specify) : _____
2010
[MEMO ITEM]

(a) SUBTOTAL of Itemized Independent Expenditures	0.00
(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.

Mary Rose Adkins
Signature

Date M M / D D / Y Y Y Y
0 3 / 0 3 / 2 0 1 1

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund	FEC IDENTIFICATION NUMBER C C00053553
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
Prolist Inc.

Date
M M / D D / Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Mailing Address
8341 Beechcraft Avenue

Amount
414.70

City State Zip Code
Gaithersburg MD 20879-1509

Transaction ID: 37268079

Purpose of Expenditure
Postage

Category/Type
004

Office Sought: House State: OH
 Senate District: 15
 Presidential

Name of Federal Candidate supported or Opposed by expenditure:
Mr. Steve Stivers

Check One: Support Oppose

Calendar Year-To-Date Per Election for Office Sought
5524.97

Disbursement For: Primary General
 Other (specify) : _____
2010
[MEMO ITEM]

Full Name (Last, First, Middle, Initial) of Payee
Prolist Inc.

Date
M M / D D / Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Mailing Address
8341 Beechcraft Avenue

Amount
21.98

City State Zip Code
Gaithersburg MD 20879-1509

Transaction ID: 37268161

Purpose of Expenditure
Postcards

Category/Type
004

Office Sought: House State: OH
 Senate District: 15
 Presidential

Name of Federal Candidate supported or Opposed by expenditure:
Mr. Steve Stivers

Check One: Support Oppose

Calendar Year-To-Date Per Election for Office Sought
5546.95

Disbursement For: Primary General
 Other (specify) : _____
2010
[MEMO ITEM]

(a) SUBTOTAL of Itemized Independent Expenditures	0.00
(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.

Mary Rose Adkins
Signature

Date M M / D D / Y Y Y Y
0 3 / 0 3 / 2 0 1 1

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund	FEC IDENTIFICATION NUMBER C C00053553
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
Prolist Inc.

Date
M M / D D / Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Mailing Address
8341 Beechcraft Avenue

Amount
3849.03
Transaction ID: 37268259

City State Zip Code
Gaithersburg MD 20879-1509

Office Sought: House State: PA
 Senate District: _____
 Presidential

Purpose of Expenditure
Postage Category/Type 004

Check One: Support Oppose

Name of Federal Candidate supported or Opposed by expenditure:
Mr. Patrick Toomey

Disbursement For: Primary General
 Other (specify) : _____
2010 [MEMO ITEM]

Calendar Year-To-Date Per Election for Office Sought
1953551.43

Postage

Full Name (Last, First, Middle, Initial) of Payee
Prolist Inc.

Date
M M / D D / Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Mailing Address
8341 Beechcraft Avenue

Amount
208.25
Transaction ID: 37268293

City State Zip Code
Gaithersburg MD 20879-1509

Office Sought: House State: PA
 Senate District: _____
 Presidential

Purpose of Expenditure
Postcards Category/Type 004

Check One: Support Oppose

Name of Federal Candidate supported or Opposed by expenditure:
Mr. Patrick Toomey

Disbursement For: Primary General
 Other (specify) : _____
2010 [MEMO ITEM]

Calendar Year-To-Date Per Election for Office Sought
1953759.68

Postcards

(a) SUBTOTAL of Itemized Independent Expenditures	0.00
(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.

Mary Rose Adkins
Signature

Date M M / D D / Y Y Y Y
0 3 / 0 3 / 2 0 1 1

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund	FEC IDENTIFICATION NUMBER C C00053553
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
Prolist Inc.

Date

M	M	/	D	D	/	Y	Y	Y	Y
1	0		1	9		2	0	1	0

Mailing Address
8341 Beechcraft Avenue

Amount
1637.48

Transaction ID: 37268324

City State Zip Code
Gaithersburg MD 20879-1509

Office Sought: House State: PA
 Senate District: 07
 Presidential

Purpose of Expenditure
Postage

Category/Type
004

Check One: Support Oppose

Name of Federal Candidate supported or Opposed by expenditure:
Mr. Patrick Meehan

Disbursement For: Primary General
 Other (specify) : _____

Calendar Year-To-Date Per Election for Office Sought
8461.25

2010
[MEMO ITEM]
Postage

Full Name (Last, First, Middle, Initial) of Payee
Prolist Inc.

Date

M	M	/	D	D	/	Y	Y	Y	Y
1	0		1	9		2	0	1	0

Mailing Address
8341 Beechcraft Avenue

Amount
88.45

Transaction ID: 37268364

City State Zip Code
Gaithersburg MD 20879-1509

Office Sought: House State: PA
 Senate District: 07
 Presidential

Purpose of Expenditure
Postcards

Category/Type
004

Check One: Support Oppose

Name of Federal Candidate supported or Opposed by expenditure:
Mr. Patrick Meehan

Disbursement For: Primary General
 Other (specify) : _____

Calendar Year-To-Date Per Election for Office Sought
8549.70

2010
[MEMO ITEM]
Postcards

(a) SUBTOTAL of Itemized Independent Expenditures	0.00
(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.

Mary Rose Adkins
Signature

Date

M	M	/	D	D	/	Y	Y	Y	Y
0	3		0	3		2	0	1	1

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund	FEC IDENTIFICATION NUMBER C C00053553
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
Prolist Inc.

Mailing Address
8341 Beechcraft Avenue

City Gaithersburg	State MD	Zip Code 20879-1509
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Purpose of Expenditure Postage	Category/ Type 004
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Date
M M / D D / Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Amount
2211.54

Transaction ID: 37268392

Office Sought: House State: PA
 Senate District: 15
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010
[MEMO ITEM]

Postage

Name of Federal Candidate supported or Opposed by expenditure:
Mr. Charles Dent

Calendar Year-To-Date Per Election
for Office Sought 19496.08

Full Name (Last, First, Middle, Initial) of Payee
Prolist Inc.

Mailing Address
8341 Beechcraft Avenue

City Gaithersburg	State MD	Zip Code 20879-1509
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Purpose of Expenditure Postcards	Category/ Type 004
-------------------------------------	--------------------------

Date
M M / D D / Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Amount
119.80

Transaction ID: 37268419

Office Sought: House State: PA
 Senate District: 15
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010
[MEMO ITEM]

Postcards

Name of Federal Candidate supported or Opposed by expenditure:
Mr. Charles Dent

Calendar Year-To-Date Per Election
for Office Sought 19615.88

(a) SUBTOTAL of Itemized Independent Expenditures	0.00
(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.

Mary Rose Adkins
Signature

Date M M / D D / Y Y Y Y
0 3 / 0 3 / 2 0 1 1

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund	FEC IDENTIFICATION NUMBER ▼ C C00053553
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee Prolist Inc.		
Mailing Address 8341 Beechcraft Avenue		
City Gaithersburg	State MD	Zip Code 20879-1509
Purpose of Expenditure Postage	Category/ Type 004	
Name of Federal Candidate supported or Opposed by expenditure: Mr. John Mulvaney		

Date M M / D D / Y Y Y Y 1 0 / 1 9 / 2 0 1 0
Amount 4477.27
Transaction ID: 37268447
Office Sought: <input checked="" type="checkbox"/> House State: <u>SC</u> <input type="checkbox"/> Senate District: <u>05</u> <input type="checkbox"/> Presidential
Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____
2010 [MEMO ITEM]
Postage

Calendar Year-To-Date Per Election for Office Sought 143713.12		
Full Name (Last, First, Middle, Initial) of Payee Prolist Inc.		
Mailing Address 8341 Beechcraft Avenue		
City Gaithersburg	State MD	Zip Code 20879-1509
Purpose of Expenditure Postcards	Category/ Type 004	
Name of Federal Candidate supported or Opposed by expenditure: Mr. John Mulvaney		

Date M M / D D / Y Y Y Y 1 0 / 1 9 / 2 0 1 0
Amount 240.99
Transaction ID: 37268471
Office Sought: <input checked="" type="checkbox"/> House State: <u>SC</u> <input type="checkbox"/> Senate District: <u>05</u> <input type="checkbox"/> Presidential
Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____
2010 [MEMO ITEM]
Postcards

(a) SUBTOTAL of Itemized Independent Expenditures	0.00
(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.

Mary Rose Adkins _____ Date M M D D Y Y Y Y
 Signature 0 3 0 3 2 0 1 1

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund	FEC IDENTIFICATION NUMBER C C00053553
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
Prolist Inc.

Mailing Address
8341 Beechcraft Avenue

City Gaithersburg	State MD	Zip Code 20879-1509
----------------------	-------------	------------------------

Purpose of Expenditure Postage	Category/ Type 004
-----------------------------------	--------------------------

Name of Federal Candidate supported or Opposed by expenditure:
Mr. Keith Fimian

Date
M M / D D / Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Amount
164.12

Transaction ID: 37268491

Office Sought: House State: VA
 Senate District: 11
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____

2010 [MEMO ITEM]

Postage

Calendar Year-To-Date Per Election
for Office Sought 8688.78

Full Name (Last, First, Middle, Initial) of Payee
Prolist Inc.

Mailing Address
8341 Beechcraft Avenue

City Gaithersburg	State MD	Zip Code 20879-1509
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Purpose of Expenditure Postcards	Category/ Type 004
-------------------------------------	--------------------------

Name of Federal Candidate supported or Opposed by expenditure:
Mr. Keith Fimian

Date
M M / D D / Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Amount
6.84

Transaction ID: 37268519

Office Sought: House State: VA
 Senate District: 11
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____

2010 [MEMO ITEM]

Postcards

Calendar Year-To-Date Per Election
for Office Sought 8695.62

(a) SUBTOTAL of Itemized Independent Expenditures	0.00
(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.

Mary Rose Adkins
Signature

Date M M / D D / Y Y Y Y
0 3 / 0 3 / 2 0 1 1

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund	FEC IDENTIFICATION NUMBER C C00053553
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
Prolist Inc.

Mailing Address
8341 Beechcraft Avenue

City Gaithersburg	State MD	Zip Code 20879-1509
----------------------	-------------	------------------------

Purpose of Expenditure Postage	Category/ Type 004
-----------------------------------	--------------------------

Name of Federal Candidate supported or Opposed by expenditure:
Mr. John Boozman

Date
M M / D D / Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Amount
20780.70

Transaction ID: 37268583

Office Sought: House State: AR
 Senate District: _____
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010
[MEMO ITEM]

Postage

Calendar Year-To-Date Per Election
for Office Sought 23493.77

Full Name (Last, First, Middle, Initial) of Payee
Prolist Inc.

Mailing Address
8341 Beechcraft Avenue

City Gaithersburg	State MD	Zip Code 20879-1509
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Purpose of Expenditure Postcards	Category/ Type 004
-------------------------------------	--------------------------

Name of Federal Candidate supported or Opposed by expenditure:
Mr. John Boozman

Calendar Year-To-Date Per Election
for Office Sought 24621.32

Date
M M / D D / Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Amount
1127.55

Transaction ID: 37268623

Office Sought: House State: AR
 Senate District: _____
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010
[MEMO ITEM]

Postcards

(a) SUBTOTAL of Itemized Independent Expenditures	0.00
(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.

Mary Rose Adkins _____ Date M M / D D / Y Y Y Y
Signature 0 3 / 0 3 / 2 0 1 1

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund	FEC IDENTIFICATION NUMBER C C00053553
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
Prolist Inc.

Mailing Address
8341 Beechcraft Avenue

City State Zip Code
Gaithersburg MD 20879-1509

Purpose of Expenditure Category/Type
Postage 004

Name of Federal Candidate supported or Opposed by expenditure:
Mr. Daniel Webster

Calendar Year-To-Date Per Election for Office Sought 2917.32

Date
MM / DD / YYYY
10 / 20 / 2010

Amount
1785.38
Transaction ID: 37331663

Office Sought: House State: FL
 Senate District: 08
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

Postage **[MEMO ITEM]**

Full Name (Last, First, Middle, Initial) of Payee
Prolist Inc.

Mailing Address
8341 Beechcraft Avenue

City State Zip Code
Gaithersburg MD 20879-1509

Purpose of Expenditure Category/Type
Postcards 004

Name of Federal Candidate supported or Opposed by expenditure:
Mr. Daniel Webster

Calendar Year-To-Date Per Election for Office Sought 3011.77

Date
MM / DD / YYYY
10 / 20 / 2010

Amount
94.45
Transaction ID: 37331664

Office Sought: House State: FL
 Senate District: 08
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

Postcards **[MEMO ITEM]**

(a) SUBTOTAL of Itemized Independent Expenditures	0.00
(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.

Mary Rose Adkins
Signature

Date MM / DD / YYYY
03 / 03 / 2011

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund		FEC IDENTIFICATION NUMBER C C00053553
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice		

Full Name (Last, First, Middle, Initial) of Payee
Prolist Inc.

Mailing Address
8341 Beechcraft Avenue

City Gaithersburg	State MD	Zip Code 20879-1509
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Purpose of Expenditure Postage	Category/ Type 004
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Name of Federal Candidate supported or Opposed by expenditure:
Mr. Dennis Ross

Date
M M / D D / Y Y Y Y
1 0 / 2 0 / 2 0 1 0

Amount
1914.82

Transaction ID: 37331665

Office Sought: House State: FL
 Senate District: 12
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

[MEMO ITEM]

Postage

Calendar Year-To-Date Per Election
for Office Sought 3083.86

Full Name (Last, First, Middle, Initial) of Payee
Prolist Inc.

Mailing Address
8341 Beechcraft Avenue

City Gaithersburg	State MD	Zip Code 20879-1509
----------------------	-------------	------------------------

Purpose of Expenditure Postcards	Category/ Type 004
-------------------------------------	--------------------------

Name of Federal Candidate supported or Opposed by expenditure:
Mr. Dennis Ross

Calendar Year-To-Date Per Election
for Office Sought 3185.48

Date
M M / D D / Y Y Y Y
1 0 / 2 0 / 2 0 1 0

Amount
101.62

Transaction ID: 37331666

Office Sought: House State: FL
 Senate District: 12
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

[MEMO ITEM]

Postcards

(a) SUBTOTAL of Itemized Independent Expenditures	0.00
(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.

Mary Rose Adkins
Signature

Date M M / D D / Y Y Y Y
0 3 / 0 3 / 2 0 1 1

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund	FEC IDENTIFICATION NUMBER ▼ C C00053553
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
 Prolist Inc.

Date

M 1	M 0	/	D 2	D 0	/	Y 2	Y 0	Y 1	Y 0
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Mailing Address
 8341 Beechcraft Avenue

Amount

902.03

City Gaithersburg	State MD	Zip Code 20879-1509
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Transaction ID: 37331667

Purpose of Expenditure Postage	Category/ Type 004
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Office Sought: House State: FL
 Senate District: 22
 Presidential

Name of Federal Candidate supported or Opposed by expenditure:
 Mr. Allen West

Check One: Support Oppose

Calendar Year-To-Date Per Election for Office Sought	1787.25
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Disbursement For: Primary General
 Other (specify) : _____
 2010
[MEMO ITEM]

Full Name (Last, First, Middle, Initial) of Payee
 Prolist Inc.

Date

M 1	M 0	/	D 2	D 0	/	Y 2	Y 0	Y 1	Y 0
--------	--------	---	--------	--------	---	--------	--------	--------	--------

Mailing Address
 8341 Beechcraft Avenue

Amount

46.80

City Gaithersburg	State MD	Zip Code 20879-1509
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Transaction ID: 37331668

Purpose of Expenditure Postcards	Category/ Type 004
-------------------------------------	--------------------------

Office Sought: House State: FL
 Senate District: 22
 Presidential

Name of Federal Candidate supported or Opposed by expenditure:
 Mr. Allen West

Check One: Support Oppose

Calendar Year-To-Date Per Election for Office Sought	1834.05
---	---------

Disbursement For: Primary General
 Other (specify) : _____
 2010
[MEMO ITEM]

(a) SUBTOTAL of Itemized Independent Expenditures	0.00
(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.

Mary Rose Adkins

 Signature

Date

M 0	M 3	/	D 0	D 3	/	Y 2	Y 0	Y 1	Y 1
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SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund	FEC IDENTIFICATION NUMBER ▼ C C00053553
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee Prolist Inc.		
Mailing Address 8341 Beechcraft Avenue		
City Gaithersburg	State MD	Zip Code 20879-1509
Purpose of Expenditure Postage	Category/ Type 004	
Name of Federal Candidate supported or Opposed by expenditure: Mr. Jon Runyan		
Calendar Year-To-Date Per Election for Office Sought	3485.25	

Date M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 1 0
Amount 2221.33
Transaction ID: 37331669
Office Sought: <input checked="" type="checkbox"/> House State: NJ <input type="checkbox"/> Senate District: 03 <input type="checkbox"/> Presidential
Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____
2010 [MEMO ITEM]
Postage

Full Name (Last, First, Middle, Initial) of Payee Prolist Inc.		
Mailing Address 8341 Beechcraft Avenue		
City Gaithersburg	State MD	Zip Code 20879-1509
Purpose of Expenditure Postcards	Category/ Type 004	
Name of Federal Candidate supported or Opposed by expenditure: Mr. Jon Runyan		
Calendar Year-To-Date Per Election for Office Sought	3605.20	

Date M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 1 0
Amount 119.95
Transaction ID: 37331670
Office Sought: <input checked="" type="checkbox"/> House State: NJ <input type="checkbox"/> Senate District: 03 <input type="checkbox"/> Presidential
Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____
2010 [MEMO ITEM]
Postcards

(a) SUBTOTAL of Itemized Independent Expenditures	0.00
(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.

Mary Rose Adkins
Signature

Date 0 3 / 0 3 / 2 0 1 1

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund	FEC IDENTIFICATION NUMBER C C00053553
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
Prolist Inc.

Date

M	M	/	D	D	/	Y	Y	Y	Y
1	0		2	0		2	0	1	0

Mailing Address
8341 Beechcraft Avenue

Amount
597.20

Transaction ID: 37331671

City State Zip Code
Gaithersburg MD 20879-1509

Office Sought: House State: OH
 Senate District: 12
 Presidential

Purpose of Expenditure
Postage

Category/Type 004

Check One: Support Oppose

Name of Federal Candidate supported or Opposed by expenditure:
Rep. Patrick J. Tiberi

Disbursement For: Primary General
 Other (specify) : _____
 2010 **[MEMO ITEM]**

Calendar Year-To-Date Per Election for Office Sought 4512.30

Postage

Full Name (Last, First, Middle, Initial) of Payee
Prolist Inc.

Date

M	M	/	D	D	/	Y	Y	Y	Y
1	0		2	0		2	0	1	0

Mailing Address
8341 Beechcraft Avenue

Amount
31.92

Transaction ID: 37331672

City State Zip Code
Gaithersburg MD 20879-1509

Office Sought: House State: OH
 Senate District: 12
 Presidential

Purpose of Expenditure
Postcards

Category/Type 004

Check One: Support Oppose

Name of Federal Candidate supported or Opposed by expenditure:
Rep. Patrick J. Tiberi

Disbursement For: Primary General
 Other (specify) : _____
 2010 **[MEMO ITEM]**

Calendar Year-To-Date Per Election for Office Sought 4544.22

Postcards

(a) SUBTOTAL of Itemized Independent Expenditures	0.00
(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.

Mary Rose Adkins
Signature

Date

M	M	/	D	D	/	Y	Y	Y	Y
0	3		0	3		2	0	1	1

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund	FEC IDENTIFICATION NUMBER ▼ C C00053553
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
Prolist Inc.

Mailing Address
8341 Beechcraft Avenue

City Gaithersburg	State MD	Zip Code 20879-1509
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Purpose of Expenditure Postage	Category/ Type 004
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Name of Federal Candidate supported or Opposed by expenditure:
Mr. Thomas Ganley

Calendar Year-To-Date Per Election for Office Sought	7043.41
---	---

Date

M M	/	D D	/	Y Y Y Y
1 0		2 0		2 0 1 0

Amount
303.76

Transaction ID: 37331673

Office Sought: House State: OH
 Senate District: 13
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
 2010 **[MEMO ITEM]**

Postage

Full Name (Last, First, Middle, Initial) of Payee
Prolist Inc.

Mailing Address
8341 Beechcraft Avenue

City Gaithersburg	State MD	Zip Code 20879-1509
----------------------	-------------	------------------------

Purpose of Expenditure Postcards	Category/ Type 004
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Name of Federal Candidate supported or Opposed by expenditure:
Mr. Thomas Ganley

Calendar Year-To-Date Per Election for Office Sought	7059.51
---	---

Date

M M	/	D D	/	Y Y Y Y
1 0		2 0		2 0 1 0

Amount
16.10

Transaction ID: 37331675

Office Sought: House State: OH
 Senate District: 13
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
 2010 **[MEMO ITEM]**

Postcards

(a) SUBTOTAL of Itemized Independent Expenditures	0.00
(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.

Mary Rose Adkins
Signature

Date

M M	/	D D	/	Y Y Y Y
0 3		0 3		2 0 1 1

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund	FEC IDENTIFICATION NUMBER C C00053553
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
Prolist Inc.

Date

M	M	/	D	D	/	Y	Y	Y	Y
1	0		2	0		2	0	1	0

Mailing Address
8341 Beechcraft Avenue

Amount
900.97

Transaction ID: 37331676

City State Zip Code
Gaithersburg MD 20879-1509

Office Sought: House State: OH
 Senate District: _____
 Presidential

Purpose of Expenditure
Postage

Category/Type 004

Check One: Support Oppose

Name of Federal Candidate supported or Opposed by expenditure:
Mr. Rob Portman

Disbursement For: Primary General

Calendar Year-To-Date Per Election for Office Sought
1187524.82

Other (specify) : _____
2010
[MEMO ITEM]
Postage

Full Name (Last, First, Middle, Initial) of Payee
Prolist Inc.

Date

M	M	/	D	D	/	Y	Y	Y	Y
1	0		2	0		2	0	1	0

Mailing Address
8341 Beechcraft Avenue

Amount
48.02

Transaction ID: 37331678

City State Zip Code
Gaithersburg MD 20879-1509

Office Sought: House State: OH
 Senate District: _____
 Presidential

Purpose of Expenditure
Postcards

Category/Type 004

Check One: Support Oppose

Name of Federal Candidate supported or Opposed by expenditure:
Mr. Rob Portman

Disbursement For: Primary General

Calendar Year-To-Date Per Election for Office Sought
1187572.84

Other (specify) : _____
2010
[MEMO ITEM]
Postcards

(a) SUBTOTAL of Itemized Independent Expenditures	0.00
(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.

Mary Rose Adkins
Signature

Date

M	M	/	D	D	/	Y	Y	Y	Y
0	3		0	3		2	0	1	1

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund	FEC IDENTIFICATION NUMBER C C00053553
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
Prolist Inc.

Mailing Address
8341 Beechcraft Avenue

City Gaithersburg	State MD	Zip Code 20879-1509
----------------------	-------------	------------------------

Purpose of Expenditure Postage	Category/ Type 004
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Name of Federal Candidate supported or Opposed by expenditure:
Mr. Jim Gerlach

Calendar Year-To-Date Per Election for Office Sought	2382.25
---	---------

Date
M M / D D / Y Y Y Y
1 0 / 2 0 / 2 0 1 0

Amount
1641.82

Transaction ID: 37331679

Office Sought: House State: PA
 Senate District: 06
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

[MEMO ITEM]

Postage

Full Name (Last, First, Middle, Initial) of Payee
Prolist Inc.

Mailing Address
8341 Beechcraft Avenue

City Gaithersburg	State MD	Zip Code 20879-1509
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Purpose of Expenditure Postcards	Category/ Type 004
-------------------------------------	--------------------------

Name of Federal Candidate supported or Opposed by expenditure:
Mr. Jim Gerlach

Calendar Year-To-Date Per Election for Office Sought	2470.53
---	---------

Date
M M / D D / Y Y Y Y
1 0 / 2 0 / 2 0 1 0

Amount
88.28

Transaction ID: 37331680

Office Sought: House State: PA
 Senate District: 06
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

[MEMO ITEM]

Postcards

(a) SUBTOTAL of Itemized Independent Expenditures	0.00
(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.

Mary Rose Adkins _____ Date M M / D D / Y Y Y Y
Signature 0 3 / 0 3 / 2 0 1 1

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund		FEC IDENTIFICATION NUMBER C C00053553
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice		

Full Name (Last, First, Middle, Initial) of Payee
Prolist Inc.

Mailing Address
8341 Beechcraft Avenue

City State Zip Code
Gaithersburg MD 20879-1509

Purpose of Expenditure Category/Type
Postage 004

Name of Federal Candidate supported or Opposed by expenditure:
Mr. Michael Fitzpatrick

Calendar Year-To-Date Per Election for Office Sought 3720.03

Date
M M / D D / Y Y Y Y
1 0 / 2 0 / 2 0 1 0

Amount
1537.29

Transaction ID: 37331681

Office Sought: House State: PA
 Senate District: 08
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010
[MEMO ITEM]

Postage

Full Name (Last, First, Middle, Initial) of Payee
Prolist Inc.

Mailing Address
8341 Beechcraft Avenue

City State Zip Code
Gaithersburg MD 20879-1509

Purpose of Expenditure Category/Type
Postcards 004

Name of Federal Candidate supported or Opposed by expenditure:
Mr. Michael Fitzpatrick

Calendar Year-To-Date Per Election for Office Sought 3803.38

Date
M M / D D / Y Y Y Y
1 0 / 2 0 / 2 0 1 0

Amount
83.35

Transaction ID: 37331682

Office Sought: House State: PA
 Senate District: 08
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010
[MEMO ITEM]

Postcards

(a) SUBTOTAL of Itemized Independent Expenditures	0.00
(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.

Mary Rose Adkins
Signature

Date M M / D D / Y Y Y Y
0 3 / 0 3 / 2 0 1 1

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund	FEC IDENTIFICATION NUMBER C C00053553
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
Prolist Inc.

Mailing Address
8341 Beechcraft Avenue

City State Zip Code
Gaithersburg MD 20879-1509

Purpose of Expenditure Category/Type
Postage 004

Name of Federal Candidate supported or Opposed by expenditure:
Mr. Patrick Toomey

Calendar Year-To-Date Per Election for Office Sought
1957827.45

Date
M M / D D / Y Y Y Y
1 0 / 2 0 / 2 0 1 0

Amount
3179.11

Transaction ID: 37331684

Office Sought: House State: PA
 Senate District: _____
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010 **[MEMO ITEM]**

Full Name (Last, First, Middle, Initial) of Payee
Prolist Inc.

Mailing Address
8341 Beechcraft Avenue

City State Zip Code
Gaithersburg MD 20879-1509

Purpose of Expenditure Category/Type
Postcards 004

Name of Federal Candidate supported or Opposed by expenditure:
Mr. Patrick Toomey

Calendar Year-To-Date Per Election for Office Sought
1957999.08

Date
M M / D D / Y Y Y Y
1 0 / 2 0 / 2 0 1 0

Amount
171.63

Transaction ID: 37331686

Office Sought: House State: PA
 Senate District: _____
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010 **[MEMO ITEM]**

(a) SUBTOTAL of Itemized Independent Expenditures	0.00
(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.

Mary Rose Adkins
Signature

Date M M / D D / Y Y Y Y
0 3 / 0 3 / 2 0 1 1

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund	FEC IDENTIFICATION NUMBER C C00053553
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
Prolist Inc.

Mailing Address
8341 Beechcraft Avenue

City State Zip Code
Gaithersburg MD 20879-1509

Purpose of Expenditure Category/Type
Postage 004

Name of Federal Candidate supported or Opposed by expenditure:
Mr. Kenneth Buck

Calendar Year-To-Date Per Election for Office Sought
1050179.86

Date
M M / D D / Y Y Y Y
1 0 / 2 1 / 2 0 1 0

Amount
188836.37

Transaction ID: 37342347

Office Sought: House State: CO
 Senate District: _____
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010 **[MEMO ITEM]**

Postage

Full Name (Last, First, Middle, Initial) of Payee
Prolist Inc.

Mailing Address
8341 Beechcraft Avenue

City State Zip Code
Gaithersburg MD 20879-1509

Purpose of Expenditure Category/Type
Postcards 004

Name of Federal Candidate supported or Opposed by expenditure:
Mr. Kenneth Buck

Calendar Year-To-Date Per Election for Office Sought
1060478.48

Date
M M / D D / Y Y Y Y
1 0 / 2 1 / 2 0 1 0

Amount
10298.62

Transaction ID: 37342348

Office Sought: House State: CO
 Senate District: _____
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010 **[MEMO ITEM]**

Postcards

(a) SUBTOTAL of Itemized Independent Expenditures	0.00
(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.

Mary Rose Adkins
Signature

Date M M / D D / Y Y Y Y
0 3 / 0 3 / 2 0 1 1

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund	FEC IDENTIFICATION NUMBER ▼ C C00053553
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
Prolist Inc.

Mailing Address
8341 Beechcraft Avenue

City Gaithersburg	State MD	Zip Code 20879-1509
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Purpose of Expenditure Postage	Category/ Type
	004

Name of Federal Candidate supported or Opposed by expenditure:
Rep. Michael Avery Ross

Calendar Year-To-Date Per Election for Office Sought	6270.71
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Date

M M 1 0	/	D D 2 1	/	Y Y Y Y 2 0 1 0
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Amount

5067.82

Transaction ID: 37342400

Office Sought: House State: AR
 Senate District: 04
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
 2010

[MEMO ITEM]

Postage

Full Name (Last, First, Middle, Initial) of Payee
Prolist Inc.

Mailing Address
8341 Beechcraft Avenue

City Gaithersburg	State MD	Zip Code 20879-1509
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Purpose of Expenditure Postcards	Category/ Type
	004

Name of Federal Candidate supported or Opposed by expenditure:
Rep. Michael Avery Ross

Calendar Year-To-Date Per Election for Office Sought	6626.94
---	---------

Date

M M 1 0	/	D D 2 1	/	Y Y Y Y 2 0 1 0
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Amount

356.23

Transaction ID: 37342401

Office Sought: House State: AR
 Senate District: 04
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
 2010

[MEMO ITEM]

Postcards

(a) SUBTOTAL of Itemized Independent Expenditures	0.00
(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.

Mary Rose Adkins _____ Date

M M 0 3	/	D D 0 3	/	Y Y Y Y 2 0 1 1
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 Signature

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund	FEC IDENTIFICATION NUMBER ▼ C C00053553
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
Prolist Inc.

Mailing Address
8341 Beechcraft Avenue

City Gaithersburg	State MD	Zip Code 20879-1509
Purpose of Expenditure Postcards		Category/ Type 004

Name of Federal Candidate supported or Opposed by expenditure:
Rep. Dennis A. Cardoza

Calendar Year-To-Date Per Election for Office Sought	4098.23
---	---

Date

M M	/	D D	/	Y Y Y Y
1 0		2 1		2 0 1 0

Amount
3144.16

Transaction ID: 37342402

Office Sought: House State: CA
 Senate District: 18
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____

2010 **[MEMO ITEM]**

Postcards

Full Name (Last, First, Middle, Initial) of Payee
Prolist Inc.

Mailing Address
8341 Beechcraft Avenue

City Gaithersburg	State MD	Zip Code 20879-1509
Purpose of Expenditure Postcards		Category/ Type 004

Name of Federal Candidate supported or Opposed by expenditure:
Rep. Dennis A. Cardoza

Calendar Year-To-Date Per Election for Office Sought	4322.49
---	---

Date

M M	/	D D	/	Y Y Y Y
1 0		2 1		2 0 1 0

Amount
224.26

Transaction ID: 37342403

Office Sought: House State: CA
 Senate District: 18
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____

2010 **[MEMO ITEM]**

Postcards

(a) SUBTOTAL of Itemized Independent Expenditures	0.00
(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.

Mary Rose Adkins _____ Date M M D D Y Y Y Y
 Signature 0 3 0 3 2 0 1 1

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund		FEC IDENTIFICATION NUMBER C C00053553
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice		

Full Name (Last, First, Middle, Initial) of Payee
Prolist Inc.

Mailing Address
8341 Beechcraft Avenue

City Gaithersburg	State MD	Zip Code 20879-1509
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Purpose of Expenditure Postage	Category/ Type	004
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Name of Federal Candidate supported or Opposed by expenditure:
Ms. Deborah Halvorson

Date
M M / D D / Y Y Y Y
1 0 / 2 1 / 2 0 1 0

Amount
3067.85

Transaction ID: 37342404

Office Sought: House State: IL
 Senate District: 11
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

[MEMO ITEM]

Postage

Calendar Year-To-Date Per Election
for Office Sought

4002.51

Full Name (Last, First, Middle, Initial) of Payee
Prolist Inc.

Mailing Address
8341 Beechcraft Avenue

City Gaithersburg	State MD	Zip Code 20879-1509
----------------------	-------------	------------------------

Purpose of Expenditure Postcards	Category/ Type	004
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Name of Federal Candidate supported or Opposed by expenditure:
Ms. Deborah Halvorson

Date
M M / D D / Y Y Y Y
1 0 / 2 1 / 2 0 1 0

Amount
213.97

Transaction ID: 37342405

Office Sought: House State: IL
 Senate District: 11
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

[MEMO ITEM]

Postcards

(a) SUBTOTAL of Itemized Independent Expenditures	0.00
(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.

Mary Rose Adkins
Signature

Date M M / D D / Y Y Y Y
0 3 / 0 3 / 2 0 1 1

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund	FEC IDENTIFICATION NUMBER C C00053553
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
Prolist Inc.

Date
M M / D D / Y Y Y Y
1 0 / 2 1 / 2 0 1 0

Mailing Address
8341 Beechcraft Avenue

Amount
2568.31

City State Zip Code
Gaithersburg MD 20879-1509

Transaction ID: 37342406

Purpose of Expenditure
Postage

Category/Type 004

Office Sought: House State: MI
 Senate District: 15
 Presidential

Name of Federal Candidate supported or Opposed by expenditure:
Rep. John D. Dingell

Check One: Support Oppose

Calendar Year-To-Date Per Election for Office Sought
3443.79

Disbursement For: Primary General
 Other (specify) : _____
2010
[MEMO ITEM]

Full Name (Last, First, Middle, Initial) of Payee
Prolist Inc.

Date
M M / D D / Y Y Y Y
1 0 / 2 1 / 2 0 1 0

Mailing Address
8341 Beechcraft Avenue

Amount
182.58

City State Zip Code
Gaithersburg MD 20879-1509

Transaction ID: 37342407

Purpose of Expenditure
Postcards

Category/Type 004

Office Sought: House State: MI
 Senate District: 15
 Presidential

Name of Federal Candidate supported or Opposed by expenditure:
Rep. John D. Dingell

Check One: Support Oppose

Calendar Year-To-Date Per Election for Office Sought
3626.37

Disbursement For: Primary General
 Other (specify) : _____
2010
[MEMO ITEM]

(a) SUBTOTAL of Itemized Independent Expenditures	0.00
(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.

Mary Rose Adkins
Signature

Date M M / D D / Y Y Y Y
0 3 / 0 3 / 2 0 1 1

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund	FEC IDENTIFICATION NUMBER C C00053553
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
Prolist Inc.

Mailing Address
8341 Beechcraft Avenue

City Gaithersburg	State MD	Zip Code 20879-1509
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Purpose of Expenditure Postage	Category/ Type 004
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Date
M M / D D / Y Y Y Y
1 0 / 2 1 / 2 0 1 0

Amount
3316.06

Transaction ID: 37342408

Office Sought: House State: MS
 Senate District: 01
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____

2010 [MEMO ITEM]

Postage

Name of Federal Candidate supported or Opposed by expenditure:
Mr. Travis Childers

Calendar Year-To-Date Per Election
for Office Sought 4285.72

Full Name (Last, First, Middle, Initial) of Payee
Prolist Inc.

Mailing Address
8341 Beechcraft Avenue

City Gaithersburg	State MD	Zip Code 20879-1509
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Purpose of Expenditure Postcards	Category/ Type 004
-------------------------------------	--------------------------

Date
M M / D D / Y Y Y Y
1 0 / 2 1 / 2 0 1 0

Amount
232.53

Transaction ID: 37342409

Office Sought: House State: MS
 Senate District: 01
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____

2010 [MEMO ITEM]

Postcards

Name of Federal Candidate supported or Opposed by expenditure:
Mr. Travis Childers

Calendar Year-To-Date Per Election
for Office Sought 4518.25

(a) SUBTOTAL of Itemized Independent Expenditures	0.00
(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.

Mary Rose Adkins
Signature

Date M M / D D / Y Y Y Y
0 3 / 0 3 / 2 0 1 1

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund	FEC IDENTIFICATION NUMBER C C00053553
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
Prolist Inc.

Date
M M / D D / Y Y Y Y
1 0 / 2 1 / 2 0 1 0

Mailing Address
8341 Beechcraft Avenue

Amount
2217.04

City State Zip Code
Gaithersburg MD 20879-1509

Transaction ID: 37342410

Purpose of Expenditure
Postage

Category/Type 004

Office Sought: House State: MS
 Senate District: 04
 Presidential

Name of Federal Candidate supported or Opposed by expenditure:
Rep. Gene Taylor

Check One: Support Oppose

Calendar Year-To-Date Per Election for Office Sought
3044.58

Disbursement For: Primary General
 Other (specify) : _____
2010
[MEMO ITEM]

Full Name (Last, First, Middle, Initial) of Payee
Prolist Inc.

Date
M M / D D / Y Y Y Y
1 0 / 2 1 / 2 0 1 0

Mailing Address
8341 Beechcraft Avenue

Amount
157.15

City State Zip Code
Gaithersburg MD 20879-1509

Transaction ID: 37342411

Purpose of Expenditure
Postcards

Category/Type 004

Office Sought: House State: MS
 Senate District: 04
 Presidential

Name of Federal Candidate supported or Opposed by expenditure:
Rep. Gene Taylor

Check One: Support Oppose

Calendar Year-To-Date Per Election for Office Sought
3201.73

Disbursement For: Primary General
 Other (specify) : _____
2010
[MEMO ITEM]

(a) SUBTOTAL of Itemized Independent Expenditures	0.00
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	

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Mary Rose Adkins
Signature

Date M M / D D / Y Y Y Y
0 3 / 0 3 / 2 0 1 1

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund	FEC IDENTIFICATION NUMBER C C00053553
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
Prolist Inc.

Mailing Address
8341 Beechcraft Avenue

City Gaithersburg	State MD	Zip Code 20879-1509
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Purpose of Expenditure Postage	Category/ Type 004
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Name of Federal Candidate supported or Opposed by expenditure:
Rep. Heath Shuler

Calendar Year-To-Date Per Election for Office Sought	44253.32
---	----------

Date
M M / D D / Y Y Y Y
1 0 / 2 1 / 2 0 1 0

Amount
1214.74

Transaction ID: 37342412

Office Sought: House State: NC
 Senate District: 11
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

[MEMO ITEM]

Postage

Full Name (Last, First, Middle, Initial) of Payee
Prolist Inc.

Mailing Address
8341 Beechcraft Avenue

City Gaithersburg	State MD	Zip Code 20879-1509
----------------------	-------------	------------------------

Purpose of Expenditure Postcards	Category/ Type 004
-------------------------------------	--------------------------

Name of Federal Candidate supported or Opposed by expenditure:
Rep. Heath Shuler

Calendar Year-To-Date Per Election for Office Sought	44336.77
---	----------

Date
M M / D D / Y Y Y Y
1 0 / 2 1 / 2 0 1 0

Amount
83.45

Transaction ID: 37342413

Office Sought: House State: NC
 Senate District: 11
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

[MEMO ITEM]

Postcards

(a) SUBTOTAL of Itemized Independent Expenditures	0.00
(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.

Mary Rose Adkins
Signature

Date M M / D D / Y Y Y Y
0 3 / 0 3 / 2 0 1 1

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund	FEC IDENTIFICATION NUMBER C C00053553
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
Prolist Inc.

Mailing Address
8341 Beechcraft Avenue

City Gaithersburg	State MD	Zip Code 20879-1509
----------------------	-------------	------------------------

Purpose of Expenditure Postage	Category/ Type 004
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Name of Federal Candidate supported or Opposed by expenditure:
Rep. Lincoln Davis

Date
M M / D D / Y Y Y Y
1 0 / 2 1 / 2 0 1 0

Amount
4993.26

Transaction ID: 37342414

Office Sought: House State: TN
 Senate District: 04
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

[MEMO ITEM]

Postage

Calendar Year-To-Date Per Election
for Office Sought

6187.86

Full Name (Last, First, Middle, Initial) of Payee
Prolist Inc.

Mailing Address
8341 Beechcraft Avenue

City Gaithersburg	State MD	Zip Code 20879-1509
----------------------	-------------	------------------------

Purpose of Expenditure Postcards	Category/ Type 004
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Name of Federal Candidate supported or Opposed by expenditure:
Rep. Lincoln Davis

Date
M M / D D / Y Y Y Y
1 0 / 2 1 / 2 0 1 0

Amount
351.84

Transaction ID: 37342415

Office Sought: House State: TN
 Senate District: 04
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

[MEMO ITEM]

Postcards

Calendar Year-To-Date Per Election
for Office Sought

6539.70

(a) SUBTOTAL of Itemized Independent Expenditures	0.00
(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.

Mary Rose Adkins
Signature

Date M M / D D / Y Y Y Y
0 3 / 0 3 / 2 0 1 1

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund	FEC IDENTIFICATION NUMBER C C00053553
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
Prolist Inc.

Date
M M / D D / Y Y Y Y
1 0 / 2 1 / 2 0 1 0

Mailing Address
8341 Beechcraft Avenue

Amount
1721.61

City State Zip Code
Gaithersburg MD 20879-1509

Transaction ID: 37342416

Purpose of Expenditure
Postage

Category/Type
004

Office Sought: House State: WV
 Senate District: 03
 Presidential

Name of Federal Candidate supported or Opposed by expenditure:
Rep. Nick Joe Rahall, II

Check One: Support Oppose

Calendar Year-To-Date Per Election for Office Sought
2473.75

Disbursement For: Primary General
 Other (specify) : _____
2010
[MEMO ITEM]

Full Name (Last, First, Middle, Initial) of Payee
Prolist Inc.

Date
M M / D D / Y Y Y Y
1 0 / 2 1 / 2 0 1 0

Mailing Address
8341 Beechcraft Avenue

Amount
117.16

City State Zip Code
Gaithersburg MD 20879-1509

Transaction ID: 37342417

Purpose of Expenditure
Postcards

Category/Type
004

Office Sought: House State: WV
 Senate District: 03
 Presidential

Name of Federal Candidate supported or Opposed by expenditure:
Rep. Nick Joe Rahall, II

Check One: Support Oppose

Calendar Year-To-Date Per Election for Office Sought
2590.91

Disbursement For: Primary General
 Other (specify) : _____
2010
[MEMO ITEM]

(a) SUBTOTAL of Itemized Independent Expenditures	0.00
(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.

Mary Rose Adkins
Signature

Date M M / D D / Y Y Y Y
0 3 / 0 3 / 2 0 1 1

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund	FEC IDENTIFICATION NUMBER C C00053553
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
Prolist Inc.

Date
M M / D D / Y Y Y Y
1 0 / 2 2 / 2 0 1 0

Mailing Address
8341 Beechcraft Avenue

Amount
6094.32

City State Zip Code
Gaithersburg MD 20879-1509

Transaction ID: 37342429

Purpose of Expenditure
Postage

Category/Type
004

Office Sought: House State: FL
 Senate District: 02
 Presidential

Name of Federal Candidate supported or Opposed by expenditure:
Rep. Allen Boyd

Check One: Support Oppose

Calendar Year-To-Date Per Election for Office Sought
7448.03

Disbursement For: Primary General
 Other (specify) : _____
2010
[MEMO ITEM]

Full Name (Last, First, Middle, Initial) of Payee
Prolist Inc.

Date
M M / D D / Y Y Y Y
1 0 / 2 2 / 2 0 1 0

Mailing Address
8341 Beechcraft Avenue

Amount
436.22

City State Zip Code
Gaithersburg MD 20879-1509

Transaction ID: 37342430

Purpose of Expenditure
Postcards

Category/Type
004

Office Sought: House State: FL
 Senate District: 02
 Presidential

Name of Federal Candidate supported or Opposed by expenditure:
Rep. Allen Boyd

Check One: Support Oppose

Calendar Year-To-Date Per Election for Office Sought
7884.25

Disbursement For: Primary General
 Other (specify) : _____
2010
[MEMO ITEM]

(a) SUBTOTAL of Itemized Independent Expenditures	0.00
(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.

Mary Rose Adkins
Signature

Date M M / D D / Y Y Y Y
0 3 / 0 3 / 2 0 1 1

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund	FEC IDENTIFICATION NUMBER ▼ C C00053553
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee Prolist Inc.		
Mailing Address 8341 Beechcraft Avenue		
City Gaithersburg	State MD	Zip Code 20879-1509
Purpose of Expenditure Postage	Category/ Type 004	
Name of Federal Candidate supported or Opposed by expenditure: Rep. Ike Skelton		
Calendar Year-To-Date Per Election for Office Sought		8313.43

Date M M / D D / Y Y Y Y 1 0 / 2 2 / 2 0 1 0
Amount 6870.92
Transaction ID: 37342431
Office Sought: <input checked="" type="checkbox"/> House State: <u>MO</u> <input type="checkbox"/> Senate District: <u>04</u> <input type="checkbox"/> Presidential
Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____
2010 [MEMO ITEM]
Postage

Full Name (Last, First, Middle, Initial) of Payee Prolist Inc.		
Mailing Address 8341 Beechcraft Avenue		
City Gaithersburg	State MD	Zip Code 20879-1509
Purpose of Expenditure Postcards	Category/ Type 004	
Name of Federal Candidate supported or Opposed by expenditure: Rep. Ike Skelton		
Calendar Year-To-Date Per Election for Office Sought		8796.75

Date M M / D D / Y Y Y Y 1 0 / 2 2 / 2 0 1 0
Amount 483.32
Transaction ID: 37342432
Office Sought: <input checked="" type="checkbox"/> House State: <u>MO</u> <input type="checkbox"/> Senate District: <u>04</u> <input type="checkbox"/> Presidential
Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____
2010 [MEMO ITEM]
Postcards

(a) SUBTOTAL of Itemized Independent Expenditures	0.00
(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.

Mary Rose Adkins _____ Date 03 / 03 / 2011
Signature

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund	FEC IDENTIFICATION NUMBER C C00053553
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
Prolist Inc.

Mailing Address
8341 Beechcraft Avenue

City Gaithersburg	State MD	Zip Code 20879-1509
----------------------	-------------	------------------------

Purpose of Expenditure Postage	Category/ Type 004
-----------------------------------	--------------------------

Name of Federal Candidate supported or Opposed by expenditure:
Rep. Zachary T. Space

Calendar Year-To-Date Per Election for Office Sought	4364.90
---	---------

Date
M M / D D / Y Y Y Y
1 0 / 2 2 / 2 0 1 0

Amount
3466.10

Transaction ID: 37342433

Office Sought: House State: OH
 Senate District: 18
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

[MEMO ITEM]

Postage

Full Name (Last, First, Middle, Initial) of Payee
Prolist Inc.

Mailing Address
8341 Beechcraft Avenue

City Gaithersburg	State MD	Zip Code 20879-1509
----------------------	-------------	------------------------

Purpose of Expenditure Postcards	Category/ Type 004
-------------------------------------	--------------------------

Name of Federal Candidate supported or Opposed by expenditure:
Rep. Zachary T. Space

Calendar Year-To-Date Per Election for Office Sought	4609.57
---	---------

Date
M M / D D / Y Y Y Y
1 0 / 2 2 / 2 0 1 0

Amount
244.67

Transaction ID: 37342434

Office Sought: House State: OH
 Senate District: 18
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

[MEMO ITEM]

Postcards

(a) SUBTOTAL of Itemized Independent Expenditures	0.00
(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.

Mary Rose Adkins
Signature

Date M M / D D / Y Y Y Y
0 3 / 0 3 / 2 0 1 1

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund	FEC IDENTIFICATION NUMBER C C00053553
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
Prolist Inc.

Mailing Address
8341 Beechcraft Avenue

City Gaithersburg State MD Zip Code 20879-1509

Purpose of Expenditure Postage Category/Type 004

Name of Federal Candidate supported or Opposed by expenditure:
Rep. Daniel Boren

Calendar Year-To-Date Per Election for Office Sought 7726.66

Date 10 / 22 / 2010

Amount 6349.22

Transaction ID: 37342437

Office Sought: House State: OK
 Senate District: 02
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____

2010 [MEMO ITEM]

Postage

Full Name (Last, First, Middle, Initial) of Payee
Prolist Inc.

Mailing Address
8341 Beechcraft Avenue

City Gaithersburg State MD Zip Code 20879-1509

Purpose of Expenditure Postcards Category/Type 004

Name of Federal Candidate supported or Opposed by expenditure:
Rep. Daniel Boren

Calendar Year-To-Date Per Election for Office Sought 8175.48

Date 10 / 22 / 2010

Amount 448.82

Transaction ID: 37342438

Office Sought: House State: OK
 Senate District: 02
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____

2010 [MEMO ITEM]

Postcards

(a) SUBTOTAL of Itemized Independent Expenditures	0.00
(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.

Mary Rose Adkins
Signature

Date 03 / 03 / 2011

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund	FEC IDENTIFICATION NUMBER ▼ C C00053553
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee Prolist Inc.		
Mailing Address 8341 Beechcraft Avenue		
City Gaithersburg	State MD	Zip Code 20879-1509
Purpose of Expenditure Postage	Category/ Type 004	
Name of Federal Candidate supported or Opposed by expenditure: Rep. Jason Altmire		

Date M M / D D / Y Y Y Y 1 0 / 2 2 / 2 0 1 0
Amount 7181.23
Transaction ID: 37342439
Office Sought: <input checked="" type="checkbox"/> House State: PA <input type="checkbox"/> Senate District: 04 <input type="checkbox"/> Presidential
Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____
2010 [MEMO ITEM]
Postage

Calendar Year-To-Date Per Election for Office Sought 8682.15		
Full Name (Last, First, Middle, Initial) of Payee Prolist Inc.		
Mailing Address 8341 Beechcraft Avenue		
City Gaithersburg	State MD	Zip Code 20879-1509
Purpose of Expenditure Postcards	Category/ Type 004	
Name of Federal Candidate supported or Opposed by expenditure: Rep. Jason Altmire		

Date M M / D D / Y Y Y Y 1 0 / 2 2 / 2 0 1 0
Amount 514.32
Transaction ID: 37342440
Office Sought: <input checked="" type="checkbox"/> House State: PA <input type="checkbox"/> Senate District: 04 <input type="checkbox"/> Presidential
Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____
2010 [MEMO ITEM]
Postcards

(a) SUBTOTAL of Itemized Independent Expenditures	0.00
(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.

Mary Rose Adkins _____ Date M M D D Y Y Y Y
 Signature 0 3 0 3 2 0 1 1

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund	FEC IDENTIFICATION NUMBER C C00053553
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
Prolist Inc.

Date
M M / D D / Y Y Y Y
1 0 / 2 2 / 2 0 1 0

Mailing Address
8341 Beechcraft Avenue

Amount
6686.49

City State Zip Code
Gaithersburg MD 20879-1509

Transaction ID: 37342441

Purpose of Expenditure
Postage

Category/Type
004

Office Sought: House State: PA
 Senate District: 17
 Presidential

Name of Federal Candidate supported or Opposed by expenditure:
Rep. Tim Holden

Check One: Support Oppose

Calendar Year-To-Date Per Election
for Office Sought 8117.52

Disbursement For: Primary General
 Other (specify) : _____
2010
[MEMO ITEM]

Full Name (Last, First, Middle, Initial) of Payee
Prolist Inc.

Date
M M / D D / Y Y Y Y
1 0 / 2 2 / 2 0 1 0

Mailing Address
8341 Beechcraft Avenue

Amount
477.23

City State Zip Code
Gaithersburg MD 20879-1509

Transaction ID: 37342442

Purpose of Expenditure
Postcards

Category/Type
004

Office Sought: House State: PA
 Senate District: 17
 Presidential

Name of Federal Candidate supported or Opposed by expenditure:
Rep. Tim Holden

Check One: Support Oppose

Calendar Year-To-Date Per Election
for Office Sought 8594.75

Disbursement For: Primary General
 Other (specify) : _____
2010
[MEMO ITEM]

(a) SUBTOTAL of Itemized Independent Expenditures	0.00
(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.

Mary Rose Adkins
Signature

Date M M / D D / Y Y Y Y
0 3 / 0 3 / 2 0 1 1

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund	FEC IDENTIFICATION NUMBER C C00053553
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
Prolist Inc.

Mailing Address
8341 Beechcraft Avenue

City Gaithersburg	State MD	Zip Code 20879-1509
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Purpose of Expenditure Postage	Category/ Type 004
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Name of Federal Candidate supported or Opposed by expenditure:
Rep. Stephanie Herseth Sandlin

Calendar Year-To-Date Per Election for Office Sought	8228.38
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Date
M M / D D / Y Y Y Y
1 0 / 2 2 / 2 0 1 0

Amount
6785.87

Transaction ID: 37342443

Office Sought: House State: SD
 Senate District: 01
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010
[MEMO ITEM]

Postage

Full Name (Last, First, Middle, Initial) of Payee
Prolist Inc.

Mailing Address
8341 Beechcraft Avenue

City Gaithersburg	State MD	Zip Code 20879-1509
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Purpose of Expenditure Postcards	Category/ Type 004
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Name of Federal Candidate supported or Opposed by expenditure:
Rep. Stephanie Herseth Sandlin

Calendar Year-To-Date Per Election for Office Sought	8711.70
---	---------

Date
M M / D D / Y Y Y Y
1 0 / 2 2 / 2 0 1 0

Amount
483.32

Transaction ID: 37342444

Office Sought: House State: SD
 Senate District: 01
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010
[MEMO ITEM]

Postcards

(a) SUBTOTAL of Itemized Independent Expenditures	0.00
(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.

Mary Rose Adkins _____ Date M M / D D / Y Y Y Y
Signature 0 3 / 0 3 / 2 0 1 1

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund	FEC IDENTIFICATION NUMBER C C00053553
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
Prolist Inc.

Mailing Address
8341 Beechcraft Avenue

City Gaithersburg	State MD	Zip Code 20879-1509
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Purpose of Expenditure Postage	Category/ Type 004
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Date
M M / D D / Y Y Y Y
1 0 / 2 2 / 2 0 1 0

Amount
6779.15

Transaction ID: 37342445

Office Sought: House State: UT
 Senate District: 02
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____

2010 **[MEMO ITEM]**

Postage

Name of Federal Candidate supported or Opposed by expenditure:
Rep. James D. Matheson

Calendar Year-To-Date Per Election
for Office Sought 8221.66

Full Name (Last, First, Middle, Initial) of Payee
Prolist Inc.

Mailing Address
8341 Beechcraft Avenue

City Gaithersburg	State MD	Zip Code 20879-1509
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Purpose of Expenditure Postcards	Category/ Type 004
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Date
M M / D D / Y Y Y Y
1 0 / 2 2 / 2 0 1 0

Amount
483.32

Transaction ID: 37342446

Office Sought: House State: UT
 Senate District: 02
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____

2010 **[MEMO ITEM]**

Postcards

Name of Federal Candidate supported or Opposed by expenditure:
Rep. James D. Matheson

Calendar Year-To-Date Per Election
for Office Sought 8704.98

(a) SUBTOTAL of Itemized Independent Expenditures	0.00
(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.

Mary Rose Adkins _____ Date M M / D D / Y Y Y Y
Signature 0 3 / 0 3 / 2 0 1 1

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund		FEC IDENTIFICATION NUMBER C C00053553
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice		

Full Name (Last, First, Middle, Initial) of Payee
Prolist Inc.

Mailing Address
8341 Beechcraft Avenue

City State Zip Code
Gaithersburg MD 20879-1509

Purpose of Expenditure Category/Type
Postage 004

Name of Federal Candidate supported or Opposed by expenditure:
Mr. Richard Blumenthal

Calendar Year-To-Date Per Election for Office Sought 53351.01

Date
M M / D D / Y Y Y Y
1 0 / 2 2 / 2 0 1 0

Amount
29402.37
Transaction ID: 37342608

Office Sought: House State: CT
 Senate District: _____
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010 [MEMO ITEM]

Full Name (Last, First, Middle, Initial) of Payee
Prolist Inc.

Mailing Address
8341 Beechcraft Avenue

City State Zip Code
Gaithersburg MD 20879-1509

Purpose of Expenditure Category/Type
Postcards 004

Name of Federal Candidate supported or Opposed by expenditure:
Mr. Richard Blumenthal

Calendar Year-To-Date Per Election for Office Sought 54998.00

Date
M M / D D / Y Y Y Y
1 0 / 2 2 / 2 0 1 0

Amount
1646.99
Transaction ID: 37342609

Office Sought: House State: CT
 Senate District: _____
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010 [MEMO ITEM]

(a) SUBTOTAL of Itemized Independent Expenditures	0.00
(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.

Mary Rose Adkins
Signature

Date M M / D D / Y Y Y Y
0 3 / 0 3 / 2 0 1 1

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund	FEC IDENTIFICATION NUMBER ▼ C C00053553
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
Prolist Inc.

Mailing Address
8341 Beechcraft Avenue

City Gaithersburg	State MD	Zip Code 20879-1509
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Purpose of Expenditure Postage	Category/ Type 004
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Name of Federal Candidate supported or Opposed by expenditure:
Van Tran

Calendar Year-To-Date Per Election for Office Sought	811.39
---	--

Date

M M / D D / Y Y Y Y
1 0 / 2 2 / 2 0 1 0

Amount
494.41

Transaction ID: 37342610

Office Sought: House State: CA
 Senate District: 47
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
 2010 **[MEMO ITEM]**

Postage

Full Name (Last, First, Middle, Initial) of Payee
Prolist Inc.

Mailing Address
8341 Beechcraft Avenue

City Gaithersburg	State MD	Zip Code 20879-1509
----------------------	-------------	------------------------

Purpose of Expenditure Postcards	Category/ Type 004
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Name of Federal Candidate supported or Opposed by expenditure:
Van Tran

Calendar Year-To-Date Per Election for Office Sought	838.34
---	--

Date

M M / D D / Y Y Y Y
1 0 / 2 2 / 2 0 1 0

Amount
26.95

Transaction ID: 37342611

Office Sought: House State: CA
 Senate District: 47
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
 2010 **[MEMO ITEM]**

Postcards

(a) SUBTOTAL of Itemized Independent Expenditures	0.00
(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.

Mary Rose Adkins _____ Date

M M
0 3

D D
0 3

Y Y Y Y
2 0 1 1

Signature

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund	FEC IDENTIFICATION NUMBER C C00053553
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
Prolist Inc.

Mailing Address
8341 Beechcraft Avenue

City Gaithersburg	State MD	Zip Code 20879-1509
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Purpose of Expenditure Postage	Category/ Type 004
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Name of Federal Candidate supported or Opposed by expenditure:
Ms. Ann Buerkle

Calendar Year-To-Date Per Election for Office Sought	21773.02
---	----------

Date
M M / D D / Y Y Y Y
1 0 / 2 2 / 2 0 1 0

Amount
18889.12

Transaction ID: 37342612

Office Sought: House State: NY
 Senate District: 25
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010
[MEMO ITEM]

Postage

Full Name (Last, First, Middle, Initial) of Payee
Prolist Inc.

Mailing Address
8341 Beechcraft Avenue

City Gaithersburg	State MD	Zip Code 20879-1509
----------------------	-------------	------------------------

Purpose of Expenditure Postcards	Category/ Type 004
-------------------------------------	--------------------------

Name of Federal Candidate supported or Opposed by expenditure:
Ms. Ann Buerkle

Calendar Year-To-Date Per Election for Office Sought	22832.68
---	----------

Date
M M / D D / Y Y Y Y
1 0 / 2 2 / 2 0 1 0

Amount
1059.66

Transaction ID: 37342613

Office Sought: House State: NY
 Senate District: 25
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010
[MEMO ITEM]

Postcards

(a) SUBTOTAL of Itemized Independent Expenditures	0.00
(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.

Mary Rose Adkins
Signature

Date M M / D D / Y Y Y Y
0 3 / 0 3 / 2 0 1 1

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund	FEC IDENTIFICATION NUMBER C C00053553
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
Prolist Inc.

Date
M M / D D / Y Y Y Y
1 0 / 2 2 / 2 0 1 0

Mailing Address
8341 Beechcraft Avenue

Amount
500.24

City State Zip Code
Gaithersburg MD 20879-1509

Transaction ID: 37342614

Purpose of Expenditure
Postage

Category/Type
004

Office Sought: House State: NY
 Senate District: 13
 Presidential

Name of Federal Candidate supported or Opposed by expenditure:
Mr. Michael Grimm

Check One: Support Oppose

Calendar Year-To-Date Per Election for Office Sought
911.52

Disbursement For: Primary General
 Other (specify) : _____
2010
[MEMO ITEM]

Full Name (Last, First, Middle, Initial) of Payee
Prolist Inc.

Date
M M / D D / Y Y Y Y
1 0 / 2 2 / 2 0 1 0

Mailing Address
8341 Beechcraft Avenue

Amount
27.21

City State Zip Code
Gaithersburg MD 20879-1509

Transaction ID: 37342615

Purpose of Expenditure
Postcards

Category/Type
004

Office Sought: House State: NY
 Senate District: 13
 Presidential

Name of Federal Candidate supported or Opposed by expenditure:
Mr. Michael Grimm

Check One: Support Oppose

Calendar Year-To-Date Per Election for Office Sought
938.73

Disbursement For: Primary General
 Other (specify) : _____
2010
[MEMO ITEM]

(a) SUBTOTAL of Itemized Independent Expenditures	0.00
(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.

Mary Rose Adkins
Signature

Date M M / D D / Y Y Y Y
0 3 / 0 3 / 2 0 1 1

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund	FEC IDENTIFICATION NUMBER C C00053553
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
Prolist Inc.

Mailing Address
8341 Beechcraft Avenue

City Gaithersburg	State MD	Zip Code 20879-1509
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Purpose of Expenditure Postage	Category/ Type 004
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Name of Federal Candidate supported or Opposed by expenditure:
Mr. Patrick Meehan

Calendar Year-To-Date Per Election for Office Sought	19568.98
---	----------

Date
M M / D D / Y Y Y Y
1 0 / 2 2 / 2 0 1 0

Amount
9448.97

Transaction ID: 37342616

Office Sought: House State: PA
 Senate District: 07
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

[MEMO ITEM]

Postage

Full Name (Last, First, Middle, Initial) of Payee
Prolist Inc.

Mailing Address
8341 Beechcraft Avenue

City Gaithersburg	State MD	Zip Code 20879-1509
----------------------	-------------	------------------------

Purpose of Expenditure Postcards	Category/ Type 004
-------------------------------------	--------------------------

Name of Federal Candidate supported or Opposed by expenditure:
Mr. Patrick Meehan

Calendar Year-To-Date Per Election for Office Sought	19833.92
---	----------

Date
M M / D D / Y Y Y Y
1 0 / 2 2 / 2 0 1 0

Amount
264.94

Transaction ID: 37342617

Office Sought: House State: PA
 Senate District: 07
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

[MEMO ITEM]

Postcards

(a) SUBTOTAL of Itemized Independent Expenditures	0.00
(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.

Mary Rose Adkins
Signature

Date M M / D D / Y Y Y Y
0 3 / 0 3 / 2 0 1 1

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund	FEC IDENTIFICATION NUMBER C C00053553
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
Prolist Inc.

Mailing Address
8341 Beechcraft Avenue

City Gaithersburg	State MD	Zip Code 20879-1509
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Purpose of Expenditure Postage	Category/ Type 004
-----------------------------------	--------------------------

Name of Federal Candidate supported or Opposed by expenditure:
Mr. Patrick Toomey

Date
M M / D D / Y Y Y Y
1 0 / 2 2 / 2 0 1 0

Amount
9448.97

Transaction ID: 37342618

Office Sought: House State: PA
 Senate District: _____
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____

2010 **[MEMO ITEM]**

Postage

Calendar Year-To-Date Per Election
for Office Sought 1969018.36

Full Name (Last, First, Middle, Initial) of Payee
Prolist Inc.

Mailing Address
8341 Beechcraft Avenue

City Gaithersburg	State MD	Zip Code 20879-1509
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Purpose of Expenditure Postcards	Category/ Type 004
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Name of Federal Candidate supported or Opposed by expenditure:
Mr. Patrick Toomey

Date
M M / D D / Y Y Y Y
1 0 / 2 2 / 2 0 1 0

Amount
264.94

Transaction ID: 37342619

Office Sought: House State: PA
 Senate District: _____
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____

2010 **[MEMO ITEM]**

Postcards

(a) SUBTOTAL of Itemized Independent Expenditures	0.00
(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.

Mary Rose Adkins
Signature

Date M M / D D / Y Y Y Y
0 3 / 0 3 / 2 0 1 1

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

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund		FEC IDENTIFICATION NUMBER C C00053553
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice		

Full Name (Last, First, Middle, Initial) of Payee
Prolist Inc.

Mailing Address
8341 Beechcraft Avenue

City Gaithersburg	State MD	Zip Code 20879-1509
----------------------	-------------	------------------------

Purpose of Expenditure Postage	Category/ Type 004
-----------------------------------	--------------------------

Name of Federal Candidate supported or Opposed by expenditure:
Sen. Richard M. Burr

Calendar Year-To-Date Per Election for Office Sought	34472.79
---	----------

Date
M M / D D / Y Y Y Y
1 0 / 2 3 / 2 0 1 0

Amount
3383.72

Transaction ID: 37342636

Office Sought: House State: NC
 Senate District: _____
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

Full Name (Last, First, Middle, Initial) of Payee
Prolist Inc.

Mailing Address
8341 Beechcraft Avenue

City Gaithersburg	State MD	Zip Code 20879-1509
----------------------	-------------	------------------------

Purpose of Expenditure Postage	Category/ Type 004
-----------------------------------	--------------------------

Name of Federal Candidate supported or Opposed by expenditure:
Sen. Richard M. Burr

Calendar Year-To-Date Per Election for Office Sought	35062.11
---	----------

Date
M M / D D / Y Y Y Y
1 0 / 2 3 / 2 0 1 0

Amount
589.32

Transaction ID: 37342637

Office Sought: House State: NC
 Senate District: _____
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

(a) SUBTOTAL of Itemized Independent Expenditures	3973.04
(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
Signature

Date M M / D D / Y Y Y Y
0 3 / 0 3 / 2 0 1 1

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund	FEC IDENTIFICATION NUMBER ▼ C C00053553
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
Prolist Inc.

Mailing Address
8341 Beechcraft Avenue

City Gaithersburg	State MD	Zip Code 20879-1509
Purpose of Expenditure Postage		Category/ Type 004

Name of Federal Candidate supported or Opposed by expenditure:
Sen. Richard M. Burr

Calendar Year-To-Date Per Election for Office Sought	35335.22
--	--

Date

M M	/	D D	/	Y Y Y Y
1 0		2 3		2 0 1 0

Amount
273.11

Transaction ID: 37342638

Office Sought: House State: NC
 Senate District: _____
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
 2010

Full Name (Last, First, Middle, Initial) of Payee
Prolist Inc.

Mailing Address
8341 Beechcraft Avenue

City Gaithersburg	State MD	Zip Code 20879-1509
Purpose of Expenditure Postcards		Category/ Type 004

Name of Federal Candidate supported or Opposed by expenditure:
Sen. Richard M. Burr

Calendar Year-To-Date Per Election for Office Sought	37216.52
--	--

Date

M M	/	D D	/	Y Y Y Y
1 0		2 3		2 0 1 0

Amount
1881.30

Transaction ID: 37342654

Office Sought: House State: NC
 Senate District: _____
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
 2010

(a) SUBTOTAL of Itemized Independent Expenditures	2154.41
(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 _____ Date

M M	/	D D	/	Y Y Y Y
0 3		0 3		2 0 1 1

 Signature

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund	FEC IDENTIFICATION NUMBER C C00053553
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
Prolist Inc.

Mailing Address
8341 Beechcraft Avenue

City Gaithersburg	State MD	Zip Code 20879-1509
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Purpose of Expenditure Postcards	Category/ Type 004
-------------------------------------	--------------------------

Name of Federal Candidate supported or Opposed by expenditure:
Sen. Richard M. Burr

Calendar Year-To-Date Per Election for Office Sought	37652.66
---	----------

Date
M M / D D / Y Y Y Y
1 0 / 2 3 / 2 0 1 0

Amount
436.14

Transaction ID: 37342655

Office Sought: House State: NC
 Senate District: _____
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

Full Name (Last, First, Middle, Initial) of Payee
Prolist Inc.

Mailing Address
8341 Beechcraft Avenue

City Gaithersburg	State MD	Zip Code 20879-1509
----------------------	-------------	------------------------

Purpose of Expenditure Postcards	Category/ Type 004
-------------------------------------	--------------------------

Name of Federal Candidate supported or Opposed by expenditure:
Sen. Richard M. Burr

Calendar Year-To-Date Per Election for Office Sought	37904.61
---	----------

Date
M M / D D / Y Y Y Y
1 0 / 2 3 / 2 0 1 0

Amount
251.95

Transaction ID: 37342656

Office Sought: House State: NC
 Senate District: _____
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

(a) SUBTOTAL of Itemized Independent Expenditures	688.09
(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
Signature

Date M M / D D / Y Y Y Y
0 3 / 0 3 / 2 0 1 1

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund		FEC IDENTIFICATION NUMBER C C00053553
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice		

Full Name (Last, First, Middle, Initial) of Payee
Prolist Inc.

Date
M M / D D / Y Y Y Y
1 0 / 2 5 / 2 0 1 0

Mailing Address
8341 Beechcraft Avenue

Amount
71401.05

City State Zip Code
Gaithersburg MD 20879-1509

Transaction ID: 37351545

Purpose of Expenditure
Postage

Category/Type
004

Office Sought: House State: CA
 Senate District: _____
 Presidential

Name of Federal Candidate supported or Opposed by expenditure:
Sen. Barbara Boxer

Check One: Support Oppose

Calendar Year-To-Date Per Election for Office Sought
366740.96

Disbursement For: Primary General
 Other (specify) : _____
2010
[MEMO ITEM]

Full Name (Last, First, Middle, Initial) of Payee
Prolist Inc.

Date
M M / D D / Y Y Y Y
1 0 / 2 5 / 2 0 1 0

Mailing Address
8341 Beechcraft Avenue

Amount
3810.00

City State Zip Code
Gaithersburg MD 20879-1509

Transaction ID: 37351546

Purpose of Expenditure
Postcards

Category/Type
004

Office Sought: House State: CA
 Senate District: _____
 Presidential

Name of Federal Candidate supported or Opposed by expenditure:
Sen. Barbara Boxer

Check One: Support Oppose

Calendar Year-To-Date Per Election for Office Sought
370550.96

Disbursement For: Primary General
 Other (specify) : _____
2010
[MEMO ITEM]

(a) SUBTOTAL of Itemized Independent Expenditures	0.00
(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.

Mary Rose Adkins
Signature

Date M M / D D / Y Y Y Y
0 3 / 0 3 / 2 0 1 1

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund	FEC IDENTIFICATION NUMBER C C00053553
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
Prolist Inc.

Date
M M / D D / Y Y Y Y
1 0 / 2 6 / 2 0 1 0

Mailing Address
8341 Beechcraft Avenue

Amount
81801.14

City State Zip Code
Gaithersburg MD 20879-1509

Transaction ID: 37357859

Purpose of Expenditure
Postage

Category/Type 004

Office Sought: House State: PA
 Senate District: _____
 Presidential

Name of Federal Candidate supported or Opposed by expenditure:
Mr. Joseph Sestak

Check One: Support Oppose

Calendar Year-To-Date Per Election for Office Sought
2320577.91

Disbursement For: Primary General
 Other (specify) : _____
2010
[MEMO ITEM]

Full Name (Last, First, Middle, Initial) of Payee
Prolist Inc.

Date
M M / D D / Y Y Y Y
1 0 / 2 6 / 2 0 1 0

Mailing Address
8341 Beechcraft Avenue

Amount
9197.77

City State Zip Code
Gaithersburg MD 20879-1509

Transaction ID: 37357860

Purpose of Expenditure
Postcards

Category/Type 004

Office Sought: House State: PA
 Senate District: _____
 Presidential

Name of Federal Candidate supported or Opposed by expenditure:
Mr. Joseph Sestak

Check One: Support Oppose

Calendar Year-To-Date Per Election for Office Sought
2329775.68

Disbursement For: Primary General
 Other (specify) : _____
2010
[MEMO ITEM]

(a) SUBTOTAL of Itemized Independent Expenditures	0.00
(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.

Mary Rose Adkins
Signature

Date M M / D D / Y Y Y Y
0 3 / 0 3 / 2 0 1 1

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund		FEC IDENTIFICATION NUMBER C C00053553
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice		

Full Name (Last, First, Middle, Initial) of Payee
Prolist Inc.

Date
M M / D D / Y Y Y Y
1 0 / 2 6 / 2 0 1 0

Mailing Address
8341 Beechcraft Avenue

Amount
81801.14

City State Zip Code
Gaithersburg MD 20879-1509

Transaction ID: 37357861

Purpose of Expenditure
Postage

Category/Type
004

Office Sought: House State: PA
 Senate District: _____
 Presidential

Name of Federal Candidate supported or Opposed by expenditure:
Mr. Patrick Toomey

Check One: Support Oppose

Calendar Year-To-Date Per Election for Office Sought
2411576.82

Disbursement For: Primary General
 Other (specify) : _____
2010
[MEMO ITEM]

Full Name (Last, First, Middle, Initial) of Payee
Prolist Inc.

Date
M M / D D / Y Y Y Y
1 0 / 2 6 / 2 0 1 0

Mailing Address
8341 Beechcraft Avenue

Amount
9197.77

City State Zip Code
Gaithersburg MD 20879-1509

Transaction ID: 37357862

Purpose of Expenditure
Postcards

Category/Type
004

Office Sought: House State: PA
 Senate District: _____
 Presidential

Name of Federal Candidate supported or Opposed by expenditure:
Mr. Patrick Toomey

Check One: Support Oppose

Calendar Year-To-Date Per Election for Office Sought
2420774.59

Disbursement For: Primary General
 Other (specify) : _____
2010
[MEMO ITEM]

(a) SUBTOTAL of Itemized Independent Expenditures	0.00
(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.

Mary Rose Adkins
Signature

Date M M / D D / Y Y Y Y
0 3 / 0 3 / 2 0 1 1

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund	FEC IDENTIFICATION NUMBER ▼ C C00053553
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
Prolist Inc.

Mailing Address
8341 Beechcraft Avenue

City Gaithersburg	State MD	Zip Code 20879-1509
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Purpose of Expenditure Postage	Category/ Type 004
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Name of Federal Candidate supported or Opposed by expenditure:
Sen. Charles E. Grassley

Calendar Year-To-Date Per Election for Office Sought	95735.42
---	--

Date

M M	/	D D	/	Y Y Y Y
1 0		2 6		2 0 1 0

Amount
350.77

Transaction ID: 37357922

Office Sought: House State: IA
 Senate District: _____
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
 2010 **[MEMO ITEM]**

Postage

Full Name (Last, First, Middle, Initial) of Payee
Prolist Inc.

Mailing Address
8341 Beechcraft Avenue

City Gaithersburg	State MD	Zip Code 20879-1509
----------------------	-------------	------------------------

Purpose of Expenditure Postcards	Category/ Type 004
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Name of Federal Candidate supported or Opposed by expenditure:
Sen. Charles E. Grassley

Calendar Year-To-Date Per Election for Office Sought	95870.13
---	--

Date

M M	/	D D	/	Y Y Y Y
1 0		2 6		2 0 1 0

Amount
134.71

Transaction ID: 37357923

Office Sought: House State: IA
 Senate District: _____
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
 2010 **[MEMO ITEM]**

Postcards

(a) SUBTOTAL of Itemized Independent Expenditures	0.00
(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.

Mary Rose Adkins
Signature

Date

M M	/	D D	/	Y Y Y Y
0 3		0 3		2 0 1 1

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund	FEC IDENTIFICATION NUMBER C C00053553
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
Prolist Inc.

Mailing Address
8341 Beechcraft Avenue

City State Zip Code
Gaithersburg MD 20879-1509

Purpose of Expenditure
Phone Data Matching

Category/Type **004**

Name of Federal Candidate supported or Opposed by expenditure:
Mr. Dino Rossi

Calendar Year-To-Date Per Election for Office Sought **609328.85**

Date
M M / D D / Y Y Y Y
1 0 / 2 8 / 2 0 1 0

Amount
1435.92

Transaction ID: 37376221

Office Sought: House State: WA
 Senate District: _____
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

Full Name (Last, First, Middle, Initial) of Payee
Prolist Inc.

Mailing Address
8341 Beechcraft Avenue

City State Zip Code
Gaithersburg MD 20879-1509

Purpose of Expenditure
Phone Data Matching

Category/Type **004**

Name of Federal Candidate supported or Opposed by expenditure:
Sen. Patty Murray

Calendar Year-To-Date Per Election for Office Sought **610764.77**

Date
M M / D D / Y Y Y Y
1 0 / 2 8 / 2 0 1 0

Amount
1435.92

Transaction ID: 37376222

Office Sought: House State: WA
 Senate District: _____
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

(a) SUBTOTAL of Itemized Independent Expenditures	2871.84
(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
Signature

Date M M / D D / Y Y Y Y
0 3 / 0 3 / 2 0 1 1

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund	FEC IDENTIFICATION NUMBER ▼ C C00053553
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
Prolist Inc.

Mailing Address
8341 Beechcraft Avenue

City Gaithersburg	State MD	Zip Code 20879-1509
----------------------	-------------	------------------------

Purpose of Expenditure Phone Data Matching	Category/ Type
	004

Name of Federal Candidate supported or Opposed by expenditure:
Mr. Kenneth Buck

Calendar Year-To-Date Per Election for Office Sought	1227953.26
---	------------

Date
M M / D D / Y Y Y Y
1 0 / 2 8 / 2 0 1 0

Amount
1704.94

Transaction ID: 37376223

Office Sought: House State: CO
 Senate District: _____
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
 2010

Full Name (Last, First, Middle, Initial) of Payee
Prolist Inc.

Mailing Address
8341 Beechcraft Avenue

City Gaithersburg	State MD	Zip Code 20879-1509
----------------------	-------------	------------------------

Purpose of Expenditure Phone Data Matching	Category/ Type
	004

Name of Federal Candidate supported or Opposed by expenditure:
Mr. Patrick Toomey

Calendar Year-To-Date Per Election for Office Sought	2448155.48
---	------------

Date
M M / D D / Y Y Y Y
1 0 / 2 8 / 2 0 1 0

Amount
3415.29

Transaction ID: 37376224

Office Sought: House State: PA
 Senate District: _____
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
 2010

(a) SUBTOTAL of Itemized Independent Expenditures	<div style="border: 1px solid black; padding: 2px;">5120.23</div>
(b) SUBTOTAL of Unitemized Independent Expenditures	<div style="border: 1px solid black; height: 20px; width: 100%;"></div>
(c) TOTAL Independent Expenditures	<div style="border: 1px solid black; height: 20px; width: 100%;"></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.

Mary Rose Adkins
Signature

Date M M / D D / Y Y Y Y
0 3 / 0 3 / 2 0 1 1

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund	FEC IDENTIFICATION NUMBER C C00053553
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
Prolist Inc.

Mailing Address
8341 Beechcraft Avenue

City State Zip Code
Gaithersburg MD 20879-1509

Purpose of Expenditure
Phone Data Matching

Category/Type **004**

Name of Federal Candidate supported or Opposed by expenditure:
Mr. Joseph Sestak

Calendar Year-To-Date Per Election for Office Sought **2451570.77**

Date
M M / D D / Y Y Y Y
1 0 / 2 8 / 2 0 1 0

Amount
3415.29

Transaction ID: 37376225

Office Sought: House State: PA
 Senate District: _____
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

Full Name (Last, First, Middle, Initial) of Payee
Prolist Inc.

Mailing Address
8341 Beechcraft Avenue

City State Zip Code
Gaithersburg MD 20879-1509

Purpose of Expenditure
Phone Data Matching

Category/Type **004**

Name of Federal Candidate supported or Opposed by expenditure:
Ms. Carly Fiorina

Calendar Year-To-Date Per Election for Office Sought **379350.13**

Date
M M / D D / Y Y Y Y
1 0 / 2 8 / 2 0 1 0

Amount
1120.62

Transaction ID: 37376226

Office Sought: House State: CA
 Senate District: _____
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

(a) SUBTOTAL of Itemized Independent Expenditures	4535.91
(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
Signature

Date M M / D D / Y Y Y Y
0 3 / 0 3 / 2 0 1 1

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund		FEC IDENTIFICATION NUMBER C C00053553
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice		

Full Name (Last, First, Middle, Initial) of Payee
Prolist Inc.

Mailing Address
8341 Beechcraft Avenue

City Gaithersburg	State MD	Zip Code 20879-1509
----------------------	-------------	------------------------

Purpose of Expenditure Phone Data Matching	Category/ Type 004
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Name of Federal Candidate supported or Opposed by expenditure:
Sen. Barbara Boxer

Calendar Year-To-Date Per Election for Office Sought	380470.75
---	-----------

Date
M M / D D / Y Y Y Y
1 0 / 2 8 / 2 0 1 0

Amount
1120.62

Transaction ID: 37376227

Office Sought: House State: CA
 Senate District: _____
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

Full Name (Last, First, Middle, Initial) of Payee
Prolist Inc.

Mailing Address
8341 Beechcraft Avenue

City Gaithersburg	State MD	Zip Code 20879-1509
----------------------	-------------	------------------------

Purpose of Expenditure Postage	Category/ Type 004
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Name of Federal Candidate supported or Opposed by expenditure:
Mr. Dino Rossi

Calendar Year-To-Date Per Election for Office Sought	743083.48
---	-----------

Date
M M / D D / Y Y Y Y
1 0 / 2 8 / 2 0 1 0

Amount
132318.71

Transaction ID: 37376243

Office Sought: House State: WA
 Senate District: _____
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

(a) SUBTOTAL of Itemized Independent Expenditures	133439.33
(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
Signature

Date M M / D D / Y Y Y Y
0 3 / 0 3 / 2 0 1 1

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund	FEC IDENTIFICATION NUMBER C C00053553
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
Prolist Inc.

Mailing Address
8341 Beechcraft Avenue

City Gaithersburg	State MD	Zip Code 20879-1509
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Purpose of Expenditure Postage	Category/ Type 004
-----------------------------------	--------------------------

Name of Federal Candidate supported or Opposed by expenditure:
Mr. Dino Rossi

Calendar Year-To-Date Per Election for Office Sought	829716.91
---	-----------

Date
M M / D D / Y Y Y Y
1 0 / 2 8 / 2 0 1 0

Amount
86633.43

Transaction ID: 37376244

Office Sought: House State: WA
 Senate District: _____
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

Full Name (Last, First, Middle, Initial) of Payee
Prolist Inc.

Mailing Address
8341 Beechcraft Avenue

City Gaithersburg	State MD	Zip Code 20879-1509
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Purpose of Expenditure Postcards	Category/ Type 004
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Name of Federal Candidate supported or Opposed by expenditure:
Mr. Dino Rossi

Calendar Year-To-Date Per Election for Office Sought	837601.04
---	-----------

Date
M M / D D / Y Y Y Y
1 0 / 2 8 / 2 0 1 0

Amount
7884.13

Transaction ID: 37376246

Office Sought: House State: WA
 Senate District: _____
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

(a) SUBTOTAL of Itemized Independent Expenditures	94517.56
(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
Signature

Date M M / D D / Y Y Y Y
0 3 / 0 3 / 2 0 1 1

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund		FEC IDENTIFICATION NUMBER C C00053553
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice		

Full Name (Last, First, Middle, Initial) of Payee
Prolist Inc.

Mailing Address
8341 Beechcraft Avenue

City State Zip Code
Gaithersburg MD 20879-1509

Purpose of Expenditure Category/Type
Postcards 004

Name of Federal Candidate supported or Opposed by expenditure:
Mr. Dino Rossi

Calendar Year-To-Date Per Election for Office Sought 842942.91

Date
M M / D D / Y Y Y Y
1 0 / 2 8 / 2 0 1 0

Amount
5341.87

Transaction ID: 37376247

Office Sought: House State: WA
 Senate District: _____
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

Full Name (Last, First, Middle, Initial) of Payee
Prolist Inc.

Mailing Address
8341 Beechcraft Avenue

City State Zip Code
Gaithersburg MD 20879-1509

Purpose of Expenditure Category/Type
Postage 004

Name of Federal Candidate supported or Opposed by expenditure:
Rep. Michael Avery Ross

Calendar Year-To-Date Per Election for Office Sought 12366.40

Date
M M / D D / Y Y Y Y
1 0 / 3 0 / 2 0 1 0

Amount
5067.82

Transaction ID: 37380730

Office Sought: House State: AR
 Senate District: 04
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

(a) SUBTOTAL of Itemized Independent Expenditures	10409.69
(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
Signature

Date M M / D D / Y Y Y Y
0 3 / 0 3 / 2 0 1 1

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund	FEC IDENTIFICATION NUMBER C C00053553
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
Prolist Inc.

Mailing Address
8341 Beechcraft Avenue

City State Zip Code
Gaithersburg MD 20879-1509

Purpose of Expenditure Category/Type
Postage 004

Name of Federal Candidate supported or Opposed by expenditure:
Rep. Dennis A. Cardoza

Calendar Year-To-Date Per Election for Office Sought 7889.47

Date
M M / D D / Y Y Y Y
1 0 / 3 0 / 2 0 1 0

Amount
3144.16
Transaction ID: 37380732

Office Sought: House State: CA
 Senate District: 18
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

Full Name (Last, First, Middle, Initial) of Payee
Prolist Inc.

Mailing Address
8341 Beechcraft Avenue

City State Zip Code
Gaithersburg MD 20879-1509

Purpose of Expenditure Category/Type
Postage 004

Name of Federal Candidate supported or Opposed by expenditure:
Rep. Allen Boyd

Calendar Year-To-Date Per Election for Office Sought 14801.03

Date
M M / D D / Y Y Y Y
1 0 / 3 0 / 2 0 1 0

Amount
6094.32
Transaction ID: 37380733

Office Sought: House State: FL
 Senate District: 02
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

(a) SUBTOTAL of Itemized Independent Expenditures	9238.48
(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
Signature

Date M M / D D / Y Y Y Y
0 3 / 0 3 / 2 0 1 1

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund	FEC IDENTIFICATION NUMBER C C00053553
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
Prolist Inc.

Date
M M / D D / Y Y Y Y
1 0 / 3 0 / 2 0 1 0

Mailing Address
8341 Beechcraft Avenue

Amount
3067.85

City State Zip Code
Gaithersburg MD 20879-1509

Transaction ID: 37380734
Office Sought: House State: IL
 Senate District: 11
 Presidential

Purpose of Expenditure Category/Type
Postage 004

Name of Federal Candidate supported or Opposed by expenditure:
Ms. Deborah Halvorson

Check One: Support Oppose

Calendar Year-To-Date Per Election for Office Sought
7687.74

Disbursement For: Primary General
 Other (specify) : _____
2010

Full Name (Last, First, Middle, Initial) of Payee
Prolist Inc.

Date
M M / D D / Y Y Y Y
1 0 / 3 0 / 2 0 1 0

Mailing Address
8341 Beechcraft Avenue

Amount
2568.31

City State Zip Code
Gaithersburg MD 20879-1509

Transaction ID: 37380735
Office Sought: House State: MI
 Senate District: 15
 Presidential

Purpose of Expenditure Category/Type
Postage 004

Name of Federal Candidate supported or Opposed by expenditure:
Rep. John D. Dingell

Check One: Support Oppose

Calendar Year-To-Date Per Election for Office Sought
6538.91

Disbursement For: Primary General
 Other (specify) : _____
2010

(a) SUBTOTAL of Itemized Independent Expenditures	5636.16
(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
Signature

Date M M / D D / Y Y Y Y
0 3 / 0 3 / 2 0 1 1

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund	FEC IDENTIFICATION NUMBER C C00053553
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
Prolist Inc.

Date

M	M	/	D	D	/	Y	Y	Y	Y
1	0		3	0		2	0	1	0

Mailing Address
8341 Beechcraft Avenue

Amount
6870.92

Transaction ID: 37380736

City Gaithersburg	State MD	Zip Code 20879-1509
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Office Sought: House State: MO
 Senate District: 04
 Presidential

Purpose of Expenditure Postage	Category/ Type 004
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Check One: Support Oppose

Name of Federal Candidate supported or Opposed by expenditure:
Rep. Ike Skelton

Disbursement For: Primary General
 Other (specify) : _____
 2010

Calendar Year-To-Date Per Election for Office Sought	16578.93
---	----------

Full Name (Last, First, Middle, Initial) of Payee
Prolist Inc.

Date

M	M	/	D	D	/	Y	Y	Y	Y
1	0		3	0		2	0	1	0

Mailing Address
8341 Beechcraft Avenue

Amount
3316.06

Transaction ID: 37380737

City Gaithersburg	State MD	Zip Code 20879-1509
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Office Sought: House State: MS
 Senate District: 01
 Presidential

Purpose of Expenditure Postage	Category/ Type 004
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Check One: Support Oppose

Name of Federal Candidate supported or Opposed by expenditure:
Mr. Travis Childers

Disbursement For: Primary General
 Other (specify) : _____
 2010

Calendar Year-To-Date Per Election for Office Sought	8272.72
---	---------

(a) SUBTOTAL of Itemized Independent Expenditures	10186.98
(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
Signature

Date

M	M	/	D	D	/	Y	Y	Y	Y
0	3		0	3		2	0	1	1

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

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund	FEC IDENTIFICATION NUMBER C C00053553
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
Prolist Inc.

Mailing Address
8341 Beechcraft Avenue

City State Zip Code
Gaithersburg MD 20879-1509

Purpose of Expenditure Category/Type
Postage 004

Name of Federal Candidate supported or Opposed by expenditure:
Rep. Gene Taylor

Calendar Year-To-Date Per Election for Office Sought
5715.06

Date
MM / DD / YYYY
10 / 30 / 2010

Amount
2217.04

Transaction ID: 37380738

Office Sought: House State: MS
 Senate District: 04
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

Full Name (Last, First, Middle, Initial) of Payee
Prolist Inc.

Mailing Address
8341 Beechcraft Avenue

City State Zip Code
Gaithersburg MD 20879-1509

Purpose of Expenditure Category/Type
Postage 004

Name of Federal Candidate supported or Opposed by expenditure:
Rep. Heath Shuler

Calendar Year-To-Date Per Election for Office Sought
45708.84

Date
MM / DD / YYYY
10 / 30 / 2010

Amount
1214.74

Transaction ID: 37380739

Office Sought: House State: NC
 Senate District: 11
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

(a) SUBTOTAL of Itemized Independent Expenditures	3431.78
(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
Signature

Date
MM / DD / YYYY
03 / 03 / 2011

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

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund	FEC IDENTIFICATION NUMBER ▼ C C00053553
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
Prolist Inc.

Mailing Address
8341 Beechcraft Avenue

City State Zip Code
Gaithersburg MD 20879-1509

Purpose of Expenditure Category/Type
Postage 004

Name of Federal Candidate supported or Opposed by expenditure:
Rep. Zachary T. Space

Calendar Year-To-Date Per Election for Office Sought
8536.97

Date
M M / D D / Y Y Y Y
1 0 / 3 0 / 2 0 1 0

Amount
3466.10

Transaction ID: 37380740

Office Sought: House State: OH
 Senate District: 18
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

Full Name (Last, First, Middle, Initial) of Payee
Prolist Inc.

Mailing Address
8341 Beechcraft Avenue

City State Zip Code
Gaithersburg MD 20879-1509

Purpose of Expenditure Category/Type
Postage 004

Name of Federal Candidate supported or Opposed by expenditure:
Rep. Daniel Boren

Calendar Year-To-Date Per Election for Office Sought
15370.89

Date
M M / D D / Y Y Y Y
1 0 / 3 0 / 2 0 1 0

Amount
6349.22

Transaction ID: 37380741

Office Sought: House State: OK
 Senate District: 02
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

(a) SUBTOTAL of Itemized Independent Expenditures	9815.32
(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
Signature

Date M M / D D / Y Y Y Y
0 3 / 0 3 / 2 0 1 1

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund		FEC IDENTIFICATION NUMBER C C00053553
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice		

Full Name (Last, First, Middle, Initial) of Payee
Prolist Inc.

Mailing Address
8341 Beechcraft Avenue

City Gaithersburg	State MD	Zip Code 20879-1509
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Purpose of Expenditure Postage	Category/ Type 004
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Name of Federal Candidate supported or Opposed by expenditure:
Rep. Jason Altmire

Calendar Year-To-Date Per Election for Office Sought	17347.37
---	----------

Date
M M / D D / Y Y Y Y
1 0 / 3 0 / 2 0 1 0

Amount
7181.23

Transaction ID: 37380743

Office Sought: House State: PA
 Senate District: 04
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

Full Name (Last, First, Middle, Initial) of Payee
Prolist Inc.

Mailing Address
8341 Beechcraft Avenue

City Gaithersburg	State MD	Zip Code 20879-1509
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Purpose of Expenditure Postage	Category/ Type 004
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Name of Federal Candidate supported or Opposed by expenditure:
Rep. Tim Holden

Calendar Year-To-Date Per Election for Office Sought	16181.02
---	----------

Date
M M / D D / Y Y Y Y
1 0 / 3 0 / 2 0 1 0

Amount
6686.49

Transaction ID: 37380744

Office Sought: House State: PA
 Senate District: 17
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

(a) SUBTOTAL of Itemized Independent Expenditures	13867.72
(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
Signature

Date M M / D D / Y Y Y Y
0 3 / 0 3 / 2 0 1 1

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund	FEC IDENTIFICATION NUMBER C C00053553
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
Prolist Inc.

Date
M M / D D / Y Y Y Y
1 0 / 3 0 / 2 0 1 0

Mailing Address
8341 Beechcraft Avenue

Amount
6785.87

City State Zip Code
Gaithersburg MD 20879-1509

Transaction ID: 37380745

Purpose of Expenditure Category/Type
Postage 004

Office Sought: House State: SD
 Senate District: 01
 Presidential

Name of Federal Candidate supported or Opposed by expenditure:
Rep. Stephanie Herseth Sandlin

Check One: Support Oppose

Calendar Year-To-Date Per Election for Office Sought
16408.83

Disbursement For: Primary General
 Other (specify) : _____
2010

Full Name (Last, First, Middle, Initial) of Payee
Prolist Inc.

Date
M M / D D / Y Y Y Y
1 0 / 3 0 / 2 0 1 0

Mailing Address
8341 Beechcraft Avenue

Amount
4993.26

City State Zip Code
Gaithersburg MD 20879-1509

Transaction ID: 37380748

Purpose of Expenditure Category/Type
Postage 004

Office Sought: House State: TN
 Senate District: 04
 Presidential

Name of Federal Candidate supported or Opposed by expenditure:
Rep. Lincoln Davis

Check One: Support Oppose

Calendar Year-To-Date Per Election for Office Sought
12196.31

Disbursement For: Primary General
 Other (specify) : _____
2010

(a) SUBTOTAL of Itemized Independent Expenditures	11779.13
(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
Signature

Date M M / D D / Y Y Y Y
0 3 / 0 3 / 2 0 1 1

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund		FEC IDENTIFICATION NUMBER C C00053553
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice		

Full Name (Last, First, Middle, Initial) of Payee
Prolist Inc.

Date
M M / D D / Y Y Y Y
1 0 / 3 0 / 2 0 1 0

Mailing Address
8341 Beechcraft Avenue

Amount
6779.15
Transaction ID: 37380749

City State Zip Code
Gaithersburg MD 20879-1509

Office Sought: House State: UT
 Senate District: 02
 Presidential

Purpose of Expenditure
Postage
Category/Type 004

Check One: Support Oppose

Name of Federal Candidate supported or Opposed by expenditure:
Rep. James D. Matheson

Disbursement For: Primary General
 Other (specify) : _____
2010

Calendar Year-To-Date Per Election
for Office Sought 16395.39

Full Name (Last, First, Middle, Initial) of Payee
Prolist Inc.

Date
M M / D D / Y Y Y Y
1 0 / 3 0 / 2 0 1 0

Mailing Address
8341 Beechcraft Avenue

Amount
1721.61
Transaction ID: 37380750

City State Zip Code
Gaithersburg MD 20879-1509

Office Sought: House State: WV
 Senate District: 03
 Presidential

Purpose of Expenditure
Postage
Category/Type 004

Check One: Support Oppose

Name of Federal Candidate supported or Opposed by expenditure:
Rep. Nick Joe Rahall, II

Disbursement For: Primary General
 Other (specify) : _____
2010

Calendar Year-To-Date Per Election
for Office Sought 4533.41

(a) SUBTOTAL of Itemized Independent Expenditures	8500.76
(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
Signature

Date M M / D D / Y Y Y Y
0 3 / 0 3 / 2 0 1 1

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund	FEC IDENTIFICATION NUMBER C C00053553
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
Prolist Inc.

Mailing Address
8341 Beechcraft Avenue

City State Zip Code
Gaithersburg MD 20879-1509

Purpose of Expenditure Category/Type
Postcards 004

Name of Federal Candidate supported or Opposed by expenditure:
Rep. Michael Avery Ross

Calendar Year-To-Date Per Election for Office Sought
12722.63

Date
MM / DD / YYYY
10 / 30 / 2010

Amount
356.23
Transaction ID: 37380753

Office Sought: House State: AR
 Senate District: 04
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

Full Name (Last, First, Middle, Initial) of Payee
Prolist Inc.

Mailing Address
8341 Beechcraft Avenue

City State Zip Code
Gaithersburg MD 20879-1509

Purpose of Expenditure Category/Type
Postcards 004

Name of Federal Candidate supported or Opposed by expenditure:
Rep. Dennis A. Cardoza

Calendar Year-To-Date Per Election for Office Sought
8113.73

Date
MM / DD / YYYY
10 / 30 / 2010

Amount
224.26
Transaction ID: 37380754

Office Sought: House State: CA
 Senate District: 18
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

(a) SUBTOTAL of Itemized Independent Expenditures	580.49
(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
Signature

Date MM / DD / YYYY
03 / 03 / 2011

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund	FEC IDENTIFICATION NUMBER ▼ C C00053553
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
Prolist Inc.

Mailing Address
8341 Beechcraft Avenue

City Gaithersburg	State MD	Zip Code 20879-1509
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Purpose of Expenditure Postcards	Category/ Type 004
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Name of Federal Candidate supported or Opposed by expenditure:
Rep. Allen Boyd

Calendar Year-To-Date Per Election for Office Sought	15237.25
---	--

Date

M 10	D 30	Y 2010
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Amount
436.22

Transaction ID: 37380755

Office Sought: House State: FL
 Senate District: 02
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
 2010

Full Name (Last, First, Middle, Initial) of Payee
Prolist Inc.

Mailing Address
8341 Beechcraft Avenue

City Gaithersburg	State MD	Zip Code 20879-1509
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Purpose of Expenditure Postcards	Category/ Type 004
-------------------------------------	---

Name of Federal Candidate supported or Opposed by expenditure:
Ms. Deborah Halvorson

Calendar Year-To-Date Per Election for Office Sought	7901.71
---	---

Date

M 10	D 30	Y 2010
---------	---------	-----------

Amount
213.97

Transaction ID: 37380756

Office Sought: House State: IL
 Senate District: 11
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
 2010

(a) SUBTOTAL of Itemized Independent Expenditures	650.19
(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 _____ Date

M 03	D 03	Y 2011
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 Signature

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund	FEC IDENTIFICATION NUMBER C C00053553
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
Prolist Inc.

Mailing Address
8341 Beechcraft Avenue

City Gaithersburg	State MD	Zip Code 20879-1509
----------------------	-------------	------------------------

Purpose of Expenditure Postcards	Category/ Type 004
-------------------------------------	--------------------------

Name of Federal Candidate supported or Opposed by expenditure:
Rep. John D. Dingell

Calendar Year-To-Date Per Election for Office Sought	6721.49
---	---------

Date
M M / D D / Y Y Y Y
1 0 / 3 0 / 2 0 1 0

Amount
182.58

Transaction ID: 37380757

Office Sought: House State: MI
 Senate District: 15
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

Full Name (Last, First, Middle, Initial) of Payee
Prolist Inc.

Mailing Address
8341 Beechcraft Avenue

City Gaithersburg	State MD	Zip Code 20879-1509
----------------------	-------------	------------------------

Purpose of Expenditure Postcards	Category/ Type 004
-------------------------------------	--------------------------

Name of Federal Candidate supported or Opposed by expenditure:
Rep. Ike Skelton

Calendar Year-To-Date Per Election for Office Sought	17062.25
---	----------

Date
M M / D D / Y Y Y Y
1 0 / 3 0 / 2 0 1 0

Amount
483.32

Transaction ID: 37380758

Office Sought: House State: MO
 Senate District: 04
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

(a) SUBTOTAL of Itemized Independent Expenditures	665.90
(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
Signature

Date M M / D D / Y Y Y Y
0 3 / 0 3 / 2 0 1 1

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

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund		FEC IDENTIFICATION NUMBER C C00053553
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice		

Full Name (Last, First, Middle, Initial) of Payee
Prolist Inc.

Mailing Address
8341 Beechcraft Avenue

City Gaithersburg	State MD	Zip Code 20879-1509
----------------------	-------------	------------------------

Purpose of Expenditure Postcards	Category/ Type 004
-------------------------------------	--------------------------

Name of Federal Candidate supported or Opposed by expenditure:
Mr. Travis Childers

Calendar Year-To-Date Per Election for Office Sought	8505.25
---	---------

Date
M M / D D / Y Y Y Y
1 0 / 3 0 / 2 0 1 0

Amount
232.53

Transaction ID: 37380759

Office Sought: House State: MS
 Senate District: 01
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

Full Name (Last, First, Middle, Initial) of Payee
Prolist Inc.

Mailing Address
8341 Beechcraft Avenue

City Gaithersburg	State MD	Zip Code 20879-1509
----------------------	-------------	------------------------

Purpose of Expenditure Postcards	Category/ Type 004
-------------------------------------	--------------------------

Name of Federal Candidate supported or Opposed by expenditure:
Rep. Gene Taylor

Calendar Year-To-Date Per Election for Office Sought	5872.21
---	---------

Date
M M / D D / Y Y Y Y
1 0 / 3 0 / 2 0 1 0

Amount
157.15

Transaction ID: 37380760

Office Sought: House State: MS
 Senate District: 04
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

(a) SUBTOTAL of Itemized Independent Expenditures	389.68
(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
Signature

Date M M / D D / Y Y Y Y
0 3 / 0 3 / 2 0 1 1

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund	FEC IDENTIFICATION NUMBER ▼ C C00053553
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
Prolist Inc.

Mailing Address
8341 Beechcraft Avenue

City Gaithersburg	State MD	Zip Code 20879-1509
----------------------	-------------	------------------------

Purpose of Expenditure Postcards	Category/ Type 004
-------------------------------------	---

Name of Federal Candidate supported or Opposed by expenditure:
Rep. Heath Shuler

Calendar Year-To-Date Per Election for Office Sought	45792.29
---	--

Date

M M 1 0	D D 3 0	Y Y Y Y 2 0 1 0
------------	------------	--------------------

Amount
83.45

Transaction ID: 37380761

Office Sought: House State: NC
 Senate District: 11
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
 2010

Full Name (Last, First, Middle, Initial) of Payee
Prolist Inc.

Mailing Address
8341 Beechcraft Avenue

City Gaithersburg	State MD	Zip Code 20879-1509
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Purpose of Expenditure Postcards	Category/ Type 004
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Name of Federal Candidate supported or Opposed by expenditure:
Rep. Zachary T. Space

Calendar Year-To-Date Per Election for Office Sought	8781.64
---	---

Date

M M 1 0	D D 3 0	Y Y Y Y 2 0 1 0
------------	------------	--------------------

Amount
244.67

Transaction ID: 37380762

Office Sought: House State: OH
 Senate District: 18
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
 2010

(a) SUBTOTAL of Itemized Independent Expenditures	328.12
(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
Signature

Date

M M 0 3	D D 0 3	Y Y Y Y 2 0 1 1
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SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund	FEC IDENTIFICATION NUMBER C C00053553
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
Prolist Inc.

Mailing Address
8341 Beechcraft Avenue

City Gaithersburg	State MD	Zip Code 20879-1509
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Purpose of Expenditure Postcards	Category/ Type 004
-------------------------------------	--------------------------

Name of Federal Candidate supported or Opposed by expenditure:
Rep. Daniel Boren

Calendar Year-To-Date Per Election for Office Sought	15819.71
---	----------

Date
M M / D D / Y Y Y Y
1 0 / 3 0 / 2 0 1 0

Amount
448.82

Transaction ID: 37380763

Office Sought: House State: OK
 Senate District: 02
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
 2010

Full Name (Last, First, Middle, Initial) of Payee
Prolist Inc.

Mailing Address
8341 Beechcraft Avenue

City Gaithersburg	State MD	Zip Code 20879-1509
----------------------	-------------	------------------------

Purpose of Expenditure Postcards	Category/ Type 004
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Name of Federal Candidate supported or Opposed by expenditure:
Rep. Jason Altmire

Calendar Year-To-Date Per Election for Office Sought	17861.69
---	----------

Date
M M / D D / Y Y Y Y
1 0 / 3 0 / 2 0 1 0

Amount
514.32

Transaction ID: 37380764

Office Sought: House State: PA
 Senate District: 04
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
 2010

(a) SUBTOTAL of Itemized Independent Expenditures	963.14
(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
Signature

Date M M / D D / Y Y Y Y
0 3 / 0 3 / 2 0 1 1

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund	FEC IDENTIFICATION NUMBER C C00053553
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
Prolist Inc.

Mailing Address
8341 Beechcraft Avenue

City Gaithersburg	State MD	Zip Code 20879-1509
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Purpose of Expenditure Postcards	Category/ Type 004
-------------------------------------	--------------------------

Name of Federal Candidate supported or Opposed by expenditure:
Rep. Tim Holden

Calendar Year-To-Date Per Election for Office Sought	16658.25
---	----------

Date
M M / D D / Y Y Y Y
1 0 / 3 0 / 2 0 1 0

Amount
477.23

Transaction ID: 37380765

Office Sought: House State: PA
 Senate District: 17
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

Full Name (Last, First, Middle, Initial) of Payee
Prolist Inc.

Mailing Address
8341 Beechcraft Avenue

City Gaithersburg	State MD	Zip Code 20879-1509
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Purpose of Expenditure Postcards	Category/ Type 004
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Name of Federal Candidate supported or Opposed by expenditure:
Rep. Stephanie Herseth Sandlin

Calendar Year-To-Date Per Election for Office Sought	16892.15
---	----------

Date
M M / D D / Y Y Y Y
1 0 / 3 0 / 2 0 1 0

Amount
483.32

Transaction ID: 37380766

Office Sought: House State: SD
 Senate District: 01
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

(a) SUBTOTAL of Itemized Independent Expenditures	960.55
(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
Signature

Date M M / D D / Y Y Y Y
0 3 / 0 3 / 2 0 1 1

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund	FEC IDENTIFICATION NUMBER C C00053553
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
Prolist Inc.

Mailing Address
8341 Beechcraft Avenue

City Gaithersburg	State MD	Zip Code 20879-1509
----------------------	-------------	------------------------

Purpose of Expenditure Postcards	Category/ Type 004
-------------------------------------	--------------------------

Name of Federal Candidate supported or Opposed by expenditure:
Rep. Lincoln Davis

Calendar Year-To-Date Per Election for Office Sought	12548.15
---	----------

Date
M M / D D / Y Y Y Y
1 0 / 3 0 / 2 0 1 0

Amount
351.84

Transaction ID: 37380767

Office Sought: House State: TN
 Senate District: 04
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

Full Name (Last, First, Middle, Initial) of Payee
Prolist Inc.

Mailing Address
8341 Beechcraft Avenue

City Gaithersburg	State MD	Zip Code 20879-1509
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Purpose of Expenditure Postcards	Category/ Type 004
-------------------------------------	--------------------------

Name of Federal Candidate supported or Opposed by expenditure:
Rep. James D. Matheson

Calendar Year-To-Date Per Election for Office Sought	16878.71
---	----------

Date
M M / D D / Y Y Y Y
1 0 / 3 0 / 2 0 1 0

Amount
483.32

Transaction ID: 37380768

Office Sought: House State: UT
 Senate District: 02
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

(a) SUBTOTAL of Itemized Independent Expenditures	835.16
(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
Signature

Date M M / D D / Y Y Y Y
0 3 / 0 3 / 2 0 1 1

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund	FEC IDENTIFICATION NUMBER ▼ C C00053553
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
Prolist Inc.

Mailing Address
8341 Beechcraft Avenue

City Gaithersburg	State MD	Zip Code 20879-1509
----------------------	-------------	------------------------

Purpose of Expenditure Postcards	Category/ Type 004
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Name of Federal Candidate supported or Opposed by expenditure:
Rep. Nick Joe Rahall, II

Calendar Year-To-Date Per Election for Office Sought	4650.57
---	---

Date

M M	/	D D	/	Y Y Y Y
1 0		3 0		2 0 1 0

Amount
117.16

Transaction ID: 37380769

Office Sought: House State: WV
 Senate District: 03
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
 2010

Full Name (Last, First, Middle, Initial) of Payee
Prolist Inc.

Mailing Address
8341 Beechcraft Avenue

City Gaithersburg	State MD	Zip Code 20879-1509
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Purpose of Expenditure Postage	Category/ Type 004
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Name of Federal Candidate supported or Opposed by expenditure:
Mr. Richard Blumenthal

Calendar Year-To-Date Per Election for Office Sought	89317.71
---	--

Date

M M	/	D D	/	Y Y Y Y
1 0		3 0		2 0 1 0

Amount
29402.37

Transaction ID: 37384443

Office Sought: House State: CT
 Senate District: _____
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
 2010

(a) SUBTOTAL of Itemized Independent Expenditures	29519.53
(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
Signature

Date

M M	/	D D	/	Y Y Y Y
0 3		0 3		2 0 1 1

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund	FEC IDENTIFICATION NUMBER C C00053553
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
Prolist Inc.

Mailing Address
8341 Beechcraft Avenue

City Gaithersburg	State MD	Zip Code 20879-1509
----------------------	-------------	------------------------

Purpose of Expenditure Postage	Category/ Type 004
-----------------------------------	--------------------------

Name of Federal Candidate supported or Opposed by expenditure:
Van Tran

Calendar Year-To-Date Per Election for Office Sought	1399.73
---	---------

Date
M M / D D / Y Y Y Y
1 0 / 3 0 / 2 0 1 0

Amount
494.41

Transaction ID: 37384444

Office Sought: House State: CA
 Senate District: 47
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

Full Name (Last, First, Middle, Initial) of Payee
Prolist Inc.

Mailing Address
8341 Beechcraft Avenue

City Gaithersburg	State MD	Zip Code 20879-1509
----------------------	-------------	------------------------

Purpose of Expenditure Postage	Category/ Type 004
-----------------------------------	--------------------------

Name of Federal Candidate supported or Opposed by expenditure:
Ms. Ann Buerkle

Calendar Year-To-Date Per Election for Office Sought	44355.70
---	----------

Date
M M / D D / Y Y Y Y
1 0 / 3 0 / 2 0 1 0

Amount
18889.12

Transaction ID: 37384446

Office Sought: House State: NY
 Senate District: 25
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

(a) SUBTOTAL of Itemized Independent Expenditures	19383.53
(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
Signature

Date M M / D D / Y Y Y Y
0 3 / 0 3 / 2 0 1 1

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

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund	FEC IDENTIFICATION NUMBER ▼ C C00053553
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
Prolist Inc.

Mailing Address
8341 Beechcraft Avenue

City State Zip Code
Gaithersburg MD 20879-1509

Purpose of Expenditure Category/Type
Postage 004

Name of Federal Candidate supported or Opposed by expenditure:
Mr. Michael Grimm

Calendar Year-To-Date Per Election for Office Sought 1600.25

Date
M M / D D / Y Y Y Y
1 0 / 3 0 / 2 0 1 0

Amount
500.24

Transaction ID: 37384448

Office Sought: House State: NY
 Senate District: 13
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

Full Name (Last, First, Middle, Initial) of Payee
Prolist Inc.

Mailing Address
8341 Beechcraft Avenue

City State Zip Code
Gaithersburg MD 20879-1509

Purpose of Expenditure Category/Type
Postage 004

Name of Federal Candidate supported or Opposed by expenditure:
Mr. Patrick Meehan

Calendar Year-To-Date Per Election for Office Sought 28316.45

Date
M M / D D / Y Y Y Y
1 0 / 3 0 / 2 0 1 0

Amount
4724.49

Transaction ID: 37384449

Office Sought: House State: PA
 Senate District: 07
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

(a) SUBTOTAL of Itemized Independent Expenditures	5224.73
(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
Signature

Date M M / D D / Y Y Y Y
0 3 / 0 3 / 2 0 1 1

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund	FEC IDENTIFICATION NUMBER C C00053553
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
Prolist Inc.

Mailing Address
8341 Beechcraft Avenue

City Gaithersburg	State MD	Zip Code 20879-1509
----------------------	-------------	------------------------

Purpose of Expenditure Postage	Category/ Type 004
-----------------------------------	--------------------------

Name of Federal Candidate supported or Opposed by expenditure:
Mr. Patrick Toomey

Calendar Year-To-Date Per Election for Office Sought	2474524.52
---	------------

Date
M M / D D / Y Y Y Y
1 0 / 3 0 / 2 0 1 0

Amount
4724.48

Transaction ID: 37384450

Office Sought: House State: PA
 Senate District: _____
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

Full Name (Last, First, Middle, Initial) of Payee
Prolist Inc.

Mailing Address
8341 Beechcraft Avenue

City Gaithersburg	State MD	Zip Code 20879-1509
----------------------	-------------	------------------------

Purpose of Expenditure Postcards	Category/ Type 004
-------------------------------------	--------------------------

Name of Federal Candidate supported or Opposed by expenditure:
Mr. Richard Blumenthal

Calendar Year-To-Date Per Election for Office Sought	91066.81
---	----------

Date
M M / D D / Y Y Y Y
1 0 / 3 0 / 2 0 1 0

Amount
1749.10

Transaction ID: 37384453

Office Sought: House State: CT
 Senate District: _____
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

(a) SUBTOTAL of Itemized Independent Expenditures	6473.58
(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
Signature

Date M M / D D / Y Y Y Y
0 3 / 0 3 / 2 0 1 1

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund	FEC IDENTIFICATION NUMBER C C00053553
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
Prolist Inc.

Mailing Address
8341 Beechcraft Avenue

City Gaithersburg	State MD	Zip Code 20879-1509
----------------------	-------------	------------------------

Purpose of Expenditure Postcards	Category/ Type 004
-------------------------------------	--------------------------

Name of Federal Candidate supported or Opposed by expenditure:
Van Tran

Calendar Year-To-Date Per Election for Office Sought	1428.35
---	---------

Date
M M / D D / Y Y Y Y
1 0 / 3 0 / 2 0 1 0

Amount
28.62

Transaction ID: 37384454

Office Sought: House State: CA
 Senate District: 47
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

Full Name (Last, First, Middle, Initial) of Payee
Prolist Inc.

Mailing Address
8341 Beechcraft Avenue

City Gaithersburg	State MD	Zip Code 20879-1509
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Purpose of Expenditure Postcards	Category/ Type 004
-------------------------------------	--------------------------

Name of Federal Candidate supported or Opposed by expenditure:
Ms. Ann Buerkle

Calendar Year-To-Date Per Election for Office Sought	45481.06
---	----------

Date
M M / D D / Y Y Y Y
1 0 / 3 0 / 2 0 1 0

Amount
1125.36

Transaction ID: 37384455

Office Sought: House State: NY
 Senate District: 25
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

(a) SUBTOTAL of Itemized Independent Expenditures	1153.98
(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
Signature

Date M M / D D / Y Y Y Y
0 3 / 0 3 / 2 0 1 1

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund		FEC IDENTIFICATION NUMBER C C00053553
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice		

Full Name (Last, First, Middle, Initial) of Payee
Prolist Inc.

Mailing Address
8341 Beechcraft Avenue

City Gaithersburg	State MD	Zip Code 20879-1509
----------------------	-------------	------------------------

Purpose of Expenditure Postcards	Category/ Type 004
-------------------------------------	--------------------------

Name of Federal Candidate supported or Opposed by expenditure:
Mr. Michael Grimm

Calendar Year-To-Date Per Election for Office Sought	1629.15
---	---------

Date
M M / D D / Y Y Y Y
1 0 / 3 0 / 2 0 1 0

Amount
28.90

Transaction ID: 37384456

Office Sought: House State: NY
 Senate District: 13
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

Full Name (Last, First, Middle, Initial) of Payee
Prolist Inc.

Mailing Address
8341 Beechcraft Avenue

City Gaithersburg	State MD	Zip Code 20879-1509
----------------------	-------------	------------------------

Purpose of Expenditure Postcards	Category/ Type 004
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Name of Federal Candidate supported or Opposed by expenditure:
Mr. Patrick Meehan

Calendar Year-To-Date Per Election for Office Sought	28597.81
---	----------

Date
M M / D D / Y Y Y Y
1 0 / 3 0 / 2 0 1 0

Amount
281.36

Transaction ID: 37384457

Office Sought: House State: PA
 Senate District: 07
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

(a) SUBTOTAL of Itemized Independent Expenditures	310.26
(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
Signature

Date M M / D D / Y Y Y Y
0 3 / 0 3 / 2 0 1 1

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund	FEC IDENTIFICATION NUMBER C C00053553
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
Prolist Inc.

Date
M M / D D / Y Y Y Y
1 0 / 3 0 / 2 0 1 0

Mailing Address
8341 Beechcraft Avenue

Amount
281.36

City State Zip Code
Gaithersburg MD 20879-1509

Transaction ID: 37384458

Purpose of Expenditure Category/Type
Postcards 004

Office Sought: House State: PA
 Senate District: _____
 Presidential

Name of Federal Candidate supported or Opposed by expenditure:
Mr. Patrick Toomey

Check One: Support Oppose

Calendar Year-To-Date Per Election for Office Sought
2474805.88

Disbursement For: Primary General
 Other (specify) : _____
2010

Full Name (Last, First, Middle, Initial) of Payee
Prolist Inc.

Date
M M / D D / Y Y Y Y
1 0 / 3 0 / 2 0 1 0

Mailing Address
8341 Beechcraft Avenue

Amount
2565.57

City State Zip Code
Gaithersburg MD 20879-1509

Transaction ID: 37386526

Purpose of Expenditure Category/Type
Postage 004

Office Sought: House State: AZ
 Senate District: 05
 Presidential

Name of Federal Candidate supported or Opposed by expenditure:
Mr. David Schweikert

Check One: Support Oppose

Calendar Year-To-Date Per Election for Office Sought
103634.70

Disbursement For: Primary General
 Other (specify) : _____
2010

(a) SUBTOTAL of Itemized Independent Expenditures	2846.93
(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
Signature

Date M M / D D / Y Y Y Y
0 3 / 0 3 / 2 0 1 1

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund	FEC IDENTIFICATION NUMBER C C00053553
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
Prolist Inc.

Mailing Address
8341 Beechcraft Avenue

City Gaithersburg	State MD	Zip Code 20879-1509
----------------------	-------------	------------------------

Purpose of Expenditure Postage	Category/ Type 004
-----------------------------------	--------------------------

Name of Federal Candidate supported or Opposed by expenditure:
Mr. Jesse Kelly

Calendar Year-To-Date Per Election for Office Sought	75828.30
---	----------

Date
M M / D D / Y Y Y Y
1 0 / 3 0 / 2 0 1 0

Amount
21599.14

Transaction ID: 37386527

Office Sought: House State: AZ
 Senate District: 08
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

Full Name (Last, First, Middle, Initial) of Payee
Prolist Inc.

Mailing Address
8341 Beechcraft Avenue

City Gaithersburg	State MD	Zip Code 20879-1509
----------------------	-------------	------------------------

Purpose of Expenditure Postage	Category/ Type 004
-----------------------------------	--------------------------

Name of Federal Candidate supported or Opposed by expenditure:
Rep. Daniel Lungren

Calendar Year-To-Date Per Election for Office Sought	1219.13
---	---------

Date
M M / D D / Y Y Y Y
1 0 / 3 0 / 2 0 1 0

Amount
406.74

Transaction ID: 37386528

Office Sought: House State: CA
 Senate District: 03
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

(a) SUBTOTAL of Itemized Independent Expenditures	22005.88
(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
Signature

Date M M / D D / Y Y Y Y
0 3 / 0 3 / 2 0 1 1

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund	FEC IDENTIFICATION NUMBER C C00053553
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
Prolist Inc.

Mailing Address
8341 Beechcraft Avenue

City Gaithersburg	State MD	Zip Code 20879-1509
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Purpose of Expenditure Postage	Category/ Type 004
-----------------------------------	--------------------------

Name of Federal Candidate supported or Opposed by expenditure:
Mr. David Harmer

Calendar Year-To-Date Per Election for Office Sought	94460.52
---	----------

Date
M M / D D / Y Y Y Y
1 0 / 3 0 / 2 0 1 0

Amount
6247.75

Transaction ID: 37386529

Office Sought: House State: CA
 Senate District: 11
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

Full Name (Last, First, Middle, Initial) of Payee
Prolist Inc.

Mailing Address
8341 Beechcraft Avenue

City Gaithersburg	State MD	Zip Code 20879-1509
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Purpose of Expenditure Postage	Category/ Type 004
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Name of Federal Candidate supported or Opposed by expenditure:
Mr. James Vidak

Calendar Year-To-Date Per Election for Office Sought	157039.46
---	-----------

Date
M M / D D / Y Y Y Y
1 0 / 3 0 / 2 0 1 0

Amount
3582.01

Transaction ID: 37386530

Office Sought: House State: CA
 Senate District: 20
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

(a) SUBTOTAL of Itemized Independent Expenditures	9829.76
(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
Signature

Date M M / D D / Y Y Y Y
0 3 / 0 3 / 2 0 1 1

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund	FEC IDENTIFICATION NUMBER C C00053553
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
Prolist Inc.

Date
M M / D D / Y Y Y Y
1 0 / 3 0 / 2 0 1 0

Mailing Address
8341 Beechcraft Avenue

Amount
6654.49

City State Zip Code
Gaithersburg MD 20879-1509

Transaction ID: 37386531

Purpose of Expenditure Category/Type
Postage 004

Office Sought: House State: CA
 Senate District: _____
 Presidential

Name of Federal Candidate supported or Opposed by expenditure:
Ms. Carly Fiorina

Check One: Support Oppose

Calendar Year-To-Date Per Election for Office Sought
395420.80

Disbursement For: Primary General
 Other (specify) : _____
2010

Full Name (Last, First, Middle, Initial) of Payee
Prolist Inc.

Date
M M / D D / Y Y Y Y
1 0 / 3 0 / 2 0 1 0

Mailing Address
8341 Beechcraft Avenue

Amount
3582.01

City State Zip Code
Gaithersburg MD 20879-1509

Transaction ID: 37386532

Purpose of Expenditure Category/Type
Postage 004

Office Sought: House State: CA
 Senate District: _____
 Presidential

Name of Federal Candidate supported or Opposed by expenditure:
Ms. Carly Fiorina

Check One: Support Oppose

Calendar Year-To-Date Per Election for Office Sought
399002.81

Disbursement For: Primary General
 Other (specify) : _____
2010

(a) SUBTOTAL of Itemized Independent Expenditures	10236.50
(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
Signature

Date M M / D D / Y Y Y Y
0 3 / 0 3 / 2 0 1 1

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund	FEC IDENTIFICATION NUMBER C C00053553
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
Prolist Inc.

Mailing Address
8341 Beechcraft Avenue

City State Zip Code
Gaithersburg MD 20879-1509

Purpose of Expenditure Category/Type
Postage 004

Name of Federal Candidate supported or Opposed by expenditure:
Mr. Ryan Frazier

Calendar Year-To-Date Per Election for Office Sought
8008.17

Date
MM / DD / YYYY
10 / 30 / 2010

Amount
3203.58
Transaction ID: 37386533

Office Sought: House State: CO
 Senate District: 07
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

Full Name (Last, First, Middle, Initial) of Payee
Prolist Inc.

Mailing Address
8341 Beechcraft Avenue

City State Zip Code
Gaithersburg MD 20879-1509

Purpose of Expenditure Category/Type
Postage 004

Name of Federal Candidate supported or Opposed by expenditure:
Mr. Charles Djou

Calendar Year-To-Date Per Election for Office Sought
11611.48

Date
MM / DD / YYYY
10 / 30 / 2010

Amount
4730.71
Transaction ID: 37386534

Office Sought: House State: HI
 Senate District: 01
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

(a) SUBTOTAL of Itemized Independent Expenditures	7934.29
(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
Signature

Date MM / DD / YYYY
03 / 03 / 2011

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund		FEC IDENTIFICATION NUMBER C C00053553
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice		

Full Name (Last, First, Middle, Initial) of Payee
Prolist Inc.

Mailing Address
8341 Beechcraft Avenue

City State Zip Code
Gaithersburg MD 20879-1509

Purpose of Expenditure Category/Type
Postage 004

Name of Federal Candidate supported or Opposed by expenditure:
Mr. Joe Heck

Calendar Year-To-Date Per Election for Office Sought 2233.72

Date
M M / D D / Y Y Y Y
1 0 / 3 0 / 2 0 1 0

Amount
691.87

Transaction ID: 37386535

Office Sought: House State: NV
 Senate District: 03
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

Full Name (Last, First, Middle, Initial) of Payee
Prolist Inc.

Mailing Address
8341 Beechcraft Avenue

City State Zip Code
Gaithersburg MD 20879-1509

Purpose of Expenditure Category/Type
Postage 004

Name of Federal Candidate supported or Opposed by expenditure:
Jaime Herrera

Calendar Year-To-Date Per Election for Office Sought 148272.84

Date
M M / D D / Y Y Y Y
1 0 / 3 0 / 2 0 1 0

Amount
3530.55

Transaction ID: 37386537

Office Sought: House State: WA
 Senate District: 03
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

(a) SUBTOTAL of Itemized Independent Expenditures	4222.42
(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
Signature

Date M M / D D / Y Y Y Y
0 3 / 0 3 / 2 0 1 1

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund		FEC IDENTIFICATION NUMBER C C00053553
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice		

Full Name (Last, First, Middle, Initial) of Payee
Prolist Inc.

Mailing Address
8341 Beechcraft Avenue

City Gaithersburg	State MD	Zip Code 20879-1509
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Purpose of Expenditure Postage	Category/ Type 004
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Name of Federal Candidate supported or Opposed by expenditure:
Mr. Dino Rossi

Calendar Year-To-Date Per Election for Office Sought	846473.46
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Date
M M / D D / Y Y Y Y
1 0 / 3 0 / 2 0 1 0

Amount
3530.55

Transaction ID: 37386538

Office Sought: House State: WA
 Senate District: _____
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

Full Name (Last, First, Middle, Initial) of Payee
Prolist Inc.

Mailing Address
8341 Beechcraft Avenue

City Gaithersburg	State MD	Zip Code 20879-1509
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Purpose of Expenditure Postcards	Category/ Type 004
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Name of Federal Candidate supported or Opposed by expenditure:
Mr. David Schweikert

Calendar Year-To-Date Per Election for Office Sought	103803.32
---	-----------

Date
M M / D D / Y Y Y Y
1 0 / 3 0 / 2 0 1 0

Amount
168.62

Transaction ID: 37386540

Office Sought: House State: AZ
 Senate District: 05
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

(a) SUBTOTAL of Itemized Independent Expenditures	3699.17
(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
Signature

Date M M / D D / Y Y Y Y
0 3 / 0 3 / 2 0 1 1

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund	FEC IDENTIFICATION NUMBER C C00053553
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
Prolist Inc.

Mailing Address
8341 Beechcraft Avenue

City Gaithersburg	State MD	Zip Code 20879-1509
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Purpose of Expenditure Postcards	Category/ Type	004
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Name of Federal Candidate supported or Opposed by expenditure:
Mr. Jesse Kelly

Calendar Year-To-Date Per Election for Office Sought	77248.70
---	----------

Date
M M / D D / Y Y Y Y
1 0 / 3 0 / 2 0 1 0

Amount
1420.40

Transaction ID: 37386541

Office Sought: House State: AZ
 Senate District: 08
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
 2010

Full Name (Last, First, Middle, Initial) of Payee
Prolist Inc.

Mailing Address
8341 Beechcraft Avenue

City Gaithersburg	State MD	Zip Code 20879-1509
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Purpose of Expenditure Postcards	Category/ Type	004
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Name of Federal Candidate supported or Opposed by expenditure:
Rep. Daniel Lungren

Calendar Year-To-Date Per Election for Office Sought	1244.40
---	---------

Date
M M / D D / Y Y Y Y
1 0 / 3 0 / 2 0 1 0

Amount
25.27

Transaction ID: 37386542

Office Sought: House State: CA
 Senate District: 03
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
 2010

(a) SUBTOTAL of Itemized Independent Expenditures	1445.67
(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 _____ Date M M / D D / Y Y Y Y
 Signature 0 3 / 0 3 / 2 0 1 1

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund	FEC IDENTIFICATION NUMBER C C00053553
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
Prolist Inc.

Mailing Address
8341 Beechcraft Avenue

City Gaithersburg	State MD	Zip Code 20879-1509
----------------------	-------------	------------------------

Purpose of Expenditure Postcards	Category/ Type 004
-------------------------------------	--------------------------

Name of Federal Candidate supported or Opposed by expenditure:
Mr. David Harmer

Calendar Year-To-Date Per Election for Office Sought	94871.33
---	----------

Date
M M / D D / Y Y Y Y
1 0 / 3 0 / 2 0 1 0

Amount
410.81

Transaction ID: 37386543

Office Sought: House State: CA
 Senate District: 11
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

Full Name (Last, First, Middle, Initial) of Payee
Prolist Inc.

Mailing Address
8341 Beechcraft Avenue

City Gaithersburg	State MD	Zip Code 20879-1509
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Purpose of Expenditure Postcards	Category/ Type 004
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Name of Federal Candidate supported or Opposed by expenditure:
Mr. James Vidak

Calendar Year-To-Date Per Election for Office Sought	157274.02
---	-----------

Date
M M / D D / Y Y Y Y
1 0 / 3 0 / 2 0 1 0

Amount
234.56

Transaction ID: 37386544

Office Sought: House State: CA
 Senate District: 20
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

(a) SUBTOTAL of Itemized Independent Expenditures	645.37
(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
Signature

Date M M / D D / Y Y Y Y
0 3 / 0 3 / 2 0 1 1

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund	FEC IDENTIFICATION NUMBER C C00053553
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
Prolist Inc.

Mailing Address
8341 Beechcraft Avenue

City Gaithersburg	State MD	Zip Code 20879-1509
----------------------	-------------	------------------------

Purpose of Expenditure Postcards	Category/ Type 004
-------------------------------------	--------------------------

Name of Federal Candidate supported or Opposed by expenditure:
Ms. Carly Fiorina

Calendar Year-To-Date Per Election for Office Sought
399438.89

Date
M M / D D / Y Y Y Y
1 0 / 3 0 / 2 0 1 0

Amount
436.08

Transaction ID: 37386545

Office Sought: House State: CA
 Senate District: _____
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

Full Name (Last, First, Middle, Initial) of Payee
Prolist Inc.

Mailing Address
8341 Beechcraft Avenue

City Gaithersburg	State MD	Zip Code 20879-1509
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Purpose of Expenditure Postcards	Category/ Type 004
-------------------------------------	--------------------------

Name of Federal Candidate supported or Opposed by expenditure:
Ms. Carly Fiorina

Calendar Year-To-Date Per Election for Office Sought
399673.45

Date
M M / D D / Y Y Y Y
1 0 / 3 0 / 2 0 1 0

Amount
234.56

Transaction ID: 37386546

Office Sought: House State: CA
 Senate District: _____
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

(a) SUBTOTAL of Itemized Independent Expenditures	670.64
(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
Signature

Date M M / D D / Y Y Y Y
0 3 / 0 3 / 2 0 1 1

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund	FEC IDENTIFICATION NUMBER C C00053553
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
Prolist Inc.

Mailing Address
8341 Beechcraft Avenue

City Gaithersburg	State MD	Zip Code 20879-1509
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Purpose of Expenditure Postcards	Category/ Type 004
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Name of Federal Candidate supported or Opposed by expenditure:
Mr. Ryan Frazier

Calendar Year-To-Date Per Election for Office Sought	8217.80
---	---------

Date
M M / D D / Y Y Y Y
1 0 / 3 0 / 2 0 1 0

Amount
209.63

Transaction ID: 37386547

Office Sought: House State: CO
 Senate District: 07
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

Full Name (Last, First, Middle, Initial) of Payee
Prolist Inc.

Mailing Address
8341 Beechcraft Avenue

City Gaithersburg	State MD	Zip Code 20879-1509
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Purpose of Expenditure Postcards	Category/ Type 004
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Name of Federal Candidate supported or Opposed by expenditure:
Mr. Charles Djou

Calendar Year-To-Date Per Election for Office Sought	11922.78
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Date
M M / D D / Y Y Y Y
1 0 / 3 0 / 2 0 1 0

Amount
311.30

Transaction ID: 37386548

Office Sought: House State: HI
 Senate District: 01
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

(a) SUBTOTAL of Itemized Independent Expenditures	520.93
(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
Signature

Date M M / D D / Y Y Y Y
0 3 / 0 3 / 2 0 1 1

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund	FEC IDENTIFICATION NUMBER C C00053553
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
Prolist Inc.

Mailing Address
8341 Beechcraft Avenue

City Gaithersburg	State MD	Zip Code 20879-1509
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Purpose of Expenditure Postcards	Category/ Type	004
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Name of Federal Candidate supported or Opposed by expenditure:
Mr. Joe Heck

Calendar Year-To-Date Per Election for Office Sought	2276.50
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Date
M M / D D / Y Y Y Y
1 0 / 3 0 / 2 0 1 0

Amount
42.78

Transaction ID: 37386549

Office Sought: House State: NV
 Senate District: 03
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

Full Name (Last, First, Middle, Initial) of Payee
Prolist Inc.

Mailing Address
8341 Beechcraft Avenue

City Gaithersburg	State MD	Zip Code 20879-1509
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Purpose of Expenditure Postcards	Category/ Type	004
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Name of Federal Candidate supported or Opposed by expenditure:
Jaime Herrera

Calendar Year-To-Date Per Election for Office Sought	148504.21
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Date
M M / D D / Y Y Y Y
1 0 / 3 0 / 2 0 1 0

Amount
231.37

Transaction ID: 37386551

Office Sought: House State: WA
 Senate District: 03
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

(a) SUBTOTAL of Itemized Independent Expenditures	274.15
(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
Signature

Date M M / D D / Y Y Y Y
0 3 / 0 3 / 2 0 1 1

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund	FEC IDENTIFICATION NUMBER C C00053553
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
Prolist Inc.

Mailing Address
8341 Beechcraft Avenue

City Gaithersburg	State MD	Zip Code 20879-1509
----------------------	-------------	------------------------

Purpose of Expenditure Postcards	Category/ Type 004
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Name of Federal Candidate supported or Opposed by expenditure:
Mr. Dino Rossi

Calendar Year-To-Date Per Election for Office Sought	846704.83
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Date
M M / D D / Y Y Y Y
1 0 / 3 0 / 2 0 1 0

Amount
231.37

Transaction ID: 37386552

Office Sought: House State: WA
 Senate District: _____
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

Full Name (Last, First, Middle, Initial) of Payee
Prolist Inc.

Mailing Address
8341 Beechcraft Avenue

City Gaithersburg	State MD	Zip Code 20879-1509
----------------------	-------------	------------------------

Purpose of Expenditure Postage	Category/ Type 004
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Name of Federal Candidate supported or Opposed by expenditure:
Mr. Joseph Sestak

Calendar Year-To-Date Per Election for Office Sought	2556607.02
---	------------

Date
M M / D D / Y Y Y Y
1 0 / 3 0 / 2 0 1 0

Amount
81801.14

Transaction ID: 37392838

Office Sought: House State: PA
 Senate District: _____
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

(a) SUBTOTAL of Itemized Independent Expenditures	82032.51
(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
Signature

Date M M / D D / Y Y Y Y
0 3 / 0 3 / 2 0 1 1

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund	FEC IDENTIFICATION NUMBER C C00053553
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
Prolist Inc.

Mailing Address
8341 Beechcraft Avenue

City Gaithersburg	State MD	Zip Code 20879-1509
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Purpose of Expenditure Postage	Category/ Type 004
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Name of Federal Candidate supported or Opposed by expenditure:
Mr. Patrick Toomey

Calendar Year-To-Date Per Election for Office Sought
2638408.16

Date
M M / D D / Y Y Y Y
1 0 / 3 0 / 2 0 1 0

Amount
81801.14

Transaction ID: 37392840

Office Sought: House State: PA
 Senate District: _____
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

Full Name (Last, First, Middle, Initial) of Payee
Prolist Inc.

Mailing Address
8341 Beechcraft Avenue

City Gaithersburg	State MD	Zip Code 20879-1509
----------------------	-------------	------------------------

Purpose of Expenditure Postcards	Category/ Type 004
-------------------------------------	--------------------------

Name of Federal Candidate supported or Opposed by expenditure:
Mr. Joseph Sestak

Calendar Year-To-Date Per Election for Office Sought
2647605.92

Date
M M / D D / Y Y Y Y
1 0 / 3 0 / 2 0 1 0

Amount
9197.76

Transaction ID: 37392842

Office Sought: House State: PA
 Senate District: _____
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

(a) SUBTOTAL of Itemized Independent Expenditures	90998.90
(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
Signature

Date M M / D D / Y Y Y Y
0 3 / 0 3 / 2 0 1 1

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund	FEC IDENTIFICATION NUMBER ▼ C C00053553
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
Prolist Inc.

Mailing Address
8341 Beechcraft Avenue

City Gaithersburg	State MD	Zip Code 20879-1509
Purpose of Expenditure Postcards		Category/ Type 004

Name of Federal Candidate supported or Opposed by expenditure:
Mr. Patrick Toomey

Calendar Year-To-Date Per Election for Office Sought	2656803.69
---	--

Date

M M 1 0	/	D D 3 0	/	Y Y Y Y 2 0 1 0
------------	---	------------	---	--------------------

Amount
9197.77

Transaction ID: 37392843

Office Sought: House State: PA
 Senate District: _____
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
 2010

Full Name (Last, First, Middle, Initial) of Payee
Prolist Inc.

Mailing Address
8341 Beechcraft Avenue

City Gaithersburg	State MD	Zip Code 20879-1509
Purpose of Expenditure Postage		Category/ Type 004

Name of Federal Candidate supported or Opposed by expenditure:
Sen. Barbara Boxer

Calendar Year-To-Date Per Election for Office Sought	471074.50
---	---

Date

M M 1 0	/	D D 3 0	/	Y Y Y Y 2 0 1 0
------------	---	------------	---	--------------------

Amount
71401.05

Transaction ID: 37392863

Office Sought: House State: CA
 Senate District: _____
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
 2010

(a) SUBTOTAL of Itemized Independent Expenditures	80598.82
(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 _____ Date

M M 0 3	/	D D 0 3	/	Y Y Y Y 2 0 1 1
------------	---	------------	---	--------------------

 Signature

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund	FEC IDENTIFICATION NUMBER C C00053553
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
Prolist Inc.

Mailing Address
8341 Beechcraft Avenue

City Gaithersburg	State MD	Zip Code 20879-1509
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Purpose of Expenditure Postcards	Category/ Type 004
-------------------------------------	--------------------------

Name of Federal Candidate supported or Opposed by expenditure:
Sen. Barbara Boxer

Calendar Year-To-Date Per Election for Office Sought	474884.50
---	-----------

Date
M M / D D / Y Y Y Y
1 0 / 3 0 / 2 0 1 0

Amount
3810.00

Transaction ID: 37392867

Office Sought: House State: CA
 Senate District: _____
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

Full Name (Last, First, Middle, Initial) of Payee
Prolist Inc.

Mailing Address
8341 Beechcraft Avenue

City Gaithersburg	State MD	Zip Code 20879-1509
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Purpose of Expenditure Phone Data Matching	Category/ Type 004
---	--------------------------

Name of Federal Candidate supported or Opposed by expenditure:
Ms. Carly Fiorina

Calendar Year-To-Date Per Election for Office Sought	484529.07
---	-----------

Date
M M / D D / Y Y Y Y
1 1 / 0 4 / 2 0 1 0

Amount
2094.28

Transaction ID: 37514171

Office Sought: House State: CA
 Senate District: _____
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

(a) SUBTOTAL of Itemized Independent Expenditures	5904.28
(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 _____ Date M M / D D / Y Y Y Y
Signature 0 3 / 0 3 / 2 0 1 1

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund	FEC IDENTIFICATION NUMBER C C00053553
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
Prolist Inc.

Mailing Address
8341 Beechcraft Avenue

City Gaithersburg	State MD	Zip Code 20879-1509
----------------------	-------------	------------------------

Purpose of Expenditure Phone Data Matching	Category/ Type 004
---	--------------------------

Name of Federal Candidate supported or Opposed by expenditure:
Sen. Barbara Boxer

Calendar Year-To-Date Per Election for Office Sought	486623.34
---	-----------

Date
M M / D D / Y Y Y Y
1 1 / 0 4 / 2 0 1 0

Amount
2094.27

Transaction ID: 37514172

Office Sought: House State: CA
 Senate District: _____
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

Full Name (Last, First, Middle, Initial) of Payee
Prolist Inc.

Mailing Address
8341 Beechcraft Avenue

City Gaithersburg	State MD	Zip Code 20879-1509
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Purpose of Expenditure Postage	Category/ Type 004
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Name of Federal Candidate supported or Opposed by expenditure:
Sen. Charles E. Grassley

Calendar Year-To-Date Per Election for Office Sought	96220.90
---	----------

Date
M M / D D / Y Y Y Y
1 1 / 1 7 / 2 0 1 0

Amount
350.77

Transaction ID: 37681255

Office Sought: House State: IA
 Senate District: _____
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

(a) SUBTOTAL of Itemized Independent Expenditures	2445.04
(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
Signature

Date M M / D D / Y Y Y Y
0 3 / 0 3 / 2 0 1 1

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

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund		FEC IDENTIFICATION NUMBER C C00053553
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice		

Full Name (Last, First, Middle, Initial) of Payee
Prolist Inc.

Mailing Address
8341 Beechcraft Avenue

City Gaithersburg	State MD	Zip Code 20879-1509
----------------------	-------------	------------------------

Purpose of Expenditure Postcards	Category/ Type 004
-------------------------------------	--------------------------

Name of Federal Candidate supported or Opposed by expenditure:
Sen. Charles E. Grassley

Calendar Year-To-Date Per Election for Office Sought	96355.61
---	----------

Date
M M / D D / Y Y Y Y
1 1 / 1 7 / 2 0 1 0

Amount
134.71

Transaction ID: 37681259

Office Sought: House State: IA
 Senate District: _____
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

Full Name (Last, First, Middle, Initial) of Payee
Connection Strategy, LLC

Mailing Address
P.O. Box 2192

City Arlington	State VA	Zip Code 22202
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Purpose of Expenditure Phone Bank	Category/ Type 004
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Name of Federal Candidate supported or Opposed by expenditure:
Mr. Dino Rossi

Calendar Year-To-Date Per Election for Office Sought	592020.89
---	-----------

Date
M M / D D / Y Y Y Y
1 0 / 2 5 / 2 0 1 0

Amount
4919.48

Transaction ID: 37352364

Office Sought: House State: WA
 Senate District: _____
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

[MEMO ITEM]
Phone Bank

(a) SUBTOTAL of Itemized Independent Expenditures	134.71
(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
Signature

Date M M / D D / Y Y Y Y
0 3 / 0 3 / 2 0 1 1

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund	FEC IDENTIFICATION NUMBER C C00053553
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
Connection Strategy, LLC

Mailing Address
P.O. Box 2192

City Arlington	State VA	Zip Code 22202
Purpose of Expenditure Phone Bank	Category/ Type	004

Date
M M / D D / Y Y Y Y
1 0 / 2 5 / 2 0 1 0

Amount
4919.47

Transaction ID: 37352365

Office Sought: House State: WA
 Senate District: _____
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010
[MEMO ITEM]

Phone Bank

Name of Federal Candidate supported or Opposed by expenditure:
Sen. Patty Murray

Calendar Year-To-Date Per Election
for Office Sought

596940.36

Full Name (Last, First, Middle, Initial) of Payee
Connection Strategy, LLC

Mailing Address
P.O. Box 2192

City Arlington	State VA	Zip Code 22202
Purpose of Expenditure Phone Bank	Category/ Type	004

Date
M M / D D / Y Y Y Y
1 0 / 2 5 / 2 0 1 0

Amount
5841.17

Transaction ID: 37352366

Office Sought: House State: CO
 Senate District: _____
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010
[MEMO ITEM]

Phone Bank

Name of Federal Candidate supported or Opposed by expenditure:
Mr. Kenneth Buck

Calendar Year-To-Date Per Election
for Office Sought

1066319.65

(a) SUBTOTAL of Itemized Independent Expenditures	0.00
(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.

Mary Rose Adkins
Signature

Date M M / D D / Y Y Y Y
0 3 / 0 3 / 2 0 1 1

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund		FEC IDENTIFICATION NUMBER C C00053553
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice		

Full Name (Last, First, Middle, Initial) of Payee
Connection Strategy, LLC

Date
M M / D D / Y Y Y Y
1 0 / 2 5 / 2 0 1 0

Mailing Address
P.O. Box 2192

Amount
11700.82

City State Zip Code
Arlington VA 22202

Transaction ID: 37352367

Purpose of Expenditure
Phone Bank

Category/Type
004

Office Sought: House State: PA
 Senate District: _____
 Presidential

Name of Federal Candidate supported or Opposed by expenditure:
Mr. Patrick Toomey

Check One: Support Oppose

Calendar Year-To-Date Per Election for Office Sought
1980984.12

Disbursement For: Primary General
 Other (specify) : _____
2010
[MEMO ITEM]

Full Name (Last, First, Middle, Initial) of Payee
Connection Strategy, LLC

Date
M M / D D / Y Y Y Y
1 0 / 2 5 / 2 0 1 0

Mailing Address
P.O. Box 2192

Amount
11700.81

City State Zip Code
Arlington VA 22202

Transaction ID: 37352368

Purpose of Expenditure
Phone Bank

Category/Type
004

Office Sought: House State: PA
 Senate District: _____
 Presidential

Name of Federal Candidate supported or Opposed by expenditure:
Mr. Joseph Sestak

Check One: Support Oppose

Calendar Year-To-Date Per Election for Office Sought
1992684.93

Disbursement For: Primary General
 Other (specify) : _____
2010
[MEMO ITEM]

(a) SUBTOTAL of Itemized Independent Expenditures	0.00
(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.

Mary Rose Adkins
Signature

Date M M / D D / Y Y Y Y
0 3 / 0 3 / 2 0 1 1

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund		FEC IDENTIFICATION NUMBER C C00053553
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice		

Full Name (Last, First, Middle, Initial) of Payee
Connection Strategy, LLC

Date
M M / D D / Y Y Y Y
1 0 / 2 5 / 2 0 1 0

Mailing Address
P.O. Box 2192

Amount
3839.28

City State Zip Code
Arlington VA 22202

Transaction ID: 37352369

Purpose of Expenditure
Phone Bank

Category/Type 004

Office Sought: House State: CA
 Senate District: _____
 Presidential

Name of Federal Candidate supported or Opposed by expenditure:
Ms. Carly Fiorina

Check One: Support Oppose

Calendar Year-To-Date Per Election for Office Sought
283283.00

Disbursement For: Primary General
 Other (specify) : _____
2010
[MEMO ITEM]
Phone Bank

Full Name (Last, First, Middle, Initial) of Payee
Connection Strategy, LLC

Date
M M / D D / Y Y Y Y
1 0 / 2 5 / 2 0 1 0

Mailing Address
P.O. Box 2192

Amount
3839.27

City State Zip Code
Arlington VA 22202

Transaction ID: 37352370

Purpose of Expenditure
Phone Bank

Category/Type 004

Office Sought: House State: CA
 Senate District: _____
 Presidential

Name of Federal Candidate supported or Opposed by expenditure:
Sen. Barbara Boxer

Check One: Support Oppose

Calendar Year-To-Date Per Election for Office Sought
287122.27

Disbursement For: Primary General
 Other (specify) : _____
2010
[MEMO ITEM]
Phone Bank

(a) SUBTOTAL of Itemized Independent Expenditures	0.00
(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.

Mary Rose Adkins
Signature

Date M M / D D / Y Y Y Y
0 3 / 0 3 / 2 0 1 1

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund	FEC IDENTIFICATION NUMBER C C00053553
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
Connection Strategy, LLC

Mailing Address
P.O. Box 2192

City Arlington	State VA	Zip Code 22202
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Purpose of Expenditure Phone Bank	Category/ Type 004
--------------------------------------	--------------------------

Name of Federal Candidate supported or Opposed by expenditure:
Mr. Dino Rossi

Calendar Year-To-Date Per Election for Office Sought	602973.46
---	-----------

Date
M M / D D / Y Y Y Y
1 0 / 2 8 / 2 0 1 0

Amount
4919.48

Transaction ID: 37376231

Office Sought: House State: WA
 Senate District: _____
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

Full Name (Last, First, Middle, Initial) of Payee
Connection Strategy, LLC

Mailing Address
P.O. Box 2192

City Arlington	State VA	Zip Code 22202
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Purpose of Expenditure Phone Bank	Category/ Type 004
--------------------------------------	--------------------------

Name of Federal Candidate supported or Opposed by expenditure:
Sen. Patty Murray

Calendar Year-To-Date Per Election for Office Sought	607892.93
---	-----------

Date
M M / D D / Y Y Y Y
1 0 / 2 8 / 2 0 1 0

Amount
4919.47

Transaction ID: 37376232

Office Sought: House State: WA
 Senate District: _____
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

(a) SUBTOTAL of Itemized Independent Expenditures	9838.95
(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
Signature

Date M M / D D / Y Y Y Y
0 3 / 0 3 / 2 0 1 1

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund	FEC IDENTIFICATION NUMBER ▼ C C00053553
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
Connection Strategy, LLC

Mailing Address
P.O. Box 2192

City Arlington	State VA	Zip Code 22202
Purpose of Expenditure Phone Bank		Category/ Type 004

Name of Federal Candidate supported or Opposed by expenditure:
Mr. Kenneth Buck

Calendar Year-To-Date Per Election for Office Sought	1226248.32
---	--

Date
M 1 0 / D 2 8 / Y 2 0 1 0

Amount
5841.17

Transaction ID: 37376233

Office Sought: House State: CO
 Senate District: _____
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
 2010

Full Name (Last, First, Middle, Initial) of Payee
Connection Strategy, LLC

Mailing Address
P.O. Box 2192

City Arlington	State VA	Zip Code 22202
Purpose of Expenditure Phone Bank		Category/ Type 004

Name of Federal Candidate supported or Opposed by expenditure:
Mr. Patrick Toomey

Calendar Year-To-Date Per Election for Office Sought	2433039.38
---	--

Date
M 1 0 / D 2 8 / Y 2 0 1 0

Amount
11700.82

Transaction ID: 37376234

Office Sought: House State: PA
 Senate District: _____
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
 2010

(a) SUBTOTAL of Itemized Independent Expenditures	17541.99
(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 _____ Date M 0 3 / D 0 3 / Y 2 0 1 1
Signature

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund	FEC IDENTIFICATION NUMBER C C00053553
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
Connection Strategy, LLC

Mailing Address
P.O. Box 2192

City Arlington	State VA	Zip Code 22202
-------------------	-------------	-------------------

Purpose of Expenditure Phone Bank	Category/ Type 004
--------------------------------------	--------------------------

Name of Federal Candidate supported or Opposed by expenditure:
Mr. Joseph Sestak

Calendar Year-To-Date Per Election for Office Sought
2444740.19

Date
M M / D D / Y Y Y Y
1 0 / 2 8 / 2 0 1 0

Amount
11700.81

Transaction ID: 37376235

Office Sought: House State: PA
 Senate District: _____
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

Full Name (Last, First, Middle, Initial) of Payee
Connection Strategy, LLC

Mailing Address
P.O. Box 2192

City Arlington	State VA	Zip Code 22202
-------------------	-------------	-------------------

Purpose of Expenditure Phone Bank	Category/ Type 004
--------------------------------------	--------------------------

Name of Federal Candidate supported or Opposed by expenditure:
Ms. Carly Fiorina

Calendar Year-To-Date Per Election for Office Sought
374390.24

Date
M M / D D / Y Y Y Y
1 0 / 2 8 / 2 0 1 0

Amount
3839.28

Transaction ID: 37376236

Office Sought: House State: CA
 Senate District: _____
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

(a) SUBTOTAL of Itemized Independent Expenditures	15540.09
(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
Signature

Date M M / D D / Y Y Y Y
0 3 / 0 3 / 2 0 1 1

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund		FEC IDENTIFICATION NUMBER C C00053553
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice		

Full Name (Last, First, Middle, Initial) of Payee
Connection Strategy, LLC

Mailing Address
P.O. Box 2192

City: Arlington State: VA Zip Code: 22202

Purpose of Expenditure: Phone Bank Category/Type: 004

Name of Federal Candidate supported or Opposed by expenditure:
Sen. Barbara Boxer

Calendar Year-To-Date Per Election for Office Sought: 378229.51

Date: 10 / 28 / 2010

Amount: 3839.27

Transaction ID: 37376237

Office Sought: House State: CA
 Senate District: _____
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____ 2010

Full Name (Last, First, Middle, Initial) of Payee
Connection Strategy, LLC

Mailing Address
P.O. Box 2192

City: Arlington State: VA Zip Code: 22202

Purpose of Expenditure: Phone Bank Category/Type: 004

Name of Federal Candidate supported or Opposed by expenditure:
Ms. Carly Fiorina

Calendar Year-To-Date Per Election for Office Sought: 478659.65

Date: 11 / 04 / 2010

Amount: 3775.15

Transaction ID: 37514177

Office Sought: House State: CA
 Senate District: _____
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____ 2010

(a) SUBTOTAL of Itemized Independent Expenditures	7614.42
(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
Signature

Date: 03 / 03 / 2011

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund	FEC IDENTIFICATION NUMBER C C00053553
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
Connection Strategy, LLC

Date
M M / D D / Y Y Y Y
1 1 / 0 4 / 2 0 1 0

Mailing Address
P.O. Box 2192

Amount
3775.14

City State Zip Code
Arlington VA 22202

Transaction ID: 37514179

Purpose of Expenditure
Phone Bank

Category/Type 004

Office Sought: House State: CA
 Senate District: _____
 Presidential

Name of Federal Candidate supported or Opposed by expenditure:
Sen. Barbara Boxer

Check One: Support Oppose

Calendar Year-To-Date Per Election for Office Sought
482434.79

Disbursement For: Primary General
 Other (specify) : _____
2010

Full Name (Last, First, Middle, Initial) of Payee
Master Print, Inc.

Date
M M / D D / Y Y Y Y
1 0 / 1 4 / 2 0 1 0

Mailing Address
P.O. Box 1467

Amount
48.53

City State Zip Code
Newington VA 22122

Transaction ID: 37176912

Purpose of Expenditure
Print 4 Color Cards

Category/Type 004

Office Sought: House State: CA
 Senate District: 03
 Presidential

Name of Federal Candidate supported or Opposed by expenditure:
Rep. Daniel Lungren

Check One: Support Oppose

Calendar Year-To-Date Per Election for Office Sought
48.53

Disbursement For: Primary General
 Other (specify) : _____
2010

[MEMO ITEM]
Print 4 Color Cards

(a) SUBTOTAL of Itemized Independent Expenditures	3775.14
(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
Signature

Date M M / D D / Y Y Y Y
0 3 / 0 3 / 2 0 1 1

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund	FEC IDENTIFICATION NUMBER C C00053553
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
Master Print, Inc.

Date
M M / D D / Y Y Y Y
1 0 / 1 4 / 2 0 1 0

Mailing Address
P.O. Box 1467

Amount
785.46

City State Zip Code
Newington VA 22122

Transaction ID: 37176913
Office Sought: House State: CA
 Senate District: 11
 Presidential

Purpose of Expenditure Category/Type
Print 4 Color Cards 004

Name of Federal Candidate supported or Opposed by expenditure:
Mr. David Harmer

Check One: Support Oppose

Calendar Year-To-Date Per Election for Office Sought
80485.46

Disbursement For: Primary General
 Other (specify) : _____
2010

[MEMO ITEM]
Print 4 Color Cards

Full Name (Last, First, Middle, Initial) of Payee
Master Print, Inc.

Date
M M / D D / Y Y Y Y
1 0 / 1 4 / 2 0 1 0

Mailing Address
P.O. Box 1467

Amount
833.99

City State Zip Code
Newington VA 22122

Transaction ID: 37176914
Office Sought: House State: CA
 Senate District: _____
 Presidential

Purpose of Expenditure Category/Type
Print 4 Color Cards 004

Name of Federal Candidate supported or Opposed by expenditure:
Ms. Carly Fiorina

Check One: Support Oppose

Calendar Year-To-Date Per Election for Office Sought
240392.36

Disbursement For: Primary General
 Other (specify) : _____
2010

[MEMO ITEM]
Print 4 Color Cards

(a) SUBTOTAL of Itemized Independent Expenditures	0.00
(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.

Mary Rose Adkins
Signature

Date M M / D D / Y Y Y Y
0 3 / 0 3 / 2 0 1 1

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund	FEC IDENTIFICATION NUMBER C C00053553
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
Master Print, Inc.

Mailing Address
P.O. Box 1467

City Newington	State VA	Zip Code 22122
-------------------	-------------	-------------------

Purpose of Expenditure Print 4 Color Cards	Category/ Type 004
---	--------------------------

Name of Federal Candidate supported or Opposed by expenditure:
Mr. Charles Djou

Date
M M / D D / Y Y Y Y
1 0 / 1 4 / 2 0 1 0

Amount
597.97

Transaction ID: 37176915

Office Sought: House State: HI
 Senate District: 01
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

[MEMO ITEM]
Print 4 Color Cards

Calendar Year-To-Date Per Election
for Office Sought
597.97

Full Name (Last, First, Middle, Initial) of Payee
Master Print, Inc.

Mailing Address
P.O. Box 1467

City Newington	State VA	Zip Code 22122
-------------------	-------------	-------------------

Purpose of Expenditure Print 4 Color Cards	Category/ Type 004
---	--------------------------

Name of Federal Candidate supported or Opposed by expenditure:
Mr. Joe Heck

Date
M M / D D / Y Y Y Y
1 0 / 1 4 / 2 0 1 0

Amount
82.17

Transaction ID: 37176916

Office Sought: House State: NV
 Senate District: 03
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

[MEMO ITEM]
Print 4 Color Cards

Calendar Year-To-Date Per Election
for Office Sought
82.17

(a) SUBTOTAL of Itemized Independent Expenditures	0.00
(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.

Mary Rose Adkins
Signature

Date M M / D D / Y Y Y Y
0 3 / 0 3 / 2 0 1 1

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund	FEC IDENTIFICATION NUMBER C C00053553
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
Master Print, Inc.

Date
M M / D D / Y Y Y Y
1 0 / 1 5 / 2 0 1 0

Mailing Address
P.O. Box 1467

Amount
2259.51

City State Zip Code
Newington VA 22122

Transaction ID: 37179058

Purpose of Expenditure
Print 4 Color Cards

Category/Type 004

Office Sought: House State: CA
 Senate District: _____
 Presidential

Name of Federal Candidate supported or Opposed by expenditure:
Ms. Carly Fiorina

Check One: Support Oppose

Calendar Year-To-Date Per Election for Office Sought
249742.44

Disbursement For: Primary General
 Other (specify) : _____
2010
[MEMO ITEM]
Print 4 Color Cards

Full Name (Last, First, Middle, Initial) of Payee
Master Print, Inc.

Date
M M / D D / Y Y Y Y
1 0 / 1 5 / 2 0 1 0

Mailing Address
P.O. Box 1467

Amount
14446.42

City State Zip Code
Newington VA 22122

Transaction ID: 37179060

Purpose of Expenditure
Print 4 Color Cards

Category/Type 004

Office Sought: House State: MO
 Senate District: _____
 Presidential

Name of Federal Candidate supported or Opposed by expenditure:
Mr. Roy Blunt

Check One: Support Oppose

Calendar Year-To-Date Per Election for Office Sought
2288727.81

Disbursement For: Primary General
 Other (specify) : _____
2010
[MEMO ITEM]
Print 4 Color Cards

(a) SUBTOTAL of Itemized Independent Expenditures	0.00
(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.

Mary Rose Adkins
Signature

Date M M / D D / Y Y Y Y
0 3 / 0 3 / 2 0 1 1

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund		FEC IDENTIFICATION NUMBER C C00053553
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice		

Full Name (Last, First, Middle, Initial) of Payee
Master Print, Inc.

Date
M M / D D / Y Y Y Y
1 0 / 1 5 / 2 0 1 0

Mailing Address
P.O. Box 1467

Amount
14948.10

City State Zip Code
Newington VA 22122

Transaction ID: 37179061

Purpose of Expenditure
Print 4 Color Cards

Category/Type
004

Office Sought: House State: WI
 Senate District: _____
 Presidential

Name of Federal Candidate supported or Opposed by expenditure:
Mr. Ronald Johnson

Check One: Support Oppose

Calendar Year-To-Date Per Election
for Office Sought 636176.62

Disbursement For: Primary General
 Other (specify) : _____
2010

[MEMO ITEM]
Print 4 Color Cards

Full Name (Last, First, Middle, Initial) of Payee
Master Print, Inc.

Date
M M / D D / Y Y Y Y
1 0 / 1 5 / 2 0 1 0

Mailing Address
P.O. Box 1467

Amount
384.45

City State Zip Code
Newington VA 22122

Transaction ID: 37179077

Purpose of Expenditure
Flyers

Category/Type
004

Office Sought: House State: KS
 Senate District: 03
 Presidential

Name of Federal Candidate supported or Opposed by expenditure:
Mr. Kevin Yoder

Check One: Support Oppose

Calendar Year-To-Date Per Election
for Office Sought 7749.29

Disbursement For: Primary General
 Other (specify) : _____
2010

(a) SUBTOTAL of Itemized Independent Expenditures	384.45
(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
Signature

Date M M / D D / Y Y Y Y
0 3 / 0 3 / 2 0 1 1

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund	FEC IDENTIFICATION NUMBER ▼ C C00053553
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
Master Print, Inc.

Mailing Address
P.O. Box 1467

City	State	Zip Code
Newington	VA	22122

Purpose of Expenditure Flyers	Category/ Type
	004

Name of Federal Candidate supported or Opposed by expenditure:
Rep. Charles F. Bass

Calendar Year-To-Date Per Election for Office Sought	154186.11
---	-----------

Date

M M	/	D D	/	Y Y Y Y
1 0		1 5		2 0 1 0

Amount

768.93

Transaction ID: 37179078

Office Sought: House State: NH
 Senate District: 02
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
 2010

Full Name (Last, First, Middle, Initial) of Payee
Master Print, Inc.

Mailing Address
P.O. Box 1467

City	State	Zip Code
Newington	VA	22122

Purpose of Expenditure Flyers	Category/ Type
	004

Name of Federal Candidate supported or Opposed by expenditure:
Rep. Steve Chabot

Calendar Year-To-Date Per Election for Office Sought	6190.10
---	---------

Date

M M	/	D D	/	Y Y Y Y
1 0		1 5		2 0 1 0

Amount

96.12

Transaction ID: 37179079

Office Sought: House State: OH
 Senate District: 01
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
 2010

(a) SUBTOTAL of Itemized Independent Expenditures	865.05
(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
Signature

Date

M M	/	D D	/	Y Y Y Y
0 3		0 3		2 0 1 1

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund	FEC IDENTIFICATION NUMBER C C00053553
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
Master Print, Inc.

Date
M M / D D / Y Y Y Y
1 0 / 1 5 / 2 0 1 0

Mailing Address
P.O. Box 1467

Amount
96.12

City State Zip Code
Newington VA 22122

Transaction ID: 37179080

Purpose of Expenditure
Flyers Category/Type 004

Office Sought: House State: OH
 Senate District: 01
 Presidential

Name of Federal Candidate supported or Opposed by expenditure:
Mr. Steven Driehaus

Check One: Support Oppose

Calendar Year-To-Date Per Election for Office Sought
6286.22

Disbursement For: Primary General
 Other (specify) : _____
2010

Full Name (Last, First, Middle, Initial) of Payee
Master Print, Inc.

Date
M M / D D / Y Y Y Y
1 0 / 1 5 / 2 0 1 0

Mailing Address
P.O. Box 1467

Amount
96.12

City State Zip Code
Newington VA 22122

Transaction ID: 37179081

Purpose of Expenditure
Flyers Category/Type 004

Office Sought: House State: OH
 Senate District: _____
 Presidential

Name of Federal Candidate supported or Opposed by expenditure:
Mr. Rob Portman

Check One: Support Oppose

Calendar Year-To-Date Per Election for Office Sought
1183479.68

Disbursement For: Primary General
 Other (specify) : _____
2010

(a) SUBTOTAL of Itemized Independent Expenditures	192.24
(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
Signature

Date M M / D D / Y Y Y Y
0 3 / 0 3 / 2 0 1 1

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund	FEC IDENTIFICATION NUMBER C C00053553
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
Master Print, Inc.

Mailing Address
P.O. Box 1467

City Newington	State VA	Zip Code 22122
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Purpose of Expenditure Flyers	Category/ Type 004
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Name of Federal Candidate supported or Opposed by expenditure:
Lee Fisher

Calendar Year-To-Date Per Election for Office Sought	1183575.80
---	------------

Date
M M / D D / Y Y Y Y
1 0 / 1 5 / 2 0 1 0

Amount
96.12

Transaction ID: 37179082

Office Sought: House State: OH
 Senate District: _____
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

Full Name (Last, First, Middle, Initial) of Payee
Master Print, Inc.

Mailing Address
P.O. Box 1467

City Newington	State VA	Zip Code 22122
-------------------	-------------	-------------------

Purpose of Expenditure Flyers	Category/ Type 004
----------------------------------	--------------------------

Name of Federal Candidate supported or Opposed by expenditure:
Mr. Keith Fimian

Calendar Year-To-Date Per Election for Office Sought	7556.53
---	---------

Date
M M / D D / Y Y Y Y
1 0 / 1 5 / 2 0 1 0

Amount
307.57

Transaction ID: 37179083

Office Sought: House State: VA
 Senate District: 11
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

(a) SUBTOTAL of Itemized Independent Expenditures	403.69
(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
Signature

Date M M / D D / Y Y Y Y
0 3 / 0 3 / 2 0 1 1

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund	FEC IDENTIFICATION NUMBER C C00053553
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
Master Print, Inc.

Mailing Address
P.O. Box 1467

City Newington	State VA	Zip Code 22122
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Purpose of Expenditure Flyers	Category/ Type 004
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Name of Federal Candidate supported or Opposed by expenditure:
Rep. Gerald Connolly

Calendar Year-To-Date Per Election for Office Sought	7864.10
---	---------

Date
M M / D D / Y Y Y Y
1 0 / 1 5 / 2 0 1 0

Amount
307.57

Transaction ID: 37179084

Office Sought: House State: VA
 Senate District: 11
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

Full Name (Last, First, Middle, Initial) of Payee
Master Print, Inc.

Mailing Address
P.O. Box 1467

City Newington	State VA	Zip Code 22122
-------------------	-------------	-------------------

Purpose of Expenditure Print 4 Color Cards	Category/ Type 004
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Name of Federal Candidate supported or Opposed by expenditure:
Mr. David Schweikert

Calendar Year-To-Date Per Election for Office Sought	100426.27
---	-----------

Date
M M / D D / Y Y Y Y
1 0 / 1 5 / 2 0 1 0

Amount
301.02

Transaction ID: 37179088

Office Sought: House State: AZ
 Senate District: 05
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

(a) SUBTOTAL of Itemized Independent Expenditures	608.59
(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
Signature

Date M M / D D / Y Y Y Y
0 3 / 0 3 / 2 0 1 1

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund		FEC IDENTIFICATION NUMBER C C00053553
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice		

Full Name (Last, First, Middle, Initial) of Payee
Master Print, Inc.

Mailing Address
P.O. Box 1467

City State Zip Code
Newington VA 22122

Purpose of Expenditure Category/Type
Print 4 Color Cards 004

Name of Federal Candidate supported or Opposed by expenditure:
Mr. Jesse Kelly

Calendar Year-To-Date Per Election for Office Sought
53586.30

Date
M M / D D / Y Y Y Y
1 0 / 1 5 / 2 0 1 0

Amount
2535.72
Transaction ID: 37179089

Office Sought: House State: AZ
 Senate District: 08
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

Full Name (Last, First, Middle, Initial) of Payee
Master Print, Inc.

Mailing Address
P.O. Box 1467

City State Zip Code
Newington VA 22122

Purpose of Expenditure Category/Type
Print 4 Color Cards 004

Name of Federal Candidate supported or Opposed by expenditure:
Mr. David Harmer

Calendar Year-To-Date Per Election for Office Sought
87191.96

Date
M M / D D / Y Y Y Y
1 0 / 1 5 / 2 0 1 0

Amount
47.94
Transaction ID: 37179090

Office Sought: House State: CA
 Senate District: 11
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

(a) SUBTOTAL of Itemized Independent Expenditures	2583.66
(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
Signature

Date M M / D D / Y Y Y Y
0 3 / 0 3 / 2 0 1 1

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund	FEC IDENTIFICATION NUMBER C C00053553
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
Master Print, Inc.

Mailing Address
P.O. Box 1467

City Newington	State VA	Zip Code 22122
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Purpose of Expenditure Print 4 Color Cards	Category/ Type 004
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Name of Federal Candidate supported or Opposed by expenditure:
Mr. James Vidak

Calendar Year-To-Date Per Election for Office Sought	153174.12
---	-----------

Date
M M / D D / Y Y Y Y
1 0 / 1 5 / 2 0 1 0

Amount
418.75

Transaction ID: 37179091

Office Sought: House State: CA
 Senate District: 20
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

Full Name (Last, First, Middle, Initial) of Payee
Master Print, Inc.

Mailing Address
P.O. Box 1467

City Newington	State VA	Zip Code 22122
-------------------	-------------	-------------------

Purpose of Expenditure Print 4 Color Cards	Category/ Type 004
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Name of Federal Candidate supported or Opposed by expenditure:
Ms. Carly Fiorina

Calendar Year-To-Date Per Election for Office Sought	250209.13
---	-----------

Date
M M / D D / Y Y Y Y
1 0 / 1 5 / 2 0 1 0

Amount
466.69

Transaction ID: 37179092

Office Sought: House State: CA
 Senate District: _____
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

(a) SUBTOTAL of Itemized Independent Expenditures	885.44
(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
Signature

Date M M / D D / Y Y Y Y
0 3 / 0 3 / 2 0 1 1

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund	FEC IDENTIFICATION NUMBER C C00053553
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
Master Print, Inc.

Mailing Address
P.O. Box 1467

City State Zip Code
Newington VA 22122

Purpose of Expenditure Category/Type
Print 4 Color Cards 004

Name of Federal Candidate supported or Opposed by expenditure:
Mr. Ryan Frazier

Calendar Year-To-Date Per Election for Office Sought 4161.73

Date
M M / D D / Y Y Y Y
1 0 / 1 5 / 2 0 1 0

Amount
374.24

Transaction ID: 37179093

Office Sought: House State: CO
 Senate District: 07
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

Full Name (Last, First, Middle, Initial) of Payee
Master Print, Inc.

Mailing Address
P.O. Box 1467

City State Zip Code
Newington VA 22122

Purpose of Expenditure Category/Type
Print 4 Color Cards 004

Name of Federal Candidate supported or Opposed by expenditure:
Jaime Herrera

Calendar Year-To-Date Per Election for Office Sought 143345.34

Date
M M / D D / Y Y Y Y
1 0 / 1 5 / 2 0 1 0

Amount
413.05

Transaction ID: 37179094

Office Sought: House State: WA
 Senate District: 03
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

(a) SUBTOTAL of Itemized Independent Expenditures	787.29
(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
Signature

Date M M / D D / Y Y Y Y
0 3 / 0 3 / 2 0 1 1

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund	FEC IDENTIFICATION NUMBER C C00053553
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
Master Print, Inc.

Mailing Address
P.O. Box 1467

City Newington	State VA	Zip Code 22122
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Purpose of Expenditure Print 4 Color Cards	Category/ Type 004
---	--------------------------

Name of Federal Candidate supported or Opposed by expenditure:
Mr. Dino Rossi

Calendar Year-To-Date Per Election for Office Sought
576543.22

Date
M M / D D / Y Y Y Y
1 0 / 1 5 / 2 0 1 0

Amount
12695.50

Transaction ID: 37179095

Office Sought: House State: WA
 Senate District: _____
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

Full Name (Last, First, Middle, Initial) of Payee
Master Print, Inc.

Mailing Address
P.O. Box 1467

City Newington	State VA	Zip Code 22122
-------------------	-------------	-------------------

Purpose of Expenditure Print 4 Color Cards	Category/ Type 004
---	--------------------------

Name of Federal Candidate supported or Opposed by expenditure:
Mr. Dino Rossi

Calendar Year-To-Date Per Election for Office Sought
576956.27

Date
M M / D D / Y Y Y Y
1 0 / 1 5 / 2 0 1 0

Amount
413.05

Transaction ID: 37179096

Office Sought: House State: WA
 Senate District: _____
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

(a) SUBTOTAL of Itemized Independent Expenditures	13108.55
(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
Signature

Date M M / D D / Y Y Y Y
0 3 / 0 3 / 2 0 1 1

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund	FEC IDENTIFICATION NUMBER C C00053553
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
Master Print, Inc.

Mailing Address
P.O. Box 1467

City Newington	State VA	Zip Code 22122
-------------------	-------------	-------------------

Purpose of Expenditure Print 4 Color Cards	Category/ Type 004
---	--------------------------

Name of Federal Candidate supported or Opposed by expenditure:
Rep. Daniel Lungren

Calendar Year-To-Date Per Election for Office Sought	529.06
---	--------

Date
M M / D D / Y Y Y Y
1 0 / 1 5 / 2 0 1 0

Amount
48.52

Transaction ID: 37179098

Office Sought: House State: CA
 Senate District: 03
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

Full Name (Last, First, Middle, Initial) of Payee
Master Print, Inc.

Mailing Address
P.O. Box 1467

City Newington	State VA	Zip Code 22122
-------------------	-------------	-------------------

Purpose of Expenditure Print 4 Color Cards	Category/ Type 004
---	--------------------------

Name of Federal Candidate supported or Opposed by expenditure:
Mr. David Harmer

Calendar Year-To-Date Per Election for Office Sought	87929.44
---	----------

Date
M M / D D / Y Y Y Y
1 0 / 1 5 / 2 0 1 0

Amount
737.48

Transaction ID: 37179099

Office Sought: House State: CA
 Senate District: 11
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

(a) SUBTOTAL of Itemized Independent Expenditures	786.00
(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.

Mary Rose Adkins
Signature

Date M M / D D / Y Y Y Y
0 3 / 0 3 / 2 0 1 1

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund	FEC IDENTIFICATION NUMBER C C00053553
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
Master Print, Inc.

Mailing Address
P.O. Box 1467

City Newington	State VA	Zip Code 22122
-------------------	-------------	-------------------

Purpose of Expenditure Print 4 Color Cards	Category/ Type 004
---	--------------------------

Name of Federal Candidate supported or Opposed by expenditure:
Ms. Carly Fiorina

Calendar Year-To-Date Per Election for Office Sought	250995.13
---	-----------

Date
M M / D D / Y Y Y Y
1 0 / 1 5 / 2 0 1 0

Amount
786.00

Transaction ID: 37179100

Office Sought: House State: CA
 Senate District: _____
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

Full Name (Last, First, Middle, Initial) of Payee
Master Print, Inc.

Mailing Address
P.O. Box 1467

City Newington	State VA	Zip Code 22122
-------------------	-------------	-------------------

Purpose of Expenditure Print 4 Color Cards	Category/ Type 004
---	--------------------------

Name of Federal Candidate supported or Opposed by expenditure:
Mr. Charles Djou

Calendar Year-To-Date Per Election for Office Sought	6237.91
---	---------

Date
M M / D D / Y Y Y Y
1 0 / 1 5 / 2 0 1 0

Amount
597.93

Transaction ID: 37179101

Office Sought: House State: HI
 Senate District: 01
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

(a) SUBTOTAL of Itemized Independent Expenditures	1383.93
(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
Signature

Date M M / D D / Y Y Y Y
0 3 / 0 3 / 2 0 1 1

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund	FEC IDENTIFICATION NUMBER C C00053553
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
Master Print, Inc.

Mailing Address
P.O. Box 1467

City State Zip Code
Newington VA 22122

Purpose of Expenditure Category/Type
Print 4 Color Cards 004

Name of Federal Candidate supported or Opposed by expenditure:
Mr. Joe Heck

Calendar Year-To-Date Per Election for Office Sought 898.99

Date
M M / D D / Y Y Y Y
1 0 / 1 5 / 2 0 1 0

Amount
82.17

Transaction ID: 37179102

Office Sought: House State: NV
 Senate District: 03
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

Full Name (Last, First, Middle, Initial) of Payee
Master Print, Inc.

Mailing Address
P.O. Box 1467

City State Zip Code
Newington VA 22122

Purpose of Expenditure Category/Type
Print 4 Color Cards 004

Name of Federal Candidate supported or Opposed by expenditure:
Mr. Dino Rossi

Calendar Year-To-Date Per Election for Office Sought 585859.75

Date
M M / D D / Y Y Y Y
1 0 / 1 5 / 2 0 1 0

Amount
8903.48

Transaction ID: 37179104

Office Sought: House State: WA
 Senate District: _____
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

(a) SUBTOTAL of Itemized Independent Expenditures	8985.65
(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
Signature

Date M M / D D / Y Y Y Y
0 3 / 0 3 / 2 0 1 1

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund	FEC IDENTIFICATION NUMBER C C00053553
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
Master Print, Inc.

Date
M M / D D / Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Mailing Address
P.O. Box 1467

Amount
10731.13

City State Zip Code
Newington VA 22122

Transaction ID: 37220449
Office Sought: House State: PA
 Senate District: _____
 Presidential

Purpose of Expenditure
Print 4 Color Cards

Category/Type
004

Name of Federal Candidate supported or Opposed by expenditure:
Mr. Patrick Toomey

Check One: Support Oppose

Calendar Year-To-Date Per Election
for Office Sought 1547722.15

Disbursement For: Primary General
 Other (specify) : _____
2010

[MEMO ITEM]
Print 4 Color Cards

Full Name (Last, First, Middle, Initial) of Payee
Master Print, Inc.

Date
M M / D D / Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Mailing Address
P.O. Box 1467

Amount
1587.68

City State Zip Code
Newington VA 22122

Transaction ID: 37220605
Office Sought: House State: FL
 Senate District: 25
 Presidential

Purpose of Expenditure
Print 4 Color Cards

Category/Type
004

Name of Federal Candidate supported or Opposed by expenditure:
Mr. David Rivera

Check One: Support Oppose

Calendar Year-To-Date Per Election
for Office Sought 1587.68

Disbursement For: Primary General
 Other (specify) : _____
2010

[MEMO ITEM]
Print 4 Color Cards

(a) SUBTOTAL of Itemized Independent Expenditures	0.00
(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.

Mary Rose Adkins
Signature

Date M M / D D / Y Y Y Y
0 3 / 0 3 / 2 0 1 1

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund	FEC IDENTIFICATION NUMBER C C00053553
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
Master Print, Inc.

Mailing Address
P.O. Box 1467

City State Zip Code
Newington VA 22122

Purpose of Expenditure Category/Type
Print 4 Color Cards 004

Name of Federal Candidate supported or Opposed by expenditure:
Mr. Benjamin Lange

Calendar Year-To-Date Per Election for Office Sought 37764.06

Date
MM / DD / YYYY
10 / 18 / 2010

Amount
799.06

Transaction ID: 37220724

Office Sought: House State: IA
 Senate District: 01
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

[MEMO ITEM]
Print 4 Color Cards

Full Name (Last, First, Middle, Initial) of Payee
Master Print, Inc.

Mailing Address
P.O. Box 1467

City State Zip Code
Newington VA 22122

Purpose of Expenditure Category/Type
Print 4 Color Cards 004

Name of Federal Candidate supported or Opposed by expenditure:
Sen. Charles E. Grassley

Calendar Year-To-Date Per Election for Office Sought 82374.48

Date
MM / DD / YYYY
10 / 18 / 2010

Amount
1669.48

Transaction ID: 37220944

Office Sought: House State: IA
 Senate District: _____
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

[MEMO ITEM]
Print 4 Color Cards

(a) SUBTOTAL of Itemized Independent Expenditures	0.00
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	

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Mary Rose Adkins
Signature

Date MM / DD / YYYY
03 / 03 / 2011

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund	FEC IDENTIFICATION NUMBER C C00053553
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
Master Print, Inc.

Date

M	M	/	D	D	/	Y	Y	Y	Y
1	0		1	8		2	0	1	0

Mailing Address
P.O. Box 1467

Amount
870.42

Transaction ID: 37221474

City State Zip Code
Newington VA 22122

Office Sought: House State: IA
 Senate District: 02
 Presidential

Purpose of Expenditure
Print 4 Color Cards

Category/Type 004

Check One: Support Oppose

Name of Federal Candidate supported or Opposed by expenditure:
Mariannette Miller-Meeks

Disbursement For: Primary General

Calendar Year-To-Date Per Election for Office Sought
37835.42

Other (specify) : _____
2010
[MEMO ITEM]
Print 4 Color Cards

Full Name (Last, First, Middle, Initial) of Payee
Master Print, Inc.

Date

M	M	/	D	D	/	Y	Y	Y	Y
1	0		1	8		2	0	1	0

Mailing Address
P.O. Box 1467

Amount
934.49

Transaction ID: 37221687

City State Zip Code
Newington VA 22122

Office Sought: House State: KS
 Senate District: 03
 Presidential

Purpose of Expenditure
Print 4 Color Cards

Category/Type 004

Check One: Support Oppose

Name of Federal Candidate supported or Opposed by expenditure:
Mr. Kevin Yoder

Disbursement For: Primary General

Calendar Year-To-Date Per Election for Office Sought
8683.78

Other (specify) : _____
2010
[MEMO ITEM]
Print 4 Color Cards

(a) SUBTOTAL of Itemized Independent Expenditures	0.00
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	

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Mary Rose Adkins
Signature

Date

M	M	/	D	D	/	Y	Y	Y	Y
0	3		0	3		2	0	1	1

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund		FEC IDENTIFICATION NUMBER C C00053553
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice		

Full Name (Last, First, Middle, Initial) of Payee
Master Print, Inc.

Date
M M / D D / Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Mailing Address
P.O. Box 1467

Amount
1082.29

City State Zip Code
Newington VA 22122

Transaction ID: 37221823

Purpose of Expenditure
Print 4 Color Cards

Category/Type 004

Office Sought: House State: NY
 Senate District: 01
 Presidential

Name of Federal Candidate supported or Opposed by expenditure:
Mr. Randolph Altschuler

Check One: Support Oppose

Calendar Year-To-Date Per Election for Office Sought
1082.29

Disbursement For: Primary General
 Other (specify) : _____
2010
[MEMO ITEM]
Print 4 Color Cards

Full Name (Last, First, Middle, Initial) of Payee
Master Print, Inc.

Date
M M / D D / Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Mailing Address
P.O. Box 1467

Amount
166.61

City State Zip Code
Newington VA 22122

Transaction ID: 37223383

Purpose of Expenditure
Print 4 Color Cards

Category/Type 004

Office Sought: House State: AZ
 Senate District: 07
 Presidential

Name of Federal Candidate supported or Opposed by expenditure:
Ms. Ruth McClung

Check One: Support Oppose

Calendar Year-To-Date Per Election for Office Sought
166.61

Disbursement For: Primary General
 Other (specify) : _____
2010
[MEMO ITEM]
Print 4 Color Cards

(a) SUBTOTAL of Itemized Independent Expenditures	0.00
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	

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Mary Rose Adkins
Signature

Date M M / D D / Y Y Y Y
0 3 / 0 3 / 2 0 1 1

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund	FEC IDENTIFICATION NUMBER C C00053553
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
Master Print, Inc.

Date
M M / D D / Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Mailing Address
P.O. Box 1467

Amount
2062.53

City State Zip Code
Newington VA 22122

Transaction ID: 37224196

Purpose of Expenditure
Print 4 Color Cards

Category/Type 004

Office Sought: House State: CT
 Senate District: _____
 Presidential

Name of Federal Candidate supported or Opposed by expenditure:
Mr. Richard Blumenthal

Check One: Support Oppose

Calendar Year-To-Date Per Election for Office Sought
2062.53

Disbursement For: Primary General
 Other (specify) : _____
2010
[MEMO ITEM]
Print 4 Color Cards

Full Name (Last, First, Middle, Initial) of Payee
Master Print, Inc.

Date
M M / D D / Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Mailing Address
P.O. Box 1467

Amount
609.80

City State Zip Code
Newington VA 22122

Transaction ID: 37224452

Purpose of Expenditure
Print 4 Color Cards

Category/Type 004

Office Sought: House State: DE
 Senate District: _____
 Presidential

Name of Federal Candidate supported or Opposed by expenditure:
Ms. Christine O'Donnell

Check One: Support Oppose

Calendar Year-To-Date Per Election for Office Sought
158732.30

Disbursement For: Primary General
 Other (specify) : _____
2010
[MEMO ITEM]
Print 4 Color Cards

(a) SUBTOTAL of Itemized Independent Expenditures	0.00
(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.

Mary Rose Adkins
Signature

Date M M / D D / Y Y Y Y
0 3 / 0 3 / 2 0 1 1

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund		FEC IDENTIFICATION NUMBER C C00053553
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice		

Full Name (Last, First, Middle, Initial) of Payee
Master Print, Inc.

Mailing Address
P.O. Box 1467

City State Zip Code
Newington VA 22122

Purpose of Expenditure Category/Type
Print 4 Color Cards 004

Name of Federal Candidate supported or Opposed by expenditure:
Sen. Richard M. Burr

Calendar Year-To-Date Per Election for Office Sought 15233.45

Date
MM / DD / YYYY
10 / 18 / 2010

Amount
1903.66

Transaction ID: 37224645

Office Sought: House State: NC
 Senate District: _____
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

[MEMO ITEM]
Print 4 Color Cards

Full Name (Last, First, Middle, Initial) of Payee
Master Print, Inc.

Mailing Address
P.O. Box 1467

City State Zip Code
Newington VA 22122

Purpose of Expenditure Category/Type
Print 4 Color Cards 004

Name of Federal Candidate supported or Opposed by expenditure:
Mr. George Kelly

Calendar Year-To-Date Per Election for Office Sought 1262.69

Date
MM / DD / YYYY
10 / 18 / 2010

Amount
1262.69

Transaction ID: 37225220

Office Sought: House State: PA
 Senate District: 03
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

[MEMO ITEM]
Print 4 Color Cards

(a) SUBTOTAL of Itemized Independent Expenditures	0.00
(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.

Mary Rose Adkins
Signature

Date MM / DD / YYYY
03 / 03 / 2011

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund	FEC IDENTIFICATION NUMBER ▼ C C00053553
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
Master Print, Inc.

Mailing Address
P.O. Box 1467

City	State	Zip Code
Newington	VA	22122

Purpose of Expenditure Print 4 Color Cards	Category/ Type
	004

Name of Federal Candidate supported or Opposed by expenditure:
Mr. Sam Caligiuri

Calendar Year-To-Date Per Election for Office Sought	2016.51
---	---------

Date

M M / D D / Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Amount

1373.65

Transaction ID: 37263641

Office Sought: House State: CT
 Senate District: 05
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
 2010

[MEMO ITEM]
Print 4 Color Cards

Full Name (Last, First, Middle, Initial) of Payee
Master Print, Inc.

Mailing Address
P.O. Box 1467

City	State	Zip Code
Newington	VA	22122

Purpose of Expenditure Print 4 Color Cards	Category/ Type
	004

Name of Federal Candidate supported or Opposed by expenditure:
Sandy Adams

Calendar Year-To-Date Per Election for Office Sought	23149.59
---	----------

Date

M M / D D / Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Amount

231.73

Transaction ID: 37263650

Office Sought: House State: FL
 Senate District: 24
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
 2010

[MEMO ITEM]
Print 4 Color Cards

(a) SUBTOTAL of Itemized Independent Expenditures	0.00
(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.

Mary Rose Adkins
Signature

Date

M M / D D / Y Y Y Y
0 3 / 0 3 / 2 0 1 1

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund	FEC IDENTIFICATION NUMBER C C00053553
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
Master Print, Inc.

Mailing Address
P.O. Box 1467

City State Zip Code
Newington VA 22122

Purpose of Expenditure Category/Type
Print 4 Color Cards 004

Name of Federal Candidate supported or Opposed by expenditure:
Mr. Robert Schilling

Calendar Year-To-Date Per Election for Office Sought
43110.47

Date
10 / 19 / 2010

Amount
2429.04

Transaction ID: 37263669

Office Sought: House State: IL
 Senate District: 17
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

[MEMO ITEM]
Print 4 Color Cards

Full Name (Last, First, Middle, Initial) of Payee
Master Print, Inc.

Mailing Address
P.O. Box 1467

City State Zip Code
Newington VA 22122

Purpose of Expenditure Category/Type
Print 4 Color Cards 004

Name of Federal Candidate supported or Opposed by expenditure:
Mike Pompeo

Calendar Year-To-Date Per Election for Office Sought
731.16

Date
10 / 19 / 2010

Amount
88.30

Transaction ID: 37263686

Office Sought: House State: KS
 Senate District: 04
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

[MEMO ITEM]
Print 4 Color Cards

(a) SUBTOTAL of Itemized Independent Expenditures	0.00
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	

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Mary Rose Adkins
Signature

Date 03 / 03 / 2011

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund	FEC IDENTIFICATION NUMBER C C00053553
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
Master Print, Inc.

Mailing Address
P.O. Box 1467

City Newington	State VA	Zip Code 22122
-------------------	-------------	-------------------

Purpose of Expenditure Print 4 Color Cards	Category/ Type 004
---	--------------------------

Name of Federal Candidate supported or Opposed by expenditure:
Mr. Jeffrey Perry

Calendar Year-To-Date Per Election for Office Sought	3763.52
---	---------

Date
M M / D D / Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Amount
3120.66

Transaction ID: 37263697

Office Sought: House State: MA
 Senate District: 10
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

[MEMO ITEM]
Print 4 Color Cards

Full Name (Last, First, Middle, Initial) of Payee
Master Print, Inc.

Mailing Address
P.O. Box 1467

City Newington	State VA	Zip Code 22122
-------------------	-------------	-------------------

Purpose of Expenditure Print 4 Color Cards	Category/ Type 004
---	--------------------------

Name of Federal Candidate supported or Opposed by expenditure:
Mr. Timothy Walberg

Calendar Year-To-Date Per Election for Office Sought	3708.77
---	---------

Date
M M / D D / Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Amount
3065.91

Transaction ID: 37263709

Office Sought: House State: MI
 Senate District: 07
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

[MEMO ITEM]
Print 4 Color Cards

(a) SUBTOTAL of Itemized Independent Expenditures	0.00
(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.

Mary Rose Adkins
Signature

Date M M / D D / Y Y Y Y
0 3 / 0 3 / 2 0 1 1

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund	FEC IDENTIFICATION NUMBER C C00053553
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
Master Print, Inc.

Mailing Address
P.O. Box 1467

City Newington	State VA	Zip Code 22122
-------------------	-------------	-------------------

Purpose of Expenditure Print 4 Color Cards	Category/ Type 004
---	--------------------------

Name of Federal Candidate supported or Opposed by expenditure:
Mr. Roy Blunt

Calendar Year-To-Date Per Election for Office Sought	2443895.94
---	------------

Date
M M / D D / Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Amount
633.50

Transaction ID: 37263755

Office Sought: House State: MO
 Senate District: _____
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

[MEMO ITEM]
Print 4 Color Cards

Full Name (Last, First, Middle, Initial) of Payee
Master Print, Inc.

Mailing Address
P.O. Box 1467

City Newington	State VA	Zip Code 22122
-------------------	-------------	-------------------

Purpose of Expenditure Print 4 Color Cards	Category/ Type 004
---	--------------------------

Name of Federal Candidate supported or Opposed by expenditure:
Mr. Edward Martin

Calendar Year-To-Date Per Election for Office Sought	70204.05
---	----------

Date
M M / D D / Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Amount
633.50

Transaction ID: 37263766

Office Sought: House State: MO
 Senate District: 03
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

[MEMO ITEM]
Print 4 Color Cards

(a) SUBTOTAL of Itemized Independent Expenditures	0.00
(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.

Mary Rose Adkins
Signature

Date M M / D D / Y Y Y Y
0 3 / 0 3 / 2 0 1 1

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund	FEC IDENTIFICATION NUMBER ▼ C C00053553
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
Master Print, Inc.

Date

M	M	/	D	D	/	Y	Y	Y	Y
1	0		1	9		2	0	1	0

Mailing Address
P.O. Box 1467

Amount

575.76

City Newington	State VA	Zip Code 22122
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Transaction ID: 37263779

Office Sought: House State: NE
 Senate District: 02
 Presidential

Purpose of Expenditure Print 4 Color Cards	Category/ Type 004
---	------------------------------

Check One: Support Oppose

Name of Federal Candidate supported or Opposed by expenditure:
Rep. Lee Terry

Disbursement For: Primary General
 Other (specify) : _____
 2010

Calendar Year-To-Date Per Election for Office Sought	<table style="border: none;"> <tr> <td style="border: 1px solid black; width: 100px; height: 20px; text-align: right;">1218.62</td> </tr> </table>	1218.62
1218.62		

[MEMO ITEM]
Print 4 Color Cards

Full Name (Last, First, Middle, Initial) of Payee
Master Print, Inc.

Date

M	M	/	D	D	/	Y	Y	Y	Y
1	0		1	9		2	0	1	0

Mailing Address
P.O. Box 1467

Amount

436.98

City Newington	State VA	Zip Code 22122
-------------------	-------------	-------------------

Transaction ID: 37263784

Office Sought: House State: NH
 Senate District: 01
 Presidential

Purpose of Expenditure Print 4 Color Cards	Category/ Type 004
---	------------------------------

Check One: Support Oppose

Name of Federal Candidate supported or Opposed by expenditure:
Mr. Frank Guinta

Disbursement For: Primary General
 Other (specify) : _____
 2010

Calendar Year-To-Date Per Election for Office Sought	<table style="border: none;"> <tr> <td style="border: 1px solid black; width: 100px; height: 20px; text-align: right;">7700.39</td> </tr> </table>	7700.39
7700.39		

[MEMO ITEM]
Print 4 Color Cards

(a) SUBTOTAL of Itemized Independent Expenditures	<table style="border: none;"> <tr> <td style="border: 1px solid black; width: 100px; height: 20px; text-align: right;">0.00</td> </tr> </table>	0.00
0.00		
(b) SUBTOTAL of Unitemized Independent Expenditures	<table style="border: none;"> <tr> <td style="border: 1px solid black; width: 100px; height: 20px;"></td> </tr> </table>	
(c) TOTAL Independent Expenditures	<table style="border: none;"> <tr> <td style="border: 1px solid black; width: 100px; height: 20px;"></td> </tr> </table>	

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
Signature

Date

M	M	/	D	D	/	Y	Y	Y	Y
0	3		0	3		2	0	1	1

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund	FEC IDENTIFICATION NUMBER C C00053553
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
Master Print, Inc.

Date
M M / D D / Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Mailing Address
P.O. Box 1467

Amount
729.05

City State Zip Code
Newington VA 22122

Transaction ID: 37263793

Purpose of Expenditure
Print 4 Color Cards

Category/Type 004

Office Sought: House State: NH
 Senate District: 02
 Presidential

Name of Federal Candidate supported or Opposed by expenditure:
Rep. Charles F. Bass

Check One: Support Oppose

Calendar Year-To-Date Per Election for Office Sought
15558.02

Disbursement For: Primary General
 Other (specify) : _____
2010
[MEMO ITEM]
Print 4 Color Cards

Full Name (Last, First, Middle, Initial) of Payee
Master Print, Inc.

Date
M M / D D / Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Mailing Address
P.O. Box 1467

Amount
49.49

City State Zip Code
Newington VA 22122

Transaction ID: 37263803

Purpose of Expenditure
Print 4 Color Cards

Category/Type 004

Office Sought: House State: NY
 Senate District: 04
 Presidential

Name of Federal Candidate supported or Opposed by expenditure:
Mr. Francis Becker

Check One: Support Oppose

Calendar Year-To-Date Per Election for Office Sought
692.35

Disbursement For: Primary General
 Other (specify) : _____
2010
[MEMO ITEM]
Print 4 Color Cards

(a) SUBTOTAL of Itemized Independent Expenditures	0.00
(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.

Mary Rose Adkins
Signature

Date M M / D D / Y Y Y Y
0 3 / 0 3 / 2 0 1 1

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund	FEC IDENTIFICATION NUMBER C C00053553
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
Master Print, Inc.

Date
M M / D D / Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Mailing Address
P.O. Box 1467

Amount
2076.75

City State Zip Code
Newington VA 22122

Transaction ID: 37263837

Purpose of Expenditure
Print 4 Color Cards

Category/Type 004

Office Sought: House State: NY
 Senate District: 19
 Presidential

Name of Federal Candidate supported or Opposed by expenditure:
Ms. Nan Hayworth

Check One: Support Oppose

Calendar Year-To-Date Per Election for Office Sought
7868.91

Disbursement For: Primary General
 Other (specify) : _____
2010
[MEMO ITEM]
Print 4 Color Cards

Full Name (Last, First, Middle, Initial) of Payee
Master Print, Inc.

Date
M M / D D / Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Mailing Address
P.O. Box 1467

Amount
34.14

City State Zip Code
Newington VA 22122

Transaction ID: 37263876

Purpose of Expenditure
Print 4 Color Cards

Category/Type 004

Office Sought: House State: OH
 Senate District: 01
 Presidential

Name of Federal Candidate supported or Opposed by expenditure:
Rep. Steve Chabot

Check One: Support Oppose

Calendar Year-To-Date Per Election for Office Sought
6603.70

Disbursement For: Primary General
 Other (specify) : _____
2010
[MEMO ITEM]
Print 4 Color Cards

(a) SUBTOTAL of Itemized Independent Expenditures	0.00
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	

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Mary Rose Adkins
Signature

Date M M / D D / Y Y Y Y
0 3 / 0 3 / 2 0 1 1

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund	FEC IDENTIFICATION NUMBER C C00053553
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
Master Print, Inc.

Date
M M / D D / Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Mailing Address
P.O. Box 1467

Amount
91.05

City State Zip Code
Newington VA 22122

Transaction ID: 37264089

Purpose of Expenditure
Print 4 Color Cards

Category/Type 004

Office Sought: House State: OH
 Senate District: _____
 Presidential

Name of Federal Candidate supported or Opposed by expenditure:
Mr. Rob Portman

Check One: Support Oppose

Calendar Year-To-Date Per Election for Office Sought
1185675.18

Disbursement For: Primary General
 Other (specify) : _____
2010
[MEMO ITEM]
Print 4 Color Cards

Full Name (Last, First, Middle, Initial) of Payee
Master Print, Inc.

Date
M M / D D / Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Mailing Address
P.O. Box 1467

Amount
56.91

City State Zip Code
Newington VA 22122

Transaction ID: 37264219

Purpose of Expenditure
Print 4 Color Cards

Category/Type 004

Office Sought: House State: OH
 Senate District: 15
 Presidential

Name of Federal Candidate supported or Opposed by expenditure:
Mr. Steve Stivers

Check One: Support Oppose

Calendar Year-To-Date Per Election for Office Sought
5110.27

Disbursement For: Primary General
 Other (specify) : _____
2010
[MEMO ITEM]
Print 4 Color Cards

(a) SUBTOTAL of Itemized Independent Expenditures	0.00
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	

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Mary Rose Adkins
Signature

Date M M / D D / Y Y Y Y
0 3 / 0 3 / 2 0 1 1

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund	FEC IDENTIFICATION NUMBER C C00053553
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
Master Print, Inc.

Mailing Address
P.O. Box 1467

City State Zip Code
Newington VA 22122

Purpose of Expenditure Category/Type
Print 4 Color Cards 004

Name of Federal Candidate supported or Opposed by expenditure:
Mr. Patrick Meehan

Calendar Year-To-Date Per Election for Office Sought
6823.77

Date
MM / DD / YYYY
10 / 19 / 2010

Amount
229.00

Transaction ID: 37264299

Office Sought: House State: PA
 Senate District: 07
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

[MEMO ITEM]
Print 4 Color Cards

Full Name (Last, First, Middle, Initial) of Payee
Master Print, Inc.

Mailing Address
P.O. Box 1467

City State Zip Code
Newington VA 22122

Purpose of Expenditure Category/Type
Print 4 Color Cards 004

Name of Federal Candidate supported or Opposed by expenditure:
Mr. Patrick Toomey

Calendar Year-To-Date Per Election for Office Sought
1949702.40

Date
MM / DD / YYYY
10 / 19 / 2010

Amount
539.15

Transaction ID: 37264454

Office Sought: House State: PA
 Senate District: _____
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

[MEMO ITEM]
Print 4 Color Cards

(a) SUBTOTAL of Itemized Independent Expenditures	0.00
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	

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Mary Rose Adkins
Signature

Date MM / DD / YYYY
03 / 03 / 2011

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund	FEC IDENTIFICATION NUMBER C C00053553
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
Master Print, Inc.

Mailing Address
P.O. Box 1467

City Newington	State VA	Zip Code 22122
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Purpose of Expenditure Print 4 Color Cards	Category/ Type 004
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Name of Federal Candidate supported or Opposed by expenditure:
Mr. Charles Dent

Calendar Year-To-Date Per Election for Office Sought	17284.54
---	----------

Date
M M / D D / Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Amount
310.15

Transaction ID: 37265993

Office Sought: House State: PA
 Senate District: 15
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

[MEMO ITEM]
Print 4 Color Cards

Full Name (Last, First, Middle, Initial) of Payee
Master Print, Inc.

Mailing Address
P.O. Box 1467

City Newington	State VA	Zip Code 22122
-------------------	-------------	-------------------

Purpose of Expenditure Print 4 Color Cards	Category/ Type 004
---	--------------------------

Name of Federal Candidate supported or Opposed by expenditure:
Mr. John Mulvaney

Calendar Year-To-Date Per Election for Office Sought	139235.85
---	-----------

Date
M M / D D / Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Amount
623.91

Transaction ID: 37266059

Office Sought: House State: SC
 Senate District: 05
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

[MEMO ITEM]
Print 4 Color Cards

(a) SUBTOTAL of Itemized Independent Expenditures	0.00
(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.

Mary Rose Adkins _____ Date M M / D D / Y Y Y Y
Signature 0 3 / 0 3 / 2 0 1 1

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund	FEC IDENTIFICATION NUMBER C C00053553
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
Master Print, Inc.

Mailing Address
P.O. Box 1467

City State Zip Code
Newington VA 22122

Purpose of Expenditure Category/Type
Print 4 Color Cards 004

Name of Federal Candidate supported or Opposed by expenditure:
Mr. Keith Fimian

Calendar Year-To-Date Per Election for Office Sought 8524.66

Date
MM / DD / YYYY
10 / 19 / 2010

Amount
17.70

Transaction ID: 37266105

Office Sought: House State: VA
 Senate District: 11
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

[MEMO ITEM]
Print 4 Color Cards

Full Name (Last, First, Middle, Initial) of Payee
Master Print, Inc.

Mailing Address
P.O. Box 1467

City State Zip Code
Newington VA 22122

Purpose of Expenditure Category/Type
Print 4 Color Cards 004

Name of Federal Candidate supported or Opposed by expenditure:
Mr. John Boozman

Calendar Year-To-Date Per Election for Office Sought 2713.07

Date
MM / DD / YYYY
10 / 19 / 2010

Amount
2070.25

Transaction ID: 37266196

Office Sought: House State: AR
 Senate District: _____
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

[MEMO ITEM]
Print 4 Color Cards

(a) SUBTOTAL of Itemized Independent Expenditures	0.00
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	

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Mary Rose Adkins
Signature

Date MM / DD / YYYY
03 / 03 / 2011

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund	FEC IDENTIFICATION NUMBER ▼ C C00053553
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee Master Print, Inc.		
Mailing Address P.O. Box 1467		
City Newington	State VA	Zip Code 22122
Purpose of Expenditure Graphic Art Design	Category/ Type 004	
Name of Federal Candidate supported or Opposed by expenditure: Mr. Daniel Webster		

Date	<input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="0"/>
Amount	<input style="width: 100%;" type="text" value="244.54"/>
Transaction ID: 37314756	
Office Sought:	<input checked="" type="checkbox"/> House State: <u>FL</u> <input type="checkbox"/> Senate District: <u>08</u> <input type="checkbox"/> Presidential
Check One:	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Disbursement For:	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____

Calendar Year-To-Date Per Election for Office Sought	<input style="width: 80%;" type="text" value="887.40"/>
---	---

[MEMO ITEM]
Graphic Art Design

Full Name (Last, First, Middle, Initial) of Payee Master Print, Inc.		
Mailing Address P.O. Box 1467		
City Newington	State VA	Zip Code 22122
Purpose of Expenditure Graphic Art Design	Category/ Type 004	
Name of Federal Candidate supported or Opposed by expenditure: Mr. Dennis Ross		

Date	<input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="0"/>
Amount	<input style="width: 100%;" type="text" value="263.09"/>
Transaction ID: 37314794	
Office Sought:	<input checked="" type="checkbox"/> House State: <u>FL</u> <input type="checkbox"/> Senate District: <u>12</u> <input type="checkbox"/> Presidential
Check One:	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Disbursement For:	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____

Calendar Year-To-Date Per Election for Office Sought	<input style="width: 80%;" type="text" value="905.95"/>
---	---

[MEMO ITEM]
Graphic Art Design

(a) SUBTOTAL of Itemized Independent Expenditures	<input style="width: 80%;" type="text" value="0.00"/>
(b) SUBTOTAL of Unitemized Independent Expenditures	<input style="width: 80%;" type="text"/>
(c) TOTAL Independent Expenditures	<input style="width: 80%;" type="text"/>

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

 Signature

Date /

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund	FEC IDENTIFICATION NUMBER C C00053553
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
Master Print, Inc.

Mailing Address
P.O. Box 1467

City Newington	State VA	Zip Code 22122
-------------------	-------------	-------------------

Purpose of Expenditure Graphic Art Design	Category/ Type 004
--	--------------------------

Name of Federal Candidate supported or Opposed by expenditure:
Mr. Allen West

Date
M M / D D / Y Y Y Y
1 0 / 2 0 / 2 0 1 0

Amount
121.18

Transaction ID: 37314872

Office Sought: House State: FL
 Senate District: 22
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

[MEMO ITEM]
Graphic Art Design

Calendar Year-To-Date Per Election
for Office Sought 764.04

Full Name (Last, First, Middle, Initial) of Payee
Master Print, Inc.

Mailing Address
P.O. Box 1467

City Newington	State VA	Zip Code 22122
-------------------	-------------	-------------------

Purpose of Expenditure Graphic Art Design	Category/ Type 004
--	--------------------------

Name of Federal Candidate supported or Opposed by expenditure:
Mr. Jon Runyan

Date
M M / D D / Y Y Y Y
1 0 / 2 0 / 2 0 1 0

Amount
310.53

Transaction ID: 37314990

Office Sought: House State: NJ
 Senate District: 03
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

[MEMO ITEM]
Graphic Art Design

(a) SUBTOTAL of Itemized Independent Expenditures	0.00
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	

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Mary Rose Adkins
Signature

Date M M / D D / Y Y Y Y
0 3 / 0 3 / 2 0 1 1

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund	FEC IDENTIFICATION NUMBER C C00053553
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
Master Print, Inc.

Date
M M / D D / Y Y Y Y
1 0 / 2 0 / 2 0 1 0

Mailing Address
P.O. Box 1467

Amount
82.65

City State Zip Code
Newington VA 22122

Transaction ID: 37315013

Purpose of Expenditure
Graphic Art Design

Category/Type
004

Office Sought: House State: OH
 Senate District: 12
 Presidential

Name of Federal Candidate supported or Opposed by expenditure:
Rep. Patrick J. Tiberi

Check One: Support Oppose

Calendar Year-To-Date Per Election for Office Sought
3832.45

Disbursement For: Primary General
 Other (specify) : _____
2010
[MEMO ITEM]
Graphic Art Design

Full Name (Last, First, Middle, Initial) of Payee
Master Print, Inc.

Date
M M / D D / Y Y Y Y
1 0 / 2 0 / 2 0 1 0

Mailing Address
P.O. Box 1467

Amount
41.66

City State Zip Code
Newington VA 22122

Transaction ID: 37315064

Purpose of Expenditure
Graphic Art Design

Category/Type
004

Office Sought: House State: OH
 Senate District: 13
 Presidential

Name of Federal Candidate supported or Opposed by expenditure:
Mr. Thomas Ganley

Check One: Support Oppose

Calendar Year-To-Date Per Election for Office Sought
6697.99

Disbursement For: Primary General
 Other (specify) : _____
2010
[MEMO ITEM]
Graphic Art Design

(a) SUBTOTAL of Itemized Independent Expenditures	0.00
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	

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Mary Rose Adkins
Signature

Date M M / D D / Y Y Y Y
0 3 / 0 3 / 2 0 1 1

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund	FEC IDENTIFICATION NUMBER C C00053553
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
Master Print, Inc.

Date
M M / D D / Y Y Y Y
1 0 / 2 0 / 2 0 1 0

Mailing Address
P.O. Box 1467

Amount
124.31

City State Zip Code
Newington VA 22122

Transaction ID: 37315135

Purpose of Expenditure
Graphic Art Design

Category/Type
004

Office Sought: House State: OH
 Senate District: _____
 Presidential

Name of Federal Candidate supported or Opposed by expenditure:
Mr. Rob Portman

Check One: Support Oppose

Calendar Year-To-Date Per Election for Office Sought
1186499.54

Disbursement For: Primary General
 Other (specify) : _____
2010
[MEMO ITEM]

Full Name (Last, First, Middle, Initial) of Payee
Master Print, Inc.

Date
M M / D D / Y Y Y Y
1 0 / 2 0 / 2 0 1 0

Mailing Address
P.O. Box 1467

Amount
228.55

City State Zip Code
Newington VA 22122

Transaction ID: 37315196

Purpose of Expenditure
Graphic Art Design

Category/Type
004

Office Sought: House State: PA
 Senate District: 06
 Presidential

Name of Federal Candidate supported or Opposed by expenditure:
Mr. Jim Gerlach

Check One: Support Oppose

Calendar Year-To-Date Per Election for Office Sought
511.88

Disbursement For: Primary General
 Other (specify) : _____
2010
[MEMO ITEM]

(a) SUBTOTAL of Itemized Independent Expenditures	0.00
(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.

Mary Rose Adkins
Signature

Date M M / D D / Y Y Y Y
0 3 / 0 3 / 2 0 1 1

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund	FEC IDENTIFICATION NUMBER C C00053553
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
Master Print, Inc.

Date
M M / D D / Y Y Y Y
1 0 / 2 0 / 2 0 1 0

Mailing Address
P.O. Box 1467

Amount
215.78

City State Zip Code
Newington VA 22122

Transaction ID: 37315251

Purpose of Expenditure
Graphic Art Design

Category/Type
004

Office Sought: House State: PA
 Senate District: 08
 Presidential

Name of Federal Candidate supported or Opposed by expenditure:
Mr. Michael Fitzpatrick

Check One: Support Oppose

Calendar Year-To-Date Per Election for Office Sought
1966.96

Disbursement For: Primary General
 Other (specify) : _____
2010

[MEMO ITEM]
Graphic Art Design

Full Name (Last, First, Middle, Initial) of Payee
Master Print, Inc.

Date
M M / D D / Y Y Y Y
1 0 / 2 0 / 2 0 1 0

Mailing Address
P.O. Box 1467

Amount
444.33

City State Zip Code
Newington VA 22122

Transaction ID: 37315291

Purpose of Expenditure
Graphic Art Design

Category/Type
004

Office Sought: House State: PA
 Senate District: _____
 Presidential

Name of Federal Candidate supported or Opposed by expenditure:
Mr. Patrick Toomey

Check One: Support Oppose

Calendar Year-To-Date Per Election for Office Sought
1954204.01

Disbursement For: Primary General
 Other (specify) : _____
2010

[MEMO ITEM]
Graphic Art Design

(a) SUBTOTAL of Itemized Independent Expenditures	0.00
(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.

Mary Rose Adkins
Signature

Date M M / D D / Y Y Y Y
0 3 / 0 3 / 2 0 1 1

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund	FEC IDENTIFICATION NUMBER C C00053553
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
Master Print, Inc.

Date
M M / D D / Y Y Y Y
1 0 / 2 0 / 2 0 1 0

Mailing Address
P.O. Box 1467

Amount
244.54

City State Zip Code
Newington VA 22122

Transaction ID: 37331652

Purpose of Expenditure
Print 4 Color Cards

Category/Type
004

Office Sought: House State: FL
 Senate District: 08
 Presidential

Name of Federal Candidate supported or Opposed by expenditure:
Mr. Daniel Webster

Check One: Support Oppose

Calendar Year-To-Date Per Election for Office Sought
1131.94

Disbursement For: Primary General
 Other (specify) : _____
2010
[MEMO ITEM]
Print 4 Color Cards

Full Name (Last, First, Middle, Initial) of Payee
Master Print, Inc.

Date
M M / D D / Y Y Y Y
1 0 / 2 0 / 2 0 1 0

Mailing Address
P.O. Box 1467

Amount
263.09

City State Zip Code
Newington VA 22122

Transaction ID: 37331653

Purpose of Expenditure
Print 4 Color Cards

Category/Type
004

Office Sought: House State: FL
 Senate District: 12
 Presidential

Name of Federal Candidate supported or Opposed by expenditure:
Mr. Dennis Ross

Check One: Support Oppose

Calendar Year-To-Date Per Election for Office Sought
1169.04

Disbursement For: Primary General
 Other (specify) : _____
2010
[MEMO ITEM]
Print 4 Color Cards

(a) SUBTOTAL of Itemized Independent Expenditures	0.00
(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.

Mary Rose Adkins
Signature

Date M M / D D / Y Y Y Y
0 3 / 0 3 / 2 0 1 1

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund	FEC IDENTIFICATION NUMBER C C00053553
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
Master Print, Inc.

Mailing Address
P.O. Box 1467

City Newington	State VA	Zip Code 22122
-------------------	-------------	-------------------

Purpose of Expenditure Print 4 Color Cards	Category/ Type 004
---	--------------------------

Name of Federal Candidate supported or Opposed by expenditure:
Mr. Allen West

Calendar Year-To-Date Per Election for Office Sought	885.22
---	--------

Date
M M / D D / Y Y Y Y
1 0 / 2 0 / 2 0 1 0

Amount
121.18

Transaction ID: 37331654

Office Sought: House State: FL
 Senate District: 22
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

[MEMO ITEM]
Print 4 Color Cards

Full Name (Last, First, Middle, Initial) of Payee
Master Print, Inc.

Mailing Address
P.O. Box 1467

City Newington	State VA	Zip Code 22122
-------------------	-------------	-------------------

Purpose of Expenditure Print 4 Color Cards	Category/ Type 004
---	--------------------------

Name of Federal Candidate supported or Opposed by expenditure:
Mr. Jon Runyan

Calendar Year-To-Date Per Election for Office Sought	1263.92
---	---------

Date
M M / D D / Y Y Y Y
1 0 / 2 0 / 2 0 1 0

Amount
310.53

Transaction ID: 37331655

Office Sought: House State: NJ
 Senate District: 03
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

[MEMO ITEM]
Print 4 Color Cards

(a) SUBTOTAL of Itemized Independent Expenditures	0.00
(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.

Mary Rose Adkins
Signature

Date M M / D D / Y Y Y Y
0 3 / 0 3 / 2 0 1 1

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund	FEC IDENTIFICATION NUMBER ▼ C C00053553
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee Master Print, Inc.		
Mailing Address P.O. Box 1467		
City Newington	State VA	Zip Code 22122
Purpose of Expenditure Print 4 Color Cards	Category/ Type 004	
Name of Federal Candidate supported or Opposed by expenditure: Rep. Patrick J. Tiberi		
Calendar Year-To-Date Per Election for Office Sought 3915.10		

Date	<input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="0"/>
Amount	82.65
Transaction ID: 37331656	
Office Sought:	<input checked="" type="checkbox"/> House State: <u>OH</u> <input type="checkbox"/> Senate District: <u>12</u> <input type="checkbox"/> Presidential
Check One:	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Disbursement For:	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____ 2010
[MEMO ITEM] Print 4 Color Cards	

Full Name (Last, First, Middle, Initial) of Payee Master Print, Inc.		
Mailing Address P.O. Box 1467		
City Newington	State VA	Zip Code 22122
Purpose of Expenditure Print 4 Color Cards	Category/ Type 004	
Name of Federal Candidate supported or Opposed by expenditure: Mr. Thomas Ganley		
Calendar Year-To-Date Per Election for Office Sought 6739.65		

Date	<input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="0"/>
Amount	41.66
Transaction ID: 37331657	
Office Sought:	<input checked="" type="checkbox"/> House State: <u>OH</u> <input type="checkbox"/> Senate District: <u>13</u> <input type="checkbox"/> Presidential
Check One:	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Disbursement For:	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____ 2010
[MEMO ITEM] Print 4 Color Cards	

(a) SUBTOTAL of Itemized Independent Expenditures	0.00
(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.

Mary Rose Adkins _____ Date / /

Signature

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund	FEC IDENTIFICATION NUMBER C C00053553
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
Master Print, Inc.

Date
M M / D D / Y Y Y Y
1 0 / 2 0 / 2 0 1 0

Mailing Address
P.O. Box 1467

Amount
124.31

City State Zip Code
Newington VA 22122

Transaction ID: 37331658

Purpose of Expenditure
Print 4 Color Cards

Category/Type 004

Office Sought: House State: OH
 Senate District: _____
 Presidential

Name of Federal Candidate supported or Opposed by expenditure:
Mr. Rob Portman

Check One: Support Oppose

Calendar Year-To-Date Per Election for Office Sought
1186623.85

Disbursement For: Primary General
 Other (specify) : _____
2010
[MEMO ITEM]
Print 4 Color Cards

Full Name (Last, First, Middle, Initial) of Payee
Master Print, Inc.

Date
M M / D D / Y Y Y Y
1 0 / 2 0 / 2 0 1 0

Mailing Address
P.O. Box 1467

Amount
228.55

City State Zip Code
Newington VA 22122

Transaction ID: 37331659

Purpose of Expenditure
Print 4 Color Cards

Category/Type 004

Office Sought: House State: PA
 Senate District: 06
 Presidential

Name of Federal Candidate supported or Opposed by expenditure:
Mr. Jim Gerlach

Check One: Support Oppose

Calendar Year-To-Date Per Election for Office Sought
740.43

Disbursement For: Primary General
 Other (specify) : _____
2010
[MEMO ITEM]
Print 4 Color Cards

(a) SUBTOTAL of Itemized Independent Expenditures	0.00
(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.

Mary Rose Adkins
Signature

Date M M / D D / Y Y Y Y
0 3 / 0 3 / 2 0 1 1

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund	FEC IDENTIFICATION NUMBER C C00053553
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
Master Print, Inc.

Date
M M / D D / Y Y Y Y
1 0 / 2 0 / 2 0 1 0

Mailing Address
P.O. Box 1467

Amount
215.78

City State Zip Code
Newington VA 22122

Transaction ID: 37331660

Purpose of Expenditure
Print 4 Color Cards

Category/Type 004

Office Sought: House State: PA
 Senate District: 08
 Presidential

Name of Federal Candidate supported or Opposed by expenditure:
Mr. Michael Fitzpatrick

Check One: Support Oppose

Calendar Year-To-Date Per Election for Office Sought
2182.74

Disbursement For: Primary General
 Other (specify) : _____
2010
[MEMO ITEM]
Print 4 Color Cards

Full Name (Last, First, Middle, Initial) of Payee
Master Print, Inc.

Date
M M / D D / Y Y Y Y
1 0 / 2 0 / 2 0 1 0

Mailing Address
P.O. Box 1467

Amount
444.33

City State Zip Code
Newington VA 22122

Transaction ID: 37331661

Purpose of Expenditure
Print 4 Color Cards

Category/Type 004

Office Sought: House State: PA
 Senate District: _____
 Presidential

Name of Federal Candidate supported or Opposed by expenditure:
Mr. Patrick Toomey

Check One: Support Oppose

Calendar Year-To-Date Per Election for Office Sought
1954648.34

Disbursement For: Primary General
 Other (specify) : _____
2010
[MEMO ITEM]
Print 4 Color Cards

(a) SUBTOTAL of Itemized Independent Expenditures	0.00
(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.

Mary Rose Adkins
Signature

Date M M / D D / Y Y Y Y
0 3 / 0 3 / 2 0 1 1

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund	FEC IDENTIFICATION NUMBER C C00053553
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
Master Print, Inc.

Mailing Address
P.O. Box 1467

City State Zip Code
Newington VA 22122

Purpose of Expenditure Category/Type
Print 4 Color Cards 004

Name of Federal Candidate supported or Opposed by expenditure:
Mr. Kenneth Buck

Calendar Year-To-Date Per Election for Office Sought
861343.49

Date
MM / DD / YYYY
10 / 21 / 2010

Amount
18908.85

Transaction ID: 37342345
Office Sought: House State: CO
 Senate District: _____
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010
[MEMO ITEM]
Print 4 Color Cards

Full Name (Last, First, Middle, Initial) of Payee
Master Print, Inc.

Mailing Address
P.O. Box 1467

City State Zip Code
Newington VA 22122

Purpose of Expenditure Category/Type
Print 4 Color Cards 004

Name of Federal Candidate supported or Opposed by expenditure:
Rep. Michael Avery Ross

Calendar Year-To-Date Per Election for Office Sought
1202.89

Date
MM / DD / YYYY
10 / 21 / 2010

Amount
671.64

Transaction ID: 37342390
Office Sought: House State: AR
 Senate District: 04
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010
[MEMO ITEM]
Print 4 Color Cards

(a) SUBTOTAL of Itemized Independent Expenditures	0.00
(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.

Mary Rose Adkins
Signature

Date MM / DD / YYYY
03 / 03 / 2011

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund	FEC IDENTIFICATION NUMBER C C00053553
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
Master Print, Inc.

Mailing Address
P.O. Box 1467

City Newington	State VA	Zip Code 22122
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Purpose of Expenditure Print 4 Color Cards	Category/ Type 004
---	--------------------------

Name of Federal Candidate supported or Opposed by expenditure:
Rep. Dennis A. Cardoza

Date
MM / DD / YYYY
10 / 21 / 2010

Amount
422.82

Transaction ID: 37342391

Office Sought: House State: CA
 Senate District: 18
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____

2010
[MEMO ITEM]
Print 4 Color Cards

Calendar Year-To-Date Per Election
for Office Sought
954.07

Full Name (Last, First, Middle, Initial) of Payee
Master Print, Inc.

Mailing Address
P.O. Box 1467

City Newington	State VA	Zip Code 22122
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Purpose of Expenditure Print 4 Color Cards	Category/ Type 004
---	--------------------------

Name of Federal Candidate supported or Opposed by expenditure:
Ms. Deborah Halvorson

Date
MM / DD / YYYY
10 / 21 / 2010

Amount
403.41

Transaction ID: 37342392

Office Sought: House State: IL
 Senate District: 11
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____

2010
[MEMO ITEM]
Print 4 Color Cards

Calendar Year-To-Date Per Election
for Office Sought
934.66

(a) SUBTOTAL of Itemized Independent Expenditures	0.00
(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.

Mary Rose Adkins
Signature

Date MM / DD / YYYY
03 / 03 / 2011

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund	FEC IDENTIFICATION NUMBER C C00053553
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
Master Print, Inc.

Mailing Address
P.O. Box 1467

City Newington	State VA	Zip Code 22122
-------------------	-------------	-------------------

Purpose of Expenditure Print 4 Color Cards	Category/ Type 004
---	--------------------------

Name of Federal Candidate supported or Opposed by expenditure:
Rep. John D. Dingell

Calendar Year-To-Date Per Election for Office Sought	875.48
---	--------

Date
MM / DD / YYYY
10 / 21 / 2010

Amount
344.23

Transaction ID: 37342393

Office Sought: House State: MI
 Senate District: 15
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

[MEMO ITEM]
Print 4 Color Cards

Full Name (Last, First, Middle, Initial) of Payee
Master Print, Inc.

Mailing Address
P.O. Box 1467

City Newington	State VA	Zip Code 22122
-------------------	-------------	-------------------

Purpose of Expenditure Print 4 Color Cards	Category/ Type 004
---	--------------------------

Name of Federal Candidate supported or Opposed by expenditure:
Mr. Travis Childers

Calendar Year-To-Date Per Election for Office Sought	969.66
---	--------

Date
MM / DD / YYYY
10 / 21 / 2010

Amount
438.41

Transaction ID: 37342394

Office Sought: House State: MS
 Senate District: 01
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

[MEMO ITEM]
Print 4 Color Cards

(a) SUBTOTAL of Itemized Independent Expenditures	0.00
(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.

Mary Rose Adkins
Signature

Date MM / DD / YYYY
03 / 03 / 2011

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund	FEC IDENTIFICATION NUMBER C C00053553
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
Master Print, Inc.

Mailing Address
P.O. Box 1467

City State Zip Code
Newington VA 22122

Purpose of Expenditure Category/Type
Print 4 Color Cards 004

Name of Federal Candidate supported or Opposed by expenditure:
Rep. Gene Taylor

Calendar Year-To-Date Per Election for Office Sought 827.54

Date
MM / DD / YYYY
10 / 21 / 2010

Amount
296.29

Transaction ID: 37342395

Office Sought: House State: MS
 Senate District: 04
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

[MEMO ITEM]
Print 4 Color Cards

Full Name (Last, First, Middle, Initial) of Payee
Master Print, Inc.

Mailing Address
P.O. Box 1467

City State Zip Code
Newington VA 22122

Purpose of Expenditure Category/Type
Print 4 Color Cards 004

Name of Federal Candidate supported or Opposed by expenditure:
Rep. Heath Shuler

Calendar Year-To-Date Per Election for Office Sought 43038.58

Date
MM / DD / YYYY
10 / 21 / 2010

Amount
157.33

Transaction ID: 37342396

Office Sought: House State: NC
 Senate District: 11
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

[MEMO ITEM]
Print 4 Color Cards

(a) SUBTOTAL of Itemized Independent Expenditures	0.00
(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.

Mary Rose Adkins
Signature

Date MM / DD / YYYY
03 / 03 / 2011

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund	FEC IDENTIFICATION NUMBER C C00053553
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
Master Print, Inc.

Mailing Address
P.O. Box 1467

City Newington	State VA	Zip Code 22122
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Purpose of Expenditure Print 4 Color Cards	Category/ Type 004
---	--------------------------

Name of Federal Candidate supported or Opposed by expenditure:
Rep. Lincoln Davis

Date
MM / DD / YYYY
10 / 21 / 2010

Amount
663.35

Transaction ID: 37342397

Office Sought: House State: TN
 Senate District: 04
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____

2010
[MEMO ITEM]
Print 4 Color Cards

Calendar Year-To-Date Per Election
for Office Sought
1194.60

Full Name (Last, First, Middle, Initial) of Payee
Master Print, Inc.

Mailing Address
P.O. Box 1467

City Newington	State VA	Zip Code 22122
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Purpose of Expenditure Print 4 Color Cards	Category/ Type 004
---	--------------------------

Name of Federal Candidate supported or Opposed by expenditure:
Rep. Nick Joe Rahall, II

Date
MM / DD / YYYY
10 / 21 / 2010

Amount
220.89

Transaction ID: 37342398

Office Sought: House State: WV
 Senate District: 03
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____

2010
[MEMO ITEM]
Print 4 Color Cards

(a) SUBTOTAL of Itemized Independent Expenditures	0.00
(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.

Mary Rose Adkins
Signature

Date MM / DD / YYYY
03 / 03 / 2011

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund		FEC IDENTIFICATION NUMBER C C00053553
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice		

Full Name (Last, First, Middle, Initial) of Payee
Master Print, Inc.

Date
M M / D D / Y Y Y Y
1 0 / 2 2 / 2 0 1 0

Mailing Address
P.O. Box 1467

Amount
822.46

City State Zip Code
Newington VA 22122

Transaction ID: 37342419

Purpose of Expenditure
Print 4 Color Cards

Category/Type
004

Office Sought: House State: FL
 Senate District: 02
 Presidential

Name of Federal Candidate supported or Opposed by expenditure:
Rep. Allen Boyd

Check One: Support Oppose

Calendar Year-To-Date Per Election for Office Sought
1353.71

Disbursement For: Primary General
 Other (specify) : _____
2010
[MEMO ITEM]
Print 4 Color Cards

Full Name (Last, First, Middle, Initial) of Payee
Master Print, Inc.

Date
M M / D D / Y Y Y Y
1 0 / 2 2 / 2 0 1 0

Mailing Address
P.O. Box 1467

Amount
911.26

City State Zip Code
Newington VA 22122

Transaction ID: 37342420

Purpose of Expenditure
Print 4 Color Cards

Category/Type
004

Office Sought: House State: MO
 Senate District: 04
 Presidential

Name of Federal Candidate supported or Opposed by expenditure:
Rep. Ike Skelton

Check One: Support Oppose

Calendar Year-To-Date Per Election for Office Sought
1442.51

Disbursement For: Primary General
 Other (specify) : _____
2010
[MEMO ITEM]
Print 4 Color Cards

(a) SUBTOTAL of Itemized Independent Expenditures	0.00
(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.

Mary Rose Adkins
Signature

Date M M / D D / Y Y Y Y
0 3 / 0 3 / 2 0 1 1

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund	FEC IDENTIFICATION NUMBER C C00053553
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
Master Print, Inc.

Date
M M / D D / Y Y Y Y
1 0 / 2 2 / 2 0 1 0

Mailing Address
P.O. Box 1467

Amount
461.30

City State Zip Code
Newington VA 22122

Transaction ID: 37342421
Office Sought: House State: OH
 Senate District: 18
 Presidential

Purpose of Expenditure
2010 US General Election

Category/Type
004

Name of Federal Candidate supported or Opposed by expenditure:
Rep. Zachary T. Space

Check One: Support Oppose

Calendar Year-To-Date Per Election for Office Sought
898.80

Disbursement For: Primary General
 Other (specify) : _____
2010
[MEMO ITEM]
2010 US General Election

Full Name (Last, First, Middle, Initial) of Payee
Master Print, Inc.

Date
M M / D D / Y Y Y Y
1 0 / 2 2 / 2 0 1 0

Mailing Address
P.O. Box 1467

Amount
846.19

City State Zip Code
Newington VA 22122

Transaction ID: 37342423
Office Sought: House State: OK
 Senate District: 02
 Presidential

Purpose of Expenditure
Print 4 Color Cards

Category/Type
004

Name of Federal Candidate supported or Opposed by expenditure:
Rep. Daniel Boren

Check One: Support Oppose

Calendar Year-To-Date Per Election for Office Sought
1377.44

Disbursement For: Primary General
 Other (specify) : _____
2010
[MEMO ITEM]
Print 4 Color Cards

(a) SUBTOTAL of Itemized Independent Expenditures	0.00
(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.

Mary Rose Adkins
Signature

Date M M / D D / Y Y Y Y
0 3 / 0 3 / 2 0 1 1

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund	FEC IDENTIFICATION NUMBER C C00053553
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
Master Print, Inc.

Date
M M / D D / Y Y Y Y
1 0 / 2 2 / 2 0 1 0

Mailing Address
P.O. Box 1467

Amount
969.67

City State Zip Code
Newington VA 22122

Transaction ID: 37342424

Purpose of Expenditure
Print 4 Color Cards

Category/Type
004

Office Sought: House State: PA
 Senate District: 04
 Presidential

Name of Federal Candidate supported or Opposed by expenditure:
Rep. Jason Altmire

Check One: Support Oppose

Calendar Year-To-Date Per Election for Office Sought
1500.92

Disbursement For: Primary General
 Other (specify) : _____
2010
[MEMO ITEM]
Print 4 Color Cards

Full Name (Last, First, Middle, Initial) of Payee
Master Print, Inc.

Date
M M / D D / Y Y Y Y
1 0 / 2 2 / 2 0 1 0

Mailing Address
P.O. Box 1467

Amount
899.78

City State Zip Code
Newington VA 22122

Transaction ID: 37342425

Purpose of Expenditure
Print 4 Color Cards

Category/Type
004

Office Sought: House State: PA
 Senate District: 17
 Presidential

Name of Federal Candidate supported or Opposed by expenditure:
Rep. Tim Holden

Check One: Support Oppose

Calendar Year-To-Date Per Election for Office Sought
1431.03

Disbursement For: Primary General
 Other (specify) : _____
2010
[MEMO ITEM]
Print 4 Color Cards

(a) SUBTOTAL of Itemized Independent Expenditures	0.00
(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.

Mary Rose Adkins
Signature

Date M M / D D / Y Y Y Y
0 3 / 0 3 / 2 0 1 1

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund	FEC IDENTIFICATION NUMBER C C00053553
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
Master Print, Inc.

Mailing Address
P.O. Box 1467

City Newington	State VA	Zip Code 22122
Purpose of Expenditure Print 4 Color Cards		Category/ Type 004

Name of Federal Candidate supported or Opposed by expenditure:
Rep. Stephanie Herseth Sandlin

Calendar Year-To-Date Per Election for Office Sought	1442.51
---	---

Date
10 / 22 / 2010

Amount
911.26

Transaction ID: 37342426

Office Sought: House State: SD
 Senate District: 01
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
 2010

[MEMO ITEM]
Print 4 Color Cards

Full Name (Last, First, Middle, Initial) of Payee
Master Print, Inc.

Mailing Address
P.O. Box 1467

City Newington	State VA	Zip Code 22122
Purpose of Expenditure Print 4 Color Cards		Category/ Type 004

Name of Federal Candidate supported or Opposed by expenditure:
Rep. James D. Matheson

Calendar Year-To-Date Per Election for Office Sought	1442.51
---	---

Date
10 / 22 / 2010

Amount
911.26

Transaction ID: 37342427

Office Sought: House State: UT
 Senate District: 02
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
 2010

[MEMO ITEM]
Print 4 Color Cards

(a) SUBTOTAL of Itemized Independent Expenditures	0.00
(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.

Mary Rose Adkins _____ Date 03 / 03 / 2011
Signature

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund	FEC IDENTIFICATION NUMBER C C00053553
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
Master Print, Inc.

Date
M M / D D / Y Y Y Y
1 0 / 2 2 / 2 0 1 0

Mailing Address
P.O. Box 1467

Amount
4917.21

City State Zip Code
Newington VA 22122

Transaction ID: 37342601

Purpose of Expenditure
Print 4 Color Cards

Category/Type 004

Office Sought: House State: CT
 Senate District: _____
 Presidential

Name of Federal Candidate supported or Opposed by expenditure:
Mr. Richard Blumenthal

Check One: Support Oppose

Calendar Year-To-Date Per Election for Office Sought
23948.64

Disbursement For: Primary General
 Other (specify) : _____
2010
[MEMO ITEM]
Print 4 Color Cards

Full Name (Last, First, Middle, Initial) of Payee
Master Print, Inc.

Date
M M / D D / Y Y Y Y
1 0 / 2 2 / 2 0 1 0

Mailing Address
P.O. Box 1467

Amount
66.98

City State Zip Code
Newington VA 22122

Transaction ID: 37342602

Purpose of Expenditure
Print 4 Color Cards

Category/Type 004

Office Sought: House State: CA
 Senate District: 47
 Presidential

Name of Federal Candidate supported or Opposed by expenditure:
Van Tran

Check One: Support Oppose

Calendar Year-To-Date Per Election for Office Sought
316.98

Disbursement For: Primary General
 Other (specify) : _____
2010
[MEMO ITEM]
Print 4 Color Cards

(a) SUBTOTAL of Itemized Independent Expenditures	0.00
(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.

Mary Rose Adkins
Signature

Date M M / D D / Y Y Y Y
0 3 / 0 3 / 2 0 1 1

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund	FEC IDENTIFICATION NUMBER C C00053553
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
Master Print, Inc.

Date
M M / D D / Y Y Y Y
1 0 / 2 2 / 2 0 1 0

Mailing Address
P.O. Box 1467

Amount
2633.90

City State Zip Code
Newington VA 22122

Transaction ID: 37342603

Purpose of Expenditure
Print 4 Color Cards

Category/Type 004

Office Sought: House State: NY
 Senate District: 25
 Presidential

Name of Federal Candidate supported or Opposed by expenditure:
Ms. Ann Buerkle

Check One: Support Oppose

Calendar Year-To-Date Per Election for Office Sought
2883.90

Disbursement For: Primary General
 Other (specify) : _____
2010
[MEMO ITEM]
Print 4 Color Cards

Full Name (Last, First, Middle, Initial) of Payee
Master Print, Inc.

Date
M M / D D / Y Y Y Y
1 0 / 2 2 / 2 0 1 0

Mailing Address
P.O. Box 1467

Amount
161.28

City State Zip Code
Newington VA 22122

Transaction ID: 37342604

Purpose of Expenditure
Print 4 Color Cards

Category/Type 004

Office Sought: House State: NY
 Senate District: 13
 Presidential

Name of Federal Candidate supported or Opposed by expenditure:
Mr. Michael Grimm

Check One: Support Oppose

Calendar Year-To-Date Per Election for Office Sought
411.28

Disbursement For: Primary General
 Other (specify) : _____
2010
[MEMO ITEM]
Print 4 Color Cards

(a) SUBTOTAL of Itemized Independent Expenditures	0.00
(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.

Mary Rose Adkins
Signature

Date M M / D D / Y Y Y Y
0 3 / 0 3 / 2 0 1 1

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund		FEC IDENTIFICATION NUMBER C C00053553
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice		

Full Name (Last, First, Middle, Initial) of Payee
Master Print, Inc.

Date
M M / D D / Y Y Y Y
1 0 / 2 2 / 2 0 1 0

Mailing Address
P.O. Box 1467

Amount
1570.31

City State Zip Code
Newington VA 22122

Transaction ID: 37342605

Purpose of Expenditure
Print 4 Color Cards

Category/Type
004

Office Sought: House State: PA
 Senate District: 07
 Presidential

Name of Federal Candidate supported or Opposed by expenditure:
Mr. Patrick Meehan

Check One: Support Oppose

Calendar Year-To-Date Per Election for Office Sought
10120.01

Disbursement For: Primary General
 Other (specify) : _____
2010
[MEMO ITEM]
Print 4 Color Cards

Full Name (Last, First, Middle, Initial) of Payee
Master Print, Inc.

Date
M M / D D / Y Y Y Y
1 0 / 2 2 / 2 0 1 0

Mailing Address
P.O. Box 1467

Amount
1570.31

City State Zip Code
Newington VA 22122

Transaction ID: 37342606

Purpose of Expenditure
Print 4 Color Cards

Category/Type
004

Office Sought: House State: PA
 Senate District: _____
 Presidential

Name of Federal Candidate supported or Opposed by expenditure:
Mr. Patrick Toomey

Check One: Support Oppose

Calendar Year-To-Date Per Election for Office Sought
1959569.39

Disbursement For: Primary General
 Other (specify) : _____
2010
[MEMO ITEM]
Print 4 Color Cards

(a) SUBTOTAL of Itemized Independent Expenditures	0.00
(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.

Mary Rose Adkins
Signature

Date M M / D D / Y Y Y Y
0 3 / 0 3 / 2 0 1 1

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund	FEC IDENTIFICATION NUMBER C C00053553
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
Master Print, Inc.

Mailing Address
P.O. Box 1467

City State Zip Code
Newington VA 22122

Purpose of Expenditure Category/Type
Print 4 Color Cards 004

Name of Federal Candidate supported or Opposed by expenditure:
Sen. Barbara Boxer

Calendar Year-To-Date Per Election for Office Sought
295339.91

Date
MM / DD / YYYY
10 / 25 / 2010

Amount
8217.64

Transaction ID: 37351543

Office Sought: House State: CA
 Senate District: _____
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

[MEMO ITEM]
Print 4 Color Cards

Full Name (Last, First, Middle, Initial) of Payee
Master Print, Inc.

Mailing Address
P.O. Box 1467

City State Zip Code
Newington VA 22122

Purpose of Expenditure Category/Type
Print 4 Color Cards 004

Name of Federal Candidate supported or Opposed by expenditure:
Mr. Joseph Sestak

Calendar Year-To-Date Per Election for Office Sought
2230448.35

Date
MM / DD / YYYY
10 / 26 / 2010

Amount
8328.42

Transaction ID: 37357852

Office Sought: House State: PA
 Senate District: _____
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

[MEMO ITEM]
Print 4 Color Cards

(a) SUBTOTAL of Itemized Independent Expenditures	0.00
(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.

Mary Rose Adkins
Signature

Date MM / DD / YYYY
03 / 03 / 2011

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund		FEC IDENTIFICATION NUMBER C C00053553
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice		

Full Name (Last, First, Middle, Initial) of Payee
Master Print, Inc.

Date
M M / D D / Y Y Y Y
1 0 / 2 6 / 2 0 1 0

Mailing Address
P.O. Box 1467

Amount
8328.42

City State Zip Code
Newington VA 22122

Transaction ID: 37357855

Purpose of Expenditure
Print 4 Color Cards

Category/Type
004

Office Sought: House State: PA
 Senate District: _____
 Presidential

Name of Federal Candidate supported or Opposed by expenditure:
Mr. Patrick Toomey

Check One: Support Oppose

Calendar Year-To-Date Per Election
for Office Sought 2238776.77

Disbursement For: Primary General
 Other (specify) : _____
2010

[MEMO ITEM]
Print 4 Color Cards

Full Name (Last, First, Middle, Initial) of Payee
Master Print, Inc.

Date
M M / D D / Y Y Y Y
1 0 / 3 0 / 2 0 1 0

Mailing Address
P.O. Box 1467

Amount
671.64

City State Zip Code
Newington VA 22122

Transaction ID: 37380710

Purpose of Expenditure
Print 4 Color Cards

Category/Type
004

Office Sought: House State: AR
 Senate District: 04
 Presidential

Name of Federal Candidate supported or Opposed by expenditure:
Rep. Michael Avery Ross

Check One: Support Oppose

Calendar Year-To-Date Per Election
for Office Sought 7298.58

Disbursement For: Primary General
 Other (specify) : _____
2010

(a) SUBTOTAL of Itemized Independent Expenditures	671.64
(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
Signature

Date M M / D D / Y Y Y Y
0 3 / 0 3 / 2 0 1 1

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund	FEC IDENTIFICATION NUMBER C C00053553
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
Master Print, Inc.

Mailing Address
P.O. Box 1467

City Newington	State VA	Zip Code 22122
-------------------	-------------	-------------------

Purpose of Expenditure Print 4 Color Cards	Category/ Type 004
---	--------------------------

Name of Federal Candidate supported or Opposed by expenditure:
Rep. Dennis A. Cardoza

Calendar Year-To-Date Per Election for Office Sought	4745.31
---	---------

Date
M M / D D / Y Y Y Y
1 0 / 3 0 / 2 0 1 0

Amount
422.82

Transaction ID: 37380711

Office Sought: House State: CA
 Senate District: 18
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

Full Name (Last, First, Middle, Initial) of Payee
Master Print, Inc.

Mailing Address
P.O. Box 1467

City Newington	State VA	Zip Code 22122
-------------------	-------------	-------------------

Purpose of Expenditure Print 4 Color Cards	Category/ Type 004
---	--------------------------

Name of Federal Candidate supported or Opposed by expenditure:
Rep. Allen Boyd

Calendar Year-To-Date Per Election for Office Sought	8706.71
---	---------

Date
M M / D D / Y Y Y Y
1 0 / 3 0 / 2 0 1 0

Amount
822.46

Transaction ID: 37380712

Office Sought: House State: FL
 Senate District: 02
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

(a) SUBTOTAL of Itemized Independent Expenditures	1245.28
(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
Signature

Date M M / D D / Y Y Y Y
0 3 / 0 3 / 2 0 1 1

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund	FEC IDENTIFICATION NUMBER C C00053553
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
Master Print, Inc.

Date
M M / D D / Y Y Y Y
1 0 / 3 0 / 2 0 1 0

Mailing Address
P.O. Box 1467

Amount
403.41

City State Zip Code
Newington VA 22122

Transaction ID: 37380713

Purpose of Expenditure
Print 4 Color Cards

Category/Type 004

Office Sought: House State: IL
 Senate District: 11
 Presidential

Name of Federal Candidate supported or Opposed by expenditure:
Ms. Deborah Halvorson

Check One: Support Oppose

Calendar Year-To-Date Per Election for Office Sought
4619.89

Disbursement For: Primary General
 Other (specify) : _____
2010

Full Name (Last, First, Middle, Initial) of Payee
Master Print, Inc.

Date
M M / D D / Y Y Y Y
1 0 / 3 0 / 2 0 1 0

Mailing Address
P.O. Box 1467

Amount
344.23

City State Zip Code
Newington VA 22122

Transaction ID: 37380714

Purpose of Expenditure
Print 4 Color Cards

Category/Type 004

Office Sought: House State: MI
 Senate District: 15
 Presidential

Name of Federal Candidate supported or Opposed by expenditure:
Rep. John D. Dingell

Check One: Support Oppose

Calendar Year-To-Date Per Election for Office Sought
3970.60

Disbursement For: Primary General
 Other (specify) : _____
2010

(a) SUBTOTAL of Itemized Independent Expenditures	747.64
(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
Signature

Date M M / D D / Y Y Y Y
0 3 / 0 3 / 2 0 1 1

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund	FEC IDENTIFICATION NUMBER C C00053553
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
Master Print, Inc.

Mailing Address
P.O. Box 1467

City Newington	State VA	Zip Code 22122
-------------------	-------------	-------------------

Purpose of Expenditure Print 4 Color Cards	Category/ Type 004
---	--------------------------

Name of Federal Candidate supported or Opposed by expenditure:
Rep. Ike Skelton

Calendar Year-To-Date Per Election for Office Sought	9708.01
---	---------

Date
M M / D D / Y Y Y Y
1 0 / 3 0 / 2 0 1 0

Amount
911.26

Transaction ID: 37380715

Office Sought: House State: MO
 Senate District: 04
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

Full Name (Last, First, Middle, Initial) of Payee
Master Print, Inc.

Mailing Address
P.O. Box 1467

City Newington	State VA	Zip Code 22122
-------------------	-------------	-------------------

Purpose of Expenditure Print 4 Color Cards	Category/ Type 004
---	--------------------------

Name of Federal Candidate supported or Opposed by expenditure:
Mr. Travis Childers

Calendar Year-To-Date Per Election for Office Sought	4956.66
---	---------

Date
M M / D D / Y Y Y Y
1 0 / 3 0 / 2 0 1 0

Amount
438.41

Transaction ID: 37380716

Office Sought: House State: MS
 Senate District: 01
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

(a) SUBTOTAL of Itemized Independent Expenditures	1349.67
(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
Signature

Date M M / D D / Y Y Y Y
0 3 / 0 3 / 2 0 1 1

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund	FEC IDENTIFICATION NUMBER C C00053553
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Check if 24-hour notice 48-hour notice

Full Name (Last, First, Middle, Initial) of Payee
Master Print, Inc.

Date
M M / D D / Y Y Y Y
1 0 / 3 0 / 2 0 1 0

Mailing Address
P.O. Box 1467

Amount
296.29

City State Zip Code
Newington VA 22122

Transaction ID: 37380717

Purpose of Expenditure
Print 4 Color Cards

Category/Type
004

Office Sought: House State: MS
 Senate District: 04
 Presidential

Name of Federal Candidate supported or Opposed by expenditure:
Rep. Gene Taylor

Check One: Support Oppose

Calendar Year-To-Date Per Election for Office Sought
3498.02

Disbursement For: Primary General
 Other (specify) : _____
2010

Full Name (Last, First, Middle, Initial) of Payee
Master Print, Inc.

Date
M M / D D / Y Y Y Y
1 0 / 3 0 / 2 0 1 0

Mailing Address
P.O. Box 1467

Amount
157.33

City State Zip Code
Newington VA 22122

Transaction ID: 37380718

Purpose of Expenditure
Print 4 Color Cards

Category/Type
004

Office Sought: House State: NC
 Senate District: 11
 Presidential

Name of Federal Candidate supported or Opposed by expenditure:
Rep. Heath Shuler

Check One: Support Oppose

Calendar Year-To-Date Per Election for Office Sought
44494.10

Disbursement For: Primary General
 Other (specify) : _____
2010

(a) SUBTOTAL of Itemized Independent Expenditures	453.62
(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
Signature

Date
M M / D D / Y Y Y Y
0 3 / 0 3 / 2 0 1 1

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund	FEC IDENTIFICATION NUMBER ▼ C C00053553
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
Master Print, Inc.

Mailing Address
P.O. Box 1467

City Newington	State VA	Zip Code 22122
-------------------	-------------	-------------------

Purpose of Expenditure Print 4 Color Cards	Category/ Type 004
---	---

Name of Federal Candidate supported or Opposed by expenditure:
Rep. Zachary T. Space

Calendar Year-To-Date Per Election for Office Sought	5070.87
---	---

Date

M M	/	D D	/	Y Y Y Y
1 0		3 0		2 0 1 0

Amount
461.30

Transaction ID: 37380719

Office Sought: House State: OH
 Senate District: 18
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
 2010

Full Name (Last, First, Middle, Initial) of Payee
Master Print, Inc.

Mailing Address
P.O. Box 1467

City Newington	State VA	Zip Code 22122
-------------------	-------------	-------------------

Purpose of Expenditure Print 4 Color Cards	Category/ Type 004
---	---

Name of Federal Candidate supported or Opposed by expenditure:
Rep. Daniel Boren

Calendar Year-To-Date Per Election for Office Sought	9021.67
---	---

Date

M M	/	D D	/	Y Y Y Y
1 0		3 0		2 0 1 0

Amount
846.19

Transaction ID: 37380720

Office Sought: House State: OK
 Senate District: 02
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
 2010

(a) SUBTOTAL of Itemized Independent Expenditures	1307.49
(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
Signature

Date

M M	/	D D	/	Y Y Y Y
0 3		0 3		2 0 1 1

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund	FEC IDENTIFICATION NUMBER C C00053553
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
Master Print, Inc.

Date
M M / D D / Y Y Y Y
1 0 / 3 0 / 2 0 1 0

Mailing Address
P.O. Box 1467

Amount
969.67

City State Zip Code
Newington VA 22122

Transaction ID: 37380721
Office Sought: House State: PA
 Senate District: 04
 Presidential

Purpose of Expenditure Category/Type
Print 4 Color Cards 004

Name of Federal Candidate supported or Opposed by expenditure:
Rep. Jason Altmire

Check One: Support Oppose

Calendar Year-To-Date Per Election for Office Sought
10166.14

Disbursement For: Primary General
 Other (specify) : _____
2010

Full Name (Last, First, Middle, Initial) of Payee
Master Print, Inc.

Date
M M / D D / Y Y Y Y
1 0 / 3 0 / 2 0 1 0

Mailing Address
P.O. Box 1467

Amount
899.78

City State Zip Code
Newington VA 22122

Transaction ID: 37380722
Office Sought: House State: PA
 Senate District: 17
 Presidential

Purpose of Expenditure Category/Type
Print 4 Color Cards 004

Name of Federal Candidate supported or Opposed by expenditure:
Rep. Tim Holden

Check One: Support Oppose

Calendar Year-To-Date Per Election for Office Sought
9494.53

Disbursement For: Primary General
 Other (specify) : _____
2010

(a) SUBTOTAL of Itemized Independent Expenditures	1869.45
(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
Signature

Date M M / D D / Y Y Y Y
0 3 / 0 3 / 2 0 1 1

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund	FEC IDENTIFICATION NUMBER ▼ C C00053553
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
Master Print, Inc.

Mailing Address
P.O. Box 1467

City Newington	State VA	Zip Code 22122
Purpose of Expenditure Print 4 Color Cards		Category/ Type 004

Name of Federal Candidate supported or Opposed by expenditure:
Rep. Stephanie Herseth Sandlin

Calendar Year-To-Date Per Election for Office Sought	9622.96
---	---

Date

M M	/	D D	/	Y Y Y Y
1 0		3 0		2 0 1 0

Amount
911.26

Transaction ID: 37380723

Office Sought: House State: SD
 Senate District: 01
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
 2010

Full Name (Last, First, Middle, Initial) of Payee
Master Print, Inc.

Mailing Address
P.O. Box 1467

City Newington	State VA	Zip Code 22122
Purpose of Expenditure Print 4 Color Cards		Category/ Type 004

Name of Federal Candidate supported or Opposed by expenditure:
Rep. Lincoln Davis

Calendar Year-To-Date Per Election for Office Sought	7203.05
---	---

Date

M M	/	D D	/	Y Y Y Y
1 0		3 0		2 0 1 0

Amount
663.35

Transaction ID: 37380724

Office Sought: House State: TN
 Senate District: 04
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
 2010

(a) SUBTOTAL of Itemized Independent Expenditures	1574.61
(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 _____ Date

M M	/	D D	/	Y Y Y Y
0 3		0 3		2 0 1 1

 Signature

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

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund		FEC IDENTIFICATION NUMBER C C00053553
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice		

Full Name (Last, First, Middle, Initial) of Payee
Master Print, Inc.

Mailing Address
P.O. Box 1467

City Newington	State VA	Zip Code 22122
-------------------	-------------	-------------------

Purpose of Expenditure Print 4 Color Cards	Category/ Type 004
---	--------------------------

Name of Federal Candidate supported or Opposed by expenditure:
Rep. James D. Matheson

Calendar Year-To-Date Per Election for Office Sought	9616.24
---	---------

Date
M M / D D / Y Y Y Y
1 0 / 3 0 / 2 0 1 0

Amount
911.26

Transaction ID: 37380725

Office Sought: House State: UT
 Senate District: 02
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

Full Name (Last, First, Middle, Initial) of Payee
Master Print, Inc.

Mailing Address
P.O. Box 1467

City Newington	State VA	Zip Code 22122
-------------------	-------------	-------------------

Purpose of Expenditure Print 4 Color Cards	Category/ Type 004
---	--------------------------

Name of Federal Candidate supported or Opposed by expenditure:
Rep. Nick Joe Rahall, II

Calendar Year-To-Date Per Election for Office Sought	2811.80
---	---------

Date
M M / D D / Y Y Y Y
1 0 / 3 0 / 2 0 1 0

Amount
220.89

Transaction ID: 37380726

Office Sought: House State: WV
 Senate District: 03
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

(a) SUBTOTAL of Itemized Independent Expenditures	1132.15
(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
Signature

Date M M / D D / Y Y Y Y
0 3 / 0 3 / 2 0 1 1

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund	FEC IDENTIFICATION NUMBER C C00053553
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
Master Print, Inc.

Mailing Address
P.O. Box 1467

City Newington	State VA	Zip Code 22122
-------------------	-------------	-------------------

Purpose of Expenditure Print 4 Color Cards	Category/ Type 004
---	--------------------------

Name of Federal Candidate supported or Opposed by expenditure:
Mr. Richard Blumenthal

Calendar Year-To-Date Per Election for Office Sought	59915.34
---	----------

Date
M M / D D / Y Y Y Y
1 0 / 3 0 / 2 0 1 0

Amount
4917.34

Transaction ID: 37384414

Office Sought: House State: CT
 Senate District: _____
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

Full Name (Last, First, Middle, Initial) of Payee
Master Print, Inc.

Mailing Address
P.O. Box 1467

City Newington	State VA	Zip Code 22122
-------------------	-------------	-------------------

Purpose of Expenditure Print 4 Color Cards	Category/ Type 004
---	--------------------------

Name of Federal Candidate supported or Opposed by expenditure:
Van Tran

Calendar Year-To-Date Per Election for Office Sought	905.32
---	--------

Date
M M / D D / Y Y Y Y
1 0 / 3 0 / 2 0 1 0

Amount
66.98

Transaction ID: 37384430

Office Sought: House State: CA
 Senate District: 47
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

(a) SUBTOTAL of Itemized Independent Expenditures	4984.32
(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
Signature

Date M M / D D / Y Y Y Y
0 3 / 0 3 / 2 0 1 1

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund		FEC IDENTIFICATION NUMBER C C00053553
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice		

Full Name (Last, First, Middle, Initial) of Payee
Master Print, Inc.

Mailing Address
P.O. Box 1467

City Newington	State VA	Zip Code 22122
-------------------	-------------	-------------------

Purpose of Expenditure Print 4 Color Cards	Category/ Type 004
---	--------------------------

Name of Federal Candidate supported or Opposed by expenditure:
Ms. Ann Buerkle

Calendar Year-To-Date Per Election for Office Sought	25466.58
---	----------

Date
M M / D D / Y Y Y Y
1 0 / 3 0 / 2 0 1 0

Amount
2633.90

Transaction ID: 37384431

Office Sought: House State: NY
 Senate District: 25
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

Full Name (Last, First, Middle, Initial) of Payee
Master Print, Inc.

Mailing Address
P.O. Box 1467

City Newington	State VA	Zip Code 22122
-------------------	-------------	-------------------

Purpose of Expenditure Print 4 Color Cards	Category/ Type 004
---	--------------------------

Name of Federal Candidate supported or Opposed by expenditure:
Mr. Michael Grimm

Calendar Year-To-Date Per Election for Office Sought	1100.01
---	---------

Date
M M / D D / Y Y Y Y
1 0 / 3 0 / 2 0 1 0

Amount
161.28

Transaction ID: 37384432

Office Sought: House State: NY
 Senate District: 13
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

(a) SUBTOTAL of Itemized Independent Expenditures	2795.18
(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
Signature

Date M M / D D / Y Y Y Y
0 3 / 0 3 / 2 0 1 1

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund	FEC IDENTIFICATION NUMBER C C00053553
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
Master Print, Inc.

Mailing Address
P.O. Box 1467

City Newington	State VA	Zip Code 22122
-------------------	-------------	-------------------

Purpose of Expenditure Print 4 Color Cards	Category/ Type 004
---	--------------------------

Name of Federal Candidate supported or Opposed by expenditure:
Mr. Patrick Meehan

Calendar Year-To-Date Per Election for Office Sought	23591.96
---	----------

Date
M M / D D / Y Y Y Y
1 0 / 3 0 / 2 0 1 0

Amount
1570.31

Transaction ID: 37384433

Office Sought: House State: PA
 Senate District: 07
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

Full Name (Last, First, Middle, Initial) of Payee
Master Print, Inc.

Mailing Address
P.O. Box 1467

City Newington	State VA	Zip Code 22122
-------------------	-------------	-------------------

Purpose of Expenditure Print 4 Color Cards	Category/ Type 004
---	--------------------------

Name of Federal Candidate supported or Opposed by expenditure:
Mr. Patrick Toomey

Calendar Year-To-Date Per Election for Office Sought	2453141.08
---	------------

Date
M M / D D / Y Y Y Y
1 0 / 3 0 / 2 0 1 0

Amount
1570.31

Transaction ID: 37384434

Office Sought: House State: PA
 Senate District: _____
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

(a) SUBTOTAL of Itemized Independent Expenditures	3140.62
(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 _____ Date M M / D D / Y Y Y Y
Signature 0 3 / 0 3 / 2 0 1 1

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund		FEC IDENTIFICATION NUMBER C C00053553
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice		

Full Name (Last, First, Middle, Initial) of Payee
Master Print, Inc.

Date
M M / D D / Y Y Y Y
1 0 / 3 0 / 2 0 1 0

Mailing Address
P.O. Box 1467

Amount
8329.48

City State Zip Code
Newington VA 22122

Transaction ID: 37392834

Purpose of Expenditure
Print 4 Color Cards

Category/Type
004

Office Sought: House State: PA
 Senate District: _____
 Presidential

Name of Federal Candidate supported or Opposed by expenditure:
Mr. Joseph Sestak

Check One: Support Oppose

Calendar Year-To-Date Per Election
for Office Sought 2461470.56

Disbursement For: Primary General
 Other (specify) : _____
2010

Full Name (Last, First, Middle, Initial) of Payee
Master Print, Inc.

Date
M M / D D / Y Y Y Y
1 0 / 3 0 / 2 0 1 0

Mailing Address
P.O. Box 1467

Amount
8329.48

City State Zip Code
Newington VA 22122

Transaction ID: 37392835

Purpose of Expenditure
Print 4 Color Cards

Category/Type
004

Office Sought: House State: PA
 Senate District: _____
 Presidential

Name of Federal Candidate supported or Opposed by expenditure:
Mr. Patrick Toomey

Check One: Support Oppose

Calendar Year-To-Date Per Election
for Office Sought 2469800.04

Disbursement For: Primary General
 Other (specify) : _____
2010

(a) SUBTOTAL of Itemized Independent Expenditures	16658.96
(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
Signature

Date M M / D D / Y Y Y Y
0 3 / 0 3 / 2 0 1 1

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund	FEC IDENTIFICATION NUMBER C C00053553
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
Master Print, Inc.

Mailing Address
P.O. Box 1467

City Newington	State VA	Zip Code 22122
-------------------	-------------	-------------------

Purpose of Expenditure Print 4 Color Cards	Category/ Type 004
---	--------------------------

Name of Federal Candidate supported or Opposed by expenditure:
Sen. Barbara Boxer

Calendar Year-To-Date Per Election for Office Sought	388766.31
---	-----------

Date
M M / D D / Y Y Y Y
1 0 / 3 0 / 2 0 1 0

Amount
8295.56

Transaction ID: 37392859

Office Sought: House State: CA
 Senate District: _____
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

Full Name (Last, First, Middle, Initial) of Payee
National Rifle Association of America

Mailing Address
11250 Waples Mill Road

City Fairfax	State VA	Zip Code 22030
-----------------	-------------	-------------------

Purpose of Expenditure Prepay Salary / Benefits	Category/ Type 001
--	--------------------------

Name of Federal Candidate supported or Opposed by expenditure:
Mr. Steve Stivers

Calendar Year-To-Date Per Election for Office Sought	7304.10
---	---------

Date
M M / D D / Y Y Y Y
1 0 / 2 7 / 2 0 1 0

Amount
1757.15

Transaction ID: 37362488

Office Sought: House State: OH
 Senate District: 15
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

(a) SUBTOTAL of Itemized Independent Expenditures	10052.71
(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
Signature

Date M M / D D / Y Y Y Y
0 3 / 0 3 / 2 0 1 1

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund	FEC IDENTIFICATION NUMBER C C00053553
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
National Rifle Association of America

Mailing Address
11250 Waples Mill Road

City	State	Zip Code
Fairfax	VA	22030

Purpose of Expenditure Prepay Salary / Benefits	Category/Type 001
--	----------------------

Name of Federal Candidate supported or Opposed by expenditure:
Rep. Patrick J. Tiberi

Calendar Year-To-Date Per Election for Office Sought	4983.51
--	---------

Date
M M / D D / Y Y Y Y
1 0 / 2 7 / 2 0 1 0

Amount
439.29

Transaction ID: 37362494

Office Sought: House State: OH
 Senate District: 12
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

Full Name (Last, First, Middle, Initial) of Payee
National Rifle Association of America

Mailing Address
11250 Waples Mill Road

City	State	Zip Code
Fairfax	VA	22030

Purpose of Expenditure Prepay Salary / Benefits	Category/Type 001
--	----------------------

Name of Federal Candidate supported or Opposed by expenditure:
Mr. Keith Fimian

Calendar Year-To-Date Per Election for Office Sought	10883.35
--	----------

Date
M M / D D / Y Y Y Y
1 0 / 2 7 / 2 0 1 0

Amount
2187.73

Transaction ID: 37362496

Office Sought: House State: VA
 Senate District: 11
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

(a) SUBTOTAL of Itemized Independent Expenditures	2627.02
(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
Signature

Date M M / D D / Y Y Y Y
0 3 / 0 3 / 2 0 1 1

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund	FEC IDENTIFICATION NUMBER C C00053553
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
National Rifle Association of America

Mailing Address
11250 Waples Mill Road

City	State	Zip Code
Fairfax	VA	22030

Purpose of Expenditure Prepay Salary / Benefits	Category/Type 001
--	----------------------

Name of Federal Candidate supported or Opposed by expenditure:
Mr. Edward Martin

Calendar Year-To-Date Per Election for Office Sought	76030.79
--	----------

Date
M M / D D / Y Y Y Y
1 0 / 2 7 / 2 0 1 0

Amount
1093.87

Transaction ID: 37362516

Office Sought: House State: MO
 Senate District: 03
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

Full Name (Last, First, Middle, Initial) of Payee
National Rifle Association of America

Mailing Address
11250 Waples Mill Road

City	State	Zip Code
Fairfax	VA	22030

Purpose of Expenditure Prepay Salary / Benefits	Category/Type 001
--	----------------------

Name of Federal Candidate supported or Opposed by expenditure:
Mr. Roy Blunt

Calendar Year-To-Date Per Election for Office Sought	2449722.67
--	------------

Date
M M / D D / Y Y Y Y
1 0 / 2 7 / 2 0 1 0

Amount
1093.86

Transaction ID: 37362517

Office Sought: House State: MO
 Senate District: _____
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

(a) SUBTOTAL of Itemized Independent Expenditures	2187.73
(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
Signature

Date M M / D D / Y Y Y Y
0 3 / 0 3 / 2 0 1 1

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund	FEC IDENTIFICATION NUMBER C C00053553
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
National Rifle Association of America

Mailing Address
11250 Waples Mill Road

City	State	Zip Code
Fairfax	VA	22030

Purpose of Expenditure Prepay Salary / Benefits	Category/Type 001
--	----------------------

Name of Federal Candidate supported or Opposed by expenditure:
Mr. Dino Rossi

Calendar Year-To-Date Per Election for Office Sought	598053.98
--	-----------

Date
M M / D D / Y Y Y Y
1 0 / 2 7 / 2 0 1 0

Amount
1113.62

Transaction ID: 37362630

Office Sought: House State: WA
 Senate District: _____
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

Full Name (Last, First, Middle, Initial) of Payee
National Rifle Association of America

Mailing Address
11250 Waples Mill Road

City	State	Zip Code
Fairfax	VA	22030

Purpose of Expenditure Prepay Salary / Benefits	Category/Type 001
--	----------------------

Name of Federal Candidate supported or Opposed by expenditure:
Jaime Herrera

Calendar Year-To-Date Per Election for Office Sought	144742.29
--	-----------

Date
M M / D D / Y Y Y Y
1 0 / 2 7 / 2 0 1 0

Amount
1113.62

Transaction ID: 37362631

Office Sought: House State: WA
 Senate District: 03
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

(a) SUBTOTAL of Itemized Independent Expenditures	2227.24
(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 _____ Date M M / D D / Y Y Y Y
Signature 0 3 / 0 3 / 2 0 1 1

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund	FEC IDENTIFICATION NUMBER ▼ C C00053553
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
National Rifle Association of America

Mailing Address
11250 Waples Mill Road

City State Zip Code
Fairfax VA 22030

Purpose of Expenditure
Prepay Salary / Benefits

Category/Type **001**

Name of Federal Candidate supported or Opposed by expenditure:
Mr. Charles Dent

Calendar Year-To-Date Per Election for Office Sought **31881.33**

Date
M M / D D / Y Y Y Y
1 0 / 2 7 / 2 0 1 0

Amount
1127.95

Transaction ID: 37362632

Office Sought: House State: PA
 Senate District: 15
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

Full Name (Last, First, Middle, Initial) of Payee
National Rifle Association of America

Mailing Address
11250 Waples Mill Road

City State Zip Code
Fairfax VA 22030

Purpose of Expenditure
Prepay Salary / Benefits

Category/Type **001**

Name of Federal Candidate supported or Opposed by expenditure:
Mr. Patrick Toomey

Calendar Year-To-Date Per Election for Office Sought **2421338.56**

Date
M M / D D / Y Y Y Y
1 0 / 2 7 / 2 0 1 0

Amount
563.97

Transaction ID: 37362633

Office Sought: House State: PA
 Senate District: _____
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

(a) SUBTOTAL of Itemized Independent Expenditures	1691.92
(b) SUBTOTAL of Unitemized Independent Expenditures	<input style="width:100%;" type="text"/>
(c) TOTAL Independent Expenditures	<input style="width:100%;" type="text"/>

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
Signature

Date M M / D D / Y Y Y Y
0 3 / 0 3 / 2 0 1 1

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

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund	FEC IDENTIFICATION NUMBER ▼ C C00053553
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
National Rifle Association of America

Mailing Address
11250 Waples Mill Road

City	State	Zip Code
Fairfax	VA	22030

Purpose of Expenditure Prepay Salary / Benefits	Category/Type
	001

Name of Federal Candidate supported or Opposed by expenditure:
Sen. Richard M. Burr

Calendar Year-To-Date Per Election for Office Sought	40133.80
--	----------

Date
M M / D D / Y Y Y Y
1 0 / 2 7 / 2 0 1 0

Amount
2229.19

Transaction ID: 37362635

Office Sought: House State: NC
 Senate District: _____
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
 2010

Full Name (Last, First, Middle, Initial) of Payee
National Rifle Association of America

Mailing Address
11250 Waples Mill Road

City	State	Zip Code
Fairfax	VA	22030

Purpose of Expenditure Prepay Salary / Benefits	Category/Type
	001

Name of Federal Candidate supported or Opposed by expenditure:
Ms. Nan Hayworth

Calendar Year-To-Date Per Election for Office Sought	25763.70
--	----------

Date
M M / D D / Y Y Y Y
1 0 / 2 7 / 2 0 1 0

Amount
2375.00

Transaction ID: 37362636

Office Sought: House State: NY
 Senate District: 19
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
 2010

(a) SUBTOTAL of Itemized Independent Expenditures	4604.19
(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
Signature

Date M M / D D / Y Y Y Y
0 3 / 0 3 / 2 0 1 1

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund	FEC IDENTIFICATION NUMBER C C00053553
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
National Rifle Association of America

Mailing Address
11250 Waples Mill Road

City	State	Zip Code
Fairfax	VA	22030

Purpose of Expenditure Prepay Salary / Benefits	Category/Type 001
--	----------------------

Name of Federal Candidate supported or Opposed by expenditure:
Mr. Thomas Ganley

Calendar Year-To-Date Per Election for Office Sought	9146.13
--	---------

Date
M M / D D / Y Y Y Y
1 0 / 2 7 / 2 0 1 0

Amount
2086.62

Transaction ID: 37362637

Office Sought: House State: OH
 Senate District: 13
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

Full Name (Last, First, Middle, Initial) of Payee
National Rifle Association of America

Mailing Address
11250 Waples Mill Road

City	State	Zip Code
Fairfax	VA	22030

Purpose of Expenditure Prepay Salary / Benefits	Category/Type 001
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Name of Federal Candidate supported or Opposed by expenditure:
Rep. Steve Chabot

Calendar Year-To-Date Per Election for Office Sought	8472.42
--	---------

Date
M M / D D / Y Y Y Y
1 0 / 2 7 / 2 0 1 0

Amount
1605.33

Transaction ID: 37362638

Office Sought: House State: OH
 Senate District: 01
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

(a) SUBTOTAL of Itemized Independent Expenditures	3691.95
(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
Signature

Date M M / D D / Y Y Y Y
0 3 / 0 3 / 2 0 1 1

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund	FEC IDENTIFICATION NUMBER C C00053553
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
National Rifle Association of America

Mailing Address
11250 Waples Mill Road

City State Zip Code
Fairfax VA 22030

Purpose of Expenditure
Prepay Salary / Benefits

Category/Type **001**

Name of Federal Candidate supported or Opposed by expenditure:
Mr. Rob Portman

Calendar Year-To-Date Per Election for Office Sought **1188217.77**

Date
M M / D D / Y Y Y Y
10 / 27 / 2010

Amount
644.93

Transaction ID: 37362639

Office Sought: House State: OH
 Senate District: _____
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

Full Name (Last, First, Middle, Initial) of Payee
National Rifle Association of America

Mailing Address
11250 Waples Mill Road

City State Zip Code
Fairfax VA 22030

Purpose of Expenditure
Prepay Salary / Benefits

Category/Type **001**

Name of Federal Candidate supported or Opposed by expenditure:
Mr. Frank Guinta

Calendar Year-To-Date Per Election for Office Sought **13255.36**

Date
M M / D D / Y Y Y Y
10 / 27 / 2010

Amount
2187.73

Transaction ID: 37362640

Office Sought: House State: NH
 Senate District: 01
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

(a) SUBTOTAL of Itemized Independent Expenditures	2832.66
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	

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Mary Rose Adkins
Signature

Date M M / D D / Y Y Y Y
03 / 03 / 2011

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund	FEC IDENTIFICATION NUMBER C C00053553
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
National Rifle Association of America

Mailing Address
11250 Waples Mill Road

City	State	Zip Code
Fairfax	VA	22030

Purpose of Expenditure Prepay Salary / Benefits	Category/Type 001
--	----------------------

Name of Federal Candidate supported or Opposed by expenditure:
Mr. Kevin Yoder

Calendar Year-To-Date Per Election for Office Sought	18625.80
--	----------

Date
M M / D D / Y Y Y Y
1 0 / 2 7 / 2 0 1 0

Amount
2276.14

Transaction ID: 37362641

Office Sought: House State: KS
 Senate District: 03
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

Full Name (Last, First, Middle, Initial) of Payee
National Rifle Association of America

Mailing Address
11250 Waples Mill Road

City	State	Zip Code
Fairfax	VA	22030

Purpose of Expenditure Prepay Salary / Benefits	Category/Type 001
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Name of Federal Candidate supported or Opposed by expenditure:
Mr. Patrick Meehan

Calendar Year-To-Date Per Election for Office Sought	22021.65
--	----------

Date
M M / D D / Y Y Y Y
1 0 / 2 7 / 2 0 1 0

Amount
2187.73

Transaction ID: 37362642

Office Sought: House State: PA
 Senate District: 07
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

(a) SUBTOTAL of Itemized Independent Expenditures	4463.87
(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
Signature

Date M M / D D / Y Y Y Y
0 3 / 0 3 / 2 0 1 1

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund	FEC IDENTIFICATION NUMBER C C00053553
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
National Rifle Association of America

Mailing Address
11250 Waples Mill Road

City	State	Zip Code
Fairfax	VA	22030

Purpose of Expenditure Prepay Salary / Benefits	Category/Type 001
--	----------------------

Name of Federal Candidate supported or Opposed by expenditure:
Mr. Robert Schilling

Calendar Year-To-Date Per Election for Office Sought	62393.99
--	----------

Date
M M / D D / Y Y Y Y
1 0 / 2 7 / 2 0 1 0

Amount
1097.40

Transaction ID: 37362643

Office Sought: House State: IL
 Senate District: 17
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

Full Name (Last, First, Middle, Initial) of Payee
National Rifle Association of America

Mailing Address
11250 Waples Mill Road

City	State	Zip Code
Fairfax	VA	22030

Purpose of Expenditure Prepay Salary / Benefits	Category/Type 001
--	----------------------

Name of Federal Candidate supported or Opposed by expenditure:
Rep. Charles F. Bass

Calendar Year-To-Date Per Election for Office Sought	163397.77
--	-----------

Date
M M / D D / Y Y Y Y
1 0 / 2 7 / 2 0 1 0

Amount
2279.18

Transaction ID: 37362645

Office Sought: House State: NH
 Senate District: 02
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

(a) SUBTOTAL of Itemized Independent Expenditures	3376.58
(b) SUBTOTAL of Unitemized Independent Expenditures	_____
(c) TOTAL Independent Expenditures	1604503.03

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
Signature

Date M M / D D / Y Y Y Y
0 3 / 0 3 / 2 0 1 1