

# 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 01 31 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									
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**FEC FORM 3X**  
(Rev. 12/2004)

A. Form/Schedule : **F3XA**

Transaction ID :

This amendment 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 <b>TO</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00									
10. Debts and Obligations owed <b>BY</b> 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

**DETAILED SUMMARY PAGE  
OF RECEIPTS**

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	452893.92
(ii) Unitemized .....	107504.76	5851953.68
(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 / 485  
(check only one)

11a  11b  11c  12  
 13  14  15  16  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)  
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 / 485	
	(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"/> 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		Date of Receipt
Mailing Address 10501 Main Street		<input type="text" value="11"/> / <input type="text" value="09"/> / <input type="text" value="2010"/>
City	State	Zip Code
Fairfax	VA	22030
FEC ID number of contributing federal political committee.		Transaction ID: 37711423
<input type="text" value="C"/>		Amount of Each Receipt this Period
Name of Employer		<input type="text" value="565.16"/>
Occupation		Interest Income
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="21273.71"/>	
<input type="checkbox"/> Other (specify) ▼		

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<input type="text" value="565.16"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text" value="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 / 485  
(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 / 485  
(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 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: Aggregate Year-to-Date ▼  
 Primary    General  
 Other (specify) ▼ 334.00

Date of Receipt  
M M / D D / Y Y Y Y  
10 / 14 / 2010

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

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

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

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

**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 / 485  
(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 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 / 485

(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 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

MM / DD / YYYY  
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

MODERN MACHINERY COMPANY

Occupation

TECHNICAL TRAINING

Receipt For:

Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

287.00

Date of Receipt

MM / DD / YYYY  
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

MODERN MACHINERY COMPANY

Occupation

TECHNICAL TRAINING

Receipt For:

Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

258.00

Date of Receipt

MM / DD / YYYY  
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)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 13 / 485  
(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: 10 / 19 / 2010  
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: 10 / 19 / 2010  
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: 10 / 19 / 2010  
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 / 485  
(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)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 15 / 485

(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 HOWARD WILLIAMS

Mailing Address PO BOX 846

City State Zip Code  
RIVERTON UT 84065-0846

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

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

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 State Zip Code  
KINGSPORT TN 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

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

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 State Zip Code  
MESA AZ 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

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

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)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 16 / 485  
(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 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 / 485  
(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  
MM / DD / YYYY  
10 / 29 / 2010

**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  
MM / DD / YYYY  
10 / 18 / 2010

**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  
MM / DD / YYYY  
10 / 19 / 2010

**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 / 485

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

Date of Receipt

M M / D D / 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:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 245.00

Date of Receipt

M M / D D / 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:  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: 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 / 485  
(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  
MM / DD / YYYY  
11 / 08 / 2010

**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  
MM / DD / YYYY  
10 / 18 / 2010

**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  
MM / DD / YYYY  
10 / 20 / 2010

**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)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 20 / 485

(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 RALPH STANLEY

Mailing Address PO BOX 929

City State Zip Code  
ALTO TX 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

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

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 State Zip Code  
TULSA OK 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

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

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 State Zip Code  
COWLESVILLE NY 14037-9633

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

Name of Employer Occupation  
ROSWELL PARK CANCER INSTITUTE RESEARCH SCIENTIST

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
346.65

Date of Receipt

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

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 / 485  
(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:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 205.00

Date of Receipt  
M M / D D / Y 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:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 720.00

Date of Receipt  
M M / D D / Y 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:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 211.00

Date of Receipt  
M M / D D / Y 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 / 485  
(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 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: (check only one)	PAGE 23 / 485
	<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

<b>A.</b>	Full Name (Last, First, Middle Initial) MR DREW D LUCURELL		Date of Receipt
	Mailing Address 309 E PINE ST		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 11 / 11 / 2010
	City	State	Zip Code
	SEATTLE	WA	98122-2028
	FEC ID number of contributing federal political committee. <b>C</b>		Transaction ID: 37756741
Name of Employer ADJUSTERS INTERNATIONAL		Occupation PRESIDENT, PUBLIC INSURANCE AD	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 ▼ 263.00	<input type="text"/> 20.00

<b>B.</b>	Full Name (Last, First, Middle Initial) MR LEO TREMBLAY		Date of Receipt
	Mailing Address 2583 CENTRE ST		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 10 / 18 / 2010
	City	State	Zip Code
	BOSTON	MA	02132-6221
	FEC ID number of contributing federal political committee. <b>C</b>		Transaction ID: 37756745
Name of Employer RETIRED		Occupation RETIRED	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 ▼ 227.00	<input type="text"/> 34.00

<b>C.</b>	Full Name (Last, First, Middle Initial) MR THOMAS B BRADFORD		Date of Receipt
	Mailing Address 703 SW 1ST ST		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 10 / 14 / 2010
	City	State	Zip Code
	CASEY	IL	62420-1313
	FEC ID number of contributing federal political committee. <b>C</b>		Transaction ID: 37756750
Name of Employer RETIRED		Occupation RETIRED	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 ▼ 270.00	<input type="text"/> 40.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<input type="text"/> 94.00
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 24 / 485

(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 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 MM / DD / YYYY  
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 MM / DD / YYYY  
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 MM / DD / YYYY  
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 / 485  
(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 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

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

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

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

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

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

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 / 485  
(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  
 Date of Receipt 10 / 15 / 2010  
**Transaction ID: 37756827**  
 Amount of Each Receipt this Period 80.00  
 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

**B.** Full Name (Last, First, Middle Initial)  
MR ROBERT WARFIELD  
 Mailing Address 4535 N DOUGLAS HWY  
 City JUNEAU State AK Zip Code 99801-9464  
 Date of Receipt 10 / 26 / 2010  
**Transaction ID: 37756871**  
 Amount of Each Receipt this Period 100.00  
 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

**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  
 Date of Receipt 10 / 25 / 2010  
**Transaction ID: 37756878**  
 Amount of Each Receipt this Period 50.00  
 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

**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 / 485  
(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 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  
M M / D D / Y Y Y Y  
1 0 / 1 8 / 2 0 1 0

**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

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

**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 / 485  
(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 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 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 Occupation

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: 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 Occupation  
HUNTINGTON PIPING CARPENTER

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 234.00

Date of Receipt  
M M / D D / Y 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 / 485  
(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 State Zip Code  
DRAPER UT 84020-8501

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

Name of Employer Occupation  
WESTERN AIRLINES PILOT

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
MM / DD / YYYY  
11 / 04 / 2010

**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 State Zip Code  
CHINO VALLEY AZ 86323-2703

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  
MM / DD / YYYY  
10 / 19 / 2010

**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 State Zip Code  
CAMPBELL CA 95008-6329

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 ▼ 320.00

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

**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 / 485

(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

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

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

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

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

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

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 / 485  
(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: PAGE 32 / 485  
(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 L BALLARD

Mailing Address 817 HAYNES RD

City State Zip Code  
VICTORIA TX 77904-4105

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

Name of Employer Occupation  
FORMOSA PLASTICS QUALITY CONTROL SUPERVISOR

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 262.00

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

**Transaction ID: 37757107**

Amount of Each Receipt this Period  
20.00

**B.**

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

Mailing Address 170 DREISER LOOP APT 18D

City State Zip Code  
BRONX NY 10475-1910

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  
MM / DD / YYYY  
10 / 20 / 2010

**Transaction ID: 37757108**

Amount of Each Receipt this Period  
100.00

**C.**

Full Name (Last, First, Middle Initial)  
MR CLAY NORVELL

Mailing Address 414 LEE DR

City State Zip Code  
HOMER AK 99603-7605

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 ▼ 374.00

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

**Transaction ID: 37757121**

Amount of Each Receipt this Period  
40.00

**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 / 485

(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

KODIAK

State

AK

Zip Code

99615-1661

FEC ID number of contributing federal political committee.

C

Name of Employer  
SEALAND INC

Occupation  
RETIRED

Receipt For:

Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

247.00

Date of Receipt

MM / DD / YYYY  
10 / 19 / 2010

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

WASILLA

State

AK

Zip Code

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

MM / DD / YYYY  
10 / 14 / 2010

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

AURORA

State

CO

Zip Code

80015-1215

FEC ID number of contributing federal political committee.

C

Name of Employer

Occupation

Receipt For:

Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

320.00

Date of Receipt

MM / DD / YYYY  
10 / 19 / 2010

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 / 485

(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

GRIFFIN

State

GA

Zip Code

30224-5335

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 ▼

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

FRANKLIN

State

MN

Zip Code

55333-9799

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 / 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

GREENBUSH

State

MN

Zip Code

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 / 485  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    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 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 / 485  
(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 / 485

(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 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

MM / DD / YYYY  
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

Receipt For:

Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

MM / DD / YYYY  
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

MM / DD / YYYY  
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 / 485  
(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

Mailing Address 6927 SUNRISE CT

City MIDLAND State TX Zip Code 79707-1414

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

Name of Employer FLUOR OIL & GAS CORP Occupation GEOL

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 2000.00

Date of Receipt: 10 / 26 / 2010  
**Transaction ID: 37757409**  
 Amount of Each Receipt this Period: 1000.00

**B.**

Full Name (Last, First, Middle Initial)  
MR BRENT T LOCKWOOD

Mailing Address 7506 URAY DR

City AUSTIN State TX Zip Code 78724-3351

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

Name of Employer TANDEM COMPUTERS Occupation ELECTRONIC TECH

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 263.98

Date of Receipt: 10 / 18 / 2010  
**Transaction ID: 37757416**  
 Amount of Each Receipt this Period: 30.45

**C.**

Full Name (Last, First, Middle Initial)  
MR VERNON WILLIS

Mailing Address 257 CUMBERLAND RD

City WHEATLAND State WY Zip Code 82201-9733

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 ▼ 318.00

Date of Receipt: 10 / 19 / 2010  
**Transaction ID: 37757422**  
 Amount of Each Receipt this Period: 20.00

**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 / 485  
(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 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 / 485  
(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: 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: 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: 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 / 485  
(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 / 485  
(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 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 / 485  
(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 ALBUQUERQUE State NM Zip Code 87122-3151

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

Name of Employer FOOR SERVICES OF AMERICA Occupation MANAGEMENT

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 281.00

Date of Receipt 10 / 18 / 2010

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 HORSEHEADS State NY Zip Code 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 10 / 18 / 2010

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 MONROE State MI Zip Code 48162-4567

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 ▼ 314.00

Date of Receipt 10 / 14 / 2010

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 / 485  
(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 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  
MM / DD / YYYY  
11 / 02 / 2010

**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  
MM / DD / YYYY  
10 / 19 / 2010

**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  
MM / DD / YYYY  
10 / 14 / 2010

**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 / 485

(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

GRAND RAPIDS

State

MI

Zip Code

49512-5321

FEC ID number of contributing federal political committee.

C

Name of Employer  
FISHER BODY GM

Occupation  
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

MOUNTAIN VIEW

State

AR

Zip Code

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

CLINTON

State

WI

Zip Code

53525-8454

FEC ID number of contributing federal political committee.

C

Name of Employer  
RETIRED

Occupation  
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 / 485

(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) .....

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

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

FOR LINE NUMBER: PAGE 47 / 485  
(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 / 485  
(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 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 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

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 217.00

Date of Receipt  
M M / D D / Y 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

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 207.00

Date of Receipt  
M M / D D / Y 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 / 485  
(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  
MM / DD / YYYY  
10 / 14 / 2010

**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  
MM / DD / YYYY  
10 / 19 / 2010

**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  
MM / DD / YYYY  
10 / 25 / 2010

**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 / 485

(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 / 485

(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 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

MM / DD / YYYY  
10 / 25 / 2010

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

MM / DD / YYYY  
10 / 27 / 2010

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

Receipt For:

Primary  General

Other (specify) ▼

Aggregate Year-to-Date ▼

236.00

Date of Receipt

MM / DD / YYYY  
11 / 02 / 2010

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 / 485  
(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 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 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: (check only one)	PAGE 53 / 485
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

<b>A.</b>	Full Name (Last, First, Middle Initial) MR JAMES N BRYSON	Date of Receipt MM / DD / YYYY 10 / 19 / 2010
	Mailing Address 151 COX FARM RD	<b>Transaction ID:</b> 37758227
	City State Zip Code CULLOWHEE NC 28723-6821	Amount of Each Receipt this Period 20.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer DEPT OF INTERIOR Occupation RETIRED - TEACHER Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Aggregate Year-to-Date 321.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) MR JAMES N BRYSON	Date of Receipt MM / DD / YYYY 10 / 18 / 2010
	Mailing Address 151 COX FARM RD	<b>Transaction ID:</b> 37758228
	City State Zip Code CULLOWHEE NC 28723-6821	Amount of Each Receipt this Period 25.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer DEPT OF INTERIOR Occupation RETIRED - TEACHER Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Aggregate Year-to-Date 301.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) MAJ JAMES P HAMILTON	Date of Receipt MM / DD / YYYY 10 / 18 / 2010
	Mailing Address 143 STONE RIDGE RD	<b>Transaction ID:</b> 37758231
	City State Zip Code LEESVILLE SC 29070-7295	Amount of Each Receipt this Period 100.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation RETIRED - PILOT Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Aggregate Year-to-Date 329.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	145.00
<b>TOTAL</b> 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 / 485

(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 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 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 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 / 485  
(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 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

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 / 485  
(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 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 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 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 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 / 485  
(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 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 RETIRED      Occupation RETIRED

Receipt For:      Aggregate Year-to-Date ▼  
 Primary    General  
 Other (specify) ▼      382.00

Date of Receipt  

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

**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 CONRAIL      Occupation RETIRED

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

Date of Receipt  

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

**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:      Aggregate Year-to-Date ▼  
 Primary    General  
 Other (specify) ▼      291.00

Date of Receipt  

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

**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 / 485  
(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)  
COL FREDERICK E JOHNSTON, III

Mailing Address 19355 CYPRESS RIDGE TER UNIT 1

City LEESBURG State VA Zip Code 20176-6910

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

Name of Employer Occupation RETIRED

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1500.00

Date of Receipt 10 / 26 / 2010

**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 FREEVILLE State NY Zip Code 13068-0316

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

Name of Employer Occupation RETIRED

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 501.00

Date of Receipt 10 / 22 / 2010

**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 MILLIGAN COLLEGE State TN Zip Code 37682-0035

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

Name of Employer Occupation RETIRED

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 208.00

Date of Receipt 10 / 21 / 2010

**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 / 485  
(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 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  
RETIREED

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 235.00

Date of Receipt  
M M / D D / Y 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

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: 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  
RETIREED

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 241.00

Date of Receipt  
M M / D D / Y 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 / 485  
(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 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

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 / 485  
(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 T ANTHONY BROOKS

Mailing Address PO BOX 819

City State Zip Code  
TETON VILLAGE WY 83025-0819

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

Name of Employer Occupation  
RETIREED

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 State Zip Code  
GALENA MD 21635-1334

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

Name of Employer Occupation  
BELL ATLANTIC RETIREED

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 State Zip Code  
SHINGLE SPRINGS CA 95682-8752

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

Name of Employer Occupation

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 / 485  
(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 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 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 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 / 485  
(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 / 485  
(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 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 / 485

(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 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

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

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

RETIRED

Occupation

RETIRED

Receipt For:

Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

364.00

Date of Receipt

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

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

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

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 / 485  
(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

Mailing Address 1621 STRATFORD AVE # A2

City State Zip Code  
STRATFORD CT 06615-6421

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

Name of Employer CITY OF BRIDGEPORT Occupation FIREFIGHTER

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 404.00

Date of Receipt  
MM / DD / YYYY  
11 / 09 / 2010

**Transaction ID: 37758983**

Amount of Each Receipt this Period  
40.00

**B.**

Full Name (Last, First, Middle Initial)  
MR ROBERT ALLEN

Mailing Address 1621 STRATFORD AVE # A2

City State Zip Code  
STRATFORD CT 06615-6421

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

Name of Employer CITY OF BRIDGEPORT Occupation FIREFIGHTER

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 444.00

Date of Receipt  
MM / DD / YYYY  
11 / 09 / 2010

**Transaction ID: 37758984**

Amount of Each Receipt this Period  
40.00

**C.**

Full Name (Last, First, Middle Initial)  
MR ROBERT ALLEN

Mailing Address 1621 STRATFORD AVE # A2

City State Zip Code  
STRATFORD CT 06615-6421

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

Name of Employer CITY OF BRIDGEPORT Occupation FIREFIGHTER

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 364.00

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

**Transaction ID: 37758985**

Amount of Each Receipt this Period  
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 / 485

(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 State Zip Code  
ATLANTA GA 30345-4172

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

Name of Employer Occupation  
SELF EMPLOYED CONSULTANT

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 262.00

Date of Receipt

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

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 State Zip Code  
BLUE BELL PA 19422-3647

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

Name of Employer Occupation  
RETIRED / SEARS HARDWARE RETIRED / ASSOCIATE

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 254.00

Date of Receipt

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

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 State Zip Code  
PLANO TX 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

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

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 / 485  
(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 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  
MM / DD / YYYY  
10 / 19 / 2010

**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  
MM / DD / YYYY  
10 / 19 / 2010

**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  
MM / DD / YYYY  
11 / 01 / 2010

**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 / 485

(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

Mailing Address 817 STUCKERT DR

City State Zip Code  
**BURLESON TX 76028-6810**

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
206.00

Date of Receipt

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

Transaction ID: 37759111

Amount of Each Receipt this Period

20.00

**B.**

Full Name (Last, First, Middle Initial)

MR DAVID B GATES

Mailing Address 1145 JONATHAN CT

City State Zip Code  
**RED BLUFF CA 96080-4200**

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

Name of Employer Occupation  
**DISABLED**

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
248.00

Date of Receipt

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

Transaction ID: 37759118

Amount of Each Receipt this Period

20.00

**C.**

Full Name (Last, First, Middle Initial)

DR URSULA MAZUR, PHD

Mailing Address 18351 STATE ROUTE 194

City State Zip Code  
**PULLMAN WA 99163-8657**

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  
1 0 / 1 8 / 2 0 1 0

Transaction ID: 37759129

Amount of Each Receipt this Period

75.00

**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 / 485  
(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

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 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 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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
217.00

Date of Receipt  
M M / D D / Y 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 / 485  
(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 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 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 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 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 / 485  
(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 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 Y  
1 0 / 1 5 / 2 0 1 0

**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 Y  
1 0 / 1 9 / 2 0 1 0

**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 Y  
1 0 / 1 8 / 2 0 1 0

**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 / 485  
(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

<b>A.</b>	Full Name (Last, First, Middle Initial) MR SHANE P SCHMITT		Date of Receipt MM / DD / YYYY 10 / 18 / 2010
	Mailing Address 572 ROOSEVELT ST		<b>Transaction ID:</b> 37759364
	City State Zip Code CREVE COEUR IL 61610-4176	FEC ID number of contributing federal political committee. <b>C</b>	Amount of Each Receipt this Period 50.00
	Name of Employer Occupation DISABLED VETERAN	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 470.00

<b>B.</b>	Full Name (Last, First, Middle Initial) MR DENNIS CHILD		Date of Receipt MM / DD / YYYY 10 / 29 / 2010
	Mailing Address 212 S 800 E		<b>Transaction ID:</b> 37759410
	City State Zip Code LOGAN UT 84321-5629	FEC ID number of contributing federal political committee. <b>C</b>	Amount of Each Receipt this Period 100.00
	Name of Employer Occupation	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00

<b>C.</b>	Full Name (Last, First, Middle Initial) MR WILLIAM E PHARIS		Date of Receipt MM / DD / YYYY 10 / 26 / 2010
	Mailing Address 47 BERWICK RD		<b>Transaction ID:</b> 37759459
	City State Zip Code ROCHESTER NY 14609-7702	FEC ID number of contributing federal political committee. <b>C</b>	Amount of Each Receipt this Period 20.00
	Name of Employer Occupation	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 214.00

**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 / 485

(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 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

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 / 485  
(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		Date of Receipt <table border="1" style="font-size: small; text-align: center;"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>1</td><td>0</td><td></td><td>1</td><td>4</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	1	0		1	4		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y													
1	0		1	4		2	0	1	0													
Mailing Address 704 SHALLOWFORD DR		<b>Transaction ID:</b> 37759522																				
City MANCHESTER	State MO	Zip Code 63021-6607																				
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period <table border="1" style="width: 100%; text-align: right;"><tr><td>40.00</td></tr></table>	40.00																			
40.00																						
Name of Employer CHAMINADE COLLEGE PREP	Occupation TEACHER																					
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <table border="1" style="width: 100%; text-align: right;"><tr><td>283.00</td></tr></table>	283.00																				
283.00																						

**B.**

Full Name (Last, First, Middle Initial) DR ROBERT M DOMKE		Date of Receipt <table border="1" style="font-size: small; text-align: center;"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>1</td><td>0</td><td></td><td>1</td><td>8</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	1	0		1	8		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y													
1	0		1	8		2	0	1	0													
Mailing Address 27 CHELSEAS WALK		<b>Transaction ID:</b> 37759524																				
City ITHACA	State NY	Zip Code 14850-1087																				
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period <table border="1" style="width: 100%; text-align: right;"><tr><td>25.00</td></tr></table>	25.00																			
25.00																						
Name of Employer RADIOLOGY ASSOCIATES OF ITHACA	Occupation PHYSICIAN																					
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <table border="1" style="width: 100%; text-align: right;"><tr><td>250.00</td></tr></table>	250.00																				
250.00																						

**C.**

Full Name (Last, First, Middle Initial) MR PAUL D WASSON		Date of Receipt <table border="1" style="font-size: small; text-align: center;"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>1</td><td>0</td><td></td><td>1</td><td>8</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	1	0		1	8		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y													
1	0		1	8		2	0	1	0													
Mailing Address 4709 ROYAL OAK DR		<b>Transaction ID:</b> 37759557																				
City OKLAHOMA CITY	State OK	Zip Code 73135-2029																				
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period <table border="1" style="width: 100%; text-align: right;"><tr><td>30.00</td></tr></table>	30.00																			
30.00																						
Name of Employer AFFINIA GROUP	Occupation MAINTENANCE																					
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <table border="1" style="width: 100%; text-align: right;"><tr><td>433.00</td></tr></table>	433.00																				
433.00																						

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<table border="1" style="width: 100%;"><tr><td>95.00</td></tr></table>	95.00
95.00		
<b>TOTAL</b> This Period (last page this line number only) .....	<table border="1" style="width: 100%;"><tr><td> </td></tr></table>	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 76 / 485  
(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 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

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 / 485  
(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 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 / 485

(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 STPEHEN 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

MM / DD / YYYY  
11 / 02 / 2010

Transaction ID: 37759640

Amount of Each Receipt this Period

51.00

**B.**

Full Name (Last, First, Middle Initial)

MR STPEHEN 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

MM / DD / YYYY  
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

Receipt For:

Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

MM / DD / YYYY  
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 / 485

(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 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
	RETIRED

Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 313.00
---	------------------------------------

Date of Receipt

M M / D D / 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: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> 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: 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: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 290.00
---	------------------------------------

Date of Receipt

M M / D D / 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 / 485  
(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)  
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  
M M / D D / Y Y Y Y  
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  
M M / D D / Y Y Y Y  
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

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 287.00

Date of Receipt  
M M / D D / Y Y Y Y  
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 / 485  
(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 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

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 / 485

(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 THOMAS E HENDRIX

Mailing Address 4197 SPRINGDALE RD

City State Zip Code  
ARDMORE OK 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  
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 State Zip Code  
INDIANOLA IA 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  
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 State Zip Code  
SARASOTA FL 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  
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 / 485
	(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 BILL SELMER		Date of Receipt
Mailing Address PO BOX 5312		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y
City	State	Zip Code
SAN BERNARDINO	CA	92412-5312
FEC ID number of contributing federal political committee.	<input type="text"/> C <input type="text"/>	<b>Transaction ID:</b> 37759952
Name of Employer	Occupation	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 ▼	<input type="text"/> 50.00
	<input type="text"/> 224.00	

**B.**

Full Name (Last, First, Middle Initial) MR JOHN MCLEOD		Date of Receipt
Mailing Address 1150 W G MARTINELLI BLVD		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y
City	State	Zip Code
CITRUS SPRINGS	FL	34434-3233
FEC ID number of contributing federal political committee.	<input type="text"/> C <input type="text"/>	<b>Transaction ID:</b> 37759981
Name of Employer	Occupation	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 ▼	<input type="text"/> 30.00
	<input type="text"/> 215.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<input type="text"/> 80.00
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/> 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)

<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) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<input type="text" value="19900.00"/>
<b>TOTAL</b> 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																			
	Mailing Address PO Box 3595	<table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>1</td><td>0</td><td></td><td>1</td><td>9</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	1	0		1	9		2	0	1
M	M	/	D	D	/	Y	Y	Y	Y												
1	0		1	9		2	0	1	0												
	City Arlington State WA Zip Code 98223	Amount of Each Disbursement this Period																			
	Purpose of Disbursement	<table border="1"><tr><td>2500.00</td></tr></table>	2500.00																		
2500.00																					
	Candidate Name Mr. John Koster	<table border="1"><tr><td>011</td></tr></table> Category/Type	011																		
011																					
	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																			
	Mailing Address 2840 Northup Way, Suite 140	<table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>1</td><td>0</td><td></td><td>1</td><td>9</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	1	0		1	9		2	0	1
M	M	/	D	D	/	Y	Y	Y	Y												
1	0		1	9		2	0	1	0												
	City Bellevue State WA Zip Code 98004	Amount of Each Disbursement this Period																			
	Purpose of Disbursement	<table border="1"><tr><td>3000.00</td></tr></table>	3000.00																		
3000.00																					
	Candidate Name Washington State Republican Party	<table border="1"><tr><td>011</td></tr></table> Category/Type	011																		
011																					
	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																			
	Mailing Address PO Box 7806	<table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>1</td><td>0</td><td></td><td>2</td><td>5</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	1	0		2	5		2	0	1
M	M	/	D	D	/	Y	Y	Y	Y												
1	0		2	5		2	0	1	0												
	City Corpus Christi State TX Zip Code 78467	Amount of Each Disbursement this Period																			
	Purpose of Disbursement	<table border="1"><tr><td>2500.00</td></tr></table>	2500.00																		
2500.00																					
	Candidate Name Rep. Solomon P. Ortiz	<table border="1"><tr><td>011</td></tr></table> Category/Type	011																		
011																					
	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) ▼																			

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<table border="1"><tr><td>8000.00</td></tr></table>	8000.00
8000.00		
<b>TOTAL</b> This Period (last page this line number only) .....	<table border="1"><tr><td></td></tr></table>	

**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	Transaction ID: 37343274 Date of Disbursement 10 / 25 / 2010
	Mailing Address PO Box 89520	Amount of Each Disbursement this Period 2450.00
	City Tucson State AZ Zip Code 85752	
	Purpose of Disbursement	011 Category/ Type
	Candidate Name Mr. Jesse Kelly	
	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) ▼

B.	Full Name (Last, First, Middle Initial) Tim Walz For U.S. Congress	Transaction ID: 37351405 Date of Disbursement 10 / 26 / 2010
	Mailing Address PO Box 938	Amount of Each Disbursement this Period 4950.00
	City Mankato State MN Zip Code 56002	
	Purpose of Disbursement	011 Category/ Type
	Candidate Name Mr. Timothy Walz	
	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) ▼

C.	Full Name (Last, First, Middle Initial) Ron Johnson For Senate Inc	Transaction ID: 37351407 Date of Disbursement 10 / 26 / 2010
	Mailing Address 601 Oregon Street Suite A	Amount of Each Disbursement this Period 4950.00
	City Oshkosh State WI Zip Code 54902	
	Purpose of Disbursement	011 Category/ Type
	Candidate Name Mr. Ronald Johnson	
	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) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	▶	12350.00
<b>TOTAL</b> 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 State Zip Code  
Rockford IL 61126

Purpose of Disbursement

Category/  
Type

Candidate Name  
Rep. Donald A. Manzullo

Office Sought:  House  Senate  President  
Disbursement For: 2010  Primary  General  Other (specify) ▼

State: IL District: 16

**Transaction ID:** 37351535  
Date of Disbursement

/

Amount of Each Disbursement this Period

**B.** Full Name (Last, First, Middle Initial)  
Kind For Congress Committee

Mailing Address 205 5th Avenue South  
Suite 428

City State Zip Code  
La Crosse WI 54601

Purpose of Disbursement

Category/  
Type

Candidate Name  
Rep. Ron Kind

Office Sought:  House  Senate  President  
Disbursement For: 2010  Primary  General  Other (specify) ▼

State: WI District: 03

**Transaction ID:** 37379278  
Date of Disbursement

/

Amount of Each Disbursement this Period

**C.** Full Name (Last, First, Middle Initial)  
People For Ben

Mailing Address PO Box 31129

City State Zip Code  
Santa Fe NM 87594

Purpose of Disbursement

Category/  
Type

Candidate Name  
Rep. Ben Lujan, Jr.

Office Sought:  House  Senate  President  
Disbursement For: 2010  Primary  General  Other (specify) ▼

State: NM District: 03

**Transaction ID:** 37379279  
Date of Disbursement

/

Amount of Each Disbursement this Period

**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 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><b>A.</b> 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 <span style="float: right; border: 1px solid black; padding: 2px;">011</span> Category/ Type</p> <p>Candidate Name Mr. Timothy Walberg</p> <p>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: MI District: 07</p>	<p><b>Transaction ID:</b> 37379280 <b>Date of Disbursement</b> 10 / 29 / 2010</p> <p>Amount of Each Disbursement this Period <span style="border: 1px solid black; padding: 5px; display: block; text-align: center;">4950.00</span></p>
<p><b>B.</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 <span style="float: right; border: 1px solid black; padding: 2px;">011</span> Category/ Type</p> <p>Candidate Name Mr. Bill Flores</p> <p>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: 17 General Debt 2010</p>	<p><b>Transaction ID:</b> 37682847 <b>Date of Disbursement</b> 11 / 18 / 2010</p> <p>Amount of Each Disbursement this Period <span style="border: 1px solid black; padding: 5px; display: block; text-align: center;">2500.00</span></p> <p>Debt Retirement</p>
<p><b>C.</b> 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 <span style="float: right; border: 1px solid black; padding: 2px;">011</span> Category/ Type</p> <p>Candidate Name Mr. Robert Hurt</p> <p>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: VA District: 05 General Debt 2010</p>	<p><b>Transaction ID:</b> 37682848 <b>Date of Disbursement</b> 11 / 18 / 2010</p> <p>Amount of Each Disbursement this Period <span style="border: 1px solid black; padding: 5px; display: block; text-align: center;">2500.00</span></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)

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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)

Morgan Griffith For Congress

Mailing Address PO Box 361

City State Zip Code  
Christiansburg VA 24068

Purpose of Disbursement  
Debt Retirement

Candidate Name  
H Morgan Griffith

Office Sought:  House  
 Senate  
 President

State: VA District: 09

Disbursement For: 2010  
 Primary  General  
 Other (specify) ▼  
General Debt 2010

Transaction ID: 37682849

Date of Disbursement

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

Amount of Each Disbursement this Period

2500.00
---------

Debt Retirement

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

2500.00
---------

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

59150.00
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# 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><b>A.</b> 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 Estimated Federal Taxes</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><b>Transaction ID:</b> 37160362 <b>Date of Disbursement</b> 10 / 15 / 2010</p> <p>Amount of Each Disbursement this Period 2498.78</p> <p>Estimated Federal Taxes</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Bank of America - NY</p> <p>Mailing Address 671 County Route 1</p> <p>City Pine Island State NY Zip Code 10969</p> <p>Purpose of Disbursement Account Analysis 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><b>Transaction ID:</b> 37311049 <b>Date of Disbursement</b> 10 / 15 / 2010</p> <p>Amount of Each Disbursement this Period 756.75</p> <p>Account Analysis Fees</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) NJI New Media, LLC</p> <p>Mailing Address 201 King Street, Suite 202</p> <p>City Alexandria State VA Zip Code 22134</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 State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 37511703 <b>Date of Disbursement</b> 11 / 04 / 2010</p> <p>Amount of Each Disbursement this Period 2600.00</p> <p>Website Hosting / Service Fee</p>

**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><b>A.</b> 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><b>Transaction ID:</b> 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>B.</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 &amp; 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><b>Transaction ID:</b> 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 &amp; Mailing</p>
<p><b>C.</b> 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 &amp; 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><b>Transaction ID:</b> 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 &amp; Mailing</p>

**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

<b>A.</b> 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>B.</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

<b>C.</b> 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

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	49687.15
<b>TOTAL</b> 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) 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

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	25008.28
<b>TOTAL</b> 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	Transaction ID: 37711414 Date of Disbursement 11 / 01 / 2010
	Mailing Address 10501 Main Street	Amount of Each Disbursement this Period 10.00
	City Fairfax State VA Zip Code 22030	
	Purpose of Disbursement Credit Card Fees Candidate Name	001 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) ▼
		Credit Card Fees

B.	Full Name (Last, First, Middle Initial) Wachovia Bank	Transaction ID: 37711415 Date of Disbursement 11 / 02 / 2010
	Mailing Address 10501 Main Street	Amount of Each Disbursement this Period 131.43
	City Fairfax State VA Zip Code 22030	
	Purpose of Disbursement Credit Card Fees Candidate Name	001 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) ▼
		Credit Card Fees

C.	Full Name (Last, First, Middle Initial) American Express Company	Transaction ID: 37711416 Date of Disbursement 11 / 22 / 2010
	Mailing Address P.O. Box 53852	Amount of Each Disbursement this Period 10.79
	City Phoenix State AZ Zip Code 85072	
	Purpose of Disbursement Credit Card Fees Candidate Name	001 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) ▼
		Credit Card Fees

**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)

<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><b>A.</b> Full Name (Last, First, Middle Initial) PAYMENTECH, INC.</p> <p>Mailing Address 4 NORTHEASTERN BLVD</p> <p>City SALEM State NH Zip Code 03079</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><b>Transaction ID:</b> 37711417 <b>Date of Disbursement</b> 11 / 22 / 2010</p> <p>Amount of Each Disbursement this Period 62.31</p> <p>001 Category/ Type</p> <p>Credit Card Fees</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Wachovia - Account Analysis</p> <p>Mailing Address P.O. Box 2080</p> <p>City Jacksonville State FL Zip Code 32231</p> <p>Purpose of Disbursement Account Analysis 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><b>Transaction ID:</b> 37711418 <b>Date of Disbursement</b> 11 / 09 / 2010</p> <p>Amount of Each Disbursement this Period 15.24</p> <p>001 Category/ Type</p> <p>Account Analysis Fees</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Wachovia - Account Analysis</p> <p>Mailing Address P.O. Box 2080</p> <p>City Jacksonville State FL Zip Code 32231</p> <p>Purpose of Disbursement Account Analysis 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><b>Transaction ID:</b> 37711419 <b>Date of Disbursement</b> 11 / 09 / 2010</p> <p>Amount of Each Disbursement this Period 920.37</p> <p>001 Category/ Type</p> <p>Account Analysis Fees</p>

**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

A.	Full Name (Last, First, Middle Initial) McCarthy for Iowa <hr/> Mailing Address 5220 SE 31st Court <hr/> City Des Moines State IA Zip Code 50320 <hr/> Purpose of Disbursement Kevin McCarthy, STATE HOUSE 67th IA Candidate Name IA Rep. Kevin McCarthy <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IA District: 67 Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 37179007 Date of Disbursement 10 / 15 / 2010 <hr/> Amount of Each Disbursement this Period 1000.00 <hr/> Kevin McCarthy, STATE HOU-SE 67th IA
B.	Full Name (Last, First, Middle Initial) Worthan for Iowa House <hr/> Mailing Address 5647 105th Avenue <hr/> City Storm Lake State IA Zip Code 50588 <hr/> Purpose of Disbursement Gary Worthan, STATE HOUSE 52nd IA Candidate Name IA Rep. Gary Worthan <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IA District: 52 Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 37179008 Date of Disbursement 10 / 15 / 2010 <hr/> Amount of Each Disbursement this Period 250.00 <hr/> Gary Worthan, STATE HOUSE 52nd IA
C.	Full Name (Last, First, Middle Initial) Sweeney for Statehouse <hr/> Mailing Address 21547 Highway S27 <hr/> City Alden State IA Zip Code 50006 <hr/> Purpose of Disbursement Annette Sweeney, STATE HOUSE 44th IA Candidate Name IA Rep. Annette Sweeney <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IA District: 44 Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 37179009 Date of Disbursement 10 / 15 / 2010 <hr/> Amount of Each Disbursement this Period 250.00 <hr/> Annette Sweeney, STATE HO-USE 44th IA

**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

<p><b>A.</b> Full Name (Last, First, Middle Initial) Swaim for House</p> <p>Mailing Address 108 E. Jefferson</p> <p>City Bloomfield State IA Zip Code 52537</p> <p>Purpose of Disbursement Kurt Swaim, STATE HOUSE 94th IA</p> <p>Candidate Name IA Rep. Kurt Swaim</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IA District: 94</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 37179010 <b>Date of Disbursement</b> 10 / 15 / 2010</p> <p>Amount of Each Disbursement this Period 500.00</p> <p>Kurt Swaim, STATE HOUSE 94th IA</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Shomshor for Iowa House</p> <p>Mailing Address 3018 Avenue M</p> <p>City Council Bluff State IA Zip Code 51501</p> <p>Purpose of Disbursement Paul Shomshor, STATE HOUSE 100th IA</p> <p>Candidate Name IA Rep. Paul Shomshor, Jr.</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IA District: 00</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 37179011 <b>Date of Disbursement</b> 10 / 15 / 2010</p> <p>Amount of Each Disbursement this Period 250.00</p> <p>Paul Shomshor, STATE HOUSE 100th IA</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Reasoner for State Representative</p> <p>Mailing Address 702 New York Avenue</p> <p>City Creston State IA Zip Code 50801</p> <p>Purpose of Disbursement Michael Reasoner, STATE HOUSE 95th IA</p> <p>Candidate Name IA Rep. Michael Reasoner</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IA District: 95</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 37179012 <b>Date of Disbursement</b> 10 / 15 / 2010</p> <p>Amount of Each Disbursement this Period 250.00</p> <p>Michael Reasoner, STATE HOUSE 95th IA</p>

**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) 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><b>A.</b> 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><b>Transaction ID:</b> 37179013 <b>Date of Disbursement:</b> 10 / 15 / 2010</p> <p>Amount of Each Disbursement this Period 250.00</p> <p>011 Category/Type</p> <p>HENRY RAYHONS, STATE HOUSE 11th IA</p>
<p><b>B.</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><b>Transaction ID:</b> 37179014 <b>Date of Disbursement:</b> 10 / 15 / 2010</p> <p>Amount of Each Disbursement this Period 250.00</p> <p>011 Category/Type</p> <p>SCOTT RAECKER, STATE HOUSE 63rd IA</p>
<p><b>C.</b> 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><b>Transaction ID:</b> 37179015 <b>Date of Disbursement:</b> 10 / 15 / 2010</p> <p>Amount of Each Disbursement this Period 250.00</p> <p>011 Category/Type</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

<p><b>A.</b> Full Name (Last, First, Middle Initial) Marek for State Representative</p> <p>Mailing Address 1741 Riverside Road</p> <p>City Riverside State IA Zip Code 52327</p> <p>Purpose of Disbursement Larry Marek, STATE HOUSE 89th IA</p> <p>Candidate Name IA Rep. Larry Marek</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: IA District: 89</p>	<p><b>Transaction ID:</b> 37179016</p> <p>Date of Disbursement 10 / 15 / 2010</p> <p>Amount of Each Disbursement this Period 250.00</p> <p>Larry Marek, STATE HOUSE 89th IA</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Jeff Kaufmann for State Representative</p> <p>Mailing Address 2125 Old Muscatine Road</p> <p>City Wilton State IA Zip Code 52778</p> <p>Purpose of Disbursement Jeff Kaufmann, STATE HOUSE 79th IA</p> <p>Candidate Name IA Rep. Jeff Kaufmann</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: IA District: 79</p>	<p><b>Transaction ID:</b> 37179017</p> <p>Date of Disbursement 10 / 15 / 2010</p> <p>Amount of Each Disbursement this Period 500.00</p> <p>Jeff Kaufmann, STATE HOUSE 79th IA</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Geri D. Huser for State Representative</p> <p>Mailing Address 213 7th Street, NW</p> <p>City Altoona State IA Zip Code 50009</p> <p>Purpose of Disbursement GERI HUSER, STATE HOUSE 42nd IA</p> <p>Candidate Name GERI HUSER</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: IA District: 42</p>	<p><b>Transaction ID:</b> 37179018</p> <p>Date of Disbursement 10 / 15 / 2010</p> <p>Amount of Each Disbursement this Period 250.00</p> <p>GERI HUSER, STATE HOUSE 42nd IA</p>

**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) 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><b>A.</b></p> <p>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><b>Transaction ID:</b> 37179019 <b>Date of Disbursement</b> 10 / 15 / 2010</p> <p>Amount of Each Disbursement this Period 250.00</p> <p>Chris Hagenow, STATE HOUSE 59th IA</p>
<p><b>B.</b></p> <p>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><b>Transaction ID:</b> 37179020 <b>Date of Disbursement</b> 10 / 15 / 2010</p> <p>Amount of Each Disbursement this Period 250.00</p> <p>Doris Kelley, STATE HOUSE 20th IA</p>
<p><b>C.</b></p> <p>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><b>Transaction ID:</b> 37179021 <b>Date of Disbursement</b> 10 / 15 / 2010</p> <p>Amount of Each Disbursement this Period 500.00</p> <p>David Deyoe, STATE HOUSE 10th IA</p>

**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) 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) Citizens for Gronstal	Transaction ID: 37179022 Date of Disbursement 10 / 15 / 2010
	Mailing Address 220 Bennett Avenue	Amount of Each Disbursement this Period 1000.00
	City Council Bluffs State IA Zip Code 51503	
	Purpose of Disbursement MICHAEL GRONSTAL, STATE SENATE 50th IA	011 Category/ Type
	Candidate Name MICHAEL GRONSTAL	
	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: IA District:	MICHAEL GRONSTAL, STATE SENATE 50th IA

B.	Full Name (Last, First, Middle Initial) Kettering Campaign	Transaction ID: 37179023 Date of Disbursement 10 / 15 / 2010
	Mailing Address 275 Crescent Park Drive	Amount of Each Disbursement this Period 500.00
	City Lake View State IA Zip Code 51450	
	Purpose of Disbursement Steve Kettering, STATE SENATE 26th IA	011 Category/ Type
	Candidate Name IA Sen. Steve Kettering	
	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: IA District:	Steve Kettering, STATE SENATE 26th IA

C.	Full Name (Last, First, Middle Initial) McKinley for Iowa	Transaction ID: 37179024 Date of Disbursement 10 / 15 / 2010
	Mailing Address 21884 483rd Lane	Amount of Each Disbursement this Period 1000.00
	City Chariton State IA Zip Code 50049	
	Purpose of Disbursement PAUL MCKINLEY, STATE SENATE 36th IA	011 Category/ Type
	Candidate Name PAUL MCKINLEY	
	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: IA District:	PAUL MCKINLEY, STATE SENATE 36th IA

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

2500.00

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

<b>A.</b> Full Name (Last, First, Middle Initial) Baudler for State Representative <hr/> Mailing Address 2260 Highway 25 <hr/> City Greenfield State IA Zip Code 50849 <hr/> Purpose of Disbursement CLEL BAUDLER, STATE HOUSE 58th IA <hr/> Candidate Name CLEL BAUDLER <hr/> 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: 58	Transaction ID: 37179025 Date of Disbursement 10 / 15 / 2010
	Amount of Each Disbursement this Period 250.00
	Category/Type 011
	CLEL BAUDLER, STATE HOUSE 58th IA
<b>B.</b> Full Name (Last, First, Middle Initial) Dennis Black for Senate <hr/> Mailing Address Box 1271 <hr/> City Newton State IA Zip Code 50208 <hr/> Purpose of Disbursement DENNIS H. BLACK, STATE SENATE 21st IA <hr/> Candidate Name DENNIS H. BLACK <hr/> 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: IA District:	Transaction ID: 37179026 Date of Disbursement 10 / 15 / 2010
	Amount of Each Disbursement this Period 500.00
	Category/Type 011
	DENNIS H. BLACK, STATE SE- NATE 21st IA
<b>C.</b> Full Name (Last, First, Middle Initial) Arnold for House <hr/> Mailing Address 26875 407th Street <hr/> City Russell State IA Zip Code 50238 <hr/> Purpose of Disbursement Richard Arnold, STATE HOUSE 72nd IA <hr/> Candidate Name Richard Arnold <hr/> 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: 72	Transaction ID: 37179027 Date of Disbursement 10 / 15 / 2010
	Amount of Each Disbursement this Period 250.00
	Category/Type 011
	Richard Arnold, STATE HOU- SE 72nd IA

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	1000.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	0.00

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

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

FOR LINE NUMBER: (check only one)

<input 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><b>A.</b> 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><b>Transaction ID:</b> 37179028 <b>Date of Disbursement:</b> 10 / 15 / 2010</p> <p>Amount of Each Disbursement this Period 250.00</p> <p>011 Category/ Type</p> <p>McKinley Bailey, STATE HO- USE 9th IA</p>
<p><b>B.</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><b>Transaction ID:</b> 37179029 <b>Date of Disbursement:</b> 10 / 15 / 2010</p> <p>Amount of Each Disbursement this Period 500.00</p> <p>011 Category/ Type</p> <p>Brian Quirk, STATE HOUSE 15th IA</p>
<p><b>C.</b> 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><b>Transaction ID:</b> 37179030 <b>Date of Disbursement:</b> 10 / 15 / 2010</p> <p>Amount of Each Disbursement this Period 250.00</p> <p>011 Category/ Type</p> <p>Jim Van Engelenhoven, STA- TE HOUSE 71st IA</p>

**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) 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><b>A.</b> 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><b>Transaction ID:</b> 37179031 <b>Date of Disbursement</b> 10 / 15 / 2010</p> <p>Amount of Each Disbursement this Period 250.00</p> <p>Nathan Reichert, STATE HOUSE 80th IA</p>
<p><b>B.</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><b>Transaction ID:</b> 37179032 <b>Date of Disbursement</b> 10 / 15 / 2010</p> <p>Amount of Each Disbursement this Period 250.00</p> <p>Renee Schulte, STATE HOUSE 37th IA</p>
<p><b>C.</b> 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><b>Transaction ID:</b> 37179033 <b>Date of Disbursement</b> 10 / 15 / 2010</p> <p>Amount of Each Disbursement this Period 2000.00</p> <p>Tom Corbett, GOVERNOR PA</p>

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

2500.00

**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) 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	<b>Transaction ID:</b> 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	<b>Transaction ID:</b> 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	<b>Transaction ID:</b> 37179036 Date of Disbursement 10 / 15 / 2010	Amount of Each Disbursement this Period  200.00  Mark Barker, STATE HOUSE 17th CO

**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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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)

Friends of Kevin Priola

Mailing Address 12255 Ursula Street

City Henderson State CO Zip Code 80640

Purpose of Disbursement  
Kevin Priola, STATE HOUSE 30th CO

Candidate Name  
Kevin Priola

011  
Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2010  
 Primary  General  
 Other (specify) ▼

State: CO District: 30

Transaction ID: 37179037

Date of Disbursement

10 / 15 / 2010

Amount of Each Disbursement this Period

200.00

Kevin Priola, STATE HOUSE  
30th CO

B.

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

011  
Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2010  
 Primary  General  
 Other (specify) ▼

State: CO District: 38

Transaction ID: 37179038

Date of Disbursement

10 / 15 / 2010

Amount of Each Disbursement this Period

200.00

Kathleen Conti, STATE HOU-  
SE 38th CO

C.

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

011  
Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2010  
 Primary  General  
 Other (specify) ▼

State: CO District: 27

Transaction ID: 37179039

Date of Disbursement

10 / 15 / 2010

Amount of Each Disbursement this Period

200.00

Libby Szabo, STATE HOUSE  
27th CO

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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<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><b>A.</b> 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><b>Transaction ID:</b> 37179040 <b>Date of Disbursement:</b> 10 / 15 / 2010</p> <p>Amount of Each Disbursement this Period 200.00</p> <p>Robert Ramirez, STATE HOUSE 29th CO</p>
<p><b>B.</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><b>Transaction ID:</b> 37179041 <b>Date of Disbursement:</b> 10 / 15 / 2010</p> <p>Amount of Each Disbursement this Period 200.00</p> <p>John Odom, STATE SENATE 20th CO</p>
<p><b>C.</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 type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 37179042 <b>Date of Disbursement:</b> 10 / 15 / 2010</p> <p>Amount of Each Disbursement this Period 200.00</p> <p>Ellen Roberts, STATE SENATE 6th CO</p>

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

600.00

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

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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><b>A.</b></p> <p>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</p> <p>State: CO District:</p>	<p>Transaction ID: 37179043</p> <p>Date of Disbursement 10 / 15 / 2010</p> <p>Amount of Each Disbursement this Period 200.00</p> <p>011 Category/ Type</p> <p>Bob Rankin, STATE SENATE 5th CO</p>
<p><b>B.</b></p> <p>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</p> <p>State: CO District:</p>	<p>Transaction ID: 37179044</p> <p>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>C.</b></p> <p>Full Name (Last, First, Middle Initial) Beezley for House District 33</p> <p>Mailing Address 2698 Creekside Drive</p> <p>City Erie State CO Zip Code 80023</p> <p>Purpose of Disbursement Don Beezley, STATE HOUSE 33rd CO</p> <p>Candidate Name Don Beezley</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: CO District: 33</p>	<p>Transaction ID: 37179045</p> <p>Date of Disbursement 10 / 15 / 2010</p> <p>Amount of Each Disbursement this Period 200.00</p> <p>011 Category/ Type</p> <p>Don Beezley, STATE HOUSE 33rd 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**

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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><b>A.</b> 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</p> <p>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><b>Transaction ID:</b> 37179046 <b>Date of Disbursement</b> 10 / 15 / 2010</p> <p>Amount of Each Disbursement this Period 200.00</p> <p>Kieth Swerdfeger, STATE HOUSE 47th CO</p>
<p><b>B.</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</p> <p>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><b>Transaction ID:</b> 37179047 <b>Date of Disbursement</b> 10 / 15 / 2010</p> <p>Amount of Each Disbursement this Period 200.00</p> <p>Mark Barker, STATE HOUSE 17th CO</p>
<p><b>C.</b> 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</p> <p>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><b>Transaction ID:</b> 37179048 <b>Date of Disbursement</b> 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

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**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

<b>A.</b>	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) ▼	<b>Transaction ID:</b> 37179049 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 1 0 / 1 5 / 2 0 1 0	Amount of Each Disbursement this Period  200.00
<b>B.</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) ▼	<b>Transaction ID:</b> 37179050 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 1 0 / 1 5 / 2 0 1 0	Amount of Each Disbursement this Period  200.00
<b>C.</b>	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) ▼	<b>Transaction ID:</b> 37179051 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 1 0 / 1 5 / 2 0 1 0	Amount of Each Disbursement this Period  200.00

**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

<b>A.</b> Full Name (Last, First, Middle Initial) Committee to Elect John Odom Mailing Address P.O. Box 2123 City Wheat Ridge State CO Zip Code 80034 Purpose of Disbursement John Odom, STATE SENATE 20th CO Candidate Name John Odom Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: CO District: Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 37179052 Date of Disbursement 10 / 15 / 2010
	Amount of Each Disbursement this Period 200.00 John Odom, STATE SENATE 20th CO

<b>B.</b> Full Name (Last, First, Middle Initial) Ellen Roberts for State Senate Mailing Address P.O. Box 3373 City Durango State CO Zip Code 81302 Purpose of Disbursement Ellen Roberts, STATE SENATE 6th CO 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 checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 37179053 Date of Disbursement 10 / 15 / 2010
	Amount of Each Disbursement this Period 200.00 Ellen Roberts, STATE SENA- TE 6th CO

<b>C.</b> 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 checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 37179054 Date of Disbursement 10 / 15 / 2010
	Amount of Each Disbursement this Period 200.00 Bob Rankin, STATE SENATE 5th CO

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	600.00
<b>TOTAL</b> 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) Tim Leonard for State Senate	Transaction ID: 37179055 Date of Disbursement 10 / 15 / 2010
	Mailing Address P.O. Box 1175	Amount of Each Disbursement this Period 200.00
	City Kittredge State CO Zip Code 80457	
	Purpose of Disbursement Tim Leonard, STATE SENATE 16th CO	011 Category/ Type
	Candidate Name Tim Leonard	
	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: CO District:	Tim Leonard, STATE SENATE 16th CO

B.	Full Name (Last, First, Middle Initial) Master Print, Inc.	Transaction ID: 37179103 Date of Disbursement 10 / 15 / 2010
	Mailing Address P.O. Box 1467	Amount of Each Disbursement this Period 999.44
	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) ▼ State: District:	Independent Expenditure - Print 4 Color Cards

C.	Full Name (Last, First, Middle Initial) Prolist Inc.	Transaction ID: 37179106 Date of Disbursement 10 / 15 / 2010
	Mailing Address 8341 Beechcraft Avenue	Amount of Each Disbursement this Period 209.00
	City Gaithersburg State MD Zip Code 20879-1509	
	Purpose of Disbursement Independent Expenditure - Postage	011 Category/ Type
	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	Independent Expenditure - Postage

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	▶	1408.44
<b>TOTAL</b> 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: 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

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	▶	1075.41
<b>TOTAL</b> 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><b>A.</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 - Postage</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><b>Transaction ID:</b> 37179110 <b>Date of Disbursement</b> 10 / 15 / 2010</p> <p>Amount of Each Disbursement this Period 345.85</p> <p>011 Category/ Type</p> <p>Independent Expenditure - Postage</p>
<p><b>B.</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 - Postage</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 type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 37179111 <b>Date of Disbursement</b> 10 / 15 / 2010</p> <p>Amount of Each Disbursement this Period 398.14</p> <p>011 Category/ Type</p> <p>Independent Expenditure - Postage</p>
<p><b>C.</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 - Postage</p> <p>Candidate Name Bob Boswell</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CO District: 50</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 37179112 <b>Date of Disbursement</b> 10 / 15 / 2010</p> <p>Amount of Each Disbursement this Period 243.24</p> <p>011 Category/ Type</p> <p>Independent Expenditure - Postage</p>

**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)

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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: 37179113 Date of Disbursement 10 / 15 / 2010
	Mailing Address 8341 Beechcraft Avenue	Amount of Each Disbursement this Period 733.15
	City Gaithersburg State MD Zip Code 20879-1509	
	Purpose of Disbursement Independent Expenditure - Postage Candidate Name Bob Rankin Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: CO 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: 37179114 Date of Disbursement 10 / 15 / 2010
	Mailing Address 8341 Beechcraft Avenue	Amount of Each Disbursement this Period 816.64
	City Gaithersburg State MD Zip Code 20879-1509	
	Purpose of Disbursement Independent Expenditure - Postage Candidate Name Ellen Roberts Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: CO 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: 37179115 Date of Disbursement 10 / 15 / 2010
	Mailing Address 8341 Beechcraft Avenue	Amount of Each Disbursement this Period 309.68
	City Gaithersburg State MD Zip Code 20879-1509	
	Purpose of Disbursement Independent Expenditure - Postage Candidate Name Owen Hill Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: CO 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) ..... ▶

1859.47

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

<b>A.</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 Tim Leonard <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: 37179116 Date of Disbursement 10 / 15 / 2010
	Amount of Each Disbursement this Period 655.95
	Category/ Type 011
	Independent Expenditure - Postage
<b>B.</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 Mark Barker <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CO District: 17 <hr/> 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
	Amount of Each Disbursement this Period 111.29
	Category/ Type 011
	Independent Expenditure - Postcards
<b>C.</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 Libby Szabo <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CO District: 27 <hr/> 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
	Amount of Each Disbursement this Period 207.75
	Category/ Type 011
	Independent Expenditure - Postcards

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

974.99

**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: 37179131 Date of Disbursement 10 / 15 / 2010
	Mailing Address 8341 Beechcraft Avenue	Amount of Each Disbursement this Period 181.56
	City Gaithersburg State MD Zip Code 20879-1509	
	Purpose of Disbursement Independent Expenditure - Postcards	011 Category/ Type
	Candidate Name Robert Ramirez	
	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: 29	Independent Expenditure - Postcards

B.	Full Name (Last, First, Middle Initial) Prolist Inc.	Transaction ID: 37179132 Date of Disbursement 10 / 15 / 2010
	Mailing Address 8341 Beechcraft Avenue	Amount of Each Disbursement this Period 198.98
	City Gaithersburg State MD Zip Code 20879-1509	
	Purpose of Disbursement Independent Expenditure - Postcards	011 Category/ Type
	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	Independent Expenditure - Postcards

C.	Full Name (Last, First, Middle Initial) Prolist Inc.	Transaction ID: 37179133 Date of Disbursement 10 / 15 / 2010
	Mailing Address 8341 Beechcraft Avenue	Amount of Each Disbursement this Period 188.83
	City Gaithersburg State MD Zip Code 20879-1509	
	Purpose of Disbursement Independent Expenditure - Postcards	011 Category/ Type
	Candidate Name Kathleen Conti	
	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: 38	Independent Expenditure - Postcards

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	569.37
<b>TOTAL</b> 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: 37179134 Date of Disbursement
	Mailing Address 8341 Beechcraft Avenue	<input type="text" value="10"/> <input type="text" value="15"/> / <input type="text" value="20"/> <input type="text" value="10"/>
	City Gaithersburg State MD Zip Code 20879-1509	Amount of Each Disbursement this Period
	Purpose of Disbursement Independent Expenditure - Postcards	<input type="text" value="217.44"/>
	Candidate Name Kieth Swerdfeger	<input type="text" value="011"/> Category/ Type
	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	Independent Expenditure - Postcards

B.	Full Name (Last, First, Middle Initial) Prolist Inc.	Transaction ID: 37179135 Date of Disbursement
	Mailing Address 8341 Beechcraft Avenue	<input type="text" value="10"/> <input type="text" value="15"/> / <input type="text" value="20"/> <input type="text" value="10"/>
	City Gaithersburg State MD Zip Code 20879-1509	Amount of Each Disbursement this Period
	Purpose of Disbursement Independent Expenditure - Postcards	<input type="text" value="131.19"/>
	Candidate Name Bob Boswell	<input type="text" value="011"/> Category/ Type
	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: 50	Independent Expenditure - Postcards

C.	Full Name (Last, First, Middle Initial) Prolist Inc.	Transaction ID: 37179136 Date of Disbursement
	Mailing Address 8341 Beechcraft Avenue	<input type="text" value="10"/> <input type="text" value="15"/> / <input type="text" value="20"/> <input type="text" value="10"/>
	City Gaithersburg State MD Zip Code 20879-1509	Amount of Each Disbursement this Period
	Purpose of Disbursement Independent Expenditure - Postcards	<input type="text" value="400.61"/>
	Candidate Name Bob Rankin	<input type="text" value="011"/> Category/ Type
	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: CO District:	Independent Expenditure - Postcards

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<input type="text" value="749.24"/>
<b>TOTAL</b> 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: 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) ▼
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) ▼
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) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>975.06</b>
<b>TOTAL</b> 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><b>A.</b> Full Name (Last, First, Middle Initial) OnMessage, Inc.</p> <p>Mailing Address 2130 Priest Bridge Drive, #11</p> <p>City Crofton State MD Zip Code 21114</p> <p>Purpose of Disbursement Independent Expenditure - TV Advertising</p> <p>Candidate Name Bill Brady</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><b>Transaction ID:</b> 37179142 <b>Date of Disbursement</b> 10 / 14 / 2010</p> <p>Amount of Each Disbursement this Period 290053.12</p> <p>011 Category/ Type</p> <p>Independent Expenditure - TV Advertising</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) OnMessage, Inc.</p> <p>Mailing Address 2130 Priest Bridge Drive, #11</p> <p>City Crofton State MD Zip Code 21114</p> <p>Purpose of Disbursement Independent Expenditure - TV Advertising</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><b>Transaction ID:</b> 37179143 <b>Date of Disbursement</b> 10 / 14 / 2010</p> <p>Amount of Each Disbursement this Period 251785.31</p> <p>011 Category/ Type</p> <p>Independent Expenditure - TV Advertising</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Paulsen for State House</p> <p>Mailing Address 1305 Cress Parkway</p> <p>City Hiawatha State IA Zip Code 52233</p> <p>Purpose of Disbursement Kraig Paulsen, STATE HOUSE 35th IA</p> <p>Candidate Name IA Rep. Kraig Paulsen</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IA District: 35</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 37208206 <b>Date of Disbursement</b> 10 / 19 / 2010</p> <p>Amount of Each Disbursement this Period 1000.00</p> <p>011 Category/ Type</p> <p>Kraig Paulsen, STATE HOUSE 35th IA</p>

**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	Transaction ID: 37259012 Date of Disbursement 10 / 19 / 2010
	Mailing Address 1120 G Street, NW Suite 600	Amount of Each Disbursement this Period 437.50
	City Washington State DC Zip Code 20005	
	Purpose of Disbursement Independent Expenditure - Graphic Art Design	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) ▼	Independent Expenditure - Graphic Art Design
	State: District:	

B.	Full Name (Last, First, Middle Initial) Federal Capitol Communications Corporation	Transaction ID: 37259513 Date of Disbursement 10 / 19 / 2010
	Mailing Address 1120 G Street, NW Suite 600	Amount of Each Disbursement this Period 437.50
	City Washington State DC Zip Code 20005	
	Purpose of Disbursement Independent Expenditure - Graphic Art Design	011 Category/ Type
	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) ▼	Independent Expenditure - Graphic Art Design
	State: District:	

C.	Full Name (Last, First, Middle Initial) Federal Capitol Communications Corporation	Transaction ID: 37259955 Date of Disbursement 10 / 19 / 2010
	Mailing Address 1120 G Street, NW Suite 600	Amount of Each Disbursement this Period 1200.00
	City Washington State DC Zip Code 20005	
	Purpose of Disbursement Independent Expenditure - Graphic Art Design	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 - Graphic Art Design
	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	2075.00
<b>TOTAL</b> 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

<b>A.</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 <hr/> 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:	<b>Transaction ID:</b> 37260095 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 1 0 / 1 9 / 2 0 1 0	Amount of Each Disbursement this Period 1200.00 <hr/> Independent Expenditure - Graphic Art Design
<b>B.</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 <hr/> 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:	<b>Transaction ID:</b> 37260896 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 1 0 / 1 9 / 2 0 1 0	Amount of Each Disbursement this Period 1200.00 <hr/> Independent Expenditure - Graphic Art Design
<b>C.</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 <hr/> 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:	<b>Transaction ID:</b> 37310692 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 1 0 / 1 9 / 2 0 1 0	Amount of Each Disbursement this Period 1200.00 <hr/> Independent Expenditure - Graphic Art Design

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>3600.00</b>
<b>TOTAL</b> 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

<b>A.</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 Rick Scott <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:	<b>Transaction ID:</b> 37310761 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 1 0 / 1 9 / 2 0 1 0
	Amount of Each Disbursement this Period 958.34
	Category/ Type 011
	Independent Expenditure - Graphic Art Design
<b>B.</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 TV Advertising - Credit Unused Airtime Candidate Name Governor Rick Perry <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:	<b>Transaction ID:</b> 37310988 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 1 0
	Amount of Each Disbursement this Period -25301.00
	Category/ Type 011
	TV Advertising - Credit Unused Airtime
<b>C.</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 - TV & Radio Ads Production Cost - Estimated Candidate Name Governor Rick Perry <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:	<b>Transaction ID:</b> 37310990 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 1 0
	Amount of Each Disbursement this Period 27375.00
	Category/ Type 011
	Independent Expenditure - TV & Radio Ads Production Cost - Estimated

**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)

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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: 37342621 Date of Disbursement 10 / 23 / 2010
	Mailing Address 8341 Beechcraft Avenue	Amount of Each Disbursement this Period 459.36
	City Gaithersburg State MD Zip Code 20879-1509	
	Purpose of Disbursement Independent Expenditure - Postage	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) ▼
		Independent Expenditure - Postage

B.	Full Name (Last, First, Middle Initial) Prolist Inc.	Transaction ID: 37342622 Date of Disbursement 10 / 23 / 2010
	Mailing Address 8341 Beechcraft Avenue	Amount of Each Disbursement this Period 502.49
	City Gaithersburg State MD Zip Code 20879-1509	
	Purpose of Disbursement Independent Expenditure - Postage	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 - Postage

C.	Full Name (Last, First, Middle Initial) Prolist Inc.	Transaction ID: 37342623 Date of Disbursement 10 / 23 / 2010
	Mailing Address 8341 Beechcraft Avenue	Amount of Each Disbursement this Period 716.06
	City Gaithersburg State MD Zip Code 20879-1509	
	Purpose of Disbursement Independent Expenditure - Postage	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 - Postage

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	▶	1677.91
<b>TOTAL</b> 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

<b>A.</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 NC Rep. Arthur Williams, III <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NC District: 06 <hr/> 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>B.</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 Jeffrey L. Collins <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NC District: 25 <hr/> 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
<b>C.</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 Jackie Warner <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NC District: 45 <hr/> 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)

<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

<b>A.</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 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) ▼	Transaction ID: 37342628 Date of Disbursement 10 / 23 / 2010
	Amount of Each Disbursement this Period 579.28 Independent Expenditure - Postage
<b>B.</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 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) ▼	Transaction ID: 37342629 Date of Disbursement 10 / 23 / 2010
	Amount of Each Disbursement this Period 1016.31 Independent Expenditure - Postage
<b>C.</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 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) ▼	Transaction ID: 37342630 Date of Disbursement 10 / 23 / 2010
	Amount of Each Disbursement this Period 1211.59 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

<b>A.</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 Brent Jackson <hr/> Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: NC District: <hr/> Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 37342631 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 3 / 2 0 1 0
	Amount of Each Disbursement this Period 1320.33
	Category/ Type 011
	Independent Expenditure - Postage
<b>B.</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 NC Sen. David Rouzer <hr/> Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: NC District: <hr/> Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 37342632 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 3 / 2 0 1 0
	Amount of Each Disbursement this Period 1565.80
	Category/ Type 011
	Independent Expenditure - Postage
<b>C.</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 Wesley Meredith <hr/> Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: NC District: <hr/> Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 37342633 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 3 / 2 0 1 0
	Amount of Each Disbursement this Period 1056.71
	Category/ Type 011
	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) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	2862.46
<b>TOTAL</b> 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

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	▶	1164.22
<b>TOTAL</b> 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

<b>A.</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 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: 37342644 Date of Disbursement 10 / 23 / 2010
	Amount of Each Disbursement this Period 427.28 Independent Expenditure - Postcards
<b>B.</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 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: 37342645 Date of Disbursement 10 / 23 / 2010
	Amount of Each Disbursement this Period 270.77 Independent Expenditure - Postcards
<b>C.</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 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) ▼	Transaction ID: 37342646 Date of Disbursement 10 / 23 / 2010
	Amount of Each Disbursement this Period 367.87 Independent Expenditure - Postcards

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

1065.92

**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.	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

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<input type="text" value="2098.41"/>
<b>TOTAL</b> 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

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	2194.72
<b>TOTAL</b> 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

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>2557.62</b>
<b>TOTAL</b> 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) National Rifle Association of America	Transaction ID: 37362659 Date of Disbursement 10 / 27 / 2010
	Mailing Address 11250 Waples Mill Road	Amount of Each Disbursement this Period 2189.26
	City Fairfax State VA Zip Code 22030	
	Purpose of Disbursement Independent Expenditure - Salary / Benefits	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) ▼ State: District:	Independent Expenditure - Salary / Benefits

B.	Full Name (Last, First, Middle Initial) Novacon Promotional Products	Transaction ID: 37362696 Date of Disbursement 10 / 28 / 2010
	Mailing Address 11100 Pulaski Highway	Amount of Each Disbursement this Period 582.56
	City White Marsh State MD Zip Code 21162	
	Purpose of Disbursement Independent Expenditure - Bumper Stickers	011 Category/ Type
	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:	Independent Expenditure - Bumper Stickers

C.	Full Name (Last, First, Middle Initial) Novacon Promotional Products	Transaction ID: 37362702 Date of Disbursement 10 / 28 / 2010
	Mailing Address 11100 Pulaski Highway	Amount of Each Disbursement this Period 240.93
	City White Marsh State MD Zip Code 21162	
	Purpose of Disbursement Independent Expenditure - Bumper Stickers	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) ▼ State: District:	Independent Expenditure - Bumper Stickers

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>3012.75</b>
<b>TOTAL</b> 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 State: District:	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		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 State: District:	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		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 State: District:	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		Independent Expenditure - Phone Bank

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	1590.41
<b>TOTAL</b> 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

<b>A.</b>	Full Name (Last, First, Middle Initial) Connection Strategy, LLC <hr/> Mailing Address P.O. Box 2192 <hr/> City Arlington State VA Zip Code 22202 <hr/> Purpose of Disbursement Independent Expenditure - Phone Bank Candidate Name John Kitzhaber <hr/> 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>Transaction ID:</b> 37376239 <b>Date of Disbursement</b> 10 / 28 / 2010 <hr/> Amount of Each Disbursement this Period 1004.19 <hr/> Independent Expenditure - Phone Bank
<b>B.</b>	Full Name (Last, First, Middle Initial) Master Print, Inc. <hr/> Mailing Address P.O. Box 1467 <hr/> City Newington State VA Zip Code 22122 <hr/> Purpose of Disbursement Independent Expenditure - Print 4 Color Cards Candidate Name Chris Dudley <hr/> 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>Transaction ID:</b> 37379220 <b>Date of Disbursement</b> 10 / 29 / 2010 <hr/> Amount of Each Disbursement this Period 4944.90 <hr/> Independent Expenditure - Print 4 Color Cards
<b>C.</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 Chris Dudley <hr/> 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>Transaction ID:</b> 37379223 <b>Date of Disbursement</b> 10 / 29 / 2010 <hr/> Amount of Each Disbursement this Period 33735.87 <hr/> Independent Expenditure - Postage

**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

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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: 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:	

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>2746.37</b>
<b>TOTAL</b> 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

<b>A.</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 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) ▼	Transaction ID: 37379231 Date of Disbursement 10 / 29 / 2010
	Amount of Each Disbursement this Period 144.22 Independent Expenditure - Postage

<b>B.</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 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) ▼	Transaction ID: 37379232 Date of Disbursement 10 / 29 / 2010
	Amount of Each Disbursement this Period 379.58 Independent Expenditure - Postage

<b>C.</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 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) ▼	Transaction ID: 37379233 Date of Disbursement 10 / 29 / 2010
	Amount of Each Disbursement this Period 428.12 Independent Expenditure - Postage

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	951.92
<b>TOTAL</b> 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

<b>A.</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 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>B.</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
<b>C.</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 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)

<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

<b>A.</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 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) ▼	<b>Transaction ID:</b> 37379238 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 1 0 / 2 9 / 2 0 1 0
	Amount of Each Disbursement this Period 318.16
	Independent Expenditure - Postcards
	Category/Type 011
<b>B.</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) ▼	<b>Transaction ID:</b> 37379239 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 1 0 / 2 9 / 2 0 1 0
	Amount of Each Disbursement this Period 374.43
	Independent Expenditure - Postcards
	Category/Type 011
<b>C.</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 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) ▼	<b>Transaction ID:</b> 37379324 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 1 0 / 2 9 / 2 0 1 0
	Amount of Each Disbursement this Period 208.48
	Independent Expenditure - Postage
	Category/Type 011

**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.	Transaction ID: 37379325 Date of Disbursement 10 / 29 / 2010
	Mailing Address 8341 Beechcraft Avenue	Amount of Each Disbursement this Period 189.63
	City Gaithersburg State MD Zip Code 20879-1509	
	Purpose of Disbursement Independent Expenditure - Postage	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 - Postage

B.	Full Name (Last, First, Middle Initial) Prolist Inc.	Transaction ID: 37379326 Date of Disbursement 10 / 29 / 2010
	Mailing Address 8341 Beechcraft Avenue	Amount of Each Disbursement this Period 259.70
	City Gaithersburg State MD Zip Code 20879-1509	
	Purpose of Disbursement Independent Expenditure - Postage	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 - Postage

C.	Full Name (Last, First, Middle Initial) Prolist Inc.	Transaction ID: 37379327 Date of Disbursement 10 / 29 / 2010
	Mailing Address 8341 Beechcraft Avenue	Amount of Each Disbursement this Period 181.93
	City Gaithersburg State MD Zip Code 20879-1509	
	Purpose of Disbursement Independent Expenditure - Postage	011 Category/ Type
	Candidate Name TX Rep. Jim Murphy	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: TX District: 33	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		Independent Expenditure - Postage

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	631.26
<b>TOTAL</b> 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

<b>A.</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 TX Rep. Dwayne Bohac <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: TX District: 38 <hr/> Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 37379328 Date of Disbursement 10 / 29 / 2010
	Amount of Each Disbursement this Period 224.57
	Category/ Type 011
	Independent Expenditure - Postage
<b>B.</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 TX Rep. Stephen Frost <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: TX District: 01 <hr/> Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 37379329 Date of Disbursement 10 / 29 / 2010
	Amount of Each Disbursement this Period 397.71
	Category/ Type 011
	Independent Expenditure - Postage
<b>C.</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 Tim Kleinschmidt <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: TX District: 17 <hr/> Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 37379330 Date of Disbursement 10 / 29 / 2010
	Amount of Each Disbursement this Period 479.19
	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

<b>A.</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 Paul Workman <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: TX District: 47 <hr/> Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 37379331 Date of Disbursement 10 / 29 / 2010
	Amount of Each Disbursement this Period 437.23
	Category/ Type 011
	Independent Expenditure - Postage
<b>B.</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 Dan Neil <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: TX District: 48 <hr/> Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 37379332 Date of Disbursement 10 / 29 / 2010
	Amount of Each Disbursement this Period 416.53
	Category/ Type 011
	Independent Expenditure - Postage
<b>C.</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 Larry Gonzales <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: TX District: 52 <hr/> Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 37379333 Date of Disbursement 10 / 29 / 2010
	Amount of Each Disbursement this Period 330.13
	Category/ Type 011
	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)

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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

<b>A.</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 TX Rep. Charles Anderson <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: TX District: 56 <hr/> Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> 37379334 <b>Date of Disbursement</b> 10 / 29 / 2010
	Amount of Each Disbursement this Period 435.17
	Category/ Type 011
	Independent Expenditure - Postage

<b>B.</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 TX Rep. Bill Zedler <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: TX District: 96 <hr/> Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> 37379335 <b>Date of Disbursement</b> 10 / 29 / 2010
	Amount of Each Disbursement this Period 340.74
	Category/ Type 011
	Independent Expenditure - Postage

<b>C.</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 Governor Rick Perry <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) ▼	<b>Transaction ID:</b> 37379336 <b>Date of Disbursement</b> 10 / 29 / 2010
	Amount of Each Disbursement this Period 736.83
	Category/ Type 011
	Independent Expenditure - Postage

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	1512.74
<b>TOTAL</b> 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

<b>A.</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 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) ▼	Transaction ID: 37379338 Date of Disbursement 10 / 29 / 2010 <hr/> Amount of Each Disbursement this Period 167.63 <hr/> Independent Expenditure - Postcards
	Category/Type 011
<b>B.</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. 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) ▼	Transaction ID: 37379339 Date of Disbursement 10 / 29 / 2010 <hr/> Amount of Each Disbursement this Period 132.94 <hr/> Independent Expenditure - Postcards
	Category/Type 011
<b>C.</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 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) ▼	Transaction ID: 37379340 Date of Disbursement 10 / 29 / 2010 <hr/> Amount of Each Disbursement this Period 237.82 <hr/> Independent Expenditure - Postcards
	Category/Type 011

**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)

<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

<b>A.</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. Jim Murphy Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: TX District: 33 Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 37379341 Date of Disbursement 10 / 29 / 2010 <hr/> Amount of Each Disbursement this Period 146.82 <hr/> Independent Expenditure - Postcards
	Category/Type 011
<b>B.</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 State: TX District: 38 Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 37379342 Date of Disbursement 10 / 29 / 2010 <hr/> Amount of Each Disbursement this Period 180.77 <hr/> Independent Expenditure - Postcards
	Category/Type 011
<b>C.</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. 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) ▼	Transaction ID: 37379343 Date of Disbursement 10 / 29 / 2010 <hr/> Amount of Each Disbursement this Period 362.43 <hr/> Independent Expenditure - Postcards
	Category/Type 011

**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	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: TX District: 17	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	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: TX District: 47	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	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: TX District: 48	Independent Expenditure - Postcards

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	1193.76
<b>TOTAL</b> 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: 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	
	Purpose of Disbursement Independent Expenditure - Postcards	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 - Postcards

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	
	Purpose of Disbursement Independent Expenditure - Postcards	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 - Postcards

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	
	Purpose of Disbursement Independent Expenditure - Postcards	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 - Postcards

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	1004.42
<b>TOTAL</b> 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

<b>A.</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 Governor Rick Perry <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: 37379350 Date of Disbursement 10 / 29 / 2010
	Amount of Each Disbursement this Period 584.39
	Category/ Type 011
	Independent Expenditure - Postcards
<b>B.</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 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: 37379352 Date of Disbursement 10 / 29 / 2010
	Amount of Each Disbursement this Period 141.56
	Category/ Type 011
	Independent Expenditure - Postage
<b>C.</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 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: 37379353 Date of Disbursement 10 / 29 / 2010
	Amount of Each Disbursement this Period 232.19
	Category/ Type 011
	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

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	506.49
<b>TOTAL</b> 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: 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	011 Category/ Type
	Candidate Name Jim Thompson	
	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	011 Category/ Type
	Candidate Name Jim Weidner	
	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	011 Category/ Type
	Candidate Name Matt Wingard	
	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

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	▶	1035.05
<b>TOTAL</b> 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  
Katie Eyre Brewer

Office Sought:  House  
 Senate  
 President

State: OR District: 29

Disbursement For: 2010  
 Primary  General  
 Other (specify) ▼

Transaction ID: 37379360  
Date of Disbursement

10 / 29 / 2010

Amount of Each Disbursement this Period

204.67

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  
Shawn Lindsay

Office Sought:  House  
 Senate  
 President

State: OR District: 30

Disbursement For: 2010  
 Primary  General  
 Other (specify) ▼

Transaction ID: 37379361  
Date of Disbursement

10 / 29 / 2010

Amount of Each Disbursement this Period

204.67

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  
Julie Parrish

Office Sought:  House  
 Senate  
 President

State: OR District: 37

Disbursement For: 2010  
 Primary  General  
 Other (specify) ▼

Transaction ID: 37379362  
Date of Disbursement

10 / 29 / 2010

Amount of Each Disbursement this Period

148.40

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)

<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

<b>A.</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 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) ▼	Transaction ID: 37379363 Date of Disbursement 10 / 29 / 2010
	Amount of Each Disbursement this Period 241.65 Independent Expenditure - Postage
<b>B.</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 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) ▼	Transaction ID: 37379364 Date of Disbursement 10 / 29 / 2010
	Amount of Each Disbursement this Period 115.80 Independent Expenditure - Postage
<b>C.</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 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) ▼	Transaction ID: 37379365 Date of Disbursement 10 / 29 / 2010
	Amount of Each Disbursement this Period 139.35 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)

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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: 37379366 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 Patrick Sheehan	
	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: 51	Independent Expenditure - Postage

B.	Full Name (Last, First, Middle Initial) Prolist Inc.	Transaction ID: 37379367 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 Mark Johnson	
	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: 52	Independent Expenditure - Postage

C.	Full Name (Last, First, Middle Initial) Prolist Inc.	Transaction ID: 37379368 Date of Disbursement 10 / 29 / 2010
	Mailing Address 8341 Beechcraft Avenue	Amount of Each Disbursement this Period 254.08
	City Gaithersburg State MD Zip Code 20879-1509	
	Purpose of Disbursement Independent Expenditure - Postage	011 Category/ Type
	Candidate Name Jason Conger	
	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: 54	Independent Expenditure - Postage

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	▶	1077.58
<b>TOTAL</b> 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

<b>A.</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 Dave Dottererr <hr/> 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:	Transaction ID: 37379369 Date of Disbursement 10 / 29 / 2010
	Amount of Each Disbursement this Period 287.09
	Category/ Type 011
	Independent Expenditure - Postage
<b>B.</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 Marilyn Kittelman <hr/> 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:	Transaction ID: 37379370 Date of Disbursement 10 / 29 / 2010
	Amount of Each Disbursement this Period 470.97
	Category/ Type 011
	Independent Expenditure - Postage
<b>C.</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 OR Sen. Jackie Winters <hr/> 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:	Transaction ID: 37379371 Date of Disbursement 10 / 29 / 2010
	Amount of Each Disbursement this Period 314.75
	Category/ Type 011
	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)

<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

<b>A.</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 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) ▼	Transaction ID: 37379372 Date of Disbursement 10 / 29 / 2010
	Amount of Each Disbursement this Period 425.18 Independent Expenditure - Postage Category/Type: 011
<b>B.</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 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) ▼	Transaction ID: 37379373 Date of Disbursement 10 / 29 / 2010
	Amount of Each Disbursement this Period 204.67 Independent Expenditure - Postage Category/Type: 011
<b>C.</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 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) ▼	Transaction ID: 37379374 Date of Disbursement 10 / 29 / 2010
	Amount of Each Disbursement this Period 261.73 Independent Expenditure - Postage Category/Type: 011

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	891.58
<b>TOTAL</b> 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: 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) ▼

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) ▼

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) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	1026.85
<b>TOTAL</b> 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

<b>A.</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 Chris Dudley <hr/> 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: 37379378 Date of Disbursement 10 / 29 / 2010
	Amount of Each Disbursement this Period 4955.35
	Category/ Type 011
	Independent Expenditure - Postage
<b>B.</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 Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 37379380 Date of Disbursement 10 / 29 / 2010
	Amount of Each Disbursement this Period 126.98
	Category/ Type 011
	Independent Expenditure - Postcards
<b>C.</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 Andy Olson <hr/> 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: 37379381 Date of Disbursement 10 / 29 / 2010
	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)

PAGE 160 / 485

<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

<b>A.</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. 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>B.</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
<b>C.</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 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.

Transaction ID: 37379385  
Date of Disbursement

Mailing Address 8341 Beechcraft Avenue

/   /

City Gaithersburg State MD Zip Code 20879-1509

Amount of Each Disbursement this Period

Purpose of Disbursement  
Independent Expenditure - Postcards

Category/  
Type

Candidate Name  
Jim Thompson

Office Sought:  House  Senate  President  
Disbursement For: 2010  Primary  General  Other (specify) ▼

Independent Expenditure - Postcards

State: OR District: 23

B.

Full Name (Last, First, Middle Initial)  
Prolist Inc.

Transaction ID: 37379386  
Date of Disbursement

Mailing Address 8341 Beechcraft Avenue

/   /

City Gaithersburg State MD Zip Code 20879-1509

Amount of Each Disbursement this Period

Purpose of Disbursement  
Independent Expenditure - Postcards

Category/  
Type

Candidate Name  
Jim Weidner

Office Sought:  House  Senate  President  
Disbursement For: 2010  Primary  General  Other (specify) ▼

Independent Expenditure - Postcards

State: OR District: 24

C.

Full Name (Last, First, Middle Initial)  
Prolist Inc.

Transaction ID: 37379387  
Date of Disbursement

Mailing Address 8341 Beechcraft Avenue

/   /

City Gaithersburg State MD Zip Code 20879-1509

Amount of Each Disbursement this Period

Purpose of Disbursement  
Independent Expenditure - Postcards

Category/  
Type

Candidate Name  
Matt Wingard

Office Sought:  House  Senate  President  
Disbursement For: 2010  Primary  General  Other (specify) ▼

Independent Expenditure - Postcards

State: OR District: 26

**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 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

<b>A.</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 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) ▼	Transaction ID: 37379388 Date of Disbursement 10 / 29 / 2010 <hr/> Amount of Each Disbursement this Period 111.35 <hr/> Independent Expenditure - Postcards
	Category/Type 011
<b>B.</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 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) ▼	Transaction ID: 37379389 Date of Disbursement 10 / 29 / 2010 <hr/> Amount of Each Disbursement this Period 111.35 <hr/> Independent Expenditure - Postcards
	Category/Type 011
<b>C.</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 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) ▼	Transaction ID: 37379390 Date of Disbursement 10 / 29 / 2010 <hr/> Amount of Each Disbursement this Period 131.95 <hr/> Independent Expenditure - Postcards
	Category/Type 011

**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)

<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 Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: OR District: 39	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 Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: OR District: 49	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 Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: OR District: 50	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)

<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: 37379394 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 Patrick Sheehan	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: OR District: 51	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: 37379395 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 Mark Johnson	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: OR District: 52	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: 37379396 Date of Disbursement 10 / 29 / 2010
	Mailing Address 8341 Beechcraft Avenue	Amount of Each Disbursement this Period 226.93
	City Gaithersburg State MD Zip Code 20879-1509	
	Purpose of Disbursement Independent Expenditure - Postcards	011 Category/ Type
	Candidate Name Jason Conger	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: OR District: 54	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		Independent Expenditure - Postcards

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	675.09
<b>TOTAL</b> 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)

<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) ▼	Independent Expenditure - Postcards
	State: OR District:	

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) ▼	Independent Expenditure - Postcards
	State: OR District:	

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) ▼	Independent Expenditure - Postcards
	State: OR District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>574.40</b>
<b>TOTAL</b> 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

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	772.64
<b>TOTAL</b> 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

<b>A.</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 Chris Dudley <hr/> 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: 37379406 Date of Disbursement 10 / 29 / 2010
	Amount of Each Disbursement this Period 4045.13
	Category/ Type 011
	Independent Expenditure - Postcards
<b>B.</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 Mark A. Hunt <hr/> 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: 37380661 Date of Disbursement 10 / 29 / 2010
	Amount of Each Disbursement this Period 72.18
	Category/ Type 011
	Independent Expenditure - Postage
<b>C.</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 SHARON SPENCER <hr/> 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: 37380662 Date of Disbursement 10 / 29 / 2010
	Amount of Each Disbursement this Period 72.18
	Category/ Type 011
	Independent Expenditure - Postage

**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

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	216.54
<b>TOTAL</b> 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: 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

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>207.60</b>
<b>TOTAL</b> 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: 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

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	▶	182.81
<b>TOTAL</b> 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: 37380672 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 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) ▼
		Independent Expenditure - Postage

B.	Full Name (Last, First, Middle Initial) Prolist Inc.	Transaction ID: 37380673 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 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 - Postage

C.	Full Name (Last, First, Middle Initial) Prolist Inc.	Transaction ID: 37380674 Date of Disbursement 10 / 29 / 2010
	Mailing Address 8341 Beechcraft Avenue	Amount of Each Disbursement this Period 636.87
	City Gaithersburg State MD Zip Code 20879-1509	
	Purpose of Disbursement Independent Expenditure - Postage	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 - Postage

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>731.65</b>
<b>TOTAL</b> 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: 37380675 Date of Disbursement 10 / 29 / 2010
	Mailing Address 8341 Beechcraft Avenue	Amount of Each Disbursement this Period 35.02
	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	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: 37380676 Date of Disbursement 10 / 29 / 2010
	Mailing Address 8341 Beechcraft Avenue	Amount of Each Disbursement this Period 428.95
	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:	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: 37380677 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 Candidate Name Kevin Patrick Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: WV District: 44	011 Category/ Type
	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Independent Expenditure - Postage

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>511.36</b>
<b>TOTAL</b> 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: 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

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	▶	167.13
<b>TOTAL</b> 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

<b>A.</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. 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
	Amount of Each Disbursement this Period 55.71 Independent Expenditure - Postcards
<b>B.</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
	Amount of Each Disbursement this Period 55.71 Independent Expenditure - Postcards
<b>C.</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 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
	Amount of Each Disbursement this Period 55.71 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)

<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: 37380685  
Date of Disbursement

Mailing Address 8341 Beechcraft Avenue

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

City Gaithersburg State MD Zip Code 20879-1509

Amount of Each Disbursement this Period

Purpose of Disbursement  
Independent Expenditure - Postcards

011
Category/ Type

52.27
-------

Candidate Name  
Delegate Samuel Cann, Sr.

Office Sought:  House  Senate  President  
Disbursement For: 2010  Primary  General  Other (specify) ▼

Independent Expenditure - Postcards

State: WV District: 41

B.

Full Name (Last, First, Middle Initial)  
Prolist Inc.

Transaction ID: 37380686  
Date of Disbursement

Mailing Address 8341 Beechcraft Avenue

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

City Gaithersburg State MD Zip Code 20879-1509

Amount of Each Disbursement this Period

Purpose of Disbursement  
Independent Expenditure - Postcards

011
Category/ Type

52.27
-------

Candidate Name  
WV Del. Richard Iaquina

Office Sought:  House  Senate  President  
Disbursement For: 2010  Primary  General  Other (specify) ▼

Independent Expenditure - Postcards

State: WV District: 41

C.

Full Name (Last, First, Middle Initial)  
Prolist Inc.

Transaction ID: 37380687  
Date of Disbursement

Mailing Address 8341 Beechcraft Avenue

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

City Gaithersburg State MD Zip Code 20879-1509

Amount of Each Disbursement this Period

Purpose of Disbursement  
Independent Expenditure - Postcards

011
Category/ Type

52.27
-------

Candidate Name  
WV Del. Timothy Miley

Office Sought:  House  Senate  President  
Disbursement For: 2010  Primary  General  Other (specify) ▼

Independent Expenditure - Postcards

State: WV District: 41

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

156.81

**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.	Transaction ID: 37380688 Date of Disbursement 10 / 29 / 2010
	Mailing Address 8341 Beechcraft Avenue	Amount of Each Disbursement this Period 52.27
	City Gaithersburg State MD Zip Code 20879-1509	
	Purpose of Disbursement Independent Expenditure - Postcards	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 - Postcards

B.	Full Name (Last, First, Middle Initial) Prolist Inc.	Transaction ID: 37380689 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 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 - Postcards

C.	Full Name (Last, First, Middle Initial) Prolist Inc.	Transaction ID: 37380690 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 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) ▼
		Independent Expenditure - Postcards

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	125.45
<b>TOTAL</b> 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

<b>A.</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 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: 37380691 Date of Disbursement 10 / 29 / 2010 <hr/> Amount of Each Disbursement this Period 36.59 <hr/> Independent Expenditure - Postcards
	Category/Type 011
<b>B.</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 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: 37380692 Date of Disbursement 10 / 29 / 2010 <hr/> Amount of Each Disbursement this Period 36.59 <hr/> Independent Expenditure - Postcards
	Category/Type 011
<b>C.</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 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: 37380693 Date of Disbursement 10 / 29 / 2010 <hr/> Amount of Each Disbursement this Period 491.61 <hr/> Independent Expenditure - Postcards
	Category/Type 011

**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

<b>A.</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 Elloit Simon <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: WV District: 57 <hr/> Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 37380694 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 27.03
	Category/ Type 011
	Independent Expenditure - Postcards

<b>B.</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 WV Sen. Mike Green <hr/> Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: WV District: <hr/> Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 37380695 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 331.12
	Category/ Type 011
	Independent Expenditure - Postcards

<b>C.</b> Full Name (Last, First, Middle Initial) Master Print, Inc. <hr/> Mailing Address P.O. Box 1467 <hr/> City Newington State VA Zip Code 22122 <hr/> Purpose of Disbursement Independent Expenditure - Print 4 Color Cards 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: 37380728 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 2739.45
	Category/ Type 011
	Independent Expenditure - Print 4 Color Cards

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	3097.60
<b>TOTAL</b> 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

<b>A.</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 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>B.</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
<b>C.</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 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

<b>A.</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 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) ▼	<b>Transaction ID:</b> 37384719 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 1 0 / 3 0 / 2 0 1 0
	Amount of Each Disbursement this Period 49.98
	Category/ Type 011
	Independent Expenditure - Postage
<b>B.</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 JENNINGS MCABEE <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: SC District: 12 <hr/> Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> 37384725 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 1 0 / 3 0 / 2 0 1 0
	Amount of Each Disbursement this Period 44.66
	Category/ Type 011
	Independent Expenditure - Postage
<b>C.</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 SC Rep. Wendy Nanney <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: SC District: 22 <hr/> Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> 37384732 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 1 0 / 3 0 / 2 0 1 0
	Amount of Each Disbursement this Period 36.26
	Category/ Type 011
	Independent Expenditure - Postage

**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)

<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

<b>A.</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 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) ▼	Transaction ID: 37384733 Date of Disbursement 10 / 30 / 2010
	Amount of Each Disbursement this Period 68.18 Independent Expenditure - Postage
<b>B.</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 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) ▼	Transaction ID: 37384734 Date of Disbursement 10 / 30 / 2010
	Amount of Each Disbursement this Period 63.98 Independent Expenditure - Postage
<b>C.</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 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) ▼	Transaction ID: 37384736 Date of Disbursement 10 / 30 / 2010
	Amount of Each Disbursement this Period 160.77 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

<b>A.</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 Richard Eckstrom 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: 37384737 Date of Disbursement 10 / 30 / 2010 <hr/> Amount of Each Disbursement this Period 160.76 <hr/> Independent Expenditure - Postage
	Category/Type 011
<b>B.</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 Representa Vida Miller Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: SC District: 08 Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 37385379 Date of Disbursement 10 / 30 / 2010 <hr/> Amount of Each Disbursement this Period 79.02 <hr/> Independent Expenditure - Postcards
	Category/Type 011
<b>C.</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 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: 37385380 Date of Disbursement 10 / 30 / 2010 <hr/> Amount of Each Disbursement this Period 51.86 <hr/> Independent Expenditure - Postcards
	Category/Type 011

**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)

<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

<b>A.</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 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: 37385381 Date of Disbursement 10 / 30 / 2010 <hr/> Amount of Each Disbursement this Period 46.34 <hr/> Independent Expenditure - Postcards
	011 Category/ Type
<b>B.</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 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: 37385382 Date of Disbursement 10 / 30 / 2010 <hr/> Amount of Each Disbursement this Period 37.62 <hr/> Independent Expenditure - Postcards
	011 Category/ Type
<b>C.</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 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) ▼	Transaction ID: 37385383 Date of Disbursement 10 / 30 / 2010 <hr/> Amount of Each Disbursement this Period 70.74 <hr/> Independent Expenditure - Postcards
	011 Category/ Type

**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)

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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: 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

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>418.36</b>
<b>TOTAL</b> 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	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 - 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	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 - 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	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 - Postage

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	▶	134.47
<b>TOTAL</b> 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

<b>A.</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 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>B.</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
<b>C.</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 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)

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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: 37385453 Date of Disbursement 10 / 30 / 2010
	Mailing Address 8341 Beechcraft Avenue	Amount of Each Disbursement this Period 79.37
	City Gaithersburg State MD Zip Code 20879-1509	
	Purpose of Disbursement Independent Expenditure - Postage	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 - Postage

B.	Full Name (Last, First, Middle Initial) Prolist Inc.	Transaction ID: 37385454 Date of Disbursement 10 / 30 / 2010
	Mailing Address 8341 Beechcraft Avenue	Amount of Each Disbursement this Period 61.32
	City Gaithersburg State MD Zip Code 20879-1509	
	Purpose of Disbursement Independent Expenditure - Postage	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 - Postage

C.	Full Name (Last, First, Middle Initial) Prolist Inc.	Transaction ID: 37385455 Date of Disbursement 10 / 30 / 2010
	Mailing Address 8341 Beechcraft Avenue	Amount of Each Disbursement this Period 125.49
	City Gaithersburg State MD Zip Code 20879-1509	
	Purpose of Disbursement Independent Expenditure - Postage	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 - Postage

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	▶	266.18
<b>TOTAL</b> 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: 37385456 Date of Disbursement 10 / 30 / 2010
	Mailing Address 8341 Beechcraft Avenue	Amount of Each Disbursement this Period 38.50
	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	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: 37385457 Date of Disbursement 10 / 30 / 2010
	Mailing Address 8341 Beechcraft Avenue	Amount of Each Disbursement this Period 45.64
	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	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: 37385458 Date of Disbursement 10 / 30 / 2010
	Mailing Address 8341 Beechcraft Avenue	Amount of Each Disbursement this Period 23.80
	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	011 Category/Type
	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Independent Expenditure - Postage

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	107.94
<b>TOTAL</b> 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

<b>A.</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 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
	Amount of Each Disbursement this Period 26.32 Independent Expenditure - Postage
<b>B.</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
	Amount of Each Disbursement this Period 25.06 Independent Expenditure - Postage
<b>C.</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 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
	Amount of Each Disbursement this Period 26.74 Independent Expenditure - Postage

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>78.12</b>
<b>TOTAL</b> 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

<b>A.</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 John Stevens <hr/> 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: 37385462 Date of Disbursement 10 / 30 / 2010
	Amount of Each Disbursement this Period 12.87
	Category/ Type 011
	Independent Expenditure - Postage
<b>B.</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 KS Rep. Phil Hermanson <hr/> 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: 37385463 Date of Disbursement 10 / 30 / 2010
	Amount of Each Disbursement this Period 27.44
	Category/ Type 011
	Independent Expenditure - Postage
<b>C.</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 Sam Brownback <hr/> 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: 37385464 Date of Disbursement 10 / 30 / 2010
	Amount of Each Disbursement this Period 442.24
	Category/ Type 011
	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

<b>A.</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 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) ▼	Transaction ID: 37385465 Date of Disbursement 10 / 30 / 2010
	Amount of Each Disbursement this Period 442.21 Independent Expenditure - Postage
<b>B.</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 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) ▼	Transaction ID: 37385467 Date of Disbursement 10 / 30 / 2010
	Amount of Each Disbursement this Period 34.81 Independent Expenditure - Postcards
<b>C.</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 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) ▼	Transaction ID: 37385468 Date of Disbursement 10 / 30 / 2010
	Amount of Each Disbursement this Period 40.55 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

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	▶	274.50
<b>TOTAL</b> 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: 37385472  
Date of Disbursement

Mailing Address 8341 Beechcraft Avenue

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

City Gaithersburg State MD Zip Code 20879-1509

Amount of Each Disbursement this Period

125.51
--------

Purpose of Disbursement  
Independent Expenditure - Postcards

011
-----

Category/  
Type

Candidate Name  
John Rubin

Office Sought:  House  
 Senate  
 President

Disbursement For: 2010  
 Primary  General  
 Other (specify) ▼

Independent Expenditure -  
Postcards

State: KS District: 18

B.

Full Name (Last, First, Middle Initial)  
Prolist Inc.

Transaction ID: 37385473  
Date of Disbursement

Mailing Address 8341 Beechcraft Avenue

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

City Gaithersburg State MD Zip Code 20879-1509

Amount of Each Disbursement this Period

101.64
--------

Purpose of Disbursement  
Independent Expenditure - Postcards

011
-----

Category/  
Type

Candidate Name  
Rob Bruchman

Office Sought:  House  
 Senate  
 President

Disbursement For: 2010  
 Primary  General  
 Other (specify) ▼

Independent Expenditure -  
Postcards

State: KS District: 20

C.

Full Name (Last, First, Middle Initial)  
Prolist Inc.

Transaction ID: 37385474  
Date of Disbursement

Mailing Address 8341 Beechcraft Avenue

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

City Gaithersburg State MD Zip Code 20879-1509

Amount of Each Disbursement this Period

58.42
-------

Purpose of Disbursement  
Independent Expenditure - Postcards

011
-----

Category/  
Type

Candidate Name  
Greg Smith

Office Sought:  House  
 Senate  
 President

Disbursement For: 2010  
 Primary  General  
 Other (specify) ▼

Independent Expenditure -  
Postcards

State: KS District: 22

**SUBTOTAL** of Disbursements This Page (optional) ..... ►

285.57
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**TOTAL** This Period (last page this line number only) ..... ►

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**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: 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

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	▶	241.68
<b>TOTAL</b> 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: 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	Independent Expenditure - Postcards
	Purpose of Disbursement Independent Expenditure - Postcards 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) ▼	

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	Independent Expenditure - Postcards
	Purpose of Disbursement Independent Expenditure - Postcards 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) ▼	

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	Independent Expenditure - Postcards
	Purpose of Disbursement Independent Expenditure - Postcards 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) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>71.63</b>
<b>TOTAL</b> 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 197 / 485

<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: 37385481 Date of Disbursement 10 / 30 / 2010
	Mailing Address 8341 Beechcraft Avenue	Amount of Each Disbursement this Period 25.47
	City Gaithersburg State MD Zip Code 20879-1509	
	Purpose of Disbursement Independent Expenditure - Postcards	011 Category/ Type
	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) ▼
		Independent Expenditure - Postcards

B.	Full Name (Last, First, Middle Initial) Prolist Inc.	Transaction ID: 37385482 Date of Disbursement 10 / 30 / 2010
	Mailing Address 8341 Beechcraft Avenue	Amount of Each Disbursement this Period 12.27
	City Gaithersburg State MD Zip Code 20879-1509	
	Purpose of Disbursement Independent Expenditure - Postcards	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 - Postcards

C.	Full Name (Last, First, Middle Initial) Prolist Inc.	Transaction ID: 37385483 Date of Disbursement 10 / 30 / 2010
	Mailing Address 8341 Beechcraft Avenue	Amount of Each Disbursement this Period 26.14
	City Gaithersburg State MD Zip Code 20879-1509	
	Purpose of Disbursement Independent Expenditure - Postcards	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 - Postcards

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	63.88
<b>TOTAL</b> 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 198 / 485

<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

<b>A.</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 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 10 / 30 / 2010
	Amount of Each Disbursement this Period 506.34
	011 Category/ Type
	Independent Expenditure - Postcards
<b>B.</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 10 / 30 / 2010
	Amount of Each Disbursement this Period 506.30
	011 Category/ Type
	Independent Expenditure - Postcards
<b>C.</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 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 10 / 30 / 2010
	Amount of Each Disbursement this Period 8132.10
	011 Category/ Type
	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)

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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

<b>A.</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 Chris Dudley <hr/> 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>Transaction ID:</b> 37386550 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 1 0 / 3 0 / 2 0 1 0
	Amount of Each Disbursement this Period 520.34 <hr/> Independent Expenditure - Postcards

<b>B.</b> Full Name (Last, First, Middle Initial) Simone Gordon for State Representative <hr/> Mailing Address 251 W. Broadway #113 <hr/> City Eugene State OR Zip Code 97401 <hr/> Purpose of Disbursement Void - Simone Gordon for State Representative Candidate Name Simone Gordon <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: OR District: 08 Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> 37539617 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 1 0 / 3 1 / 2 0 1 0
	Amount of Each Disbursement this Period -500.00 <hr/> Void - Simone Gordon for State Representative

<b>C.</b> Full Name (Last, First, Middle Initial) Lyle Larson for State Representative <hr/> Mailing Address P.O. Box 171148 <hr/> City San Antonio State TX Zip Code 78217 <hr/> Purpose of Disbursement Void - Lyle Larson for State Representative Candidate Name Lyle Larson <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: TX District: 22 Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> 37539619 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 1 0 / 3 1 / 2 0 1 0
	Amount of Each Disbursement this Period -500.00 <hr/> Void - Lyle Larson for State Representative

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	-479.66
<b>TOTAL</b> 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)

PAGE 200 / 485

<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) Jim McReynolds Campaign	Transaction ID: 37539621 Date of Disbursement 10 / 31 / 2010
	Mailing Address P.O. Box 155056	Amount of Each Disbursement this Period -500.00
	City Lufkin State TX Zip Code 75915	
	Purpose of Disbursement Void - Jim McReynolds Campaign	011 Category/ Type
	Candidate Name Jim McReynolds	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: TX District: 12	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		Void - Jim McReynolds Campaign

B.	Full Name (Last, First, Middle Initial) Committee to Elect Marc Gergely	Transaction ID: 37539623 Date of Disbursement 10 / 31 / 2010
	Mailing Address P.O. Box 221	Amount of Each Disbursement this Period -250.00
	City McKeesport State PA Zip Code 15134	
	Purpose of Disbursement Void - Committee to Elect Marc Gergely	011 Category/ Type
	Candidate Name PA Rep. Marc Gergely	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 35	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		Void - Committee to Elect Marc Gergely

C.	Full Name (Last, First, Middle Initial) Federal Capitol Communications Corporation	Transaction ID: 37561001 Date of Disbursement 11 / 16 / 2010
	Mailing Address 1120 G Street, NW Suite 600	Amount of Each Disbursement this Period 142118.13
	City Washington State DC Zip Code 20005	
	Purpose of Disbursement Independent Expenditure - TV & Radio Advertising	011 Category/ Type
	Candidate Name Scott Walker	
	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 - TV & Radio Advertising

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	▶	141368.13
<b>TOTAL</b> 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 / 485

<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 - TV Ad Production

Candidate Name  
Scott Walker

011  
Category/  
Type

Office Sought:  House  Senate  President  
Disbursement For: 2010  Primary  General  Other (specify) ▼

State: District:

Transaction ID: 37561005

Date of Disbursement

11 / 16 / 2010

Amount of Each Disbursement this Period

16125.00

Independent Expenditure -  
TV Ad Production

B.

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 - Radio Ad Production

Candidate Name  
Scott Walker

011  
Category/  
Type

Office Sought:  House  Senate  President  
Disbursement For: 2010  Primary  General  Other (specify) ▼

State: District:

Transaction ID: 37561006

Date of Disbursement

11 / 16 / 2010

Amount of Each Disbursement this Period

3250.00

Independent Expenditure -  
Radio Ad Production

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  
Kent Sorenson

011  
Category/  
Type

Office Sought:  House  Senate  President  
Disbursement For: 2010  Primary  General  Other (specify) ▼

State: IA District:

Transaction ID: 37681252

Date of Disbursement

11 / 17 / 2010

Amount of Each Disbursement this Period

701.54

Independent Expenditure -  
Postage

**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)

PAGE 202 / 485

<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

<b>A.</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 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) ▼	<b>Transaction ID:</b> 37681254 <b>Date of Disbursement</b> 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>B.</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) ▼	<b>Transaction ID:</b> 37681257 <b>Date of Disbursement</b> 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

<b>C.</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 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) ▼	<b>Transaction ID:</b> 37681258 <b>Date of Disbursement</b> 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

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	754.92
<b>TOTAL</b> 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)

PAGE 203 / 485

<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: 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

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	254.04
<b>TOTAL</b> 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 / 485

<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

<b>A.</b> Full Name (Last, First, Middle Initial) NRA Institute for Legislative Action <hr/> Mailing Address 11250 Waples Mill Road <hr/> City Fairfax State VA Zip Code 22030 <hr/> Purpose of Disbursement Independent Expenditure - Travel Expense Candidate Name Scott Walker <hr/> 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>Transaction ID:</b> 37683250 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 1 1 / 1 6 / 2 0 1 0
	Amount of Each Disbursement this Period 62.40
	Category/ Type 011
	Independent Expenditure - Travel Expense
<b>B.</b> Full Name (Last, First, Middle Initial) Brent Gardner <hr/> Mailing Address 11250 Waples Mill Road <hr/> City Fairfax State VA Zip Code 22030 <hr/> Purpose of Disbursement Independent Expenditure - Travel Expense Candidate Name Scott Walker <hr/> 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>Transaction ID:</b> 37683255 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 1 1 / 1 6 / 2 0 1 0
	Amount of Each Disbursement this Period 78.00
	Category/ Type 011
	Independent Expenditure - Travel Expense
<b>C.</b> Full Name (Last, First, Middle Initial) Brooks for Assembly <hr/> Mailing Address S. 4311 Grote Hill Road <hr/> City Reedsburg State WI Zip Code 53959 <hr/> Purpose of Disbursement Void - Brooks for Assembly Candidate Name WI Rep. Edward Brooks <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: WI District: 50 Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> 37711422 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 1 1 / 2 2 / 2 0 1 0
	Amount of Each Disbursement this Period -500.00
	Category/ Type 011
	Void - Brooks for Assembly

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	-359.60
<b>TOTAL</b> 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)

FOR LINE NUMBER: (check only one)

9  
 10

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

<b>A.</b> 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 <input type="text" value="29820.98"/>	<b>Transaction ID: 38594617</b>	
Amount Incurred This Period <input type="text" value="140993.78"/>	Payment This Period <input type="text" value="29820.98"/>	Outstanding Balance at Close of This Period <input type="text" value="140993.78"/>

<b>B.</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 <input type="text" value="13023.85"/>	<b>Transaction ID: 38594618</b>	
Amount Incurred This Period <input type="text" value="1306132.53"/>	Payment This Period <input type="text" value="9033.20"/>	Outstanding Balance at Close of This Period <input type="text" value="1310123.18"/>

<b>C.</b> 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 <input type="text" value="7977.77"/>	<b>Transaction ID: 38594619</b>	
Amount Incurred This Period <input type="text" value="66317.16"/>	Payment This Period <input type="text" value="5182.09"/>	Outstanding Balance at Close of This Period <input type="text" value="69112.84"/>

<b>1) SUBTOTALS</b> This Period This Page (optional).....	<input type="text" value="1520229.80"/>
<b>2) TOTALS</b> This Period (last page this line number only).....	<input type="text"/>
<b>3) TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only).....	<input type="text"/>
<b>4) ADD 2) and 3)</b> 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)

FOR LINE NUMBER: (check only one)

9  
 10

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

<b>A.</b> 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"/>		<b>Transaction ID:</b> 38594620	
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>B.</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"/>		<b>Transaction ID:</b> 38594621	
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"/>	

<b>C.</b> 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"/>		<b>Transaction ID:</b> 38594622	
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"/>	

<b>1) SUBTOTALS</b> This Period This Page (optional).....	<input type="text" value="11000.00"/>
<b>2) TOTALS</b> This Period (last page this line number only).....	<input type="text"/>
<b>3) TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only).....	<input type="text"/>
<b>4) ADD 2) and 3)</b> 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)

FOR LINE NUMBER: (check only one)

9  
 10

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

<b>A.</b> 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 Alexandria	State VA	ZIP Code 22314	

Outstanding Balance Beginning This Period 190622.00		<b>Transaction ID:</b> 38594623	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 190622.00	

<b>B.</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 Alexandria	State VA	ZIP Code 22314	

Outstanding Balance Beginning This Period 0.00		<b>Transaction ID:</b> 38594624	
Amount Incurred This Period 40277.81	Payment This Period 0.00	Outstanding Balance at Close of This Period 40277.81	

<b>C.</b> 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 Gaithersburg	State MD	ZIP Code 20879	

Outstanding Balance Beginning This Period 0.00		<b>Transaction ID:</b> 38594625	
Amount Incurred This Period 1834.26	Payment This Period 0.00	Outstanding Balance at Close of This Period 1834.26	

<b>1) SUBTOTALS</b> This Period This Page (optional).....	▶	232734.07
<b>2) TOTALS</b> This Period (last page this line number only).....	▶	
<b>3) TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only).....	▶	
<b>4) ADD 2) and 3)</b> 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 / 485
	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

<b>A.</b> 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	<b>Transaction ID: 38594626</b>	
Amount Incurred This Period 36481.28	Payment This Period 0.00	Outstanding Balance at Close of This Period 36481.28

<b>B.</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	<b>Transaction ID: 38594627</b>	
Amount Incurred This Period 30642.33	Payment This Period 0.00	Outstanding Balance at Close of This Period 30642.33

1) <b>SUBTOTALS</b> This Period This Page (optional).....	67123.61
2) <b>TOTALS</b> This Period (last page this line number only).....	1831087.48
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only).....	0.00
4) <b>ADD 2) and 3)</b> 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 <b>C</b> 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:  
Sandy Adams

---

Calendar Year-To-Date Per Election for Office Sought	21775.00
---	----------

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

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 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:  
Sandy Adams

---

Calendar Year-To-Date Per Election for Office Sought	22275.00
---	----------

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

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 M M / D D / Y Y Y Y  
0 1 / 3 1 / 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 <b>C</b> 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

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

Calendar Year-To-Date Per Election  
for Office Sought 39538.57

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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 Ad Production - Estimated Cost	Category/ Type 004
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---

Name of Federal Candidate supported or Opposed by expenditure:  
Mr. Robert Schilling

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 1 / 3 1 / 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 <b>C</b> 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 8 / 2 0 1 0

Mailing Address  
1120 G Street, NW Suite 600

Amount  
30525.00

City State Zip Code  
Washington DC 20005

Transaction ID: 37228682

Purpose of Expenditure  
Radio Advertising

Category/Type  
004

Office Sought:  House State: MO  
 Senate District: 03  
 Presidential

Name of Federal Candidate supported or Opposed by expenditure:  
Rep. Russ Carnahan

Check One:  Support  Oppose

Calendar Year-To-Date Per Election for Office Sought  
66787.21

Disbursement For:  Primary  General  
 Other (specify) : \_\_\_\_\_  
2010  
**[MEMO ITEM]**  
Radio Advertising

Full Name (Last, First, Middle, Initial) of Payee  
Federal Capitol Communications Corporation

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

Mailing Address  
1120 G Street, NW Suite 600

Amount  
2500.00

City State Zip Code  
Washington DC 20005

Transaction ID: 37228820

Purpose of Expenditure  
Radio Ad Production - Estimated Cost

Category/Type  
004

Office Sought:  House State: MO  
 Senate District: 03  
 Presidential

Name of Federal Candidate supported or Opposed by expenditure:  
Rep. Russ Carnahan

Check One:  Support  Oppose

Calendar Year-To-Date Per Election for Office Sought  
69287.21

Disbursement For:  Primary  General  
 Other (specify) : \_\_\_\_\_  
2010  
**[MEMO ITEM]**  
Radio Ad Production - Estimated Cost

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures .....	0.00
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures .....	
(c) <b>TOTAL</b> Independent Expenditures .....	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or 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 1 / 3 1 / 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 <b>C</b> 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

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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. 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 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. 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) <b>SUBTOTAL</b> of Itemized Independent Expenditures .....	1285.68
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures .....	
(c) <b>TOTAL</b> Independent Expenditures .....	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or 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 1 / 3 1 / 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 <b>C</b> 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  
642.82

City State Zip Code  
Washington DC 20005

Transaction ID: 37254079

Purpose of Expenditure  
Graphic Art Design

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  
31089.07

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: 37254189

Purpose of Expenditure  
Graphic Art Design

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  
642.86

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 1 / 3 1 / 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 <b>C</b> 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: 37254222  
Office Sought:  House State: AZ  
 Senate District: 05  
 Presidential

Purpose of Expenditure Category/Type  
Graphic Art Design 004

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  
101069.13

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: 37254256  
Office Sought:  House State: AZ  
 Senate District: 08  
 Presidential

Purpose of Expenditure Category/Type  
Graphic Art Design 004

Name of Federal Candidate supported or Opposed by expenditure:  
Mr. Jesse Kelly

Check One:  Support  Oppose

Calendar Year-To-Date Per Election for Office Sought  
54229.16

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 1 / 3 1 / 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 <b>C</b> 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: 37254287  
Office Sought:  House State: CO  
 Senate District: 07  
 Presidential

Purpose of Expenditure Category/Type  
Graphic Art Design 004

Name of Federal Candidate supported or Opposed by expenditure:  
Mr. Ryan Frazier

Check One:  Support  Oppose

Calendar Year-To-Date Per Election for Office Sought  
4804.59

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: 37254324  
Office Sought:  House State: FL  
 Senate District: 22  
 Presidential

Purpose of Expenditure Category/Type  
Graphic Art Design 004

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  
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 1 / 3 1 / 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 <b>C</b> 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: 37254367

Purpose of Expenditure Category/Type  
Graphic Art Design 004

Office Sought:  House State: FL  
 Senate District: 24  
 Presidential

Name of Federal Candidate supported or Opposed by expenditure:  
Sandy Adams

Check One:  Support  Oppose

Calendar Year-To-Date Per Election for Office Sought  
22917.86

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: 37254400

Purpose of Expenditure Category/Type  
Graphic Art Design 004

Office Sought:  House State: FL  
 Senate District: 25  
 Presidential

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  
14067.67

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 1 / 3 1 / 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 <b>C</b> 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. Daniel Webster

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: 37254431

Office Sought:  House State: FL  
 Senate District: 08  
 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. Charles Djou

Calendar Year-To-Date Per Election for Office Sought 6880.77

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

Amount  
642.86

Transaction ID: 37254458

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 .....	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 1 / 3 1 / 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 <b>C</b> 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. Robert Schilling

Calendar Year-To-Date Per Election for Office Sought 40681.43

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

Amount  
642.86

Transaction ID: 37254484

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  
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. Kevin Yoder

Calendar Year-To-Date Per Election for Office Sought 16299.66

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

Amount  
642.86

Transaction ID: 37254529

Office Sought:  House State: KS  
 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 1 / 3 1 / 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 <b>C</b> 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

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Mailing Address  
1120 G Street, NW Suite 600

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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:  
Mike Pompeo

---

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:** 37254651

Office Sought:  House State: KS  
 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

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Mailing Address  
1120 G Street, NW Suite 600

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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. Jeffrey Perry

---

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:** 37254725

Office Sought:  House State: MA  
 Senate District: 10  
 Presidential

Check One:  Support  Oppose

Disbursement For:  Primary  General  
 Other (specify) : \_\_\_\_\_  
 2010

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures .....	1285.72
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures .....	
(c) <b>TOTAL</b> Independent Expenditures .....	

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Mary Rose Adkins  
Signature

Date M M / D D / Y Y Y Y  
0 1 / 3 1 / 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 <b>C</b> 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: 37254790  
Office Sought:  House State: MI  
 Senate District: 07  
 Presidential

Purpose of Expenditure Category/Type  
Graphic Art Design 004

Name of Federal Candidate supported or Opposed by expenditure:  
Mr. Timothy Walberg

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: 37254906  
Office Sought:  House State: NE  
 Senate District: 02  
 Presidential

Purpose of Expenditure Category/Type  
Graphic Art Design 004

Name of Federal Candidate supported or Opposed by expenditure:  
Rep. Lee Terry

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 1 / 3 1 / 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 <b>C</b> 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

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Mailing Address  
1120 G Street, NW Suite 600

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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. Frank Guinta

---

Calendar Year-To-Date Per Election for Office Sought	7263.41
---	---------

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

Amount  
642.86

**Transaction ID:** 37254977

Office Sought:  House State: NH  
 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

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Mailing Address  
1120 G Street, NW Suite 600

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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. Charles F. Bass

---

Calendar Year-To-Date Per Election for Office Sought	154828.97
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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:** 37255029

Office Sought:  House State: NH  
 Senate District: 02  
 Presidential

Check One:  Support  Oppose

Disbursement For:  Primary  General  
 Other (specify) : \_\_\_\_\_  
2010

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures .....	1285.72
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures .....	
(c) <b>TOTAL</b> Independent Expenditures .....	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or 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 1 / 3 1 / 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 <b>C</b> 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. Jon Runyan

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: 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 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. Joe Heck

Calendar Year-To-Date Per Election for Office Sought 1541.85

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 .....	<span style="border:1px solid black; padding:2px;">1285.72</span>
(b) SUBTOTAL of Unitemized Independent Expenditures .....	<span style="border:1px solid black; padding:2px;"> </span>
(c) TOTAL Independent Expenditures .....	<span style="border:1px solid black; padding:2px;"> </span>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or 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 1 / 3 1 / 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 <b>C</b> 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: 37255144

Purpose of Expenditure  
Graphic Art Design

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  
9836.98

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: 37255174

Purpose of Expenditure  
Graphic Art Design

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  
5792.16

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 1 / 3 1 / 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 <b>C</b> 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. 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 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. 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 .....	<span style="border:1px solid black; padding:2px;">1285.72</span>
(b) SUBTOTAL of Unitemized Independent Expenditures .....	<span style="border:1px solid black; padding:2px;"> </span>
(c) TOTAL Independent Expenditures .....	<span style="border:1px solid black; padding:2px;"> </span>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or 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 1 / 3 1 / 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 <b>C</b> 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 Mulvaney

Calendar Year-To-Date Per Election for Office Sought  
127611.94

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

Amount  
642.86

Transaction ID: 37255464

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 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. Keith Fimian

Calendar Year-To-Date Per Election for Office Sought  
8506.96

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

Amount  
642.86

Transaction ID: 37255515

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 .....	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 1 / 3 1 / 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	<b>FEC IDENTIFICATION NUMBER</b> <b>C</b> 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: 37255980

Purpose of Expenditure Category/Type  
Graphic Art Design 004

Office Sought:  House State: CA  
 Senate District: 11  
 Presidential

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  
88212.77

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: 37256018

Purpose of Expenditure Category/Type  
Graphic Art Design 004

Office Sought:  House State: CA  
 Senate District: 20  
 Presidential

Name of Federal Candidate supported or Opposed by expenditure:  
Mr. James Vidak

Check One:  Support  Oppose

Calendar Year-To-Date Per Election for Office Sought  
153457.45

Disbursement For:  Primary  General  
 Other (specify) : \_\_\_\_\_  
2010

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures .....	566.66
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures .....	
(c) <b>TOTAL</b> Independent Expenditures .....	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or 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 1 / 3 1 / 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 <b>C</b> 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: 37256057

Purpose of Expenditure  
Graphic Art Design

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  
812.39

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  
850.00

City State Zip Code  
Washington DC 20005

Transaction ID: 37256111

Purpose of Expenditure  
Graphic Art Design

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  
276635.39

Disbursement For:  Primary  General  
 Other (specify) : \_\_\_\_\_  
2010

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures .....	1133.33
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures .....	
(c) <b>TOTAL</b> Independent Expenditures .....	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or 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 1 / 3 1 / 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	<b>FEC IDENTIFICATION NUMBER</b> ▼ <b>C</b> 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 <span style="border: 1px solid black; padding: 2px;">004</span>	
Name of Federal Candidate supported or Opposed by expenditure: Mr. Benjamin Lange		
Calendar Year-To-Date Per Election for Office Sought		<span style="border: 1px solid black; padding: 2px;">44003.89</span>

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 <span style="border: 1px solid black; padding: 2px;">283.33</span>										
<b>Transaction ID:</b> 37256136										
Office Sought: <input checked="" type="checkbox"/> House State: <u>IA</u> <input type="checkbox"/> Senate District: <u>01</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 <span style="border: 1px solid black; padding: 2px;">004</span>	
Name of Federal Candidate supported or Opposed by expenditure: Mariannette Miller-Meeks		
Calendar Year-To-Date Per Election for Office Sought		<span style="border: 1px solid black; padding: 2px;">44605.76</span>

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 <span style="border: 1px solid black; padding: 2px;">283.33</span>										
<b>Transaction ID:</b> 37256267										
Office Sought: <input checked="" type="checkbox"/> House State: <u>IA</u> <input type="checkbox"/> Senate District: <u>02</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										

<b>(a) SUBTOTAL</b> of Itemized Independent Expenditures .....	<span style="border: 1px solid black; padding: 2px;">566.66</span>
<b>(b) SUBTOTAL</b> of Unitemized Independent Expenditures .....	<span style="border: 1px solid black; padding: 2px;"> </span>
<b>(c) TOTAL</b> Independent Expenditures .....	<span style="border: 1px solid black; padding: 2px;"> </span>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or 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  
1 / D  
3 D  
1 / Y  
2 Y  
0 Y  
1 Y  
1

**SCHEDULE E (FEC Form 3X)  
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund	<b>FEC IDENTIFICATION NUMBER</b> ▼ <b>C</b> 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 <span style="border: 1px solid black; padding: 2px;">004</span>	
Name of Federal Candidate supported or Opposed by expenditure: Sen. Charles E. Grassley		
Calendar Year-To-Date Per Election for Office Sought		<span style="border: 1px solid black; padding: 2px;">95384.65</span>

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 <span style="border: 1px solid black; padding: 2px;">566.67</span>										
<b>Transaction ID:</b> 37256307										
Office Sought: <input type="checkbox"/> House State: <u>IA</u> <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 Graphic Art Design	Category/ Type <span style="border: 1px solid black; padding: 2px;">004</span>	
Name of Federal Candidate supported or Opposed by expenditure: Mr. Edward Martin		
Calendar Year-To-Date Per Election for Office Sought		<span style="border: 1px solid black; padding: 2px;">69570.55</span>

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 <span style="border: 1px solid black; padding: 2px;">283.34</span>										
<b>Transaction ID:</b> 37256387										
Office Sought: <input checked="" type="checkbox"/> House State: <u>MO</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										

<b>(a) SUBTOTAL</b> of Itemized Independent Expenditures .....	<span style="border: 1px solid black; padding: 2px;">850.01</span>
<b>(b) SUBTOTAL</b> of Unitemized Independent Expenditures .....	<span style="border: 1px solid black; padding: 2px;"> </span>
<b>(c) TOTAL</b> Independent Expenditures .....	<span style="border: 1px solid black; padding: 2px;"> </span>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or 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 01 / 31 / 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 <b>C</b> 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

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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. Roy Blunt

---

Calendar Year-To-Date Per Election for Office Sought	2442387.44
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Date  
M M / D D / Y Y Y Y  
1 0 / 1 9 / 2 0 1 0

Amount  
283.34

Transaction ID: 37256529

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  
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. Steve Chabot

---

Calendar Year-To-Date Per Election for Office Sought	6569.56
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Date  
M M / D D / Y Y Y Y  
1 0 / 1 9 / 2 0 1 0

Amount  
283.34

Transaction ID: 37256616

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 .....	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 1 / 3 1 / 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 <b>C</b> 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 <b>Washington</b>	State <b>DC</b>	Zip Code <b>20005</b>
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Purpose of Expenditure <b>Graphic Art Design</b>	Category/Type <b>004</b>
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Name of Federal Candidate supported or Opposed by expenditure:  
**Rep. Patrick J. Tiberi**

---

Calendar Year-To-Date Per Election for Office Sought	<b>3749.80</b>
--	----------------

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

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Mailing Address  
1120 G Street, NW Suite 600

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City <b>Washington</b>	State <b>DC</b>	Zip Code <b>20005</b>
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Purpose of Expenditure <b>Graphic Art Design</b>	Category/Type <b>004</b>
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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	<b>6656.33</b>
--	----------------

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) <b>SUBTOTAL</b> of Itemized Independent Expenditures .....	<b>566.68</b>
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures .....	
(c) <b>TOTAL</b> Independent Expenditures .....	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or 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 1 / 3 1 / 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	<b>FEC IDENTIFICATION NUMBER</b> ▼ <b>C</b> 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 <span style="border: 1px solid black; padding: 2px;">004</span>	
Name of Federal Candidate supported or Opposed by expenditure: Mr. Steve Stivers		
Calendar Year-To-Date Per Election for Office Sought		<span style="border: 1px solid black; padding: 2px;">5053.36</span>

Date M M / D D / Y Y Y Y <span style="border: 1px solid black; padding: 2px;">1 0 / 1 9 / 2 0 1 0</span>
Amount <span style="border: 1px solid black; padding: 2px;">283.34</span>
<b>Transaction ID:</b> 37256744
Office Sought: <input checked="" type="checkbox"/> House State: <u>OH</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 <span style="border: 1px solid black; padding: 2px;">004</span>	
Name of Federal Candidate supported or Opposed by expenditure: Mr. Rob Portman		
Calendar Year-To-Date Per Election for Office Sought		<span style="border: 1px solid black; padding: 2px;">1184709.13</span>

Date M M / D D / Y Y Y Y <span style="border: 1px solid black; padding: 2px;">1 0 / 1 9 / 2 0 1 0</span>
Amount <span style="border: 1px solid black; padding: 2px;">1133.33</span>
<b>Transaction ID:</b> 37256775
Office Sought: <input type="checkbox"/> House State: <u>OH</u> <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) <b>SUBTOTAL</b> of Itemized Independent Expenditures .....	<span style="border: 1px solid black; padding: 2px;">1416.67</span>
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures .....	<span style="border: 1px solid black; padding: 2px;"> </span>
(c) <b>TOTAL</b> Independent Expenditures .....	<span style="border: 1px solid black; padding: 2px;"> </span>

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Mary Rose Adkins  
Signature

Date 0 1 / 3 1 / 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 <b>C</b> 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. Charles Dent

Calendar Year-To-Date Per Election for Office Sought	16974.39
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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: 37256815

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  
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. Jim Gerlach

Calendar Year-To-Date Per Election for Office Sought	283.33
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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: 37256852

Office Sought:  House State: PA  
 Senate District: 06  
 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 1 / 3 1 / 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 <b>C</b> 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

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Mailing Address  
1120 G Street, NW Suite 600

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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 Meehan

---

Calendar Year-To-Date Per Election for Office Sought	6594.77
---	---------

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

Amount  
283.33

**Transaction ID:** 37256890

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  
Federal Capitol Communications Corporation

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Mailing Address  
1120 G Street, NW Suite 600

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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. Michael Fitzpatrick

---

Calendar Year-To-Date Per Election for Office Sought	1751.18
---	---------

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

Amount  
283.33

**Transaction ID:** 37256916

Office Sought:  House State: PA  
 Senate District: 08  
 Presidential

Check One:  Support  Oppose

Disbursement For:  Primary  General  
 Other (specify) : \_\_\_\_\_  
2010

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures .....	566.66
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures .....	
(c) <b>TOTAL</b> Independent Expenditures .....	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or 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 1 / 3 1 / 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 <b>C</b> 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  
1133.33

City State Zip Code  
Washington DC 20005

Transaction ID: 37256950

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  
1950849.19

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: 37256978

Purpose of Expenditure  
Graphic Art Design

Category/Type  
004

Office Sought:  House State: WA  
 Senate District: 03  
 Presidential

Name of Federal Candidate supported or Opposed by expenditure:  
Jaime Herrera

Check One:  Support  Oppose

Calendar Year-To-Date Per Election for Office Sought  
143628.67

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 1 / 3 1 / 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 <b>C</b> 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: 37257034

Purpose of Expenditure  
Graphic Art Design

Category/Type  
004

Office Sought:  House State: WA  
 Senate District: \_\_\_\_\_  
 Presidential

Name of Federal Candidate supported or Opposed by expenditure:  
Mr. Dino Rossi

Check One:  Support  Oppose

Calendar Year-To-Date Per Election  
for Office Sought 586143.08

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: 37257179

Purpose of Expenditure  
Graphic Art Design

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 531.25

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 1 / 3 1 / 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 <b>C</b> 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:  
Rep. John D. Dingell

Calendar Year-To-Date Per Election for Office Sought 531.25

Date  
MM / DD / YYYY  
10 / 19 / 2010

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 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. Travis Childers

Calendar Year-To-Date Per Election for Office Sought 531.25

Date  
MM / DD / YYYY  
10 / 19 / 2010

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 .....	

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Mary Rose Adkins  
Signature

Date MM / DD / YYYY  
01 / 31 / 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 <b>C</b> 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

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Mailing Address  
1120 G Street, NW Suite 600

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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. Gene Taylor

---

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: 37257365

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  
Federal Capitol Communications Corporation

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Mailing Address  
1120 G Street, NW Suite 600

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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. James D. Matheson

---

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: 37257419

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 .....	1062.50
(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 1 / 3 1 / 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 <b>C</b> 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

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Mailing Address  
1120 G Street, NW Suite 600

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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. 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

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Mailing Address  
1120 G Street, NW Suite 600

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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. 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 1 / 3 1 / 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 <b>C</b> 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:  
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 State Zip Code  
Washington DC 20005

Purpose of Expenditure Category/Type  
Graphic Art Design 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 .....	<span style="border:1px solid black; padding:2px;">1062.50</span>
(b) SUBTOTAL of Unitemized Independent Expenditures .....	<span style="border:1px solid black; padding:2px;"> </span>
(c) TOTAL Independent Expenditures .....	<span style="border:1px solid black; padding:2px;"> </span>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or 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 1 / 3 1 / 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 <b>C</b> 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

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Mailing Address  
1120 G Street, NW Suite 600

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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. 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

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Mailing Address  
1120 G Street, NW Suite 600

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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. 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 1 / 3 1 / 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	<b>FEC IDENTIFICATION NUMBER</b> <b>C</b> 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

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Mailing Address  
1120 G Street, NW Suite 600

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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. 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

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Mailing Address  
1120 G Street, NW Suite 600

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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. 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) <b>SUBTOTAL</b> of Itemized Independent Expenditures .....	1062.50
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures .....	
(c) <b>TOTAL</b> Independent Expenditures .....	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or 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 1 / 3 1 / 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 <b>C</b> 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: 37258658

Purpose of Expenditure  
Graphic Art Design

Category/Type  
004

Office Sought:  House State: CA  
 Senate District: 18  
 Presidential

Name of Federal Candidate supported or Opposed by expenditure:  
Rep. Dennis A. Cardoza

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: 37258721

Purpose of Expenditure  
Graphic Art Design

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 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 1 / 3 1 / 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 <b>C</b> 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:  
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 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. Patrick Toomey

Calendar Year-To-Date Per Election for Office Sought  
1951286.69

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 1 / 3 1 / 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 <b>C</b> 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

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Mailing Address  
1120 G Street, NW Suite 600

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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. Zachary T. Space

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Calendar Year-To-Date Per Election for Office Sought	437.50
--	--------

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

Amount  
437.50

Transaction ID: 37259380

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  
Federal Capitol Communications Corporation

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Mailing Address  
1120 G Street, NW Suite 600

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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. Ronald Johnson

---

Calendar Year-To-Date Per Election for Office Sought	795380.34
--	-----------

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

Amount  
958.33

Transaction ID: 37260913

Office Sought:  House State: WI  
 Senate District: \_\_\_\_\_  
 Presidential

Check One:  Support  Oppose

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 \_\_\_\_\_ Date M M / D D / Y Y Y Y  
Signature 0 1 / 3 1 / 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 <b>C</b> 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

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Mailing Address  
1120 G Street, NW Suite 600

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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. 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

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Mailing Address  
1120 G Street, NW Suite 600

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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. 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 1 / 3 1 / 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 <b>C</b> 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

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Mailing Address  
1120 G Street, NW Suite 600

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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	277593.72
---	-----------

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

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

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Mailing Address  
1120 G Street, NW Suite 600

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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. Richard Blumenthal

---

Calendar Year-To-Date Per Election for Office Sought	19031.43
---	----------

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

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 M M / D D / Y Y Y Y  
0 1 / 3 1 / 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 <b>C</b> 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

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Mailing Address  
1120 G Street, NW Suite 600

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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. Roy Blunt

---

Calendar Year-To-Date Per Election for Office Sought	2443262.44
---	------------

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

Amount  
875.00

**Transaction ID:** 37261190

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  
Federal Capitol Communications Corporation

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Mailing Address  
1120 G Street, NW Suite 600

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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	1185584.13
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Date  
M M / D D / Y Y Y Y  
1 0 / 1 9 / 2 0 1 0

Amount  
875.00

**Transaction ID:** 37261245

Office Sought:  House State: OH  
 Senate District: \_\_\_\_\_  
 Presidential

Check One:  Support  Oppose

Disbursement For:  Primary  General  
 Other (specify) : \_\_\_\_\_  
2010

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures .....	1750.00
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures .....	
(c) <b>TOTAL</b> Independent Expenditures .....	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or 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 1 / 3 1 / 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 <b>C</b> 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: 37261273

Purpose of Expenditure  
Graphic Art Design

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  
842434.64

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  
11000.00

City State Zip Code  
Washington DC 20005

Transaction ID: 37310954

Purpose of Expenditure  
TV & Radio Ad Production - Estimated Cos

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  
138611.94

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 1 / 3 1 / 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 <b>C</b> 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

Date  
MM / DD / YYYY  
10 / 20 / 2010

Amount

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

Date  
MM / DD / YYYY  
10 / 20 / 2010

Amount

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 .....	<input style="width:150px" type="text" value="500.00"/>
(b) SUBTOTAL of Unitemized Independent Expenditures .....	<input style="width:150px" type="text"/>
(c) TOTAL Independent Expenditures .....	<input style="width:150px" 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 MM / DD / YYYY  
01 / 31 / 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 <b>C</b> 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:  
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 State Zip Code  
Washington DC 20005

Purpose of Expenditure Category/Type  
Graphic Art Design 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 1 / 3 1 / 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 <b>C</b> 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. 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 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. 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 1 / 3 1 / 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 <b>C</b> 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

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Mailing Address  
1120 G Street, NW Suite 600

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City Washington	State DC	Zip Code 20005
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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. 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:  House State: WI  
 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

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Mailing Address  
1120 G Street, NW Suite 600

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City Washington	State DC	Zip Code 20005
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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. 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:  House State: WI  
 Senate District: \_\_\_\_\_  
 Presidential

Check One:  Support  Oppose

Disbursement For:  Primary  General  
 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 1 / 3 1 / 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 <b>C</b> 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

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Mailing Address  
1120 G Street, NW Suite 600

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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

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Mailing Address  
1120 G Street, NW Suite 600

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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 1 / 3 1 / 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 <b>C</b> 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 Ad Production - Estimated Cost	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	42881.25
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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 Advertising	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	947630.34
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Date  
M M / D D / Y Y Y Y  
1 0 / 2 0 / 2 0 1 0

Amount  
3600.00

Transaction ID: 37331648

Office Sought:  House State: NC  
 Senate District: 11  
 Presidential

Check One:  Support  Oppose

Disbursement For:  Primary  General  
 Other (specify) : \_\_\_\_\_  
2010

**[MEMO ITEM]**  
Radio Ad Production - Estimated Cost

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

Amount  
62437.50

Transaction ID: 37342387

Office Sought:  House State: WI  
 Senate District: \_\_\_\_\_  
 Presidential

Check One:  Support  Oppose

Disbursement For:  Primary  General  
 Other (specify) : \_\_\_\_\_  
2010

**[MEMO ITEM]**  
TV Advertising

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures .....	0.00
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures .....	
(c) <b>TOTAL</b> Independent Expenditures .....	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or 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 1 / 3 1 / 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 <b>C</b> 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) <b>SUBTOTAL</b> of Itemized Independent Expenditures .....	0.00
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures .....	
(c) <b>TOTAL</b> Independent Expenditures .....	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or 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  
01 / 31 / 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 <b>C</b> 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

Full Name (Last, First, Middle, Initial) of Payee  
Cathy Nugent

**[MEMO ITEM]**  
Radio Ad Production - Estimated Cost

Mailing Address  
15047 Oxford Street

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

City State Zip Code  
Leawood KS 66224

Amount  
50.00

Purpose of Expenditure  
Booth Rental

Category/Type 001

Transaction ID: 37362683

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 1 / 3 1 / 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 <b>C</b> 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  
Office Sought:  House State: VA  
 Senate District: 11  
 Presidential

Purpose of Expenditure Category/Type  
Bumper Stickers - Estimated Cost 004

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

**[MEMO ITEM]**  
Bumper Stickers - Estimated Cost

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: 37177555  
Office Sought:  House State: OH  
 Senate District: 01  
 Presidential

Purpose of Expenditure Category/Type  
Bumper Stickers - Estimated Cost 004

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  
6093.98

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 1 / 3 1 / 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 <b>C</b> 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

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Mailing Address  
11100 Pulaski Highway

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City White Marsh	State MD	Zip Code 21162
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Purpose of Expenditure Bumper Stickers	Category/ Type 004
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Name of Federal Candidate supported or Opposed by expenditure:  
Mr. Keith Fimian

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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

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Mailing Address  
11100 Pulaski Highway

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City White Marsh	State MD	Zip Code 21162
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Purpose of Expenditure Bumper Stickers	Category/ Type 004
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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	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 \_\_\_\_\_ Date M M / D D / Y Y Y Y  
Signature 0 1 / 3 1 / 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 <b>C</b> 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  
10198.12

City State Zip Code  
Crofton MD 21114

Transaction ID: 37160427

Purpose of Expenditure  
TV Advertising

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  
2264083.27

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 4 / 2 0 1 0

Mailing Address  
2130 Priest Bridge Drive, #11

Amount  
253251.56

City State Zip Code  
Crofton MD 21114

Transaction ID: 37179144

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  
1332556.02

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 1 / 3 1 / 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 <b>C</b> 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.

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Mailing Address  
2130 Priest Bridge Drive, #11

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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  
2274281.39

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

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.

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Mailing Address  
2130 Priest Bridge Drive, #11

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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. Patrick Toomey

---

Calendar Year-To-Date Per Election for Office Sought  
1434773.52

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

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 M M / D D / Y Y Y Y  
0 1 / 3 1 / 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 <b>C</b> 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.

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Mailing Address  
2130 Priest Bridge Drive, #11

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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	1536991.02
---	------------

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

Amount  
102217.50

Transaction ID: 37342450

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  
OnMessage, Inc.

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Mailing Address  
2130 Priest Bridge Drive, #11

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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	1549845.59
---	------------

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

Amount  
2123.44

Transaction ID: 37216588

Office Sought:  House State: PA  
 Senate District: \_\_\_\_\_  
 Presidential

Check One:  Support  Oppose

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 \_\_\_\_\_ Date M M / D D / Y Y Y Y  
Signature 0 1 / 3 1 / 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 <b>C</b> 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  
253251.56

Transaction ID: 37231501

City	State	Zip Code
Crofton	MD	21114

Office Sought:  House State: PA  
 Senate District: \_\_\_\_\_  
 Presidential

Purpose of Expenditure TV Advertising	Category/ Type	004
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Check One:  Support  Oppose

Name of Federal Candidate supported or Opposed by expenditure:  
Mr. Joseph Sestak

Disbursement For:  Primary  General  
 Other (specify) : \_\_\_\_\_  
 2010  
**[MEMO ITEM]**

Calendar Year-To-Date Per Election  
for Office Sought

1803097.15

TV Advertising

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

Transaction ID: 37231605

City	State	Zip Code
Crofton	MD	21114

Office Sought:  House State: PA  
 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. Joseph Sestak

Disbursement For:  Primary  General  
 Other (specify) : \_\_\_\_\_  
 2010  
**[MEMO ITEM]**

Calendar Year-To-Date Per Election  
for Office Sought

1805220.59

TV Advertising

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures .....	0.00
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures .....	
(c) <b>TOTAL</b> Independent Expenditures .....	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or 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	1		3	1		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 <b>C</b> 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.

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Mailing Address  
2130 Priest Bridge Drive, #11

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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  
1835220.59

Date  
10 / 18 / 2010

Amount  
30000.00

Transaction ID: 37231729

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

Full Name (Last, First, Middle, Initial) of Payee  
OnMessage, Inc.

---

Mailing Address  
2130 Priest Bridge Drive, #11

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City Crofton	State MD	Zip Code 21114
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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:  
Mr. Kenneth Buck

---

Calendar Year-To-Date Per Election for Office Sought  
1104091.53

Date  
10 / 25 / 2010

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

(a) SUBTOTAL of Itemized Independent Expenditures .....	37771.88
(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 01 / 31 / 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 <b>C</b> 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.

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Mailing Address  
2130 Priest Bridge Drive, #11

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City Crofton	State MD	Zip Code 21114
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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:  
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

Full Name (Last, First, Middle, Initial) of Payee  
OnMessage, Inc.

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Mailing Address  
2130 Priest Bridge Drive, #11

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City Crofton	State MD	Zip Code 21114
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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:  
Mr. Kenneth Buck

---

Calendar Year-To-Date Per Election for Office Sought  
1179635.28

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

Amount  
37771.88

Transaction ID: 37343903

Office Sought:  House State: CO  
 Senate District: \_\_\_\_\_  
 Presidential

Check One:  Support  Oppose

Disbursement For:  Primary  General  
 Other (specify) : \_\_\_\_\_  
2010

**[MEMO ITEM]**  
Radio Advertising

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures .....	37771.87
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures .....	
(c) <b>TOTAL</b> Independent Expenditures .....	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or 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 1 / 3 1 / 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 <b>C</b> 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

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City Crofton	State MD	Zip Code 21114
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Purpose of Expenditure Radio Ad Production - Estimated Cost	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	1181135.28
--	------------

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

Amount  
1500.00

Transaction ID: 37343904

Office Sought:  House State: CO  
 Senate District: \_\_\_\_\_  
 Presidential

Check One:  Support  Oppose

Disbursement For:  Primary  General  
 Other (specify) : \_\_\_\_\_  
2010

**[MEMO ITEM]**  
Radio Ad Production - Estimated Cost

Full Name (Last, First, Middle, Initial) of Payee  
OnMessage, Inc.

---

Mailing Address  
2130 Priest Bridge Drive, #11

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City Crofton	State MD	Zip Code 21114
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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	1218907.15
--	------------

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

Amount  
37771.87

Transaction ID: 37343918

Office Sought:  House State: CO  
 Senate District: \_\_\_\_\_  
 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 M M / D D / Y Y Y Y  
0 1 / 3 1 / 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 <b>C</b> 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.

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Mailing Address  
2130 Priest Bridge Drive, #11

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City Crofton	State MD	Zip Code 21114
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Purpose of Expenditure Radio Ad Production - Estimated Cost	Category/Type 004
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Date  
10 / 25 / 2010

Amount  
1500.00

Transaction ID: 37343920

Office Sought:  House State: CO  
 Senate District: \_\_\_\_\_  
 Presidential

Check One:  Support  Oppose

Name of Federal Candidate supported or Opposed by expenditure:  
Mr. Michael Bennet

---

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

Full Name (Last, First, Middle, Initial) of Payee  
OnMessage, Inc.

---

Mailing Address  
2130 Priest Bridge Drive, #11

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City Crofton	State MD	Zip Code 21114
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Purpose of Expenditure TV Advertising	Category/Type 004
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Date  
10 / 25 / 2010

Amount  
102217.50

Transaction ID: 37352375

Office Sought:  House State: PA  
 Senate District: \_\_\_\_\_  
 Presidential

Check One:  Support  Oppose

Name of Federal Candidate supported or Opposed by expenditure:  
Mr. Patrick Toomey

---

Calendar Year-To-Date Per Election for Office Sought  
2097025.87

Disbursement For:  Primary  General  
 Other (specify) : \_\_\_\_\_  
2010

**[MEMO ITEM]**  
TV Advertising

(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 01 / 31 / 2011

# SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund	<b>FEC IDENTIFICATION NUMBER</b> ▼ <b>C</b> 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 Ad Production - Estimated Cost	Category/Type 004
---	----------------------

Name of Federal Candidate supported or Opposed by expenditure:  
Mr. Patrick Toomey

Calendar Year-To-Date Per Election for Office Sought	2109525.87
--	------------

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	2211743.37
--	------------

Date  
MM / DD / YYYY  
10 / 25 / 2010

Amount  
12500.00

Transaction ID: 37352376

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

Date  
MM / DD / YYYY  
10 / 25 / 2010

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

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures .....	0.00
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures .....	_____
(c) <b>TOTAL</b> Independent Expenditures .....	_____

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or 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  
01 / 31 / 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 <b>C</b> 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  
TV Ad Production - Estimated Cost

Category/Type  
004

Name of Federal Candidate supported or Opposed by expenditure:  
Mr. Joseph Sestak

Calendar Year-To-Date Per Election for Office Sought  
2224243.37

Date  
MM / DD / YYYY  
10 / 25 / 2010

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

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  
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  
455.27

Date  
MM / DD / YYYY  
10 / 14 / 2010

Amount  
406.74

Transaction ID: 37176933

Office Sought:  House State: CA  
 Senate District: 03  
 Presidential

Check One:  Support  Oppose

Disbursement For:  Primary  General  
 Other (specify) : \_\_\_\_\_  
2010

**[MEMO ITEM]**  
Postage

(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  
01 / 31 / 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 <b>C</b> 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.

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Mailing Address  
8341 Beechcraft Avenue

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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	480.54
---	--------

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

Amount  
25.27

Transaction ID: 37176934

Office Sought:  House State: CA  
 Senate District: 03  
 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.

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Mailing Address  
8341 Beechcraft Avenue

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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

(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 1 / 3 1 / 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 <b>C</b> 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  
410.81

Transaction ID: 37176936

City State Zip Code  
Gaithersburg MD 20879-1509

Office Sought:  House State: CA  
 Senate District: 11  
 Presidential

Purpose of Expenditure  
Postcards

Category/Type  
004

Check One:  Support  Oppose

Name of Federal Candidate supported or Opposed by expenditure:  
Mr. David Harmer

Disbursement For:  Primary  General  
 Other (specify) : \_\_\_\_\_  
 2010 **[MEMO ITEM]**

Calendar Year-To-Date Per Election  
for Office Sought 87144.02

Postcards

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) : \_\_\_\_\_  
 2010 **[MEMO ITEM]**

Calendar Year-To-Date Per Election  
for Office Sought 247046.85

Postage

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures .....	0.00
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures .....	
(c) <b>TOTAL</b> Independent Expenditures .....	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or 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	1		3	1		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 <b>C</b> 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.

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Mailing Address  
8341 Beechcraft Avenue

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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:  
Ms. Carly Fiorina

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

Amount  
436.08

Transaction ID: 37176938

Office Sought:  House State: CA  
 Senate District: \_\_\_\_\_  
 Presidential

Check One:  Support  Oppose

Disbursement For:  Primary  General  
 Other (specify) : \_\_\_\_\_

2010 **[MEMO ITEM]**

Postcards

Calendar Year-To-Date Per Election  
for Office Sought 247482.93

---

Full Name (Last, First, Middle, Initial) of Payee  
Prolist Inc.

---

Mailing Address  
8341 Beechcraft Avenue

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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. 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

(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 1 / 3 1 / 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 <b>C</b> 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  
311.30

City State Zip Code  
Gaithersburg MD 20879-1509

Transaction ID: 37176940

Purpose of Expenditure  
Postcards

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  
5639.98

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 4 / 2 0 1 0

Mailing Address  
8341 Beechcraft Avenue

Amount  
691.87

City State Zip Code  
Gaithersburg MD 20879-1509

Transaction ID: 37176941

Purpose of Expenditure  
Postage

Category/Type  
004

Office Sought:  House State: NV  
 Senate District: 03  
 Presidential

Name of Federal Candidate supported or Opposed by expenditure:  
Mr. Joe Heck

Check One:  Support  Oppose

Calendar Year-To-Date Per Election for Office Sought  
774.04

Disbursement For:  Primary  General  
 Other (specify) : \_\_\_\_\_  
2010  
**[MEMO ITEM]**

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures .....	0.00
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures .....	
(c) <b>TOTAL</b> Independent Expenditures .....	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or 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 1 / 3 1 / 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 <b>C</b> 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.

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Mailing Address  
8341 Beechcraft Avenue

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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	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

Full Name (Last, First, Middle, Initial) of Payee  
Prolist Inc.

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Mailing Address  
8341 Beechcraft Avenue

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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. 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

(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 1 / 3 1 / 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 <b>C</b> 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 5 / 2 0 1 0

Mailing Address  
8341 Beechcraft Avenue

Amount  
1162.05  
Transaction ID: 37179064

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  
275785.39

2010  
**[MEMO ITEM]**  
Postcards

Full Name (Last, First, Middle, Initial) of Payee  
Prolist Inc.

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

Mailing Address  
8341 Beechcraft Avenue

Amount  
145946.56  
Transaction ID: 37179065

City State Zip Code  
Gaithersburg MD 20879-1509

Office Sought:  House State: MO  
 Senate District: \_\_\_\_\_  
 Presidential

Purpose of Expenditure  
Postage Category/Type 004

Check One:  Support  Oppose

Name of Federal Candidate supported or Opposed by expenditure:  
Mr. Roy Blunt

Disbursement For:  Primary  General  
 Other (specify) : \_\_\_\_\_

Calendar Year-To-Date Per Election for Office Sought  
2434674.37

2010  
**[MEMO ITEM]**  
Postage

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures .....	0.00
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures .....	
(c) <b>TOTAL</b> Independent Expenditures .....	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or 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 1 / 3 1 / 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	<b>FEC IDENTIFICATION NUMBER</b> ▼ <b>C</b> 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. 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]**

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. 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]**

<b>(a) SUBTOTAL</b> of Itemized Independent Expenditures .....	0.00
<b>(b) SUBTOTAL</b> of Unitemized Independent Expenditures .....	_____
<b>(c) TOTAL</b> Independent Expenditures .....	_____

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or 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 1 / 3 1 / 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 <b>C</b> 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 5 / 2 0 1 0

Mailing Address  
8341 Beechcraft Avenue

Amount  
7687.74

City State Zip Code  
Gaithersburg MD 20879-1509

Transaction ID: 37179068

Purpose of Expenditure Category/Type  
Postcards 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  
794422.01

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 5 / 2 0 1 0

Mailing Address  
8341 Beechcraft Avenue

Amount  
4787.06

City State Zip Code  
Gaithersburg MD 20879-1509

Transaction ID: 37179117

Purpose of Expenditure Category/Type  
Postage 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  
838946.94

Disbursement For:  Primary  General  
 Other (specify) : \_\_\_\_\_  
2010

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures .....	4787.06
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures .....	
(c) <b>TOTAL</b> Independent Expenditures .....	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or 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 1 / 3 1 / 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 <b>C</b> 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.

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Mailing Address  
8341 Beechcraft Avenue

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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. 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

Full Name (Last, First, Middle, Initial) of Payee  
Prolist Inc.

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Mailing Address  
8341 Beechcraft Avenue

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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	1944196.89
---	------------

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

(a) SUBTOTAL of Itemized Independent Expenditures .....	2612.70
(b) SUBTOTAL of Unitemized Independent Expenditures .....	
(c) TOTAL Independent Expenditures .....	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or 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 1 / 3 1 / 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	<b>FEC IDENTIFICATION NUMBER</b> ▼ <b>C</b> 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.

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Mailing Address  
8341 Beechcraft Avenue

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City Gaithersburg	State MD	Zip Code 20879-1509
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Purpose of Expenditure Postcards	Category/ Type <span style="border: 1px solid black; padding: 2px;">004</span>
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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	<div style="border: 1px solid black; padding: 2px; display: inline-block;">1949715.86</div>
---	---

Date  

M 10	/	D 18	/	Y 2010
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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

Full Name (Last, First, Middle, Initial) of Payee  
Prolist Inc.

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Mailing Address  
8341 Beechcraft Avenue

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City Gaithersburg	State MD	Zip Code 20879-1509
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Purpose of Expenditure Postage	Category/ Type <span style="border: 1px solid black; padding: 2px;">004</span>
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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	<div style="border: 1px solid black; padding: 2px; display: inline-block;">12811.55</div>
---	---

Date  

M 10	/	D 18	/	Y 2010
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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

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures .....	<div style="border: 1px solid black; padding: 2px; display: inline-block;">0.00</div>
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures .....	<div style="border: 1px solid black; height: 20px; width: 100%;"></div>
(c) <b>TOTAL</b> 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 \_\_\_\_\_ Date 

M 01	/	D 31	/	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	<b>FEC IDENTIFICATION NUMBER</b> ▼ <b>C</b> 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 <span style="border: 1px solid black; padding: 2px;">004</span>
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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	<span style="border: 1px solid black; padding: 2px;">13424.81</span>
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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

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 <span style="border: 1px solid black; padding: 2px;">004</span>
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Name of Federal Candidate supported or Opposed by expenditure:  
 Mr. Benjamin Lange

Calendar Year-To-Date Per Election for Office Sought	<span style="border: 1px solid black; padding: 2px;">43411.91</span>
---	--

Date  

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

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

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures .....	<span style="border: 1px solid black; padding: 2px;">0.00</span>
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures .....	<span style="border: 1px solid black; padding: 2px;"> </span>
(c) <b>TOTAL</b> Independent Expenditures .....	<span style="border: 1px solid black; padding: 2px;"> </span>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or 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 1	3 1	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 <b>C</b> 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  
308.65

City State Zip Code  
Gaithersburg MD 20879-1509

Transaction ID: 37234242

Purpose of Expenditure  
Postcards

Category/  
Type 004

Office Sought:  House State: IA  
 Senate District: 01  
 Presidential

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 43720.56

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  
11798.66

City State Zip Code  
Gaithersburg MD 20879-1509

Transaction ID: 37234546

Purpose of Expenditure  
Postage

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 94173.14

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 1 / 3 1 / 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 <b>C</b> 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.

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Mailing Address  
8341 Beechcraft Avenue

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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

Full Name (Last, First, Middle, Initial) of Payee  
Prolist Inc.

---

Mailing Address  
8341 Beechcraft Avenue

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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  
6150.81

Transaction ID: 37234788

Office Sought:  House State: IA  
 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:  
Mariannette Miller-Meeks

---

Calendar Year-To-Date Per Election  
for Office Sought

43986.23

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures .....	0.00
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures .....	
(c) <b>TOTAL</b> Independent Expenditures .....	

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Mary Rose Adkins  
Signature

Date M M / D D / Y Y Y Y  
0 1 / 3 1 / 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 <b>C</b> 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  
336.20

Transaction ID: 37234877

City State Zip Code  
Gaithersburg MD 20879-1509

Office Sought:  House State: IA  
 Senate District: 02  
 Presidential

Purpose of Expenditure  
Postcards

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  
44322.43

Other (specify) : \_\_\_\_\_  
2010  
**[MEMO ITEM]**  
Postcards

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  
6612.06

Transaction ID: 37234961

City State Zip Code  
Gaithersburg MD 20879-1509

Office Sought:  House State: KS  
 Senate District: 03  
 Presidential

Purpose of Expenditure  
Postage

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  
15295.84

Other (specify) : \_\_\_\_\_  
2010  
**[MEMO ITEM]**  
Postage

(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	1		3	1		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	<b>FEC IDENTIFICATION NUMBER</b> ▼ <b>C</b> 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 <span style="border: 1px solid black; padding: 2px;">004</span>

---

Name of Federal Candidate supported or Opposed by expenditure:  
Mr. Kevin Yoder

---

Calendar Year-To-Date Per Election for Office Sought	<span style="border: 1px solid black; padding: 2px;">15656.80</span>
---	--

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

Full Name (Last, First, Middle, Initial) of Payee  
Prolist Inc.

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Mailing Address  
8341 Beechcraft Avenue

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City Gaithersburg	State MD	Zip Code 20879-1509
Purpose of Expenditure Postage		Category/ Type <span style="border: 1px solid black; padding: 2px;">004</span>

---

Name of Federal Candidate supported or Opposed by expenditure:  
Mr. Randolph Altschuler

---

Calendar Year-To-Date Per Election for Office Sought	<span style="border: 1px solid black; padding: 2px;">8776.08</span>
---	---

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

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures .....	<span style="border: 1px solid black; padding: 2px;">0.00</span>
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures .....	<span style="border: 1px solid black; padding: 2px;"> </span>
(c) <b>TOTAL</b> Independent Expenditures .....	<span style="border: 1px solid black; padding: 2px;"> </span>

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Mary Rose Adkins  
Signature

Date 

M M	/	D D	/	Y Y Y Y
0 1		3 1		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 <b>C</b> 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.

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Mailing Address  
8341 Beechcraft Avenue

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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. 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

Full Name (Last, First, Middle, Initial) of Payee  
Prolist Inc.

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Mailing Address  
8341 Beechcraft Avenue

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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
---	---------

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

(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 1 / 3 1 / 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	<b>FEC IDENTIFICATION NUMBER</b> ▼ <b>C</b> 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:  
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]**

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 17252.28

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]**

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures .....	<span style="border: 1px solid black; padding: 2px;">0.00</span>
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures .....	<span style="border: 1px solid black; display: inline-block; width: 100px; height: 15px;"></span>
(c) <b>TOTAL</b> Independent Expenditures .....	<span style="border: 1px solid black; display: inline-block; width: 100px; height: 15px;"></span>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or 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 1 3 1 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 <b>C</b> 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.

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Mailing Address  
8341 Beechcraft Avenue

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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

---

Calendar Year-To-Date Per Election for Office Sought	18073.10
---	----------

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

Full Name (Last, First, Middle, Initial) of Payee  
Prolist Inc.

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Mailing Address  
8341 Beechcraft Avenue

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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. Christine O'Donnell

---

Calendar Year-To-Date Per Election for Office Sought	163205.65
---	-----------

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

Amount  
4473.35

Transaction ID: 37235443

Office Sought:  House State: DE  
 Senate District: \_\_\_\_\_  
 Presidential

Check One:  Support  Oppose

Disbursement For:  Primary  General  
 Other (specify) : \_\_\_\_\_

2010 **[MEMO ITEM]**

Postage

(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 1 / 3 1 / 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 <b>C</b> 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.

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Mailing Address  
8341 Beechcraft Avenue

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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  
242.68

Transaction ID: 37235497

Office Sought:  House State: DE  
 Senate District: \_\_\_\_\_  
 Presidential

Check One:  Support  Oppose

Name of Federal Candidate supported or Opposed by expenditure:  
Ms. Christine O'Donnell

---

Calendar Year-To-Date Per Election  
for Office Sought 163448.33

Disbursement For:  Primary  General  
 Other (specify) : \_\_\_\_\_  
2010  
**[MEMO ITEM]**

Postcards

Full Name (Last, First, Middle, Initial) of Payee  
Prolist Inc.

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Mailing Address  
8341 Beechcraft Avenue

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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  
14455.20

Transaction ID: 37235572

Office Sought:  House State: NC  
 Senate District: \_\_\_\_\_  
 Presidential

Check One:  Support  Oppose

Name of Federal Candidate supported or Opposed by expenditure:  
Sen. Richard M. Burr

---

Calendar Year-To-Date Per Election  
for Office Sought 29688.65

Disbursement For:  Primary  General  
 Other (specify) : \_\_\_\_\_  
2010  
**[MEMO ITEM]**

Postage

(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 1 / 3 1 / 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 <b>C</b> 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  
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]**

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  
9282.39

City State Zip Code  
Gaithersburg MD 20879-1509

Transaction ID: 37235754

Purpose of Expenditure  
Postage

Category/Type  
004

Office Sought:  House State: PA  
 Senate District: 03  
 Presidential

Name of Federal Candidate supported or Opposed by expenditure:  
Mr. George Kelly

Check One:  Support  Oppose

Calendar Year-To-Date Per Election for Office Sought  
10545.08

Disbursement For:  Primary  General  
 Other (specify) : \_\_\_\_\_  
2010  
**[MEMO ITEM]**

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures .....	0.00
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures .....	
(c) <b>TOTAL</b> Independent Expenditures .....	

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Mary Rose Adkins  
Signature

Date M M / D D / Y Y Y Y  
0 1 / 3 1 / 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 <b>C</b> 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  
502.51

City State Zip Code  
Gaithersburg MD 20879-1509

Transaction ID: 37235822

Purpose of Expenditure  
Postcards

Category/Type  
004

Office Sought:  House State: PA  
 Senate District: 03  
 Presidential

Name of Federal Candidate supported or Opposed by expenditure:  
Mr. George Kelly

Check One:  Support  Oppose

Calendar Year-To-Date Per Election for Office Sought  
11047.59

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  
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]**

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures .....	0.00
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures .....	
(c) <b>TOTAL</b> Independent Expenditures .....	

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Mary Rose Adkins  
Signature

Date M M / D D / Y Y Y Y  
0 1 / 3 1 / 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 <b>C</b> 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  
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]**

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  
1693.95

City State Zip Code  
Gaithersburg MD 20879-1509

Transaction ID: 37266687

Purpose of Expenditure  
Postage

Category/Type  
004

Office Sought:  House State: FL  
 Senate District: 24  
 Presidential

Name of Federal Candidate supported or Opposed by expenditure:  
Sandy Adams

Check One:  Support  Oppose

Calendar Year-To-Date Per Election for Office Sought  
24843.54

Disbursement For:  Primary  General  
 Other (specify) : \_\_\_\_\_  
2010  
**[MEMO ITEM]**

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures .....	0.00
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures .....	
(c) <b>TOTAL</b> Independent Expenditures .....	

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Mary Rose Adkins  
Signature

Date  
M M / D D / Y Y Y Y  
0 1 / 3 1 / 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 <b>C</b> 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  
89.51

City State Zip Code  
Gaithersburg MD 20879-1509

Transaction ID: 37266742

Purpose of Expenditure Category/Type  
Postcards 004

Office Sought:  House State: FL  
 Senate District: 24  
 Presidential

Name of Federal Candidate supported or Opposed by expenditure:  
Sandy Adams

Check One:  Support  Oppose

Calendar Year-To-Date Per Election for Office Sought  
24933.05

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  
17247.88

City State Zip Code  
Gaithersburg MD 20879-1509

Transaction ID: 37266770

Purpose of Expenditure Category/Type  
Postage 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]**

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures .....	0.00
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures .....	
(c) <b>TOTAL</b> Independent Expenditures .....	

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Mary Rose Adkins  
Signature

Date M M / D D / Y Y Y Y  
0 1 / 3 1 / 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	<b>FEC IDENTIFICATION NUMBER</b> ▼ <b>C</b> 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. Robert Schilling

Calendar Year-To-Date Per Election for Office Sought  
61296.59

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

Amount  
938.24

Transaction ID: 37266793

Office Sought:  House State: IL  
 Senate District: 17  
 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  
Postage 004

Name of Federal Candidate supported or Opposed by expenditure:  
Mike Pompeo

Calendar Year-To-Date Per Election for Office Sought  
1399.27

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

Amount  
668.11

Transaction ID: 37266879

Office Sought:  House State: KS  
 Senate District: 04  
 Presidential

Check One:  Support  Oppose

Disbursement For:  Primary  General  
 Other (specify) : \_\_\_\_\_  
2010 **[MEMO ITEM]**

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures .....	0.00
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures .....	_____
(c) <b>TOTAL</b> Independent Expenditures .....	_____

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Mary Rose Adkins  
Signature

Date M M / D D / Y Y Y Y  
0 1 / 3 1 / 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 <b>C</b> 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.

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Mailing Address  
8341 Beechcraft Avenue

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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:  
Mike Pompeo

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

Amount  
34.11

Transaction ID: 37266922

Office Sought:  House State: KS  
 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

1433.38

Full Name (Last, First, Middle, Initial) of Payee  
Prolist Inc.

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Mailing Address  
8341 Beechcraft Avenue

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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. Jeffrey Perry

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

Calendar Year-To-Date Per Election  
for Office Sought

25847.38

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures .....	0.00
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures .....	
(c) <b>TOTAL</b> Independent Expenditures .....	

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Mary Rose Adkins  
Signature

Date M M / D D / Y Y Y Y  
0 1 / 3 1 / 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 <b>C</b> 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.

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Mailing Address  
8341 Beechcraft Avenue

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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. 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

Full Name (Last, First, Middle, Initial) of Payee  
Prolist Inc.

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Mailing Address  
8341 Beechcraft Avenue

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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

(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 1 / 3 1 / 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 <b>C</b> 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  
1184.23

City State Zip Code  
Gaithersburg MD 20879-1509

Transaction ID: 37267153

Purpose of Expenditure  
Postcards

Category/Type  
004

Office Sought:  House State: MI  
 Senate District: 07  
 Presidential

Name of Federal Candidate supported or Opposed by expenditure:  
Mr. Timothy Walberg

Check One:  Support  Oppose

Calendar Year-To-Date Per Election for Office Sought  
26576.85

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  
4488.18

City State Zip Code  
Gaithersburg MD 20879-1509

Transaction ID: 37267240

Purpose of Expenditure  
Postage

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  
2448384.12

Disbursement For:  Primary  General  
 Other (specify) : \_\_\_\_\_  
2010  
**[MEMO ITEM]**

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures .....	0.00
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures .....	
(c) <b>TOTAL</b> Independent Expenditures .....	

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Mary Rose Adkins  
Signature

Date M M / D D / Y Y Y Y  
0 1 / 3 1 / 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 <b>C</b> 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  
244.69  
Transaction ID: 37267313

City State Zip Code  
Gaithersburg MD 20879-1509

Office Sought:  House State: MO  
 Senate District: \_\_\_\_\_  
 Presidential

Purpose of Expenditure  
Postcards  
Category/Type 004

Check One:  Support  Oppose

Name of Federal Candidate supported or Opposed by expenditure:  
Mr. Roy Blunt

Disbursement For:  Primary  General  
 Other (specify) : \_\_\_\_\_

Calendar Year-To-Date Per Election for Office Sought  
2448628.81

2010  
**[MEMO ITEM]**  
Postcards

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  
4488.18  
Transaction ID: 37267349

City State Zip Code  
Gaithersburg MD 20879-1509

Office Sought:  House State: MO  
 Senate District: 03  
 Presidential

Purpose of Expenditure  
Postage  
Category/Type 004

Check One:  Support  Oppose

Name of Federal Candidate supported or Opposed by expenditure:  
Mr. Edward Martin

Disbursement For:  Primary  General  
 Other (specify) : \_\_\_\_\_

Calendar Year-To-Date Per Election for Office Sought  
74692.23

2010  
**[MEMO ITEM]**  
Postage

(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 1 / 3 1 / 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 <b>C</b> 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.

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Mailing Address  
8341 Beechcraft Avenue

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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. Edward Martin

---

Calendar Year-To-Date Per Election for Office Sought	74936.92
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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]**  
Postcards

Full Name (Last, First, Middle, Initial) of Payee  
Prolist Inc.

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Mailing Address  
8341 Beechcraft Avenue

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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. 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

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures .....	0.00
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures .....	
(c) <b>TOTAL</b> Independent Expenditures .....	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or 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 1 / 3 1 / 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	<b>FEC IDENTIFICATION NUMBER</b> ▼ <b>C</b> 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.

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Mailing Address  
8341 Beechcraft Avenue

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City Gaithersburg	State MD	Zip Code 20879-1509
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Purpose of Expenditure Postcards	Category/ Type <span style="border: 1px solid black; padding: 2px;">004</span>
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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	<span style="border: 1px solid black; padding: 2px;">5519.19</span>
---	---

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

Full Name (Last, First, Middle, Initial) of Payee  
Prolist Inc.

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Mailing Address  
8341 Beechcraft Avenue

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City Gaithersburg	State MD	Zip Code 20879-1509
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Purpose of Expenditure Postage	Category/ Type <span style="border: 1px solid black; padding: 2px;">004</span>
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---

Name of Federal Candidate supported or Opposed by expenditure:  
Mr. Frank Guinta

---

Calendar Year-To-Date Per Election for Office Sought	<span style="border: 1px solid black; padding: 2px;">10898.84</span>
---	--

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

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures .....	<span style="border: 1px solid black; padding: 2px;">0.00</span>
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures .....	<span style="border: 1px solid black; padding: 2px;"> </span>
(c) <b>TOTAL</b> Independent Expenditures .....	<span style="border: 1px solid black; padding: 2px;"> </span>

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Mary Rose Adkins \_\_\_\_\_  
Signature

Date 

M M	/	D D	/	Y Y Y Y
0 1		3 1		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 <b>C</b> 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.

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Mailing Address  
8341 Beechcraft Avenue

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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. 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

Full Name (Last, First, Middle, Initial) of Payee  
Prolist Inc.

---

Mailing Address  
8341 Beechcraft Avenue

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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. Charles F. Bass

---

Calendar Year-To-Date Per Election for Office Sought	160836.99
---	-----------

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

Amount  
5278.97

Transaction ID: 37267608

Office Sought:  House State: NH  
 Senate District: 02  
 Presidential

Check One:  Support  Oppose

Disbursement For:  Primary  General  
 Other (specify) : \_\_\_\_\_  
2010

**[MEMO ITEM]**

Postage

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures .....	0.00
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures .....	
(c) <b>TOTAL</b> Independent Expenditures .....	

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Mary Rose Adkins \_\_\_\_\_  
Signature

Date M M / D D / Y Y Y Y  
0 1 / 3 1 / 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 <b>C</b> 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.

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Mailing Address  
8341 Beechcraft Avenue

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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. Charles F. Bass

---

Calendar Year-To-Date Per Election for Office Sought	161118.59
---	-----------

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

Amount  
281.60

Transaction ID: 37267652

Office Sought:  House State: NH  
 Senate District: 02  
 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.

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Mailing Address  
8341 Beechcraft Avenue

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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. Francis Becker

---

Calendar Year-To-Date Per Election for Office Sought	1065.28
---	---------

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

Amount  
372.93

Transaction ID: 37267705

Office Sought:  House State: NY  
 Senate District: 04  
 Presidential

Check One:  Support  Oppose

Disbursement For:  Primary  General  
 Other (specify) : \_\_\_\_\_  
2010

**[MEMO ITEM]**  
Postage

(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 1 / 3 1 / 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 <b>C</b> 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.

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Mailing Address  
8341 Beechcraft Avenue

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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. Francis Becker

---

Calendar Year-To-Date Per Election for Office Sought	1084.39
---	---------

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

Amount  
19.11

Transaction ID: 37267740

Office Sought:  House State: NY  
 Senate District: 04  
 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.

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Mailing Address  
8341 Beechcraft Avenue

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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. Nan Hayworth

---

Calendar Year-To-Date Per Election for Office Sought	22586.54
---	----------

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

Amount  
14717.63

Transaction ID: 37267785

Office Sought:  House State: NY  
 Senate District: 19  
 Presidential

Check One:  Support  Oppose

Disbursement For:  Primary  General  
 Other (specify) : \_\_\_\_\_  
2010

**[MEMO ITEM]**  
Postage

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures .....	0.00
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures .....	
(c) <b>TOTAL</b> Independent Expenditures .....	

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Mary Rose Adkins  
Signature

Date M M / D D / Y Y Y Y  
0 1 / 3 1 / 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 <b>C</b> 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:  
Ms. Nan Hayworth

Calendar Year-To-Date Per Election for Office Sought 23388.70

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

Amount  
802.16  
Transaction ID: 37267831

Office Sought:  House State: NY  
 Senate District: 19  
 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  
Postage 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]

(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 1 / 3 1 / 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 <b>C</b> 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  
13.19

City State Zip Code  
Gaithersburg MD 20879-1509

Transaction ID: 37267914

Purpose of Expenditure  
Postcards

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  
6867.09

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  
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]**

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures .....	0.00
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures .....	
(c) <b>TOTAL</b> Independent Expenditures .....	

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Mary Rose Adkins  
Signature

Date M M / D D / Y Y Y Y  
0 1 / 3 1 / 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	<b>FEC IDENTIFICATION NUMBER</b> ▼ <b>C</b> 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  
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]**

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]**

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures .....	0.00
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures .....	_____
(c) <b>TOTAL</b> Independent Expenditures .....	_____

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Mary Rose Adkins  
Signature

Date M M / D D / Y Y Y Y  
0 1 / 3 1 / 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 <b>C</b> 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.

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Mailing Address  
8341 Beechcraft Avenue

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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. Steve Stivers

---

Calendar Year-To-Date Per Election for Office Sought	5546.95
---	---------

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

Amount  
21.98

Transaction ID: 37268161

Office Sought:  House State: OH  
 Senate District: 15  
 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.

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Mailing Address  
8341 Beechcraft Avenue

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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	1955674.87
---	------------

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

Amount  
3849.03

Transaction ID: 37268259

Office Sought:  House State: PA  
 Senate District: \_\_\_\_\_  
 Presidential

Check One:  Support  Oppose

Disbursement For:  Primary  General  
 Other (specify) : \_\_\_\_\_  
2010

**[MEMO ITEM]**

Postage

(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 1 / 3 1 / 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	<b>FEC IDENTIFICATION NUMBER</b> ▼ <b>C</b> 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 <span style="border: 1px solid black; padding: 2px;">004</span>	
Name of Federal Candidate supported or Opposed by expenditure: Mr. Patrick Toomey		
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">1955883.12</span>		

Date M M / D D / Y Y Y Y <span style="border: 1px solid black; padding: 2px;">1 0 / 1 9 / 2 0 1 0</span>
Amount <span style="border: 1px solid black; padding: 2px;">208.25</span>
<b>Transaction ID:</b> 37268293
Office Sought: <input type="checkbox"/> House State: PA <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 <b>[MEMO ITEM]</b>
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 Postage	Category/ Type <span style="border: 1px solid black; padding: 2px;">004</span>	
Name of Federal Candidate supported or Opposed by expenditure: Mr. Patrick Meehan		
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">8461.25</span>		

Date M M / D D / Y Y Y Y <span style="border: 1px solid black; padding: 2px;">1 0 / 1 9 / 2 0 1 0</span>
Amount <span style="border: 1px solid black; padding: 2px;">1637.48</span>
<b>Transaction ID:</b> 37268324
Office Sought: <input checked="" type="checkbox"/> House State: PA <input type="checkbox"/> Senate District: 07 <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 <b>[MEMO ITEM]</b>
Postage

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures .....	<span style="border: 1px solid black; padding: 2px;">0.00</span>
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures .....	<span style="border: 1px solid black; padding: 2px;"> </span>
(c) <b>TOTAL</b> Independent Expenditures .....	<span style="border: 1px solid black; padding: 2px;"> </span>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or 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 1 / 3 1 / 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 <b>C</b> 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  
88.45

City State Zip Code  
Gaithersburg MD 20879-1509

Transaction ID: 37268364

Purpose of Expenditure Category/Type  
Postcards 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  
8549.70

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  
2211.54

City State Zip Code  
Gaithersburg MD 20879-1509

Transaction ID: 37268392

Purpose of Expenditure Category/Type  
Postage 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  
19496.08

Disbursement For:  Primary  General  
 Other (specify) : \_\_\_\_\_  
2010  
**[MEMO ITEM]**

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures .....	0.00
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures .....	
(c) <b>TOTAL</b> Independent Expenditures .....	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or 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 1 / 3 1 / 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 <b>C</b> 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.

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Mailing Address  
8341 Beechcraft Avenue

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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 Dent

---

Calendar Year-To-Date Per Election for Office Sought	19615.88
---	----------

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

Full Name (Last, First, Middle, Initial) of Payee  
Prolist Inc.

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Mailing Address  
8341 Beechcraft Avenue

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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. John Mulvaney

---

Calendar Year-To-Date Per Election for Office Sought	143713.12
---	-----------

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:  House State: SC  
 Senate District: 05  
 Presidential

Check One:  Support  Oppose

Disbursement For:  Primary  General  
 Other (specify) : \_\_\_\_\_  
2010

**[MEMO ITEM]**  
Postage

(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 1 / 3 1 / 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 <b>C</b> 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  
240.99

Transaction ID: 37268471

City State Zip Code  
Gaithersburg MD 20879-1509

Office Sought:  House State: SC  
 Senate District: 05  
 Presidential

Purpose of Expenditure  
Postcards

Category/Type  
004

Check One:  Support  Oppose

Name of Federal Candidate supported or Opposed by expenditure:  
Mr. John Mulvaney

Disbursement For:  Primary  General  
 Other (specify) : \_\_\_\_\_

Calendar Year-To-Date Per Election for Office Sought  
143954.11

2010  
**[MEMO ITEM]**  
Postcards

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  
164.12

Transaction ID: 37268491

City State Zip Code  
Gaithersburg MD 20879-1509

Office Sought:  House State: VA  
 Senate District: 11  
 Presidential

Purpose of Expenditure  
Postage

Category/Type  
004

Check One:  Support  Oppose

Name of Federal Candidate supported or Opposed by expenditure:  
Mr. Keith Fimian

Disbursement For:  Primary  General  
 Other (specify) : \_\_\_\_\_

Calendar Year-To-Date Per Election for Office Sought  
8688.78

2010  
**[MEMO ITEM]**  
Postage

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures .....	0.00
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures .....	
(c) <b>TOTAL</b> Independent Expenditures .....	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or 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	1		3	1		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 <b>C</b> 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.

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Mailing Address  
8341 Beechcraft Avenue

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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. 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

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Full Name (Last, First, Middle, Initial) of Payee  
Prolist Inc.

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Mailing Address  
8341 Beechcraft Avenue

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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. John Boozman

Calendar Year-To-Date Per Election  
for Office Sought 23493.77

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

(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 1 / 3 1 / 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 <b>C</b> 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  
1127.55

Transaction ID: 37268623

City	State	Zip Code
Gaithersburg	MD	20879-1509

Office Sought:  House State: AR  
 Senate District: \_\_\_\_\_  
 Presidential

Purpose of Expenditure Postcards	Category/ Type	004
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Check One:  Support  Oppose

Name of Federal Candidate supported or Opposed by expenditure:  
Mr. John Boozman

Disbursement For:  Primary  General  
 Other (specify) : \_\_\_\_\_

Calendar Year-To-Date Per Election for Office Sought	24621.32
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2010 **[MEMO ITEM]**  
Postcards

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  
1785.38

Transaction ID: 37331663

City	State	Zip Code
Gaithersburg	MD	20879-1509

Office Sought:  House State: FL  
 Senate District: 08  
 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. Daniel Webster

Disbursement For:  Primary  General  
 Other (specify) : \_\_\_\_\_

Calendar Year-To-Date Per Election for Office Sought	2917.32
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2010 **[MEMO ITEM]**  
Postage

(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	1		3	1		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 <b>C</b> 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.

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Mailing Address  
8341 Beechcraft Avenue

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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. Daniel Webster

---

Calendar Year-To-Date Per Election for Office Sought	3011.77
---	---------

Date  
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  
**[MEMO ITEM]**

Postcards

Full Name (Last, First, Middle, Initial) of Payee  
Prolist Inc.

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Mailing Address  
8341 Beechcraft Avenue

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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

---

Calendar Year-To-Date Per Election for Office Sought	3083.86
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Date  
10 / 20 / 2010

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

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures .....	0.00
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures .....	
(c) <b>TOTAL</b> Independent Expenditures .....	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or 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 01 / 31 / 2011  
Signature

# SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund	<b>FEC IDENTIFICATION NUMBER</b> ▼ <b>C</b> 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 <span style="border: 1px solid black; padding: 2px;">004</span>	
Name of Federal Candidate supported or Opposed by expenditure: Mr. Dennis Ross		

Date	<table border="1" style="font-size: small;"> <tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr> <tr><td>1</td><td>0</td><td></td><td>2</td><td>0</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td></tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	0		2	0		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
1	0		2	0		2	0	1	0												
Amount	<table border="1" style="font-size: small;"> <tr><td colspan="10" style="text-align: center;">101.62</td></tr> </table>	101.62																			
101.62																					
<b>Transaction ID:</b> 37331666																					
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) : _____																				
2010 <b>[MEMO ITEM]</b>																					
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 Postage	Category/ Type <span style="border: 1px solid black; padding: 2px;">004</span>	
Name of Federal Candidate supported or Opposed by expenditure: Mr. Allen West		
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">3185.48</span>		

Date	<table border="1" style="font-size: small;"> <tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr> <tr><td>1</td><td>0</td><td></td><td>2</td><td>0</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td></tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	0		2	0		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
1	0		2	0		2	0	1	0												
Amount	<table border="1" style="font-size: small;"> <tr><td colspan="10" style="text-align: center;">902.03</td></tr> </table>	902.03																			
902.03																					
<b>Transaction ID:</b> 37331667																					
Office Sought:	<input checked="" type="checkbox"/> House State: <u>FL</u> <input type="checkbox"/> Senate District: <u>22</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 <b>[MEMO ITEM]</b>																					
Postage																					

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures .....	<span style="border: 1px solid black; padding: 2px;">0.00</span>
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures .....	<span style="border: 1px solid black; display: inline-block; width: 100px; height: 15px;"></span>
(c) <b>TOTAL</b> Independent Expenditures .....	<span style="border: 1px solid black; display: inline-block; width: 100px; height: 15px;"></span>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or 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	1		3	1		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	<b>FEC IDENTIFICATION NUMBER</b> ▼ <b>C</b> 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. Allen West

Calendar Year-To-Date Per Election for Office Sought  
 1834.05

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

Amount  
 46.80

Transaction ID: 37331668

Office Sought:  House State: FL  
 Senate District: 22  
 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  
 Postage 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:  House State: NJ  
 Senate District: 03  
 Presidential

Check One:  Support  Oppose

Disbursement For:  Primary  General  
 Other (specify) : \_\_\_\_\_  
 2010 **[MEMO ITEM]**

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures .....	0.00
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures .....	_____
(c) <b>TOTAL</b> Independent Expenditures .....	_____

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or 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 1 / 3 1 / 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 <b>C</b> 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.

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Mailing Address  
8341 Beechcraft Avenue

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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. 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:  House State: NJ  
 Senate District: 03  
 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.

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Mailing Address  
8341 Beechcraft Avenue

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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. Patrick J. Tiberi

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Calendar Year-To-Date Per Election for Office Sought	4512.30
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Date  
M M / D D / Y Y Y Y  
1 0 / 2 0 / 2 0 1 0

Amount  
597.20

Transaction ID: 37331671

Office Sought:  House State: OH  
 Senate District: 12  
 Presidential

Check One:  Support  Oppose

Disbursement For:  Primary  General  
 Other (specify) : \_\_\_\_\_  
2010

**[MEMO ITEM]**  
Postage

(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 1 / 3 1 / 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 <b>C</b> 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.

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Mailing Address  
8341 Beechcraft Avenue

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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. Patrick J. Tiberi

Date  
MM / DD / YYYY  
10 / 20 / 2010

Amount  
31.92

Transaction ID: 37331672

Office Sought:  House State: OH  
 Senate District: 12  
 Presidential

Check One:  Support  Oppose

Disbursement For:  Primary  General  
 Other (specify) : \_\_\_\_\_

2010 **[MEMO ITEM]**

Postcards

Calendar Year-To-Date Per Election  
for Office Sought 4544.22

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Full Name (Last, First, Middle, Initial) of Payee  
Prolist Inc.

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Mailing Address  
8341 Beechcraft Avenue

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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  
MM / DD / YYYY  
10 / 20 / 2010

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

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures .....	0.00
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures .....	
(c) <b>TOTAL</b> Independent Expenditures .....	

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Mary Rose Adkins  
Signature

Date MM / DD / YYYY  
01 / 31 / 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 <b>C</b> 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  
16.10

Transaction ID: 37331675

City State Zip Code  
Gaithersburg MD 20879-1509

Office Sought:  House State: OH  
 Senate District: 13  
 Presidential

Purpose of Expenditure  
Postcards

Category/Type  
004

Check One:  Support  Oppose

Name of Federal Candidate supported or Opposed by expenditure:  
Mr. Thomas Ganley

Disbursement For:  Primary  General  
 Other (specify) : \_\_\_\_\_

Calendar Year-To-Date Per Election for Office Sought  
7059.51

2010  
[MEMO ITEM]  
Postcards

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  
 Other (specify) : \_\_\_\_\_

Calendar Year-To-Date Per Election for Office Sought  
1187524.82

2010  
[MEMO ITEM]  
Postage

(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	1		3	1		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	<b>FEC IDENTIFICATION NUMBER</b> ▼ <b>C</b> 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

48.02
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City Gaithersburg	State MD	Zip Code 20879-1509
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**Transaction ID:** 37331678

Office Sought:  House State: OH  
 Senate District: \_\_\_\_\_  
 Presidential

Purpose of Expenditure Postcards	Category/ Type <span style="border: 1px solid black; padding: 2px;">004</span>
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Check One:  Support  Oppose

Name of Federal Candidate supported or Opposed by expenditure:  
Mr. Rob Portman

Disbursement For:  Primary  General  
 Other (specify) : \_\_\_\_\_  
 2010 **[MEMO ITEM]**

Calendar Year-To-Date Per Election for Office Sought	1187572.84
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Postcards

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

1641.82
---------

City Gaithersburg	State MD	Zip Code 20879-1509
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**Transaction ID:** 37331679

Office Sought:  House State: PA  
 Senate District: 06  
 Presidential

Purpose of Expenditure Postage	Category/ Type <span style="border: 1px solid black; padding: 2px;">004</span>
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Check One:  Support  Oppose

Name of Federal Candidate supported or Opposed by expenditure:  
Mr. Jim Gerlach

Disbursement For:  Primary  General  
 Other (specify) : \_\_\_\_\_  
 2010 **[MEMO ITEM]**

Calendar Year-To-Date Per Election for Office Sought	2382.25
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Postage

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures .....	0.00
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures .....	
(c) <b>TOTAL</b> Independent Expenditures .....	

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Mary Rose Adkins  
Signature

Date

M M	/	D D	/	Y Y Y Y
0 1		3 1		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 <b>C</b> 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. Jim Gerlach

Calendar Year-To-Date Per Election for Office Sought 2470.53

Date  
MM / DD / YYYY  
10 / 20 / 2010

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

Postcards **[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  
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  
MM / DD / YYYY  
10 / 20 / 2010

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

Postage **[MEMO ITEM]**

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures .....	0.00
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures .....	
(c) <b>TOTAL</b> Independent Expenditures .....	

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Mary Rose Adkins  
Signature

Date MM / DD / YYYY  
01 / 31 / 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 <b>C</b> 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.

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Mailing Address  
8341 Beechcraft Avenue

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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. Michael Fitzpatrick

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

Calendar Year-To-Date Per Election  
for Office Sought 3803.38

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Full Name (Last, First, Middle, Initial) of Payee  
Prolist Inc.

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Mailing Address  
8341 Beechcraft Avenue

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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

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]**

Postage

(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 \_\_\_\_\_ Date M M / D D / Y Y Y Y  
Signature 0 1 / 3 1 / 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 <b>C</b> 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  
171.63

City State Zip Code  
Gaithersburg MD 20879-1509

Transaction ID: 37331686

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  
1960122.52

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 1 / 2 0 1 0

Mailing Address  
8341 Beechcraft Avenue

Amount  
188836.37

City State Zip Code  
Gaithersburg MD 20879-1509

Transaction ID: 37342347

Purpose of Expenditure  
Postage

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  
1050179.86

Disbursement For:  Primary  General  
 Other (specify) : \_\_\_\_\_  
2010  
**[MEMO ITEM]**

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures .....	0.00
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures .....	
(c) <b>TOTAL</b> Independent Expenditures .....	

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Mary Rose Adkins  
Signature

Date  
M M / D D / Y Y Y Y  
0 1 / 3 1 / 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 <b>C</b> 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.

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Mailing Address  
8341 Beechcraft Avenue

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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. Kenneth Buck

---

Calendar Year-To-Date Per Election for Office Sought	1060478.48
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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

Full Name (Last, First, Middle, Initial) of Payee  
Prolist Inc.

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Mailing Address  
8341 Beechcraft Avenue

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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. Michael Avery Ross

---

Calendar Year-To-Date Per Election for Office Sought	6270.71
---	---------

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

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

(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 \_\_\_\_\_ Date M M / D D / Y Y Y Y  
Signature 0 1 / 3 1 / 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 <b>C</b> 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  
356.23

City State Zip Code  
Gaithersburg MD 20879-1509

Transaction ID: 37342401

Purpose of Expenditure  
Postcards

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  
6626.94

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  
3144.16

City State Zip Code  
Gaithersburg MD 20879-1509

Transaction ID: 37342402

Purpose of Expenditure  
Postcards

Category/Type  
004

Office Sought:  House State: CA  
 Senate District: 18  
 Presidential

Name of Federal Candidate supported or Opposed by expenditure:  
Rep. Dennis A. Cardoza

Check One:  Support  Oppose

Calendar Year-To-Date Per Election for Office Sought  
4098.23

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 .....	

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Mary Rose Adkins  
Signature

Date M M / D D / Y Y Y Y  
0 1 / 3 1 / 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 <b>C</b> 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  
224.26

City State Zip Code  
Gaithersburg MD 20879-1509

Transaction ID: 37342403

Purpose of Expenditure  
Postcards

Category/Type 004

Office Sought:  House State: CA  
 Senate District: 18  
 Presidential

Name of Federal Candidate supported or Opposed by expenditure:  
Rep. Dennis A. Cardoza

Check One:  Support  Oppose

Calendar Year-To-Date Per Election for Office Sought  
4322.49

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  
3067.85

City State Zip Code  
Gaithersburg MD 20879-1509

Transaction ID: 37342404

Purpose of Expenditure  
Postage

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  
4002.51

Disbursement For:  Primary  General  
 Other (specify) : \_\_\_\_\_  
2010  
**[MEMO ITEM]**

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures .....	0.00
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures .....	
(c) <b>TOTAL</b> Independent Expenditures .....	

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Mary Rose Adkins  
Signature

Date M M / D D / Y Y Y Y  
0 1 / 3 1 / 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	<b>FEC IDENTIFICATION NUMBER</b> ▼ <b>C</b> 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.

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Mailing Address  
8341 Beechcraft Avenue

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City Gaithersburg	State MD	Zip Code 20879-1509
Purpose of Expenditure Postcards		Category/ Type <span style="border: 1px solid black; padding: 2px;">004</span>

---

Name of Federal Candidate supported or Opposed by expenditure:  
Ms. Deborah Halvorson

---

Calendar Year-To-Date Per Election for Office Sought	<span style="border: 1px solid black; padding: 2px;">4216.48</span>
--	---

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

Full Name (Last, First, Middle, Initial) of Payee  
Prolist Inc.

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Mailing Address  
8341 Beechcraft Avenue

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City Gaithersburg	State MD	Zip Code 20879-1509
Purpose of Expenditure Postage		Category/ Type <span style="border: 1px solid black; padding: 2px;">004</span>

---

Name of Federal Candidate supported or Opposed by expenditure:  
Rep. John D. Dingell

---

Calendar Year-To-Date Per Election for Office Sought	<span style="border: 1px solid black; padding: 2px;">3443.79</span>
--	---

Date  

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

Amount  
2568.31

**Transaction ID:** 37342406

Office Sought:  House State: MI  
 Senate District: 15  
 Presidential

Check One:  Support  Oppose

Disbursement For:  Primary  General  
 Other (specify) : \_\_\_\_\_  
 2010 **[MEMO ITEM]**

Postage

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures .....	<span style="border: 1px solid black; padding: 2px;">0.00</span>
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures .....	<span style="border: 1px solid black; padding: 2px;"> </span>
(c) <b>TOTAL</b> Independent Expenditures .....	<span style="border: 1px solid black; padding: 2px;"> </span>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or 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 1		3 1		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 <b>C</b> 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  
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]**

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  
3316.06

City State Zip Code  
Gaithersburg MD 20879-1509

Transaction ID: 37342408

Purpose of Expenditure  
Postage

Category/Type  
004

Office Sought:  House State: MS  
 Senate District: 01  
 Presidential

Name of Federal Candidate supported or Opposed by expenditure:  
Mr. Travis Childers

Check One:  Support  Oppose

Calendar Year-To-Date Per Election for Office Sought  
4285.72

Disbursement For:  Primary  General  
 Other (specify) : \_\_\_\_\_  
2010  
**[MEMO ITEM]**

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures .....	0.00
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures .....	
(c) <b>TOTAL</b> Independent Expenditures .....	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or 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 1 / 3 1 / 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 <b>C</b> 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.

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Mailing Address  
8341 Beechcraft Avenue

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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. Travis Childers

---

Calendar Year-To-Date Per Election for Office Sought	4518.25
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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

Full Name (Last, First, Middle, Initial) of Payee  
Prolist Inc.

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Mailing Address  
8341 Beechcraft Avenue

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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. Gene Taylor

---

Calendar Year-To-Date Per Election for Office Sought	3044.58
---	---------

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

Amount  
2217.04

Transaction ID: 37342410

Office Sought:  House State: MS  
 Senate District: 04  
 Presidential

Check One:  Support  Oppose

Disbursement For:  Primary  General  
 Other (specify) : \_\_\_\_\_  
2010

**[MEMO ITEM]**  
Postage

(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 1 / 3 1 / 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 <b>C</b> 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  
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]**

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  
1214.74

City State Zip Code  
Gaithersburg MD 20879-1509

Transaction ID: 37342412

Purpose of Expenditure  
Postage

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  
44253.32

Disbursement For:  Primary  General  
 Other (specify) : \_\_\_\_\_  
2010  
**[MEMO ITEM]**

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures .....	0.00
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures .....	
(c) <b>TOTAL</b> Independent Expenditures .....	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or 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 1 / 3 1 / 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 <b>C</b> 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  
83.45

City State Zip Code  
Gaithersburg MD 20879-1509

Transaction ID: 37342413

Purpose of Expenditure  
Postcards

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  
44336.77

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  
4993.26

City State Zip Code  
Gaithersburg MD 20879-1509

Transaction ID: 37342414

Purpose of Expenditure  
Postage

Category/Type 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  
6187.86

Disbursement For:  Primary  General  
 Other (specify) : \_\_\_\_\_  
2010  
**[MEMO ITEM]**

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures .....	0.00
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures .....	
(c) <b>TOTAL</b> Independent Expenditures .....	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or 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 1 / 3 1 / 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	<b>FEC IDENTIFICATION NUMBER</b> ▼ <b>C</b> 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 <span style="border: 1px solid black; padding: 2px;">004</span>	
Name of Federal Candidate supported or Opposed by expenditure: Rep. Lincoln Davis		
Calendar Year-To-Date Per Election for Office Sought		<span style="border: 1px solid black; padding: 2px;">6539.70</span>

Date	<span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y</span> <span style="border: 1px solid black; padding: 2px;">1 0 / 2 1 / 2 0 1 0</span>
Amount	<span style="border: 1px solid black; padding: 2px;">351.84</span>
<b>Transaction ID:</b> 37342415	
Office Sought:	<input checked="" type="checkbox"/> House State: <u>TN</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 <b>[MEMO ITEM]</b>	
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 Postage	Category/ Type <span style="border: 1px solid black; padding: 2px;">004</span>	
Name of Federal Candidate supported or Opposed by expenditure: Rep. Nick Joe Rahall, II		
Calendar Year-To-Date Per Election for Office Sought		<span style="border: 1px solid black; padding: 2px;">2473.75</span>

Date	<span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y</span> <span style="border: 1px solid black; padding: 2px;">1 0 / 2 1 / 2 0 1 0</span>
Amount	<span style="border: 1px solid black; padding: 2px;">1721.61</span>
<b>Transaction ID:</b> 37342416	
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 <b>[MEMO ITEM]</b>	
Postage	

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures .....	<span style="border: 1px solid black; padding: 2px;">0.00</span>
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures .....	<span style="border: 1px solid black; padding: 2px;"> </span>
(c) <b>TOTAL</b> Independent Expenditures .....	<span style="border: 1px solid black; padding: 2px;"> </span>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or 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 1 / 3 1 / 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 <b>C</b> 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.

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Mailing Address  
8341 Beechcraft Avenue

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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. Nick Joe Rahall, II

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

Amount  
117.16

Transaction ID: 37342417

Office Sought:  House State: WV  
 Senate District: 03  
 Presidential

Check One:  Support  Oppose

Disbursement For:  Primary  General  
 Other (specify) : \_\_\_\_\_  
2010

**[MEMO ITEM]**  
Postcards

Calendar Year-To-Date Per Election  
for Office Sought 2590.91

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Full Name (Last, First, Middle, Initial) of Payee  
Prolist Inc.

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Mailing Address  
8341 Beechcraft Avenue

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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. Allen Boyd

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

Amount  
6094.32

Transaction ID: 37342429

Office Sought:  House State: FL  
 Senate District: 02  
 Presidential

Check One:  Support  Oppose

Disbursement For:  Primary  General  
 Other (specify) : \_\_\_\_\_  
2010

**[MEMO ITEM]**  
Postage

(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 1 / 3 1 / 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 <b>C</b> 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  
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]**

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  
6870.92

City State Zip Code  
Gaithersburg MD 20879-1509

Transaction ID: 37342431

Purpose of Expenditure  
Postage

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 8313.43

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 1 / 3 1 / 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	<b>FEC IDENTIFICATION NUMBER</b> ▼ <b>C</b> 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 <span style="border: 1px solid black; padding: 2px;">004</span>
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Name of Federal Candidate supported or Opposed by expenditure:  
Rep. Ike Skelton

Calendar Year-To-Date Per Election for Office Sought	<span style="border: 1px solid black; padding: 2px;">8796.75</span>
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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:** 37342432

Office Sought:  House State: MO  
 Senate District: 04  
 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
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Purpose of Expenditure Postage	Category/ Type <span style="border: 1px solid black; padding: 2px;">004</span>
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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	<span style="border: 1px solid black; padding: 2px;">4364.90</span>
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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

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures .....	<span style="border: 1px solid black; padding: 2px;">0.00</span>
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures .....	<span style="border: 1px solid black; padding: 2px;"> </span>
(c) <b>TOTAL</b> Independent Expenditures .....	<span style="border: 1px solid black; padding: 2px;"> </span>

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Mary Rose Adkins  
Signature

Date 

M M	D D	Y Y Y Y
0 1	3 1	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	<b>FEC IDENTIFICATION NUMBER</b> ▼ <b>C</b> 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 <span style="border: 1px solid black; padding: 2px;">004</span>	
Name of Federal Candidate supported or Opposed by expenditure: Rep. Zachary T. Space		

Date M M / D D / Y Y Y Y <span style="border: 1px solid black; padding: 2px;">1 0 / 2 2 / 2 0 1 0</span>
Amount <span style="border: 1px solid black; padding: 2px;">244.67</span>
<b>Transaction ID:</b> 37342434
Office Sought: <input checked="" type="checkbox"/> House State: <u>OH</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) : _____

Calendar Year-To-Date Per Election for Office Sought	<span style="border: 1px solid black; padding: 2px;">4609.57</span>
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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 Postage	Category/ Type <span style="border: 1px solid black; padding: 2px;">004</span>	
Name of Federal Candidate supported or Opposed by expenditure: Rep. Daniel Boren		

Date M M / D D / Y Y Y Y <span style="border: 1px solid black; padding: 2px;">1 0 / 2 2 / 2 0 1 0</span>
Amount <span style="border: 1px solid black; padding: 2px;">6349.22</span>
<b>Transaction ID:</b> 37342437
Office Sought: <input checked="" type="checkbox"/> House State: <u>OK</u> <input type="checkbox"/> Senate District: <u>02</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	<span style="border: 1px solid black; padding: 2px;">7726.66</span>
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2010 **[MEMO ITEM]**  
Postage

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures .....	<span style="border: 1px solid black; padding: 2px;">0.00</span>
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures .....	<span style="border: 1px solid black; padding: 2px;"> </span>
(c) <b>TOTAL</b> Independent Expenditures .....	<span style="border: 1px solid black; padding: 2px;"> </span>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or 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 1 / 3 1 / 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 <b>C</b> 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  
448.82

City State Zip Code  
Gaithersburg MD 20879-1509

Transaction ID: 37342438

Purpose of Expenditure  
Postcards

Category/Type  
004

Office Sought:  House State: OK  
 Senate District: 02  
 Presidential

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  
8175.48

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  
7181.23

City State Zip Code  
Gaithersburg MD 20879-1509

Transaction ID: 37342439

Purpose of Expenditure  
Postage

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  
8682.15

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 1 / 3 1 / 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 <b>C</b> 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  
514.32

City State Zip Code  
Gaithersburg MD 20879-1509

Transaction ID: 37342440

Purpose of Expenditure  
Postcards

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  
9196.47

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  
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]**

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures .....	0.00
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures .....	
(c) <b>TOTAL</b> Independent Expenditures .....	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or 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 1 / 3 1 / 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 <b>C</b> 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  
477.23

City State Zip Code  
Gaithersburg MD 20879-1509

Transaction ID: 37342442

Purpose of Expenditure Category/Type  
Postcards 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]**

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  
6785.87

City State Zip Code  
Gaithersburg MD 20879-1509

Transaction ID: 37342443

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  
8228.38

Disbursement For:  Primary  General  
 Other (specify) : \_\_\_\_\_  
2010  
**[MEMO ITEM]**

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures .....	0.00
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures .....	
(c) <b>TOTAL</b> Independent Expenditures .....	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or 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 1 / 3 1 / 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 <b>C</b> 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  
483.32

City State Zip Code  
Gaithersburg MD 20879-1509

Transaction ID: 37342444

Purpose of Expenditure  
Postcards

Category/Type  
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  
8711.70

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  
6779.15

City State Zip Code  
Gaithersburg MD 20879-1509

Transaction ID: 37342445

Purpose of Expenditure  
Postage

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  
8221.66

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 1 / 3 1 / 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 <b>C</b> 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  
483.32

City State Zip Code  
Gaithersburg MD 20879-1509

Transaction ID: 37342446

Purpose of Expenditure Category/Type  
Postcards 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  
8704.98

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  
29402.37

City State Zip Code  
Gaithersburg MD 20879-1509

Transaction ID: 37342608

Purpose of Expenditure Category/Type  
Postage 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  
53351.01

Disbursement For:  Primary  General  
 Other (specify) : \_\_\_\_\_  
2010  
**[MEMO ITEM]**

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures .....	0.00
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures .....	
(c) <b>TOTAL</b> Independent Expenditures .....	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or 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 1 / 3 1 / 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	<b>FEC IDENTIFICATION NUMBER</b> ▼ <b>C</b> 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.

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Mailing Address  
8341 Beechcraft Avenue

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City Gaithersburg	State MD	Zip Code 20879-1509
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Purpose of Expenditure Postcards	Category/ Type <span style="border: 1px solid black; padding: 2px;">004</span>
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Name of Federal Candidate supported or Opposed by expenditure:  
Mr. Richard Blumenthal

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Calendar Year-To-Date Per Election for Office Sought	<span style="border: 1px solid black; padding: 2px;">54998.00</span>
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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]**

Postcards

Full Name (Last, First, Middle, Initial) of Payee  
Prolist Inc.

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Mailing Address  
8341 Beechcraft Avenue

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City Gaithersburg	State MD	Zip Code 20879-1509
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Purpose of Expenditure Postage	Category/ Type <span style="border: 1px solid black; padding: 2px;">004</span>
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Name of Federal Candidate supported or Opposed by expenditure:  
Van Tran

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Calendar Year-To-Date Per Election for Office Sought	<span style="border: 1px solid black; padding: 2px;">811.39</span>
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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

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures .....	<span style="border: 1px solid black; padding: 2px;">0.00</span>
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures .....	<span style="border: 1px solid black; padding: 2px;"> </span>
(c) <b>TOTAL</b> Independent Expenditures .....	<span style="border: 1px solid black; padding: 2px;"> </span>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or 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 1	3 1	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 <b>C</b> 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.

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Mailing Address  
8341 Beechcraft Avenue

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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:  
Van Tran

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

Calendar Year-To-Date Per Election  
for Office Sought 838.34

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Full Name (Last, First, Middle, Initial) of Payee  
Prolist Inc.

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Mailing Address  
8341 Beechcraft Avenue

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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

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

(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 1 / 3 1 / 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 <b>C</b> 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:  
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]

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 911.52

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

Amount  
500.24  
Transaction ID: 37342614

Office Sought:  House State: NY  
 Senate District: 13  
 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 1 / 3 1 / 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 <b>C</b> 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.

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Mailing Address  
8341 Beechcraft Avenue

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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. Michael Grimm

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

Amount  
27.21

Transaction ID: 37342615

Office Sought:  House State: NY  
 Senate District: 13  
 Presidential

Check One:  Support  Oppose

Disbursement For:  Primary  General  
 Other (specify) : \_\_\_\_\_  
2010

**[MEMO ITEM]**

Postcards

Calendar Year-To-Date Per Election  
for Office Sought 938.73

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Full Name (Last, First, Middle, Initial) of Payee  
Prolist Inc.

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Mailing Address  
8341 Beechcraft Avenue

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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

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

(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 1 / 3 1 / 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 <b>C</b> 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.

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Mailing Address  
8341 Beechcraft Avenue

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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 Meehan

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

Calendar Year-To-Date Per Election  
for Office Sought 19833.92

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Full Name (Last, First, Middle, Initial) of Payee  
Prolist Inc.

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Mailing Address  
8341 Beechcraft Avenue

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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

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

(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 1 / 3 1 / 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	<b>FEC IDENTIFICATION NUMBER</b> ▼ <b>C</b> 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 <span style="border: 1px solid black; padding: 2px;">004</span>	
Name of Federal Candidate supported or Opposed by expenditure: Mr. Patrick Toomey		

Date M M / D D / Y Y Y Y <span style="border: 1px solid black; padding: 2px;">1 0 / 2 2 / 2 0 1 0</span>
Amount <span style="border: 1px solid black; padding: 2px;">264.94</span>
<b>Transaction ID:</b> 37342619
Office Sought: <input type="checkbox"/> House State: PA <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) : _____

Calendar Year-To-Date Per Election for Office Sought	<span style="border: 1px solid black; padding: 2px;">1971406.74</span>
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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 Postage	Category/ Type <span style="border: 1px solid black; padding: 2px;">004</span>	
Name of Federal Candidate supported or Opposed by expenditure: Sen. Richard M. Burr		

Date M M / D D / Y Y Y Y <span style="border: 1px solid black; padding: 2px;">1 0 / 2 3 / 2 0 1 0</span>
Amount <span style="border: 1px solid black; padding: 2px;">3383.72</span>
<b>Transaction ID:</b> 37342636
Office Sought: <input type="checkbox"/> House State: NC <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) : _____

Calendar Year-To-Date Per Election for Office Sought	<span style="border: 1px solid black; padding: 2px;">34472.79</span>
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(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures .....	<span style="border: 1px solid black; padding: 2px;">3383.72</span>
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures .....	<span style="border: 1px solid black; padding: 2px;"> </span>
(c) <b>TOTAL</b> Independent Expenditures .....	<span style="border: 1px solid black; padding: 2px;"> </span>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or 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 0 1 / 3 1 / 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 <b>C</b> 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

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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. 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

Full Name (Last, First, Middle, Initial) of Payee  
Prolist Inc.

---

Mailing Address  
8341 Beechcraft Avenue

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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. 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

(a) SUBTOTAL of Itemized Independent Expenditures .....	862.43
(b) SUBTOTAL of Unitemized Independent Expenditures .....	
(c) TOTAL Independent Expenditures .....	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or 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 1 / 3 1 / 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 <b>C</b> 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.

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Mailing Address  
8341 Beechcraft Avenue

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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:  
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

Full Name (Last, First, Middle, Initial) of Payee  
Prolist Inc.

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Mailing Address  
8341 Beechcraft Avenue

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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:  
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

(a) SUBTOTAL of Itemized Independent Expenditures .....	2317.44
(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 1 / 3 1 / 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 <b>C</b> 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.

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Mailing Address  
8341 Beechcraft Avenue

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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:  
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

Full Name (Last, First, Middle, Initial) of Payee  
Prolist Inc.

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Mailing Address  
8341 Beechcraft Avenue

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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. Barbara Boxer

---

Calendar Year-To-Date Per Election for Office Sought  
366740.96

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

Amount  
71401.05

Transaction ID: 37351545

Office Sought:  House State: CA  
 Senate District: \_\_\_\_\_  
 Presidential

Check One:  Support  Oppose

Disbursement For:  Primary  General  
 Other (specify) : \_\_\_\_\_  
2010

**[MEMO ITEM]**  
Postage

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures .....	251.95
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures .....	
(c) <b>TOTAL</b> Independent Expenditures .....	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or 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 1 / 3 1 / 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 <b>C</b> 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.

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Mailing Address  
8341 Beechcraft Avenue

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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:  
Sen. Barbara Boxer

---

Calendar Year-To-Date Per Election for Office Sought	370550.96
---	-----------

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

Amount  
3810.00

Transaction ID: 37351546

Office Sought:  House State: CA  
 Senate District: \_\_\_\_\_  
 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.

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Mailing Address  
8341 Beechcraft Avenue

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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. Joseph Sestak

---

Calendar Year-To-Date Per Election for Office Sought	2322701.35
---	------------

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

Amount  
81801.14

Transaction ID: 37357859

Office Sought:  House State: PA  
 Senate District: \_\_\_\_\_  
 Presidential

Check One:  Support  Oppose

Disbursement For:  Primary  General  
 Other (specify) : \_\_\_\_\_  
2010

**[MEMO ITEM]**

Postage

(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 1 / 3 1 / 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 <b>C</b> 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.

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Mailing Address  
8341 Beechcraft Avenue

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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. Joseph Sestak

---

Calendar Year-To-Date Per Election for Office Sought	2331899.12
---	------------

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

Amount  
9197.77

Transaction ID: 37357860

Office Sought:  House State: PA  
 Senate District: \_\_\_\_\_  
 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.

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Mailing Address  
8341 Beechcraft Avenue

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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	2413700.26
---	------------

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

Amount  
81801.14

Transaction ID: 37357861

Office Sought:  House State: PA  
 Senate District: \_\_\_\_\_  
 Presidential

Check One:  Support  Oppose

Disbursement For:  Primary  General  
 Other (specify) : \_\_\_\_\_  
2010  
**[MEMO ITEM]**

Postage

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures .....	0.00
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures .....	
(c) <b>TOTAL</b> Independent Expenditures .....	

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Mary Rose Adkins  
Signature

Date M M / D D / Y Y Y Y  
0 1 / 3 1 / 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 <b>C</b> 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.

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Mailing Address  
8341 Beechcraft Avenue

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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 6 / 2 0 1 0

Amount  
9197.77

Transaction ID: 37357862

Office Sought:  House State: PA  
 Senate District: \_\_\_\_\_  
 Presidential

Check One:  Support  Oppose

Disbursement For:  Primary  General  
 Other (specify) : \_\_\_\_\_

2010 **[MEMO ITEM]**

Postcards

Calendar Year-To-Date Per Election  
for Office Sought 2422898.03

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Full Name (Last, First, Middle, Initial) of Payee  
Prolist Inc.

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Mailing Address  
8341 Beechcraft Avenue

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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

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

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures .....	0.00
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures .....	
(c) <b>TOTAL</b> Independent Expenditures .....	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or 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 1 / 3 1 / 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 <b>C</b> 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:  
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

Full Name (Last, First, Middle, Initial) of Payee  
Prolist Inc.

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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
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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	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

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures .....	1435.92
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures .....	
(c) <b>TOTAL</b> Independent Expenditures .....	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or 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 1 / 3 1 / 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 <b>C</b> 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 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

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:  
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

(a) SUBTOTAL of Itemized Independent Expenditures .....	3140.86
(b) SUBTOTAL of Unitemized Independent Expenditures .....	
(c) TOTAL Independent Expenditures .....	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or 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 1 / 3 1 / 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 <b>C</b> 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.

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Mailing Address  
8341 Beechcraft Avenue

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City Gaithersburg	State MD	Zip Code 20879-1509
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Purpose of Expenditure Phone Data Matching	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	2450278.92
---	------------

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

Full Name (Last, First, Middle, Initial) of Payee  
Prolist Inc.

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Mailing Address  
8341 Beechcraft Avenue

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City Gaithersburg	State MD	Zip Code 20879-1509
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Purpose of Expenditure Phone Data Matching	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	2453694.21
---	------------

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

(a) SUBTOTAL of Itemized Independent Expenditures .....	6830.58
(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 1 / 3 1 / 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 <b>C</b> 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.

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Mailing Address  
8341 Beechcraft Avenue

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City Gaithersburg	State MD	Zip Code 20879-1509
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Purpose of Expenditure Phone Data Matching	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	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

Full Name (Last, First, Middle, Initial) of Payee  
Prolist Inc.

---

Mailing Address  
8341 Beechcraft Avenue

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City Gaithersburg	State MD	Zip Code 20879-1509
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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

(a) SUBTOTAL of Itemized Independent Expenditures .....	2241.24
(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 1 / 3 1 / 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 <b>C</b> 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 8 / 2 0 1 0

Mailing Address  
8341 Beechcraft Avenue

Amount  
132318.71

City State Zip Code  
Gaithersburg MD 20879-1509

Transaction ID: 37376243

Purpose of Expenditure  
Postage

Category/Type 004

Office Sought:  House State: WA  
 Senate District: \_\_\_\_\_  
 Presidential

Name of Federal Candidate supported or Opposed by expenditure:  
Mr. Dino Rossi

Check One:  Support  Oppose

Calendar Year-To-Date Per Election for Office Sought  
743083.48

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 / 2 8 / 2 0 1 0

Mailing Address  
8341 Beechcraft Avenue

Amount  
86633.43

City State Zip Code  
Gaithersburg MD 20879-1509

Transaction ID: 37376244

Purpose of Expenditure  
Postage

Category/Type 004

Office Sought:  House State: WA  
 Senate District: \_\_\_\_\_  
 Presidential

Name of Federal Candidate supported or Opposed by expenditure:  
Mr. Dino Rossi

Check One:  Support  Oppose

Calendar Year-To-Date Per Election for Office Sought  
829716.91

Disbursement For:  Primary  General  
 Other (specify) : \_\_\_\_\_  
2010

(a) SUBTOTAL of Itemized Independent Expenditures .....	218952.14
(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 1 / 3 1 / 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	<b>FEC IDENTIFICATION NUMBER</b> ▼ <b>C</b> 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 <span style="border: 1px solid black; padding: 2px;">004</span>	
Name of Federal Candidate supported or Opposed by expenditure: Mr. Dino Rossi		
Calendar Year-To-Date Per Election for Office Sought		<span style="border: 1px solid black; padding: 2px;">837601.04</span>

Date M M / D D / Y Y Y Y <span style="border: 1px solid black; padding: 2px;">1 0 / 2 8 / 2 0 1 0</span>
Amount <span style="border: 1px solid black; padding: 2px;">7884.13</span>
<b>Transaction ID:</b> 37376246
Office Sought: <input type="checkbox"/> House State: <u>WA</u> <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 Prolist Inc.		
Mailing Address 8341 Beechcraft Avenue		
City Gaithersburg	State MD	Zip Code 20879-1509
Purpose of Expenditure Postcards	Category/ Type <span style="border: 1px solid black; padding: 2px;">004</span>	
Name of Federal Candidate supported or Opposed by expenditure: Mr. Dino Rossi		
Calendar Year-To-Date Per Election for Office Sought		<span style="border: 1px solid black; padding: 2px;">842942.91</span>

Date M M / D D / Y Y Y Y <span style="border: 1px solid black; padding: 2px;">1 0 / 2 8 / 2 0 1 0</span>
Amount <span style="border: 1px solid black; padding: 2px;">5341.87</span>
<b>Transaction ID:</b> 37376247
Office Sought: <input type="checkbox"/> House State: <u>WA</u> <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) <b>SUBTOTAL</b> of Itemized Independent Expenditures .....	<span style="border: 1px solid black; padding: 2px;">13226.00</span>
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures .....	<span style="border: 1px solid black; padding: 2px;"> </span>
(c) <b>TOTAL</b> Independent Expenditures .....	<span style="border: 1px solid black; padding: 2px;"> </span>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or 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 1 / 3 1 / 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 <b>C</b> 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.

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Mailing Address  
8341 Beechcraft Avenue

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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. 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

Full Name (Last, First, Middle, Initial) of Payee  
Prolist Inc.

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Mailing Address  
8341 Beechcraft Avenue

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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. 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

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures .....	8211.98
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures .....	
(c) <b>TOTAL</b> Independent Expenditures .....	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or 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 1 / 3 1 / 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 <b>C</b> 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.

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Mailing Address  
8341 Beechcraft Avenue

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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. 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

Full Name (Last, First, Middle, Initial) of Payee  
Prolist Inc.

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Mailing Address  
8341 Beechcraft Avenue

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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

---

Calendar Year-To-Date Per Election for Office Sought	7687.74
---	---------

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

Amount  
3067.85

Transaction ID: 37380734

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 .....	9162.17
(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 \_\_\_\_\_ Date M M / D D / Y Y Y Y  
Signature 0 1 / 3 1 / 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	<b>FEC IDENTIFICATION NUMBER</b> ▼ <b>C</b> 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.

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Mailing Address  
8341 Beechcraft Avenue

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City Gaithersburg	State MD	Zip Code 20879-1509
Purpose of Expenditure Postage		Category/ Type <span style="border: 1px solid black; padding: 2px;">004</span>

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Name of Federal Candidate supported or Opposed by expenditure:  
Rep. John D. Dingell

---

Calendar Year-To-Date Per Election for Office Sought	<span style="border: 1px solid black; padding: 2px;">6538.91</span>
---	---

Date  

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

Amount  
2568.31

**Transaction ID:** 37380735

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

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City Gaithersburg	State MD	Zip Code 20879-1509
Purpose of Expenditure Postage		Category/ Type <span style="border: 1px solid black; padding: 2px;">004</span>

---

Name of Federal Candidate supported or Opposed by expenditure:  
Rep. Ike Skelton

---

Calendar Year-To-Date Per Election for Office Sought	<span style="border: 1px solid black; padding: 2px;">16578.93</span>
---	--

Date  

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

Amount  
6870.92

**Transaction ID:** 37380736

Office Sought:  House State: MO  
 Senate District: 04  
 Presidential

Check One:  Support  Oppose

Disbursement For:  Primary  General  
 Other (specify) : \_\_\_\_\_  
 2010

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures .....	<span style="border: 1px solid black; padding: 2px;">9439.23</span>
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures .....	<span style="border: 1px solid black; padding: 2px;"> </span>
(c) <b>TOTAL</b> Independent Expenditures .....	<span style="border: 1px solid black; padding: 2px;"> </span>

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Mary Rose Adkins  
Signature

Date 

M M	/	D D	/	Y Y Y Y
0 1		3 1		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 <b>C</b> 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.

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Mailing Address  
8341 Beechcraft Avenue

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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. Travis Childers

---

Calendar Year-To-Date Per Election for Office Sought	8272.72
---	---------

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

Amount  
3316.06

Transaction ID: 37380737

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.

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Mailing Address  
8341 Beechcraft Avenue

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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. Gene Taylor

---

Calendar Year-To-Date Per Election for Office Sought	5715.06
---	---------

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

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

(a) SUBTOTAL of Itemized Independent Expenditures .....	5533.10
(b) SUBTOTAL of Unitemized Independent Expenditures .....	
(c) TOTAL Independent Expenditures .....	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or 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 1 / 3 1 / 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	<b>FEC IDENTIFICATION NUMBER</b> ▼ <b>C</b> 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.

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Mailing Address  
8341 Beechcraft Avenue

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City Gaithersburg	State MD	Zip Code 20879-1509
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Purpose of Expenditure Postage	Category/ Type <span style="border: 1px solid black; padding: 2px;">004</span>
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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	<span style="border: 1px solid black; padding: 2px;">45708.84</span>
---	--

Date  

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

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

Full Name (Last, First, Middle, Initial) of Payee  
Prolist Inc.

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Mailing Address  
8341 Beechcraft Avenue

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City Gaithersburg	State MD	Zip Code 20879-1509
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Purpose of Expenditure Postage	Category/ Type <span style="border: 1px solid black; padding: 2px;">004</span>
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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	<span style="border: 1px solid black; padding: 2px;">8536.97</span>
---	---

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

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures .....	<span style="border: 1px solid black; padding: 2px;">4680.84</span>
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures .....	<span style="border: 1px solid black; padding: 2px;"> </span>
(c) <b>TOTAL</b> Independent Expenditures .....	<span style="border: 1px solid black; padding: 2px;"> </span>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or 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 1		3 1		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 <b>C</b> 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. 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

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. 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

(a) SUBTOTAL of Itemized Independent Expenditures .....	13530.45
(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 1 / 3 1 / 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 <b>C</b> 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.

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Mailing Address  
8341 Beechcraft Avenue

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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

Full Name (Last, First, Middle, Initial) of Payee  
Prolist Inc.

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Mailing Address  
8341 Beechcraft Avenue

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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	16408.83
---	----------

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

Amount  
6785.87

Transaction ID: 37380745

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 .....	13472.36
(b) SUBTOTAL of Unitemized Independent Expenditures .....	
(c) TOTAL Independent Expenditures .....	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or 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 1 / 3 1 / 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	<b>FEC IDENTIFICATION NUMBER</b> ▼ <b>C</b> 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  
4993.26

City State Zip Code  
Gaithersburg MD 20879-1509

**Transaction ID:** 37380748

Purpose of Expenditure  
Postage

Category/  
Type 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

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

City State Zip Code  
Gaithersburg MD 20879-1509

**Transaction ID:** 37380749

Purpose of Expenditure  
Postage

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 16395.39

Disbursement For:  Primary  General  
 Other (specify) : \_\_\_\_\_  
2010

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures .....	11772.41
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures .....	_____
(c) <b>TOTAL</b> Independent Expenditures .....	_____

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or 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 1 / 3 1 / 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 <b>C</b> 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  
1721.61

City State Zip Code  
Gaithersburg MD 20879-1509

Transaction ID: 37380750  
Office Sought:  House State: WV  
 Senate District: 03  
 Presidential

Purpose of Expenditure Category/Type  
Postage 004

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  
4533.41

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  
356.23

City State Zip Code  
Gaithersburg MD 20879-1509

Transaction ID: 37380753  
Office Sought:  House State: AR  
 Senate District: 04  
 Presidential

Purpose of Expenditure Category/Type  
Postcards 004

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  
12722.63

Disbursement For:  Primary  General  
 Other (specify) : \_\_\_\_\_  
2010

(a) SUBTOTAL of Itemized Independent Expenditures .....	2077.84
(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 1 / 3 1 / 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 <b>C</b> 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.

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Mailing Address  
8341 Beechcraft Avenue

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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. Dennis A. Cardoza

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Calendar Year-To-Date Per Election for Office Sought	8113.73
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Date  
M M / D D / Y Y Y Y  
1 0 / 3 0 / 2 0 1 0

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

Full Name (Last, First, Middle, Initial) of Payee  
Prolist Inc.

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Mailing Address  
8341 Beechcraft Avenue

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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

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Calendar Year-To-Date Per Election for Office Sought	15237.25
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Date  
M M / D D / Y Y Y Y  
1 0 / 3 0 / 2 0 1 0

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

(a) SUBTOTAL of Itemized Independent Expenditures .....	660.48
(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 1 / 3 1 / 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 <b>C</b> 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:  
Ms. Deborah Halvorson

Calendar Year-To-Date Per Election for Office Sought  
7901.71

Date  
MM / DD / YYYY  
10 / 30 / 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

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. John D. Dingell

Calendar Year-To-Date Per Election for Office Sought  
6721.49

Date  
MM / DD / YYYY  
10 / 30 / 2010

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

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures .....	396.55
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures .....	
(c) <b>TOTAL</b> Independent Expenditures .....	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or 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  
01 / 31 / 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 <b>C</b> 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.

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Mailing Address  
8341 Beechcraft Avenue

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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. Ike Skelton

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Calendar Year-To-Date Per Election for Office Sought	17062.25
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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

Full Name (Last, First, Middle, Initial) of Payee  
Prolist Inc.

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Mailing Address  
8341 Beechcraft Avenue

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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. Travis Childers

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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

(a) SUBTOTAL of Itemized Independent Expenditures .....	715.85
(b) SUBTOTAL of Unitemized Independent Expenditures .....	
(c) TOTAL Independent Expenditures .....	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or 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 1 / 3 1 / 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 <b>C</b> 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. 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

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. Heath Shuler

Calendar Year-To-Date Per Election for Office Sought  
45792.29

Date  
M M / D D / Y Y Y Y  
1 0 / 3 0 / 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

(a) SUBTOTAL of Itemized Independent Expenditures .....	240.60
(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 1 / 3 1 / 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	<b>FEC IDENTIFICATION NUMBER</b> ▼ <b>C</b> 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

244.67
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City Gaithersburg	State MD	Zip Code 20879-1509
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**Transaction ID:** 37380762

Purpose of Expenditure Postcards	Category/ Type <span style="border: 1px solid black; padding: 2px;">004</span>
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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	<span style="border: 1px solid black; padding: 2px;">8781.64</span>
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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

448.82
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City Gaithersburg	State MD	Zip Code 20879-1509
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**Transaction ID:** 37380763

Purpose of Expenditure Postcards	Category/ Type <span style="border: 1px solid black; padding: 2px;">004</span>
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Office Sought:  House State: OK  
 Senate District: 02  
 Presidential

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	<span style="border: 1px solid black; padding: 2px;">15819.71</span>
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Disbursement For:  Primary  General  
 Other (specify) : \_\_\_\_\_  
 2010

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures .....	<span style="border: 1px solid black; padding: 2px;">693.49</span>
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures .....	<span style="border: 1px solid black; display: inline-block; width: 100%; height: 15px;"></span>
(c) <b>TOTAL</b> Independent Expenditures .....	<span style="border: 1px solid black; display: inline-block; width: 100%; height: 15px;"></span>

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Mary Rose Adkins  
Signature

Date

M M	/	D D	/	Y Y Y Y
0 1		3 1		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 <b>C</b> 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  
514.32

City State Zip Code  
Gaithersburg MD 20879-1509

Transaction ID: 37380764

Purpose of Expenditure Category/Type  
Postcards 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  
17861.69

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  
477.23

City State Zip Code  
Gaithersburg MD 20879-1509

Transaction ID: 37380765

Purpose of Expenditure Category/Type  
Postcards 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  
16658.25

Disbursement For:  Primary  General  
 Other (specify) : \_\_\_\_\_  
2010

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures .....	991.55
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures .....	
(c) <b>TOTAL</b> Independent Expenditures .....	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or 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 1 / 3 1 / 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 <b>C</b> 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. 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

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. 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

(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 1 / 3 1 / 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 <b>C</b> 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.

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Mailing Address  
8341 Beechcraft Avenue

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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. James D. Matheson

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Calendar Year-To-Date Per Election for Office Sought	16878.71
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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

Full Name (Last, First, Middle, Initial) of Payee  
Prolist Inc.

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Mailing Address  
8341 Beechcraft Avenue

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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. Nick Joe Rahall, II

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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

(a) SUBTOTAL of Itemized Independent Expenditures .....	600.48
(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 1 / 3 1 / 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 <b>C</b> 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.

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Mailing Address  
8341 Beechcraft Avenue

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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

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Calendar Year-To-Date Per Election for Office Sought	89317.71
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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

Full Name (Last, First, Middle, Initial) of Payee  
Prolist Inc.

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Mailing Address  
8341 Beechcraft Avenue

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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	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

(a) SUBTOTAL of Itemized Independent Expenditures .....	29896.78
(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 1 / 3 1 / 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 <b>C</b> 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.

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Mailing Address  
8341 Beechcraft Avenue

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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	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

Full Name (Last, First, Middle, Initial) of Payee  
Prolist Inc.

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Mailing Address  
8341 Beechcraft Avenue

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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. 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

(a) SUBTOTAL of Itemized Independent Expenditures .....	19389.36
(b) SUBTOTAL of Unitemized Independent Expenditures .....	
(c) TOTAL Independent Expenditures .....	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or 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 1 / 3 1 / 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 <b>C</b> 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

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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	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

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	2476647.96
---	------------

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

(a) SUBTOTAL of Itemized Independent Expenditures .....	9448.97
(b) SUBTOTAL of Unitemized Independent Expenditures .....	
(c) TOTAL Independent Expenditures .....	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or 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 1 / 3 1 / 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 <b>C</b> 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

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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

---

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

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:  
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

(a) SUBTOTAL of Itemized Independent Expenditures .....	1777.72
(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 \_\_\_\_\_ Date M M / D D / Y Y Y Y  
Signature 0 1 / 3 1 / 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 <b>C</b> 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:  
Ms. Ann Buerkle

Calendar Year-To-Date Per Election for Office Sought  
45481.06

Date  
MM / DD / YYYY  
10 / 30 / 2010

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

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 Grimm

Calendar Year-To-Date Per Election for Office Sought  
1629.15

Date  
MM / DD / YYYY  
10 / 30 / 2010

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

(a) SUBTOTAL of Itemized Independent Expenditures .....	1154.26
(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 MM / DD / YYYY  
01 / 31 / 2011

# SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund	<b>FEC IDENTIFICATION NUMBER</b> ▼ <b>C</b> 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 <span style="border: 1px solid black; padding: 2px;">004</span>

---

Name of Federal Candidate supported or Opposed by expenditure:  
Mr. Patrick Meehan

---

Calendar Year-To-Date Per Election for Office Sought	<span style="border: 1px solid black; padding: 2px;">28597.81</span>
---	--

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

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 <span style="border: 1px solid black; padding: 2px;">004</span>

---

Name of Federal Candidate supported or Opposed by expenditure:  
Mr. Patrick Toomey

---

Calendar Year-To-Date Per Election for Office Sought	<span style="border: 1px solid black; padding: 2px;">2476929.32</span>
---	--

Date  

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

Amount  
281.36

**Transaction ID:** 37384458

Office Sought:  House State: PA  
 Senate District: \_\_\_\_\_  
 Presidential

Check One:  Support  Oppose

Disbursement For:  Primary  General  
 Other (specify) : \_\_\_\_\_  
 2010

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures .....	<span style="border: 1px solid black; padding: 2px;">562.72</span>
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures .....	<span style="border: 1px solid black; padding: 2px;"> </span>
(c) <b>TOTAL</b> Independent Expenditures .....	<span style="border: 1px solid black; padding: 2px;"> </span>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or 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 1		3 1		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 <b>C</b> 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.

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Mailing Address  
8341 Beechcraft Avenue

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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 Schweikert

---

Calendar Year-To-Date Per Election for Office Sought	103634.70
---	-----------

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

Amount  
2565.57

Transaction ID: 37386526

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  
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. 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

(a) SUBTOTAL of Itemized Independent Expenditures .....	24164.71
(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 1 / 3 1 / 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	<b>FEC IDENTIFICATION NUMBER</b> ▼ <b>C</b> 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 <span style="border: 1px solid black; padding: 2px;">004</span>
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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	<span style="border: 1px solid black; padding: 2px;">1219.13</span>
---	---

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

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 <span style="border: 1px solid black; padding: 2px;">004</span>
-----------------------------------	---

Name of Federal Candidate supported or Opposed by expenditure:  
Mr. David Harmer

Calendar Year-To-Date Per Election for Office Sought	<span style="border: 1px solid black; padding: 2px;">94460.52</span>
---	--

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

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures .....	<span style="border: 1px solid black; padding: 2px;">6654.49</span>
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures .....	<span style="border: 1px solid black; padding: 2px;"> </span>
(c) <b>TOTAL</b> Independent Expenditures .....	<span style="border: 1px solid black; padding: 2px;"> </span>

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Mary Rose Adkins  
Signature

Date M M / D D / Y Y Y Y  
0 1 / 3 1 / 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	<b>FEC IDENTIFICATION NUMBER</b> ▼ <b>C</b> 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  
3582.01

City State Zip Code  
Gaithersburg MD 20879-1509

**Transaction ID:** 37386530

Purpose of Expenditure  
Postage

Category/  
Type 004

Office Sought:  House State: CA  
 Senate District: 20  
 Presidential

Name of Federal Candidate supported or Opposed by expenditure:  
Mr. James Vidak

Check One:  Support  Oppose

Calendar Year-To-Date Per Election  
for Office Sought 157039.46

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  
6654.49

City State Zip Code  
Gaithersburg MD 20879-1509

**Transaction ID:** 37386531

Purpose of Expenditure  
Postage

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 395420.80

Disbursement For:  Primary  General  
 Other (specify) : \_\_\_\_\_  
2010

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures .....	<b>10236.50</b>
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures .....	_____
(c) <b>TOTAL</b> Independent Expenditures .....	_____

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or 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 1 / 3 1 / 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 <b>C</b> 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.

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Mailing Address  
8341 Beechcraft Avenue

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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	399002.81
---	-----------

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

Amount  
3582.01

Transaction ID: 37386532

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
-----------------------------------	--------------------------

---

Name of Federal Candidate supported or Opposed by expenditure:  
Mr. Ryan Frazier

---

Calendar Year-To-Date Per Election for Office Sought	8008.17
---	---------

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

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

(a) SUBTOTAL of Itemized Independent Expenditures .....	6785.59
(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 1 / 3 1 / 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 <b>C</b> 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. 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

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  
MM / DD / YYYY  
10 / 30 / 2010

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

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures .....	5422.58
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures .....	
(c) <b>TOTAL</b> Independent Expenditures .....	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or 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  
01 / 31 / 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 <b>C</b> 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:  
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

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. Dino Rossi

Calendar Year-To-Date Per Election for Office Sought 846473.46

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

(a) SUBTOTAL of Itemized Independent Expenditures .....	7061.10
(b) SUBTOTAL of Unitemized Independent Expenditures .....	
(c) TOTAL Independent Expenditures .....	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or 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 1 / 3 1 / 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 <b>C</b> 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.

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Mailing Address  
8341 Beechcraft Avenue

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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

Full Name (Last, First, Middle, Initial) of Payee  
Prolist Inc.

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Mailing Address  
8341 Beechcraft Avenue

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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

(a) SUBTOTAL of Itemized Independent Expenditures .....	1589.02
(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 1 / 3 1 / 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 <b>C</b> 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

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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

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 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

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures .....	436.08
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures .....	
(c) <b>TOTAL</b> Independent Expenditures .....	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or 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 1 / 3 1 / 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 <b>C</b> 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  
234.56  
Transaction ID: 37386544

City State Zip Code  
Gaithersburg MD 20879-1509

Office Sought:  House State: CA  
 Senate District: 20  
 Presidential

Purpose of Expenditure  
Postcards  
Category/Type 004

Check One:  Support  Oppose

Name of Federal Candidate supported or Opposed by expenditure:  
Mr. James Vidak

Disbursement For:  Primary  General  
 Other (specify) : \_\_\_\_\_  
2010

Calendar Year-To-Date Per Election  
for Office Sought 157274.02

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  
436.08  
Transaction ID: 37386545

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) : \_\_\_\_\_  
2010

Calendar Year-To-Date Per Election  
for Office Sought 399438.89

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures .....	670.64
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures .....	
(c) <b>TOTAL</b> Independent Expenditures .....	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or 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 1 / 3 1 / 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 <b>C</b> 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.

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Mailing Address  
8341 Beechcraft Avenue

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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:  
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

Full Name (Last, First, Middle, Initial) of Payee  
Prolist Inc.

---

Mailing Address  
8341 Beechcraft Avenue

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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

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures .....	444.19
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures .....	
(c) <b>TOTAL</b> Independent Expenditures .....	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or 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 1 / 3 1 / 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 <b>C</b> 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.

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Mailing Address  
8341 Beechcraft Avenue

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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
---	----------

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

Full Name (Last, First, Middle, Initial) of Payee  
Prolist Inc.

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Mailing Address  
8341 Beechcraft Avenue

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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
---	---------

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

(a) SUBTOTAL of Itemized Independent Expenditures .....	354.08
(b) SUBTOTAL of Unitemized Independent Expenditures .....	
(c) TOTAL Independent Expenditures .....	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or 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 1 / 3 1 / 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 <b>C</b> 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.

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Mailing Address  
8341 Beechcraft Avenue

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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
---	-----------

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

Full Name (Last, First, Middle, Initial) of Payee  
Prolist Inc.

---

Mailing Address  
8341 Beechcraft Avenue

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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	846704.83
---	-----------

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

(a) SUBTOTAL of Itemized Independent Expenditures .....	462.74
(b) SUBTOTAL of Unitemized Independent Expenditures .....	_____
(c) TOTAL Independent Expenditures .....	_____

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or 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 1 / 3 1 / 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 <b>C</b> 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.

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Mailing Address  
8341 Beechcraft Avenue

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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. Joseph Sestak

---

Calendar Year-To-Date Per Election for Office Sought	2558730.46
---	------------

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

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	2640531.60
---	------------

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

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures .....	163602.28
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures .....	
(c) <b>TOTAL</b> Independent Expenditures .....	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or 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 1 / 3 1 / 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 <b>C</b> 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. Joseph Sestak

---

Calendar Year-To-Date Per Election for Office Sought	2649729.36
---	------------

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

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

---

Calendar Year-To-Date Per Election for Office Sought	2658927.13
---	------------

Date  
M M / D D / Y Y Y Y  
1 0 / 3 0 / 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

(a) SUBTOTAL of Itemized Independent Expenditures .....	18395.53
(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 1 / 3 1 / 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 <b>C</b> 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. Barbara Boxer

---

Calendar Year-To-Date Per Election for Office Sought	471074.50
---	-----------

Date  
M M / D D / Y Y Y Y  
1 0 / 3 0 / 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

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

(a) SUBTOTAL of Itemized Independent Expenditures .....	75211.05
(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 1 / 3 1 / 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 <b>C</b> 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

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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

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:  
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

(a) SUBTOTAL of Itemized Independent Expenditures .....	4188.55
(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 1 / 3 1 / 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 <b>C</b> 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.

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Mailing Address  
8341 Beechcraft Avenue

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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

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. 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

(a) SUBTOTAL of Itemized Independent Expenditures .....	485.48
(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 1 / 3 1 / 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 <b>C</b> 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  
4919.48

City State Zip Code  
Arlington VA 22202

Transaction ID: 37352364

Purpose of Expenditure  
Phone Bank

Category/Type 004

Office Sought:  House State: WA  
 Senate District: \_\_\_\_\_  
 Presidential

Name of Federal Candidate supported or Opposed by expenditure:  
Mr. Dino Rossi

Check One:  Support  Oppose

Calendar Year-To-Date Per Election for Office Sought  
592020.89

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  
4919.47

City State Zip Code  
Arlington VA 22202

Transaction ID: 37352365

Purpose of Expenditure  
Phone Bank

Category/Type 004

Office Sought:  House State: WA  
 Senate District: \_\_\_\_\_  
 Presidential

Name of Federal Candidate supported or Opposed by expenditure:  
Sen. Patty Murray

Check One:  Support  Oppose

Calendar Year-To-Date Per Election for Office Sought  
596940.36

Disbursement For:  Primary  General  
 Other (specify) : \_\_\_\_\_  
2010  
**[MEMO ITEM]**  
Phone Bank

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures .....	0.00
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures .....	
(c) <b>TOTAL</b> Independent Expenditures .....	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or 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 1 / 3 1 / 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 <b>C</b> 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

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Mailing Address  
P.O. Box 2192

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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. Kenneth Buck

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

Calendar Year-To-Date Per Election  
for Office Sought  
1066319.65

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Full Name (Last, First, Middle, Initial) of Payee  
Connection Strategy, LLC

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Mailing Address  
P.O. Box 2192

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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. Patrick Toomey

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

Amount  
11700.82

Transaction ID: 37352367

Office Sought:  House State: PA  
 Senate District: \_\_\_\_\_  
 Presidential

Check One:  Support  Oppose

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 1 / 3 1 / 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	<b>FEC IDENTIFICATION NUMBER</b> ▼ <b>C</b> 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  
 11700.81

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  
 1994808.37

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  
 3839.28

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

<b>(a) SUBTOTAL</b> of Itemized Independent Expenditures .....	<b>0.00</b>
<b>(b) SUBTOTAL</b> of Unitemized Independent Expenditures .....	<input style="width:100%;" type="text"/>
<b>(c) TOTAL</b> 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 1 / 3 1 / 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 <b>C</b> 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  
3839.27

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]**

Full Name (Last, First, Middle, Initial) of Payee  
Connection Strategy, LLC

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

Mailing Address  
P.O. Box 2192

Amount  
4919.48

City State Zip Code  
Arlington VA 22202

Transaction ID: 37376231

Purpose of Expenditure  
Phone Bank

Category/Type 004

Office Sought:  House State: WA  
 Senate District: \_\_\_\_\_  
 Presidential

Name of Federal Candidate supported or Opposed by expenditure:  
Mr. Dino Rossi

Check One:  Support  Oppose

Calendar Year-To-Date Per Election for Office Sought  
602973.46

Disbursement For:  Primary  General  
 Other (specify) : \_\_\_\_\_  
2010

(a) SUBTOTAL of Itemized Independent Expenditures .....	4919.48
(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 1 / 3 1 / 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 <b>C</b> 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 State Zip Code  
Arlington VA 22202

Purpose of Expenditure Category/Type  
Phone Bank 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  
MM / DD / YYYY  
10 / 28 / 2010

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

Full Name (Last, First, Middle, Initial) of Payee  
Connection Strategy, LLC

Mailing Address  
P.O. Box 2192

City State Zip Code  
Arlington VA 22202

Purpose of Expenditure Category/Type  
Phone Bank 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  
MM / DD / YYYY  
10 / 28 / 2010

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

(a) SUBTOTAL of Itemized Independent Expenditures .....	10760.64
(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 MM / DD / YYYY  
01 / 31 / 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 <b>C</b> 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 8 / 2 0 1 0

Mailing Address  
P.O. Box 2192

Amount  
11700.82

City State Zip Code  
Arlington VA 22202

Transaction ID: 37376234

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  
2435162.82

Disbursement For:  Primary  General  
 Other (specify) : \_\_\_\_\_  
2010

Full Name (Last, First, Middle, Initial) of Payee  
Connection Strategy, LLC

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

Mailing Address  
P.O. Box 2192

Amount  
11700.81

City State Zip Code  
Arlington VA 22202

Transaction ID: 37376235

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  
2446863.63

Disbursement For:  Primary  General  
 Other (specify) : \_\_\_\_\_  
2010

(a) SUBTOTAL of Itemized Independent Expenditures .....	23401.63
(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 1 / 3 1 / 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 <b>C</b> 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 8 / 2 0 1 0

Mailing Address  
P.O. Box 2192

Amount  
3839.28

City State Zip Code  
Arlington VA 22202

Transaction ID: 37376236

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  
374390.24

Disbursement For:  Primary  General  
 Other (specify) : \_\_\_\_\_  
2010

Full Name (Last, First, Middle, Initial) of Payee  
Connection Strategy, LLC

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

Mailing Address  
P.O. Box 2192

Amount  
3839.27

City State Zip Code  
Arlington VA 22202

Transaction ID: 37376237

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  
378229.51

Disbursement For:  Primary  General  
 Other (specify) : \_\_\_\_\_  
2010

(a) SUBTOTAL of Itemized Independent Expenditures .....	7678.55
(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 1 / 3 1 / 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 <b>C</b> 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

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Mailing Address  
P.O. Box 2192

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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:  
Ms. Carly Fiorina

---

Calendar Year-To-Date Per Election for Office Sought	478659.65
---	-----------

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

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

Full Name (Last, First, Middle, Initial) of Payee  
Connection Strategy, LLC

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Mailing Address  
P.O. Box 2192

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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:  
Sen. Barbara Boxer

---

Calendar Year-To-Date Per Election for Office Sought	482434.79
---	-----------

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

Amount  
3775.14

**Transaction ID:** 37514179

Office Sought:  House State: CA  
 Senate District: \_\_\_\_\_  
 Presidential

Check One:  Support  Oppose

Disbursement For:  Primary  General  
 Other (specify) : \_\_\_\_\_  
2010

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures .....	7550.29
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures .....	
(c) <b>TOTAL</b> Independent Expenditures .....	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or 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 1 / 3 1 / 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 <b>C</b> 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.

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Mailing Address  
P.O. Box 1467

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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:  
Rep. Daniel Lungren

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

Amount  
48.53

Transaction ID: 37176912

Office Sought:  House State: CA  
 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 48.53

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Full Name (Last, First, Middle, Initial) of Payee  
Master Print, Inc.

---

Mailing Address  
P.O. Box 1467

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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. David Harmer

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

Amount  
785.46

Transaction ID: 37176913

Office Sought:  House State: CA  
 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 80485.46

(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 1 / 3 1 / 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 <b>C</b> 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.

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Mailing Address  
P.O. Box 1467

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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:  
Ms. Carly Fiorina

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

Amount  
833.99

Transaction ID: 37176914

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

Calendar Year-To-Date Per Election  
for Office Sought 240392.36

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Full Name (Last, First, Middle, Initial) of Payee  
Master Print, Inc.

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Mailing Address  
P.O. Box 1467

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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 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

(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 1 / 3 1 / 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	<b>FEC IDENTIFICATION NUMBER</b> ▼ <b>C</b> 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 <div style="border: 1px solid black; padding: 2px; display: inline-block;">004</div>
Name of Federal Candidate supported or Opposed by expenditure: Mr. Joe Heck	
Calendar Year-To-Date Per Election for Office Sought	<div style="border: 1px solid black; padding: 2px; display: inline-block;">82.17</div>

Date	<div style="border: 1px solid black; padding: 2px; display: inline-block;">M M / D D / Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px; display: inline-block;">1 0 / 1 4 / 2 0 1 0</div>
Amount	<div style="border: 1px solid black; padding: 2px; display: inline-block;">82.17</div>
Transaction ID: 37176916	
Office Sought:	<input checked="" type="checkbox"/> House State: <u>NV</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
<b>[MEMO ITEM]</b> 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 <div style="border: 1px solid black; padding: 2px; display: inline-block;">004</div>
Name of Federal Candidate supported or Opposed by expenditure: Ms. Carly Fiorina	
Calendar Year-To-Date Per Election for Office Sought	<div style="border: 1px solid black; padding: 2px; display: inline-block;">249742.44</div>

Date	<div style="border: 1px solid black; padding: 2px; display: inline-block;">M M / D D / Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px; display: inline-block;">1 0 / 1 5 / 2 0 1 0</div>
Amount	<div style="border: 1px solid black; padding: 2px; display: inline-block;">2259.51</div>
Transaction ID: 37179058	
Office Sought:	<input type="checkbox"/> House State: <u>CA</u> <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
<b>[MEMO ITEM]</b> Print 4 Color Cards	

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures .....	0.00
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures .....	
(c) <b>TOTAL</b> Independent Expenditures .....	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or 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 1 / 3 1 / 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 <b>C</b> 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  
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

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

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures .....	0.00
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures .....	
(c) <b>TOTAL</b> Independent Expenditures .....	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or 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 1 / 3 1 / 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 <b>C</b> 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  
Flyers 004

Name of Federal Candidate supported or Opposed by expenditure:  
Mr. Kevin Yoder

Calendar Year-To-Date Per Election for Office Sought 7749.29

Date  
MM / DD / YYYY  
10 / 15 / 2010

Amount  
384.45

Transaction ID: 37179077

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  
Master Print, Inc.

Mailing Address  
P.O. Box 1467

City State Zip Code  
Newington VA 22122

Purpose of Expenditure Category/Type  
Flyers 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  
MM / DD / YYYY  
10 / 15 / 2010

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

(a) SUBTOTAL of Itemized Independent Expenditures .....	1153.38
(b) SUBTOTAL of Unitemized Independent Expenditures .....	
(c) TOTAL Independent Expenditures .....	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or 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  
01 / 31 / 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 <b>C</b> 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.

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Mailing Address  
P.O. Box 1467

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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. 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

Full Name (Last, First, Middle, Initial) of Payee  
Master Print, Inc.

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Mailing Address  
P.O. Box 1467

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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:  
Mr. Steven Driehaus

---

Calendar Year-To-Date Per Election for Office Sought	6286.22
---	---------

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

Amount  
96.12

**Transaction ID:** 37179080

Office Sought:  House State: OH  
 Senate District: 01  
 Presidential

Check One:  Support  Oppose

Disbursement For:  Primary  General  
 Other (specify) : \_\_\_\_\_  
2010

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures .....	192.24
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures .....	
(c) <b>TOTAL</b> Independent Expenditures .....	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or 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 1 / 3 1 / 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	<b>FEC IDENTIFICATION NUMBER</b> ▼ <b>C</b> 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

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City Newington	State VA	Zip Code 22122
Purpose of Expenditure Flyers		Category/ Type <span style="border: 1px solid black; padding: 2px;">004</span>

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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	<span style="border: 1px solid black; padding: 2px;">1183479.68</span>
---	--

Date  

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

Amount  
96.12

**Transaction ID:** 37179081

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.

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Mailing Address  
P.O. Box 1467

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City Newington	State VA	Zip Code 22122
Purpose of Expenditure Flyers		Category/ Type <span style="border: 1px solid black; padding: 2px;">004</span>

---

Name of Federal Candidate supported or Opposed by expenditure:  
Lee Fisher

---

Calendar Year-To-Date Per Election for Office Sought	<span style="border: 1px solid black; padding: 2px;">1183575.80</span>
---	--

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

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures .....	<span style="border: 1px solid black; padding: 2px;">192.24</span>
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures .....	<span style="border: 1px solid black; padding: 2px;"> </span>
(c) <b>TOTAL</b> Independent Expenditures .....	<span style="border: 1px solid black; padding: 2px;"> </span>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or 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 1		3 1		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 <b>C</b> 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.

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Mailing Address  
P.O. Box 1467

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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:  
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

Full Name (Last, First, Middle, Initial) of Payee  
Master Print, Inc.

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Mailing Address  
P.O. Box 1467

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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

(a) SUBTOTAL of Itemized Independent Expenditures .....	615.14
(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 \_\_\_\_\_ Date M M / D D / Y Y Y Y  
Signature 0 1 / 3 1 / 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	<b>FEC IDENTIFICATION NUMBER</b> ▼ <b>C</b> 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.

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Mailing Address  
P.O. Box 1467

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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. 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

Full Name (Last, First, Middle, Initial) of Payee  
Master Print, Inc.

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Mailing Address  
P.O. Box 1467

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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. 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

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures .....	2836.74
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures .....	[Empty Box]
(c) <b>TOTAL</b> Independent Expenditures .....	[Empty Box]

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or 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 1		3 1		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 <b>C</b> 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.

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Mailing Address  
P.O. Box 1467

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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. 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

Full Name (Last, First, Middle, Initial) of Payee  
Master Print, Inc.

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Mailing Address  
P.O. Box 1467

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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

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures .....	466.69
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures .....	
(c) <b>TOTAL</b> Independent Expenditures .....	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or 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 1 / 3 1 / 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 <b>C</b> 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.

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Mailing Address  
P.O. Box 1467

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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:  
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

Full Name (Last, First, Middle, Initial) of Payee  
Master Print, Inc.

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Mailing Address  
P.O. Box 1467

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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. 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

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures .....	840.93
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures .....	
(c) <b>TOTAL</b> Independent Expenditures .....	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or 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 1 / 3 1 / 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 <b>C</b> 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.

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Mailing Address  
P.O. Box 1467

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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:  
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

Full Name (Last, First, Middle, Initial) of Payee  
Master Print, Inc.

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Mailing Address  
P.O. Box 1467

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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. 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

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures .....	13108.55
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures .....	
(c) <b>TOTAL</b> Independent Expenditures .....	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or 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 1 / 3 1 / 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 <b>C</b> 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.

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Mailing Address  
P.O. Box 1467

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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. 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

Full Name (Last, First, Middle, Initial) of Payee  
Master Print, Inc.

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Mailing Address  
P.O. Box 1467

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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:  
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

(a) SUBTOTAL of Itemized Independent Expenditures .....	461.57
(b) SUBTOTAL of Unitemized Independent Expenditures .....	
(c) TOTAL Independent Expenditures .....	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or 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 1 / 3 1 / 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 <b>C</b> 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

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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. 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

Full Name (Last, First, Middle, Initial) of Payee  
Master Print, Inc.

---

Mailing Address  
P.O. Box 1467

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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. 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

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures .....	1523.48
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures .....	
(c) <b>TOTAL</b> Independent Expenditures .....	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or 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 1 / 3 1 / 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 <b>C</b> 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.

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Mailing Address  
P.O. Box 1467

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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 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

Full Name (Last, First, Middle, Initial) of Payee  
Master Print, Inc.

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Mailing Address  
P.O. Box 1467

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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. 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

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures .....	680.10
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures .....	
(c) <b>TOTAL</b> Independent Expenditures .....	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or 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 1 / 3 1 / 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 <b>C</b> 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  
8903.48

City State Zip Code  
Newington VA 22122

Transaction ID: 37179104

Purpose of Expenditure Category/Type  
Print 4 Color Cards 004

Office Sought:  House State: WA  
 Senate District: \_\_\_\_\_  
 Presidential

Name of Federal Candidate supported or Opposed by expenditure:  
Mr. Dino Rossi

Check One:  Support  Oppose

Calendar Year-To-Date Per Election for Office Sought  
585859.75

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 8 / 2 0 1 0

Mailing Address  
P.O. Box 1467

Amount  
10731.13

City State Zip Code  
Newington VA 22122

Transaction ID: 37220449

Purpose of Expenditure Category/Type  
Print 4 Color Cards 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  
1547722.15

Disbursement For:  Primary  General  
 Other (specify) : \_\_\_\_\_  
2010

**[MEMO ITEM]**  
Print 4 Color Cards

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures .....	8903.48
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures .....	_____
(c) <b>TOTAL</b> Independent Expenditures .....	_____

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or 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 1 / 3 1 / 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 <b>C</b> 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.

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Mailing Address  
P.O. Box 1467

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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. David Rivera

---

Calendar Year-To-Date Per Election for Office Sought	1587.68
---	---------

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

Amount  
1587.68

Transaction ID: 37220605

Office Sought:  House State: FL  
 Senate District: 25  
 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.

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Mailing Address  
P.O. Box 1467

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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. Benjamin Lange

---

Calendar Year-To-Date Per Election for Office Sought	37764.06
---	----------

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

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

(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 1 / 3 1 / 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 <b>C</b> 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  
1669.48

City State Zip Code  
Newington VA 22122

Transaction ID: 37220944

Purpose of Expenditure  
Print 4 Color Cards

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  
82374.48

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  
870.42

City State Zip Code  
Newington VA 22122

Transaction ID: 37221474

Purpose of Expenditure  
Print 4 Color Cards

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  
37835.42

Disbursement For:  Primary  General  
 Other (specify) : \_\_\_\_\_  
2010  
**[MEMO ITEM]**  
Print 4 Color Cards

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures .....	0.00
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures .....	
(c) <b>TOTAL</b> Independent Expenditures .....	

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Mary Rose Adkins  
Signature

Date M M / D D / Y Y Y Y  
0 1 / 3 1 / 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 <b>C</b> 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.

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Mailing Address  
P.O. Box 1467

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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. Kevin Yoder

---

Calendar Year-To-Date Per Election for Office Sought	8683.78
---	---------

Date  
10 / 18 / 2010

Amount  
934.49

Transaction ID: 37221687

Office Sought:  House State: KS  
 Senate District: 03  
 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.

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Mailing Address  
P.O. Box 1467

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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. Randolph Altschuler

---

Calendar Year-To-Date Per Election for Office Sought	1082.29
---	---------

Date  
10 / 18 / 2010

Amount  
1082.29

Transaction ID: 37221823

Office Sought:  House State: NY  
 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 .....	

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Mary Rose Adkins  
Signature

Date 01 / 31 / 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 <b>C</b> 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  
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

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

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures .....	0.00
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures .....	
(c) <b>TOTAL</b> Independent Expenditures .....	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or 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 1 / 3 1 / 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 <b>C</b> 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.

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Mailing Address  
P.O. Box 1467

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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:  
Ms. Christine O'Donnell

---

Calendar Year-To-Date Per Election for Office Sought	158732.30
---	-----------

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

Amount  
609.80

Transaction ID: 37224452

Office Sought:  House State: DE  
 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.

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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:  
Sen. Richard M. Burr

---

Calendar Year-To-Date Per Election for Office Sought	15233.45
---	----------

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

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

(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 1 / 3 1 / 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 <b>C</b> 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.

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Mailing Address  
P.O. Box 1467

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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. George Kelly

---

Calendar Year-To-Date Per Election for Office Sought	1262.69
---	---------

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

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

Full Name (Last, First, Middle, Initial) of Payee  
Master Print, Inc.

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Mailing Address  
P.O. Box 1467

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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. 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

(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 1 / 3 1 / 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 <b>C</b> 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:  
Sandy Adams

Calendar Year-To-Date Per Election for Office Sought  
23149.59

Date  
MM / DD / YYYY  
10 / 19 / 2010

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

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  
MM / DD / YYYY  
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

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures .....	0.00
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures .....	
(c) <b>TOTAL</b> Independent Expenditures .....	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or 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  
01 / 31 / 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 <b>C</b> 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  
88.30

City State Zip Code  
Newington VA 22122

Transaction ID: 37263686

Purpose of Expenditure  
Print 4 Color Cards

Category/Type  
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  
731.16

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  
3120.66

City State Zip Code  
Newington VA 22122

Transaction ID: 37263697

Purpose of Expenditure  
Print 4 Color Cards

Category/Type  
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  
3763.52

Disbursement For:  Primary  General  
 Other (specify) : \_\_\_\_\_  
2010  
**[MEMO ITEM]**  
Print 4 Color Cards

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures .....	0.00
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures .....	
(c) <b>TOTAL</b> Independent Expenditures .....	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or 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 1 / 3 1 / 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 <b>C</b> 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. 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

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. 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

(a) SUBTOTAL of Itemized Independent Expenditures .....	<b>0.00</b>
(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 1 / 3 1 / 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 <b>C</b> 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. Edward Martin

Calendar Year-To-Date Per Election for Office Sought  
70204.05

Date  
MM / DD / YYYY  
10 / 19 / 2010

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

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. Lee Terry

Calendar Year-To-Date Per Election for Office Sought  
1218.62

Date  
MM / DD / YYYY  
10 / 19 / 2010

Amount  
575.76

Transaction ID: 37263779

Office Sought:  House State: NE  
 Senate District: 02  
 Presidential

Check One:  Support  Oppose

Disbursement For:  Primary  General  
 Other (specify) : \_\_\_\_\_  
2010

**[MEMO ITEM]**  
Print 4 Color Cards

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures .....	0.00
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures .....	
(c) <b>TOTAL</b> Independent Expenditures .....	

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Mary Rose Adkins  
Signature

Date  
MM / DD / YYYY  
01 / 31 / 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 <b>C</b> 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. Frank Guinta

Calendar Year-To-Date Per Election for Office Sought **7700.39**

Date  
MM / DD / YYYY  
**10 / 19 / 2010**

Amount  
**436.98**

Transaction ID: 37263784

Office Sought:  House State: NH  
 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  
Print 4 Color Cards

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 **15558.02**

Date  
MM / DD / YYYY  
**10 / 19 / 2010**

Amount  
**729.05**

Transaction ID: 37263793

Office Sought:  House State: NH  
 Senate District: 02  
 Presidential

Check One:  Support  Oppose

Disbursement For:  Primary  General  
 Other (specify) : \_\_\_\_\_  
2010

**[MEMO ITEM]**  
Print 4 Color Cards

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures .....	<b>0.00</b>
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures .....	
(c) <b>TOTAL</b> Independent Expenditures .....	

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Mary Rose Adkins  
Signature

Date MM / DD / YYYY  
**01 / 31 / 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 <b>C</b> 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. Francis Becker

Calendar Year-To-Date Per Election for Office Sought  
692.35

Date  
MM / DD / YYYY  
10 / 19 / 2010

Amount  
49.49

Transaction ID: 37263803

Office Sought:  House State: NY  
 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:  
Ms. Nan Hayworth

Calendar Year-To-Date Per Election for Office Sought  
7868.91

Date  
MM / DD / YYYY  
10 / 19 / 2010

Amount  
2076.75

Transaction ID: 37263837

Office Sought:  House State: NY  
 Senate District: 19  
 Presidential

Check One:  Support  Oppose

Disbursement For:  Primary  General  
 Other (specify) : \_\_\_\_\_  
2010

**[MEMO ITEM]**  
Print 4 Color Cards

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures .....	0.00
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures .....	
(c) <b>TOTAL</b> Independent Expenditures .....	

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Mary Rose Adkins  
Signature

Date MM / DD / YYYY  
01 / 31 / 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 <b>C</b> 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.

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Mailing Address  
P.O. Box 1467

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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:  
Rep. Steve Chabot

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

Amount  
34.14

Transaction ID: 37263876

Office Sought:  House State: OH  
 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

6603.70

Full Name (Last, First, Middle, Initial) of Payee  
Master Print, Inc.

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Mailing Address  
P.O. Box 1467

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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. Rob Portman

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

Amount  
91.05

Transaction ID: 37264089

Office Sought:  House State: OH  
 Senate District: \_\_\_\_\_  
 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

1185675.18

(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 1 / 3 1 / 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 <b>C</b> 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  
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

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  
229.00

City State Zip Code  
Newington VA 22122

Transaction ID: 37264299

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  
6823.77

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 1 / 3 1 / 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 <b>C</b> 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.

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Mailing Address  
P.O. Box 1467

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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. Patrick Toomey

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Calendar Year-To-Date Per Election for Office Sought	1951825.84
---	------------

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

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

Full Name (Last, First, Middle, Initial) of Payee  
Master Print, Inc.

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Mailing Address  
P.O. Box 1467

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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

(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 1 / 3 1 / 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 <b>C</b> 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  
623.91

Transaction ID: 37266059

City State Zip Code  
Newington VA 22122

Office Sought:  House State: SC  
 Senate District: 05  
 Presidential

Purpose of Expenditure  
Print 4 Color Cards

Category/Type 004

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  
139235.85

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		1	9		2	0	1	0

Mailing Address  
P.O. Box 1467

Amount  
17.70

Transaction ID: 37266105

City State Zip Code  
Newington VA 22122

Office Sought:  House State: VA  
 Senate District: 11  
 Presidential

Purpose of Expenditure  
Print 4 Color Cards

Category/Type 004

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  
8524.66

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	1		3	1		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 <b>C</b> 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.

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Mailing Address  
P.O. Box 1467

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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. John Boozman

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

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

Calendar Year-To-Date Per Election  
for Office Sought 2713.07

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Full Name (Last, First, Middle, Initial) of Payee  
Master Print, Inc.

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Mailing Address  
P.O. Box 1467

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City Newington	State VA	Zip Code 22122
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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. Daniel Webster

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

Amount  
244.54

Transaction ID: 37314756

Office Sought:  House State: FL  
 Senate District: 08  
 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 887.40

(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 1 / 3 1 / 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 <b>C</b> 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.

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Mailing Address  
P.O. Box 1467

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City Newington	State VA	Zip Code 22122
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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. Dennis Ross

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

Amount  
263.09

Transaction ID: 37314794

Office Sought:  House State: FL  
 Senate District: 12  
 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 905.95

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Full Name (Last, First, Middle, Initial) of Payee  
Master Print, Inc.

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Mailing Address  
P.O. Box 1467

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City Newington	State VA	Zip Code 22122
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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. 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

(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 1 / 3 1 / 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	<b>FEC IDENTIFICATION NUMBER</b> ▼ <b>C</b> 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 <span style="border: 1px solid black; padding: 2px;">004</span>
--	---

Name of Federal Candidate supported or Opposed by expenditure:  
Mr. Jon Runyan

Calendar Year-To-Date Per Election for Office Sought	<span style="border: 1px solid black; padding: 2px;">953.39</span>
---	--

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

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 Graphic Art Design	Category/ Type <span style="border: 1px solid black; padding: 2px;">004</span>
--	---

Name of Federal Candidate supported or Opposed by expenditure:  
Rep. Patrick J. Tiberi

Calendar Year-To-Date Per Election for Office Sought	<span style="border: 1px solid black; padding: 2px;">3832.45</span>
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Date  

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

Amount  
82.65

**Transaction ID:** 37315013

Office Sought:  House State: OH  
 Senate District: 12  
 Presidential

Check One:  Support  Oppose

Disbursement For:  Primary  General  
 Other (specify) : \_\_\_\_\_  
 2010

**[MEMO ITEM]**  
Graphic Art Design

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures .....	<span style="border: 1px solid black; padding: 2px;">0.00</span>
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures .....	<span style="border: 1px solid black; padding: 2px;"> </span>
(c) <b>TOTAL</b> Independent Expenditures .....	<span style="border: 1px solid black; padding: 2px;"> </span>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or 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 1		3 1		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	<b>FEC IDENTIFICATION NUMBER</b> ▼ <b>C</b> 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 <span style="border: 1px solid black; padding: 2px;">004</span>	
Name of Federal Candidate supported or Opposed by expenditure: Mr. Thomas Ganley		

Date <table style="width:100%; border-collapse: collapse;"> <tr> <td style="text-align: center;">M M</td> <td style="text-align: center;">/</td> <td style="text-align: center;">D D</td> <td style="text-align: center;">/</td> <td style="text-align: center;">Y Y Y Y</td> </tr> <tr> <td style="text-align: center;">1 0</td> <td></td> <td style="text-align: center;">2 0</td> <td></td> <td style="text-align: center;">2 0 1 0</td> </tr> </table>	M M	/	D D	/	Y Y Y Y	1 0		2 0		2 0 1 0
M M	/	D D	/	Y Y Y Y						
1 0		2 0		2 0 1 0						
Amount <div style="border: 1px solid black; width: 100%; text-align: right; padding: 2px;">41.66</div>										
<b>Transaction ID:</b> 37315064										
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) : _____										

Calendar Year-To-Date Per Election for Office Sought	<div style="border: 1px solid black; width: 100%; text-align: right; padding: 2px;">6697.99</div>
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**[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 <span style="border: 1px solid black; padding: 2px;">004</span>	
Name of Federal Candidate supported or Opposed by expenditure: Mr. Rob Portman		

Date <table style="width:100%; border-collapse: collapse;"> <tr> <td style="text-align: center;">M M</td> <td style="text-align: center;">/</td> <td style="text-align: center;">D D</td> <td style="text-align: center;">/</td> <td style="text-align: center;">Y Y Y Y</td> </tr> <tr> <td style="text-align: center;">1 0</td> <td></td> <td style="text-align: center;">2 0</td> <td></td> <td style="text-align: center;">2 0 1 0</td> </tr> </table>	M M	/	D D	/	Y Y Y Y	1 0		2 0		2 0 1 0
M M	/	D D	/	Y Y Y Y						
1 0		2 0		2 0 1 0						
Amount <div style="border: 1px solid black; width: 100%; text-align: right; padding: 2px;">124.31</div>										
<b>Transaction ID:</b> 37315135										
Office Sought: <input type="checkbox"/> House State: <u>OH</u> <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) : _____										

Calendar Year-To-Date Per Election for Office Sought	<div style="border: 1px solid black; width: 100%; text-align: right; padding: 2px;">1186499.54</div>
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**[MEMO ITEM]**  
Graphic Art Design

<b>(a) SUBTOTAL</b> of Itemized Independent Expenditures .....	<div style="border: 1px solid black; width: 100%; text-align: right; padding: 2px;">0.00</div>
<b>(b) SUBTOTAL</b> of Unitemized Independent Expenditures .....	<div style="border: 1px solid black; width: 100%; height: 20px;"></div>
<b>(c) TOTAL</b> Independent Expenditures .....	<div style="border: 1px solid black; width: 100%; height: 20px;"></div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Mary Rose Adkins _____ Signature	Date <table style="display: inline-table; border-collapse: collapse;"> <tr> <td style="text-align: center;">M M</td> <td style="text-align: center;">/</td> <td style="text-align: center;">D D</td> <td style="text-align: center;">/</td> <td style="text-align: center;">Y Y Y Y</td> </tr> <tr> <td style="text-align: center;">0 1</td> <td></td> <td style="text-align: center;">3 1</td> <td></td> <td style="text-align: center;">2 0 1 1</td> </tr> </table>	M M	/	D D	/	Y Y Y Y	0 1		3 1		2 0 1 1
M M	/	D D	/	Y Y Y Y							
0 1		3 1		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 <b>C</b> 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  
228.55

City State Zip Code  
Newington VA 22122

**Transaction ID:** 37315196  
Office Sought:  House State: PA  
 Senate District: 06  
 Presidential

Purpose of Expenditure Category/Type  
Graphic Art Design 004

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]**  
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  
215.78

City State Zip Code  
Newington VA 22122

**Transaction ID:** 37315251  
Office Sought:  House State: PA  
 Senate District: 08  
 Presidential

Purpose of Expenditure Category/Type  
Graphic Art Design 004

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

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures .....	0.00
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures .....	
(c) <b>TOTAL</b> Independent Expenditures .....	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or 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 1 / 3 1 / 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 <b>C</b> 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.

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Mailing Address  
P.O. Box 1467

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City Newington	State VA	Zip Code 22122
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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

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

Amount  
444.33

Transaction ID: 37315291

Office Sought:  House State: PA  
 Senate District: \_\_\_\_\_  
 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  
1956327.45

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Full Name (Last, First, Middle, Initial) of Payee  
Master Print, Inc.

---

Mailing Address  
P.O. Box 1467

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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. Daniel Webster

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

Amount  
244.54

Transaction ID: 37331652

Office Sought:  House State: FL  
 Senate District: 08  
 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 M M / D D / Y Y Y Y  
0 1 / 3 1 / 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 <b>C</b> 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. Dennis Ross

Calendar Year-To-Date Per Election for Office Sought 1169.04

Date  
MM / DD / YYYY  
10 / 20 / 2010

Amount  
263.09

Transaction ID: 37331653

Office Sought:  House State: FL  
 Senate District: 12  
 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. Allen West

Calendar Year-To-Date Per Election for Office Sought 885.22

Date  
MM / DD / YYYY  
10 / 20 / 2010

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

(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  
01 / 31 / 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 <b>C</b> 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  
310.53

City State Zip Code  
Newington VA 22122

Transaction ID: 37331655

Purpose of Expenditure  
Print 4 Color Cards

Category/Type 004

Office Sought:  House State: NJ  
 Senate District: 03  
 Presidential

Name of Federal Candidate supported or Opposed by expenditure:  
Mr. Jon Runyan

Check One:  Support  Oppose

Calendar Year-To-Date Per Election for Office Sought  
1263.92

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 0 / 2 0 1 0

Mailing Address  
P.O. Box 1467

Amount  
82.65

City State Zip Code  
Newington VA 22122

Transaction ID: 37331656

Purpose of Expenditure  
Print 4 Color Cards

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  
3915.10

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 1 / 3 1 / 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 <b>C</b> 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  
41.66

City State Zip Code  
Newington VA 22122

Transaction ID: 37331657

Purpose of Expenditure  
Print 4 Color Cards

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  
6739.65

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  
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

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures .....	0.00
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures .....	
(c) <b>TOTAL</b> Independent Expenditures .....	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or 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 1 / 3 1 / 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 <b>C</b> 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. Jim Gerlach

Calendar Year-To-Date Per Election for Office Sought 740.43

Date  
MM / DD / YYYY  
10 / 20 / 2010

Amount  
228.55

Transaction ID: 37331659

Office Sought:  House State: PA  
 Senate District: 06  
 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. Michael Fitzpatrick

Calendar Year-To-Date Per Election for Office Sought 2182.74

Date  
MM / DD / YYYY  
10 / 20 / 2010

Amount  
215.78

Transaction ID: 37331660

Office Sought:  House State: PA  
 Senate District: 08  
 Presidential

Check One:  Support  Oppose

Disbursement For:  Primary  General  
 Other (specify) : \_\_\_\_\_  
2010

**[MEMO ITEM]**  
Print 4 Color Cards

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures .....	0.00
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures .....	
(c) <b>TOTAL</b> Independent Expenditures .....	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or 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  
01 / 31 / 2011



# SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund	<b>FEC IDENTIFICATION NUMBER</b> ▼ <b>C</b> 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
Name of Federal Candidate supported or Opposed by expenditure: Mr. Patrick Toomey	Category/ Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">004</div>
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px; text-align: center;">1956771.78</div>	

Date	<div style="border: 1px solid black; padding: 2px; display: inline-block;">M M / D D / Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px; display: inline-block;">1 0 / 2 0 / 2 0 1 0</div>
Amount	<div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px;">444.33</div>
Transaction ID: 37331661	
Office Sought:	<input type="checkbox"/> House State: PA <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
<b>[MEMO ITEM]</b> 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
Name of Federal Candidate supported or Opposed by expenditure: Mr. Kenneth Buck	Category/ Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">004</div>
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px; text-align: center;">861343.49</div>	

Date	<div style="border: 1px solid black; padding: 2px; display: inline-block;">M M / D D / Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px; display: inline-block;">1 0 / 2 1 / 2 0 1 0</div>
Amount	<div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px;">18908.85</div>
Transaction ID: 37342345	
Office Sought:	<input type="checkbox"/> House State: CO <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
<b>[MEMO ITEM]</b> Print 4 Color Cards	

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures .....	<div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px;">0.00</div>
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures .....	<div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px;"></div>
(c) <b>TOTAL</b> Independent Expenditures .....	<div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px;"></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 1 / 3 1 / 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 <b>C</b> 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 1 / 2 0 1 0

Mailing Address  
P.O. Box 1467

Amount  
671.64

City State Zip Code  
Newington VA 22122

Transaction ID: 37342390

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  
1202.89

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 1 / 2 0 1 0

Mailing Address  
P.O. Box 1467

Amount  
422.82

City State Zip Code  
Newington VA 22122

Transaction ID: 37342391

Purpose of Expenditure  
Print 4 Color Cards

Category/Type 004

Office Sought:  House State: CA  
 Senate District: 18  
 Presidential

Name of Federal Candidate supported or Opposed by expenditure:  
Rep. Dennis A. Cardoza

Check One:  Support  Oppose

Calendar Year-To-Date Per Election for Office Sought  
954.07

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 1 / 3 1 / 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	<b>FEC IDENTIFICATION NUMBER</b> ▼ <b>C</b> 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 <span style="border: 1px solid black; padding: 2px;">004</span>	
Name of Federal Candidate supported or Opposed by expenditure: Ms. Deborah Halvorson		

Date <table style="width:100%; border-collapse: collapse;"> <tr> <td style="text-align: center;">M M</td> <td style="text-align: center;">/</td> <td style="text-align: center;">D D</td> <td style="text-align: center;">/</td> <td style="text-align: center;">Y Y Y Y</td> </tr> <tr> <td style="text-align: center;">1 0</td> <td></td> <td style="text-align: center;">2 1</td> <td></td> <td style="text-align: center;">2 0 1 0</td> </tr> </table>	M M	/	D D	/	Y Y Y Y	1 0		2 1		2 0 1 0
M M	/	D D	/	Y Y Y Y						
1 0		2 1		2 0 1 0						
Amount <div style="border: 1px solid black; width: 100%; text-align: right; padding: 2px;">403.41</div>										
<b>Transaction ID:</b> 37342392										
Office Sought: <input checked="" type="checkbox"/> House State: <u>IL</u> <input type="checkbox"/> Senate District: <u>11</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	<div style="border: 1px solid black; width: 100%; text-align: right; padding: 2px;">934.66</div>
---	--

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 <span style="border: 1px solid black; padding: 2px;">004</span>	
Name of Federal Candidate supported or Opposed by expenditure: Rep. John D. Dingell		

Date <table style="width:100%; border-collapse: collapse;"> <tr> <td style="text-align: center;">M M</td> <td style="text-align: center;">/</td> <td style="text-align: center;">D D</td> <td style="text-align: center;">/</td> <td style="text-align: center;">Y Y Y Y</td> </tr> <tr> <td style="text-align: center;">1 0</td> <td></td> <td style="text-align: center;">2 1</td> <td></td> <td style="text-align: center;">2 0 1 0</td> </tr> </table>	M M	/	D D	/	Y Y Y Y	1 0		2 1		2 0 1 0
M M	/	D D	/	Y Y Y Y						
1 0		2 1		2 0 1 0						
Amount <div style="border: 1px solid black; width: 100%; text-align: right; padding: 2px;">344.23</div>										
<b>Transaction ID:</b> 37342393										
Office Sought: <input checked="" type="checkbox"/> House State: <u>MI</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) : _____										

Calendar Year-To-Date Per Election for Office Sought	<div style="border: 1px solid black; width: 100%; text-align: right; padding: 2px;">875.48</div>
---	--

2010 **[MEMO ITEM]**  
Print 4 Color Cards

<b>(a) SUBTOTAL</b> of Itemized Independent Expenditures .....	<div style="border: 1px solid black; width: 100%; text-align: right; padding: 2px;">0.00</div>
<b>(b) SUBTOTAL</b> of Unitemized Independent Expenditures .....	<div style="border: 1px solid black; width: 100%; height: 20px;"></div>
<b>(c) TOTAL</b> Independent Expenditures .....	<div style="border: 1px solid black; width: 100%; height: 20px;"></div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Mary Rose Adkins _____ Signature	Date <table style="display: inline-table; border-collapse: collapse;"> <tr> <td style="text-align: center;">M M</td> <td style="text-align: center;">/</td> <td style="text-align: center;">D D</td> <td style="text-align: center;">/</td> <td style="text-align: center;">Y Y Y Y</td> </tr> <tr> <td style="text-align: center;">0 1</td> <td></td> <td style="text-align: center;">3 1</td> <td></td> <td style="text-align: center;">2 0 1 1</td> </tr> </table>	M M	/	D D	/	Y Y Y Y	0 1		3 1		2 0 1 1
M M	/	D D	/	Y Y Y Y							
0 1		3 1		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	<b>FEC IDENTIFICATION NUMBER</b> <b>C</b> 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. 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

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

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures .....	0.00
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures .....	
(c) <b>TOTAL</b> Independent Expenditures .....	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or 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  
01 / 31 / 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 <b>C</b> 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.

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Mailing Address  
P.O. Box 1467

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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:  
Rep. Heath Shuler

---

Calendar Year-To-Date Per Election for Office Sought	43038.58
---	----------

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

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

Full Name (Last, First, Middle, Initial) of Payee  
Master Print, Inc.

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Mailing Address  
P.O. Box 1467

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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:  
Rep. Lincoln Davis

---

Calendar Year-To-Date Per Election for Office Sought	1194.60
---	---------

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

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

(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 \_\_\_\_\_ Date M M / D D / Y Y Y Y  
Signature 0 1 / 3 1 / 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 <b>C</b> 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 1 / 2 0 1 0

Mailing Address  
P.O. Box 1467

Amount  
220.89

City State Zip Code  
Newington VA 22122

Transaction ID: 37342398

Purpose of Expenditure  
Print 4 Color Cards

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  
752.14

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  
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

(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 1 / 3 1 / 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 <b>C</b> 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  
911.26

City State Zip Code  
Newington VA 22122

Transaction ID: 37342420  
Office Sought:  House State: MO  
 Senate District: 04  
 Presidential

Purpose of Expenditure  
Print 4 Color Cards

Category/Type  
004

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

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

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures .....	0.00
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures .....	
(c) <b>TOTAL</b> Independent Expenditures .....	

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Mary Rose Adkins  
Signature

Date M M / D D / Y Y Y Y  
0 1 / 3 1 / 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 <b>C</b> 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  
846.19

City State Zip Code  
Newington VA 22122

Transaction ID: 37342423

Purpose of Expenditure  
Print 4 Color Cards

Category/Type 004

Office Sought:  House State: OK  
 Senate District: 02  
 Presidential

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

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

(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 1 / 3 1 / 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 <b>C</b> 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  
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

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: 37342426

Purpose of Expenditure  
Print 4 Color Cards

Category/Type 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  
1442.51

Disbursement For:  Primary  General  
 Other (specify) : \_\_\_\_\_  
2010  
**[MEMO ITEM]**  
Print 4 Color Cards

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures .....	0.00
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures .....	
(c) <b>TOTAL</b> Independent Expenditures .....	

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Mary Rose Adkins  
Signature

Date M M / D D / Y Y Y Y  
0 1 / 3 1 / 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 <b>C</b> 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  
MM / DD / YYYY  
10 / 22 / 2010

Mailing Address  
P.O. Box 1467

Amount  
911.26

City State Zip Code  
Newington VA 22122

Transaction ID: 37342427  
Office Sought:  House State: UT  
 Senate District: 02  
 Presidential

Purpose of Expenditure Category/Type  
Print 4 Color Cards 004

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  
1442.51

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  
MM / DD / YYYY  
10 / 22 / 2010

Mailing Address  
P.O. Box 1467

Amount  
4917.21

City State Zip Code  
Newington VA 22122

Transaction ID: 37342601  
Office Sought:  House State: CT  
 Senate District: \_\_\_\_\_  
 Presidential

Purpose of Expenditure Category/Type  
Print 4 Color Cards 004

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

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures .....	0.00
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures .....	
(c) <b>TOTAL</b> Independent Expenditures .....	

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Mary Rose Adkins  
Signature

Date MM / DD / YYYY  
01 / 31 / 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 <b>C</b> 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  
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

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

(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 1 / 3 1 / 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 <b>C</b> 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  
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

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

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures .....	0.00
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures .....	
(c) <b>TOTAL</b> Independent Expenditures .....	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or 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 1 / 3 1 / 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 <b>C</b> 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.

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Mailing Address  
P.O. Box 1467

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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. Patrick Toomey

---

Calendar Year-To-Date Per Election for Office Sought	1961692.83
---	------------

Date  
10 / 22 / 2010

Amount  
1570.31

**Transaction ID:** 37342606

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

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:  
Sen. Barbara Boxer

---

Calendar Year-To-Date Per Election for Office Sought	295339.91
---	-----------

Date  
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

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures .....	0.00
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures .....	
(c) <b>TOTAL</b> Independent Expenditures .....	

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Mary Rose Adkins  
Signature

Date 01 / 31 / 2011

# SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund	<b>FEC IDENTIFICATION NUMBER</b> ▼ <b>C</b> 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 <span style="border: 1px solid black; padding: 2px;">004</span>
Name of Federal Candidate supported or Opposed by expenditure: Mr. Joseph Sestak	
Calendar Year-To-Date Per Election for Office Sought	<span style="border: 1px solid black; padding: 2px;">2232571.79</span>

Date	<table border="1" style="font-size: small;"> <tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr> <tr><td>1</td><td>0</td><td></td><td>2</td><td>6</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td></tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	0		2	6		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
1	0		2	6		2	0	1	0												
Amount	<span style="border: 1px solid black; padding: 2px;">8328.42</span>																				
Transaction ID: 37357852																					
Office Sought:	<input type="checkbox"/> House State: PA <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> Presidential																				
Check One:	<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose																				
Disbursement For:	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____																				
2010 <b>[MEMO ITEM]</b> 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 <span style="border: 1px solid black; padding: 2px;">004</span>
Name of Federal Candidate supported or Opposed by expenditure: Mr. Patrick Toomey	
Calendar Year-To-Date Per Election for Office Sought	<span style="border: 1px solid black; padding: 2px;">2240900.21</span>

Date	<table border="1" style="font-size: small;"> <tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr> <tr><td>1</td><td>0</td><td></td><td>2</td><td>6</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td></tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	0		2	6		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
1	0		2	6		2	0	1	0												
Amount	<span style="border: 1px solid black; padding: 2px;">8328.42</span>																				
Transaction ID: 37357855																					
Office Sought:	<input type="checkbox"/> House State: PA <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 <b>[MEMO ITEM]</b> Print 4 Color Cards																					

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures .....	<span style="border: 1px solid black; padding: 2px;">0.00</span>
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures .....	<span style="border: 1px solid black; padding: 2px;"> </span>
(c) <b>TOTAL</b> Independent Expenditures .....	<span style="border: 1px solid black; padding: 2px;"> </span>

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Mary Rose Adkins \_\_\_\_\_ Date 

M	M	/	D	D	/	Y	Y	Y	Y
0	1		3	1		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	<b>FEC IDENTIFICATION NUMBER</b> ▼ <b>C</b> 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:  
Rep. Michael Avery Ross

Calendar Year-To-Date Per Election for Office Sought	7298.58
---	---------

Date

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

Amount

671.64
--------

Transaction ID: 37380710

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  
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:  
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

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures .....	1094.46
--	---------

(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures .....	
--	--

(c) <b>TOTAL</b> Independent Expenditures .....	
---	--

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or 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 1		3 1		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 <b>C</b> 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. Allen Boyd

Calendar Year-To-Date Per Election for Office Sought 8706.71

Date  
MM / DD / YYYY  
10 / 30 / 2010

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

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:  
Ms. Deborah Halvorson

Calendar Year-To-Date Per Election for Office Sought 4619.89

Date  
MM / DD / YYYY  
10 / 30 / 2010

Amount  
403.41

Transaction ID: 37380713

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 .....	1225.87
(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 MM / DD / YYYY  
01 / 31 / 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 <b>C</b> 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.

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Mailing Address  
P.O. Box 1467

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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:  
Rep. John D. Dingell

---

Calendar Year-To-Date Per Election for Office Sought	3970.60
---	---------

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

Amount  
344.23

**Transaction ID:** 37380714

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  
Master Print, Inc.

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Mailing Address  
P.O. Box 1467

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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. 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

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures .....	1255.49
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures .....	
(c) <b>TOTAL</b> Independent Expenditures .....	

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Mary Rose Adkins  
Signature

Date M M / D D / Y Y Y Y  
0 1 / 3 1 / 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	<b>FEC IDENTIFICATION NUMBER</b> <b>C</b> 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.

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Mailing Address  
P.O. Box 1467

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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. 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

Full Name (Last, First, Middle, Initial) of Payee  
Master Print, Inc.

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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:  
Rep. Gene Taylor

---

Calendar Year-To-Date Per Election for Office Sought	3498.02
---	---------

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

Amount  
296.29

**Transaction ID:** 37380717

Office Sought:  House State: MS  
 Senate District: 04  
 Presidential

Check One:  Support  Oppose

Disbursement For:  Primary  General  
 Other (specify) : \_\_\_\_\_  
 2010

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures .....	734.70
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures .....	
(c) <b>TOTAL</b> Independent Expenditures .....	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or 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 1 / 3 1 / 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 <b>C</b> 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.

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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:  
Rep. Heath Shuler

---

Calendar Year-To-Date Per Election for Office Sought	44494.10
---	----------

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

Amount  
157.33

**Transaction ID:** 37380718

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  
Master Print, Inc.

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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. 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

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures .....	618.63
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures .....	
(c) <b>TOTAL</b> Independent Expenditures .....	

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Mary Rose Adkins  
Signature

Date M M / D D / Y Y Y Y  
0 1 / 3 1 / 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	<b>FEC IDENTIFICATION NUMBER</b> ▼ <b>C</b> 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

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City Newington	State VA	Zip Code 22122
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Purpose of Expenditure Print 4 Color Cards	Category/ Type <span style="border: 1px solid black; padding: 2px;">004</span>
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Name of Federal Candidate supported or Opposed by expenditure:  
Rep. Daniel Boren

---

Calendar Year-To-Date Per Election for Office Sought	<span style="border: 1px solid black; padding: 2px;">9021.67</span>
---	---

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

Full Name (Last, First, Middle, Initial) of Payee  
Master Print, Inc.

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Mailing Address  
P.O. Box 1467

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City Newington	State VA	Zip Code 22122
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Purpose of Expenditure Print 4 Color Cards	Category/ Type <span style="border: 1px solid black; padding: 2px;">004</span>
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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	<span style="border: 1px solid black; padding: 2px;">10166.14</span>
---	--

Date  

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

Amount  
969.67

**Transaction ID:** 37380721

Office Sought:  House State: PA  
 Senate District: 04  
 Presidential

Check One:  Support  Oppose

Disbursement For:  Primary  General  
 Other (specify) : \_\_\_\_\_  
 2010

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures .....	<span style="border: 1px solid black; padding: 2px;">1815.86</span>
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures .....	<span style="border: 1px solid black; padding: 2px;"> </span>
(c) <b>TOTAL</b> Independent Expenditures .....	<span style="border: 1px solid black; padding: 2px;"> </span>

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Mary Rose Adkins  
Signature

Date 

M M	/	D D	/	Y Y Y Y
0 1		3 1		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 <b>C</b> 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:  
Rep. Tim Holden

---

Calendar Year-To-Date Per Election for Office Sought	9494.53
---	---------

Date  
10 / 30 / 2010

Amount  
899.78

Transaction ID: 37380722

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  
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. Stephanie Herseth Sandlin

---

Calendar Year-To-Date Per Election for Office Sought	9622.96
---	---------

Date  
10 / 30 / 2010

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

(a) SUBTOTAL of Itemized Independent Expenditures .....	1811.04
(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 01 / 31 / 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 <b>C</b> 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. Lincoln Davis

Calendar Year-To-Date Per Election for Office Sought 7203.05

Date  
MM / DD / YYYY  
10 / 30 / 2010

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

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. James D. Matheson

Calendar Year-To-Date Per Election for Office Sought 9616.24

Date  
MM / DD / YYYY  
10 / 30 / 2010

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

(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  
Signature

Date MM / DD / YYYY  
01 / 31 / 2011

# SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund	<b>FEC IDENTIFICATION NUMBER</b> <b>C</b> 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. 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

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. 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

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures .....	5138.23
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures .....	
(c) <b>TOTAL</b> Independent Expenditures .....	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or 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 1 / 3 1 / 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 <b>C</b> 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  
66.98

City State Zip Code  
Newington VA 22122

Transaction ID: 37384430  
Office Sought:  House State: CA  
 Senate District: 47  
 Presidential

Purpose of Expenditure  
Print 4 Color Cards

Category/Type  
004

Name of Federal Candidate supported or Opposed by expenditure:  
Van Tran

Check One:  Support  Oppose

Calendar Year-To-Date Per Election  
for Office Sought 905.32

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  
2633.90

City State Zip Code  
Newington VA 22122

Transaction ID: 37384431  
Office Sought:  House State: NY  
 Senate District: 25  
 Presidential

Purpose of Expenditure  
Print 4 Color Cards

Category/Type  
004

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 25466.58

Disbursement For:  Primary  General  
 Other (specify) : \_\_\_\_\_  
2010

(a) SUBTOTAL of Itemized Independent Expenditures .....	2700.88
(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 1 / 3 1 / 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 <b>C</b> 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.

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Mailing Address  
P.O. Box 1467

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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. 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

Full Name (Last, First, Middle, Initial) of Payee  
Master Print, Inc.

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Mailing Address  
P.O. Box 1467

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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. 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

(a) SUBTOTAL of Itemized Independent Expenditures .....	1731.59
(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 1 / 3 1 / 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 <b>C</b> 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.

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Mailing Address  
P.O. Box 1467

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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. Patrick Toomey

---

Calendar Year-To-Date Per Election for Office Sought	2455264.52
---	------------

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

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. Joseph Sestak

---

Calendar Year-To-Date Per Election for Office Sought	2463594.00
---	------------

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

Amount  
8329.48

Transaction ID: 37392834

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 .....	9899.79
(b) SUBTOTAL of Unitemized Independent Expenditures .....	_____
(c) TOTAL Independent Expenditures .....	_____

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or 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 1 / 3 1 / 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 <b>C</b> 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. Patrick Toomey

---

Calendar Year-To-Date Per Election for Office Sought	2471923.48
---	------------

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

Amount  
8329.48

Transaction ID: 37392835

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  
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:  
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

(a) SUBTOTAL of Itemized Independent Expenditures .....	16625.04
(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 1 / 3 1 / 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 <b>C</b> 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. 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

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

(a) SUBTOTAL of Itemized Independent Expenditures .....	2196.44
(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 1 / 3 1 / 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 <b>C</b> 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. 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

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

(a) SUBTOTAL of Itemized Independent Expenditures .....	3281.60
(b) SUBTOTAL of Unitemized Independent Expenditures .....	_____
(c) TOTAL Independent Expenditures .....	_____

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or 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 1 / 3 1 / 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 <b>C</b> 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. 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

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

(a) SUBTOTAL of Itemized Independent Expenditures .....	2207.48
(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 1 / 3 1 / 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 <b>C</b> 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:  
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

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

(a) SUBTOTAL of Itemized Independent Expenditures .....	2241.57
(b) SUBTOTAL of Unitemized Independent Expenditures .....	
(c) TOTAL Independent Expenditures .....	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or 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 1 / 3 1 / 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	<b>FEC IDENTIFICATION NUMBER</b> ▼ <b>C</b> 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. Patrick Toomey

---

Calendar Year-To-Date Per Election for Office Sought	2423462.00
--	------------

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

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

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures .....	2793.16
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures .....	_____
(c) <b>TOTAL</b> Independent Expenditures .....	_____

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Mary Rose Adkins  
Signature

Date M M / D D / Y Y Y Y  
0 1 / 3 1 / 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 <b>C</b> 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
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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

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. 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

(a) SUBTOTAL of Itemized Independent Expenditures .....	4461.62
(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 1 / 3 1 / 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 <b>C</b> 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. Steve Chabot

Calendar Year-To-Date Per Election for Office Sought  
8472.42

Date  
10 / 27 / 2010

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

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  
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

(a) SUBTOTAL of Itemized Independent Expenditures .....	2250.26
(b) SUBTOTAL of Unitemized Independent Expenditures .....	
(c) TOTAL Independent Expenditures .....	

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Mary Rose Adkins  
Signature

Date 01 / 31 / 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 <b>C</b> 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

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Mailing Address  
11250 Waples Mill Road

---

City Fairfax	State VA	Zip Code 22030
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Purpose of Expenditure Prepay Salary / Benefits	Category/Type 001
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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  
1 0 / 2 7 / 2 0 1 0

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

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
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Purpose of Expenditure Prepay Salary / Benefits	Category/Type 001
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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

(a) SUBTOTAL of Itemized Independent Expenditures .....	4463.87
(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 1 / 3 1 / 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 <b>C</b> 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. 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

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

(a) SUBTOTAL of Itemized Independent Expenditures .....	3285.13
(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 1 / 3 1 / 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 <b>C</b> 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		Date M M / D D / Y Y Y Y 1 0 / 2 7 / 2 0 1 0	
Mailing Address 11250 Waples Mill Road		Amount 2279.18	
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: Rep. Charles F. Bass		Transaction ID: 37362645	
		Office Sought: <input checked="" type="checkbox"/> House State: NH <input type="checkbox"/> Senate District: 02 <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		163397.77	

(a) SUBTOTAL of Itemized Independent Expenditures .....	2279.18
(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 1 / 3 1 / 2 0 1 1