

# 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 (12G)  
Election on \_\_\_\_\_ in the State of \_\_\_\_\_  
(d) 30-Day **Post -Election** Report for the:  
 General (30G)  Runoff (30R)  Special (30S)  
Election on \_\_\_\_\_ in the State of \_\_\_\_\_

5. Covering Period 02 01 2010 through 02 28 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 04 16 2010

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

Office Use Only							
-----------------	--	--	--	--	--	--	--

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

A. Form/Schedule : **F3XA**  
Transaction ID :

This amendment 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
0	2

D	D
0	1

Y	Y	Y	Y
2	0	1	0

 To: 

M	M
0	2

D	D
2	8

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" style="display: inline-table; border-collapse: collapse;"><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 .....	8688818.36									
(c) Total Receipts (from Line 19) .....	874044.03	1199957.75								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	9562862.39	9598644.07								
7. Total Disbursements (from Line 31) .....	134835.47	170617.15								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	9428026.92	9428026.92								
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) .....	0.00									

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**

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name

National Rifle Association of America Political Victory Fund

Report Covering the Period: From: 

M	M
0	2

D	D
0	1

Y	Y	Y	Y
2	0	1	0

 To: 

M	M
0	2

D	D
2	8

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) .....	11391.00	25891.00
(ii) Unitemized .....	860964.39	1170630.61
(iii) TOTAL (add Lines 11(a)(i) and (ii) .....	872355.39	1196521.61
(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) .....	872355.39	1196521.61
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	0.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees .....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.) .....	1688.64	3436.14
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)) .....	874044.03	1199957.75
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	874044.03	1199957.75

**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

<b>II. DISBURSEMENTS</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Calendar Year-to-Date</b>
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.....	3437.79	6900.87
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶	3437.79	6900.87
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	89250.00	96900.00
24. Independent Expenditure (use Schedule E) .....	16422.68	19801.96
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.....	25725.00	47014.32
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))..	134835.47	170617.15
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	134835.47	170617.15

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 02/2003)

6 / 51

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) .....	872355.39	1196521.61
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	872355.39	1196521.61
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	3437.79	6900.87
37. Offsets to Operating Expenditures (from Line 15, page 3) .....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	3437.79	6900.87

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 7 / 51  
(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)  
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 ▼ 3433.76

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

**Transaction ID:** 33907240

Amount of Each Receipt this Period  
1687.32

Interest Income

**B.** 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 ▼ 1.47

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

**Transaction ID:** 33907283

Amount of Each Receipt this Period  
0.68

Interest Income

**C.** 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 ▼ 3434.15

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

**Transaction ID:** 33907284

Amount of Each Receipt this Period  
0.39

Interest Income

**SUBTOTAL** of Receipts This Page (optional) ..... ► **1688.39**

**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 / 51	
	(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

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) BB&T Bank		Date of Receipt
	Mailing Address 11230 Waples Mill Road		<input type="text" value="02"/> / <input type="text" value="26"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	Fairfax	VA	22030
	FEC ID number of contributing federal political committee.		Transaction ID: 33907285
	C		Amount of Each Receipt this Period
Name of Employer		Occupation	<input type="text" value="0.25"/>
Receipt For:		Aggregate Year-to-Date ▼	Interest Income
<input type="checkbox"/> Primary <input type="checkbox"/> General		<input type="text" value="0.52"/>	
<input type="checkbox"/> Other (specify) ▼			

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<input type="text" value="0.25"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text" value="1688.64"/>

**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 9 / 51
	<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

<b>A.</b>	Full Name (Last, First, Middle Initial) R W MCKINNEY		Date of Receipt MM / DD / YYYY 02 / 22 / 2010		
	Mailing Address 1771 COUNTY ROAD 1725		<b>Transaction ID:</b> 33909683		
	City CAIRO	State MO	Zip Code 65239-2450	Amount of Each Receipt this Period 600.00	
	FEC ID number of contributing federal political committee. <b>C</b>		Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
Name of Employer		Occupation		Aggregate Year-to-Date ▼ 600.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) PELHAM E ADAMS		Date of Receipt MM / DD / YYYY 02 / 24 / 2010		
	Mailing Address 8225 SOUTH BENNETT DR		<b>Transaction ID:</b> 33910410		
	City COLUMBIA	State MO	Zip Code 65201-9549	Amount of Each Receipt this Period 250.00	
	FEC ID number of contributing federal political committee. <b>C</b>		Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
Name of Employer		Occupation RETIRED		Aggregate Year-to-Date ▼ 250.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) MRS LOIS H LAZARO		Date of Receipt MM / DD / YYYY 02 / 05 / 2010		
	Mailing Address 6040 RIVER CHASE CIR NW		<b>Transaction ID:</b> 33910583		
	City ATLANTA	State GA	Zip Code 30328-3561	Amount of Each Receipt this Period 500.00	
	FEC ID number of contributing federal political committee. <b>C</b>		Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
Name of Employer		Occupation		Aggregate Year-to-Date ▼ 500.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	1350.00
<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 10 / 51  
(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 JAMES H BOEDER

Mailing Address 924 N MELBORN ST

City DEARBORN State MI Zip Code 48128-1783

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

Name of Employer Occupation  
RETIREED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
MM / DD / YYYY  
02 / 16 / 2010

**Transaction ID:** 33910606

Amount of Each Receipt this Period  
300.00

**B.** Full Name (Last, First, Middle Initial)  
MR STEVE NICHOLAS

Mailing Address 2319 QUINCE AVE

City PRESCOTT State IA Zip Code 50859-8104

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

Name of Employer Occupation  
SELF-EMPLOYED FARMER/BANKER

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
MM / DD / YYYY  
02 / 25 / 2010

**Transaction ID:** 33910991

Amount of Each Receipt this Period  
250.00

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

Mailing Address 61 SOUTHERN OAK DR

City CAMDEN State SC Zip Code 29020-7691

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

Name of Employer Occupation  
GOLF AGRONOMICS SOIL PRODUCTS MANAGER

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
MM / DD / YYYY  
02 / 19 / 2010

**Transaction ID:** 33911329

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 11 / 51  
(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 FRANK E LAMBRECHT

Mailing Address 634 NE 7TH AVE

City State Zip Code  
BOYNTON BEACH FL 33435-3907

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  
02 / 16 / 2010

**Transaction ID:** 33913246

Amount of Each Receipt this Period  
250.00

**B.**

Full Name (Last, First, Middle Initial)  
MR DAVID Y ROGERS

Mailing Address PO BOX 50368

City State Zip Code  
MIDLAND TX 79710-0368

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

Name of Employer Occupation  
SELF EMPLOYED LANDMAN / OIL PRODUCER

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

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

**Transaction ID:** 33917577

Amount of Each Receipt this Period  
250.00

**C.**

Full Name (Last, First, Middle Initial)  
MR BILLY FOLMAR

Mailing Address 4038 FM 2088

City State Zip Code  
QUITMAN TX 75783-5800

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

Name of Employer Occupation  
SELF-EMPLOYED ACCOUNTING CONSULTANT

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
MM / DD / YYYY  
02 / 24 / 2010

**Transaction ID:** 33918939

Amount of Each Receipt this Period  
500.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **1000.00**

**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 / 51  
(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 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 ▼ 500.00

Date of Receipt  
MM / DD / YYYY  
02 / 18 / 2010

**Transaction ID: 33919271**

Amount of Each Receipt this Period  
500.00

**B.** Full Name (Last, First, Middle Initial)  
MR ROBERT S KELLER

Mailing Address 6898 BELL CT

City State Zip Code  
REX GA 30273-2482

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 ▼ 201.00

Date of Receipt  
MM / DD / YYYY  
02 / 25 / 2010

**Transaction ID: 33919367**

Amount of Each Receipt this Period  
201.00

**C.** Full Name (Last, First, Middle Initial)  
MR DENNIS P CROWELL

Mailing Address 72 SPEARS CORNER RD

City State Zip Code  
WEST GARDINER ME 04345-3508

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

Name of Employer Occupation  
BLUE MARBLE GEOGRAPHICS SOFTWARE MANAGER

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
MM / DD / YYYY  
02 / 16 / 2010

**Transaction ID: 33919644**

Amount of Each Receipt this Period  
300.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **1001.00**

**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 / 51  
(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 RICHARD L CARTY

Mailing Address PO BOX 3725

City SALEM State OR Zip Code 97302-0725

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

Name of Employer Occupation  
RETIRED ENGINEER

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 201.00

Date of Receipt: 02 / 16 / 2010  
Transaction ID: 33921438  
Amount of Each Receipt this Period: 150.00

**B.** Full Name (Last, First, Middle Initial)  
P L LEEWRIGHT

Mailing Address HC 1 BOX 45

City BORGER State TX Zip Code 79007-9706

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

Name of Employer Occupation  
RETIRED

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 260.00

Date of Receipt: 02 / 23 / 2010  
Transaction ID: 33921654  
Amount of Each Receipt this Period: 80.00

**C.** Full Name (Last, First, Middle Initial)  
MR WILLIAM P HOLMES

Mailing Address PO BOX 407

City MOUNTAIN RANCH State CA Zip Code 95246-0407

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

Name of Employer Occupation  
OAKLAND POLICE DEPARTMENT SERGEANT

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt: 02 / 16 / 2010  
Transaction ID: 33922946  
Amount of Each Receipt this Period: 300.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 530.00

**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 / 51  
(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 ROBERT E BROOKER

Mailing Address 175 SCHOOL ST

City State Zip Code  
MANCHESTER MA 01944-1236

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

Name of Employer Occupation  
RETIREED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  
MM / DD / YYYY  
02 / 22 / 2010

**Transaction ID:** 33926164

Amount of Each Receipt this Period  
1000.00

**B.**

Full Name (Last, First, Middle Initial)  
MR JAMES L TERRY

Mailing Address 2250 MILL RUN DR

City State Zip Code  
BIRMINGHAM AL 35226-1836

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

Name of Employer Occupation  
EVAN TERRY ASSOCIATES, P.-C. ARCHITECT

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
MM / DD / YYYY  
02 / 22 / 2010

**Transaction ID:** 33927217

Amount of Each Receipt this Period  
500.00

**C.**

Full Name (Last, First, Middle Initial)  
MR ARLAN A HESSE

Mailing Address 1716 COUNTY ROAD 69

City State Zip Code  
PROCTORVILLE OH 45669-8950

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

Name of Employer Occupation  
INCO ALLOYS INTERNATIONAL RETIRED - METALLURGIST

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1500.00

Date of Receipt  
MM / DD / YYYY  
02 / 24 / 2010

**Transaction ID:** 33928870

Amount of Each Receipt this Period  
1000.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **2500.00**

**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 / 51

(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 PATRICK J DOBBINS

Mailing Address 4111 LOMA AVE

City

ROSEMEAD

State

CA

Zip Code

91770-4421

FEC ID number of contributing federal political committee.

C

Name of Employer

Occupation

COLLEGE STUDENT

Receipt For:

Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

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

Transaction ID: 33928942

Amount of Each Receipt this Period

20.00

**B.**

Full Name (Last, First, Middle Initial)

MR FRANK MACIOLEK

Mailing Address 405 E DAVIS ST

City

FULDA

State

MN

Zip Code

56131-1140

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  
0 2 / 1 9 / 2 0 1 0

Transaction ID: 33929018

Amount of Each Receipt this Period

400.00

**C.**

Full Name (Last, First, Middle Initial)

MR PATRICK A TOOMAN

Mailing Address 3641 MANN RD

City

CLARKSTON

State

MI

Zip Code

48346-4038

FEC ID number of contributing federal political committee.

C

Name of Employer  
PLASTIC ENG & TECH SERVICES

Occupation

OWNER

Receipt For:

Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

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

Transaction ID: 33930327

Amount of Each Receipt this Period

500.00

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

920.00

**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 / 51  
(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 TIM LANGDON

Mailing Address 2804 DRY BRANCH DR

City HARRISON State AR Zip Code 72601-9717

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

Name of Employer: GULF INTRACOASTAL CONSTRUCTORS Occupation: EQUIPMENT MANAGER

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 325.00

Date of Receipt: 02 / 25 / 2010

Transaction ID: 33931032

Amount of Each Receipt this Period: 75.00

**B.** Full Name (Last, First, Middle Initial)  
MR OLIVER BURROWS

Mailing Address 2400 MARTINGAIL DR

City COVINA State CA Zip Code 91724-3810

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: 02 / 16 / 2010

Transaction ID: 33932730

Amount of Each Receipt this Period: 250.00

**C.** Full Name (Last, First, Middle Initial)  
MR WALTER MAXIMUCK

Mailing Address 29 KINGWOOD STOCKTON RD

City STOCKTON State NJ Zip Code 08559-1706

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

Name of Employer: Occupation: RETIRED

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt: 02 / 16 / 2010

Transaction ID: 33932763

Amount of Each Receipt this Period: 1000.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 1325.00

**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 / 51  
(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 WALLACE I PUTKOWSKI, II

Mailing Address 531 SENECA RD # 1

City State Zip Code  
LEHIGHTON PA 18235-9798

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  
0 2 / 1 9 / 2 0 1 0

**Transaction ID:** 33934046

Amount of Each Receipt this Period  
100.00

**B.** Full Name (Last, First, Middle Initial)  
MR DARRELL AULDS

Mailing Address 29 SPARTINA POINT DR

City State Zip Code  
HILTON HEAD ISLAND SC 29926-1076

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

Name of Employer Occupation  
NDA & ASSOCIATES, LLC OWNER / CONSULTANT

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1100.00

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

**Transaction ID:** 33935117

Amount of Each Receipt this Period  
100.00

**C.** Full Name (Last, First, Middle Initial)  
MR GARY GUYON

Mailing Address 631 SCOTT DRIVE

City State Zip Code  
PAYSON AZ 85541-9740

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

Name of Employer Occupation  
RETIRED

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

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

**Transaction ID:** 33936088

Amount of Each Receipt this Period  
100.00

**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 19 / 51  
(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 GREG T NAYLOR

Mailing Address PO BOX 1023

City State Zip Code  
LAKE ARROWHEAD CA 92352-1023

FEC ID number of contributing federal political committee. C

Name of Employer Occupation  
RETIRED

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt M M / D D / Y Y Y Y  
02 / 16 / 2010

**Transaction ID:** 33936456

Amount of Each Receipt this Period 250.00

**B.** Full Name (Last, First, Middle Initial)  
NATHAN BLALOCK, III

Mailing Address PO BOX 1308

City State Zip Code  
SKAGWAY AK 99840-1308

FEC ID number of contributing federal political committee. C

Name of Employer Occupation  
US CUSTOMS & BORDER PATROL ENFORCEMENT OFFICER

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 450.00

Date of Receipt M M / D D / Y Y Y Y  
02 / 12 / 2010

**Transaction ID:** 33936546

Amount of Each Receipt this Period 200.00

**C.** Full Name (Last, First, Middle Initial)  
MR W HAROLD BORING

Mailing Address 2164 LAKE FRANCIS RD NE

City State Zip Code  
DALTON GA 30721-7603

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  
02 / 22 / 2010

**Transaction ID:** 33939273

Amount of Each Receipt this Period 300.00

**SUBTOTAL** of Receipts This Page (optional) ..... 750.00

**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 20 / 51
	<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

<b>A.</b>	Full Name (Last, First, Middle Initial) MR ROBERT ULRICH	Date of Receipt MM / DD / YYYY 02 / 22 / 2010
	Mailing Address 10 SUMMERFIELD CT	<b>Transaction ID:</b> 33939549
	City State Zip Code DEER PARK NY 11729-5614	Amount of Each Receipt this Period 100.00
	FEC ID number of contributing federal political committee. <b>C</b>	
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>B.</b>	Full Name (Last, First, Middle Initial) MR PAUL CREEGAN	Date of Receipt MM / DD / YYYY 02 / 23 / 2010
	Mailing Address 176 E 81ST ST	<b>Transaction ID:</b> 33939869
	City State Zip Code NEW YORK NY 10028-1865	Amount of Each Receipt this Period 50.00
	FEC ID number of contributing federal political committee. <b>C</b>	
Name of Employer CON EDISON	Occupation MECHANIC	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) MR DOUGLAS TOULOUSE	Date of Receipt MM / DD / YYYY 02 / 16 / 2010
	Mailing Address 7703 BAUGHMAN DR	<b>Transaction ID:</b> 33944421
	City State Zip Code AMARILLO TX 79121-1702	Amount of Each Receipt this Period 365.00
	FEC ID number of contributing federal political committee. <b>C</b>	
Name of Employer LONESTAR ANESTHESIA CONSULTANT	Occupation CERTIFIED R.N. ANESTHETIST	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 365.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>515.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	<b>11391.00</b>

**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

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) Boozman For Congress	Transaction ID: 33358547 Date of Disbursement 02 / 02 / 2010
	Mailing Address PO Box 671	Amount of Each Disbursement this Period 3950.00
	City Rogers State AR Zip Code 72757	
	Purpose of Disbursement	011 Category/ Type
	Candidate Name Rep. John N. Boozman	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: AR District: 03	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Brady For Congress	Transaction ID: 33716437 Date of Disbursement 02 / 25 / 2010
	Mailing Address P.O. Box 8277	Amount of Each Disbursement this Period 1000.00
	City The Woodlands State TX Zip Code 77387	
	Purpose of Disbursement	011 Category/ Type
	Candidate Name Rep. Kevin Patrick Brady	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: TX District: 08	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Kay Granger Campaign Fund	Transaction ID: 33717285 Date of Disbursement 02 / 25 / 2010
	Mailing Address 715 Jones Street, Suite 101	Amount of Each Disbursement this Period 2450.00
	City Fort Worth State TX Zip Code 76102	
	Purpose of Disbursement	011 Category/ Type
	Candidate Name Rep. Kay Granger	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: TX District: 12	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	7400.00
<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

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) Chet Edwards For Congress	Transaction ID: 33717341 Date of Disbursement
	Mailing Address PO Box 23273	<input type="text" value="02"/> <input type="text" value="25"/> / <input type="text" value="20"/> <input type="text" value="10"/>
	City Waco State TX Zip Code 76702	Amount of Each Disbursement this Period
	Purpose of Disbursement	<input type="text" value="1000.00"/>
	Candidate Name Rep. Chet Edwards	<input type="text" value="011"/> Category/Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: TX District: 17	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) PETE PAC	Transaction ID: 33720303 Date of Disbursement
	Mailing Address People for Enterprise Trade & Econ 7804 Evening Lane	<input type="text" value="02"/> <input type="text" value="25"/> / <input type="text" value="20"/> <input type="text" value="10"/>
	City Alexandria State VA Zip Code 22306	Amount of Each Disbursement this Period
	Purpose of Disbursement	<input type="text" value="4950.00"/>
	Candidate Name PETE PAC	<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) Griffith For Congress	Transaction ID: 33720304 Date of Disbursement
	Mailing Address Post Office Box 2916	<input type="text" value="02"/> <input type="text" value="25"/> / <input type="text" value="20"/> <input type="text" value="10"/>
	City Huntsville State AL Zip Code 35804	Amount of Each Disbursement this Period
	Purpose of Disbursement	<input type="text" value="1000.00"/>
	Candidate Name Rep. Parker Griffith, MD	<input type="text" value="011"/> Category/Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: AL District: 05	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<input type="text" value="6950.00"/>
<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

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) Committee To Re-Elect Trent Franks To Congress	Transaction ID: 33720305 Date of Disbursement
	Mailing Address 12416 N. 57th Drive	<input type="text" value="02"/> / <input type="text" value="25"/> / <input type="text" value="2010"/>
	City Glendale State AZ Zip Code 85304	Amount of Each Disbursement this Period
	Purpose of Disbursement	<input type="text" value="1000.00"/>
	Candidate Name Rep. Trent Franks	<input type="text" value="011"/> Category/ Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: AZ District: 02	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Mike Ross For Congress Committee	Transaction ID: 33720306 Date of Disbursement
	Mailing Address PO Box 360	<input type="text" value="02"/> / <input type="text" value="25"/> / <input type="text" value="2010"/>
	City Prescott State AR Zip Code 71857	Amount of Each Disbursement this Period
	Purpose of Disbursement	<input type="text" value="1000.00"/>
	Candidate Name Rep. Michael Avery Ross	<input type="text" value="011"/> Category/ Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: AR District: 04	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Friends Of Joe Baca	Transaction ID: 33720307 Date of Disbursement
	Mailing Address 555 Capitol Mall Suite 1425	<input type="text" value="02"/> / <input type="text" value="25"/> / <input type="text" value="2010"/>
	City Sacramento State CA Zip Code 95814	Amount of Each Disbursement this Period
	Purpose of Disbursement	<input type="text" value="1000.00"/>
	Candidate Name Rep. Joseph Baca	<input type="text" value="011"/> Category/ Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CA District: 43	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="3000.00"/>
<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

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

<p><b>A.</b> Full Name (Last, First, Middle Initial) John Salazar For Congress</p> <p>Mailing Address PO Box 534</p> <p>City Pueblo State CO Zip Code 81002</p> <p>Purpose of Disbursement <span style="float: right; border: 1px solid black; padding: 2px;">011</span> Category/Type</p> <p>Candidate Name Mr. John Salazar</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input 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: 03</p>	<p><b>Transaction ID:</b> 33720308 <b>Date of Disbursement:</b>  <table border="1" style="width: 100%; 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>0</td><td>2</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> </p> <p>Amount of Each Disbursement this Period  <table border="1" style="width: 100%; text-align: center;"> <tr> <td>1000.00</td> </tr> </table> </p>	M	M	/	D	D	/	Y	Y	Y	Y	0	2		2	5		2	0	1	0	1000.00
M	M	/	D	D	/	Y	Y	Y	Y													
0	2		2	5		2	0	1	0													
1000.00																						
<p><b>B.</b> Full Name (Last, First, Middle Initial) Simpson For Congress</p> <p>Mailing Address 1487 Parkway Drive</p> <p>City Blackfoot State ID Zip Code 83221</p> <p>Purpose of Disbursement <span style="float: right; border: 1px solid black; padding: 2px;">011</span> Category/Type</p> <p>Candidate Name Rep. Michael K. Simpson</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input 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: ID District: 02</p>	<p><b>Transaction ID:</b> 33720310 <b>Date of Disbursement:</b>  <table border="1" style="width: 100%; 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>0</td><td>2</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> </p> <p>Amount of Each Disbursement this Period  <table border="1" style="width: 100%; text-align: center;"> <tr> <td>1000.00</td> </tr> </table> </p>	M	M	/	D	D	/	Y	Y	Y	Y	0	2		2	5		2	0	1	0	1000.00
M	M	/	D	D	/	Y	Y	Y	Y													
0	2		2	5		2	0	1	0													
1000.00																						
<p><b>C.</b> Full Name (Last, First, Middle Initial) Donald A. Manzullo For Congress</p> <p>Mailing Address PO Box 7783</p> <p>City Rockford State IL Zip Code 61126</p> <p>Purpose of Disbursement <span style="float: right; border: 1px solid black; padding: 2px;">011</span> Category/Type</p> <p>Candidate Name Rep. Donald A. Manzullo</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: IL District: 16</p>	<p><b>Transaction ID:</b> 33720311 <b>Date of Disbursement:</b>  <table border="1" style="width: 100%; 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>0</td><td>2</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> </p> <p>Amount of Each Disbursement this Period  <table border="1" style="width: 100%; text-align: center;"> <tr> <td>1500.00</td> </tr> </table> </p>	M	M	/	D	D	/	Y	Y	Y	Y	0	2		2	5		2	0	1	0	1500.00
M	M	/	D	D	/	Y	Y	Y	Y													
0	2		2	5		2	0	1	0													
1500.00																						

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

**3500.00**

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

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

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

FOR LINE NUMBER: (check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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

<p><b>A.</b> Full Name (Last, First, Middle Initial) Souder For Congress Inc.</p> <p>Mailing Address P.O. Box 40233</p> <p>City Fort Wayne State IN Zip Code 46804</p> <p>Purpose of Disbursement <span style="float: right; border: 1px solid black; padding: 2px;">011</span> Category/Type</p> <p>Candidate Name Rep. Mark E. Souder</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input 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: IN District: 03</p>	<p><b>Transaction ID:</b> 33720312 <b>Date of Disbursement</b>  <table border="1" style="width: 100%;"> <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>0</td><td>2</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> </p> <p>Amount of Each Disbursement this Period  <table border="1" style="width: 100%;"> <tr> <td style="text-align: center;">1950.00</td> </tr> </table> </p>	M	M	/	D	D	/	Y	Y	Y	Y	0	2	/	2	5	/	2	0	1	0	1950.00
M	M	/	D	D	/	Y	Y	Y	Y													
0	2	/	2	5	/	2	0	1	0													
1950.00																						
<p><b>B.</b> Full Name (Last, First, Middle Initial) Hoosiers For Hill</p> <p>Mailing Address PO Box 1071</p> <p>City Seymour State IN Zip Code 47274</p> <p>Purpose of Disbursement <span style="float: right; border: 1px solid black; padding: 2px;">011</span> Category/Type</p> <p>Candidate Name Rep. Baron Hill</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input 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: IN District: 09</p>	<p><b>Transaction ID:</b> 33720313 <b>Date of Disbursement</b>  <table border="1" style="width: 100%;"> <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>0</td><td>2</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> </p> <p>Amount of Each Disbursement this Period  <table border="1" style="width: 100%;"> <tr> <td style="text-align: center;">1000.00</td> </tr> </table> </p>	M	M	/	D	D	/	Y	Y	Y	Y	0	2	/	2	5	/	2	0	1	0	1000.00
M	M	/	D	D	/	Y	Y	Y	Y													
0	2	/	2	5	/	2	0	1	0													
1000.00																						
<p><b>C.</b> Full Name (Last, First, Middle Initial) Frank Kratovil For Congress</p> <p>Mailing Address 222 Main Sail Drive PO Box 518</p> <p>City Stevensville State MD Zip Code 21666</p> <p>Purpose of Disbursement <span style="float: right; border: 1px solid black; padding: 2px;">011</span> Category/Type</p> <p>Candidate Name Rep. Frank M. Kratovil, Jr.</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input 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: MD District: 01</p>	<p><b>Transaction ID:</b> 33720314 <b>Date of Disbursement</b>  <table border="1" style="width: 100%;"> <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>0</td><td>2</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> </p> <p>Amount of Each Disbursement this Period  <table border="1" style="width: 100%;"> <tr> <td style="text-align: center;">2500.00</td> </tr> </table> </p>	M	M	/	D	D	/	Y	Y	Y	Y	0	2	/	2	5	/	2	0	1	0	2500.00
M	M	/	D	D	/	Y	Y	Y	Y													
0	2	/	2	5	/	2	0	1	0													
2500.00																						

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

**5450.00**

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

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

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

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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) John D. Dingell For Congress	Transaction ID: 33720320 Date of Disbursement 02 / 25 / 2010
	Mailing Address 607 14th Street, Nw Suite 800	Amount of Each Disbursement this Period 2000.00
	City Washington State DC Zip Code 20005	
	Purpose of Disbursement	011 Category/ Type
	Candidate Name Rep. John D. Dingell	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MI District: 15	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Graves For Congress	Transaction ID: 33720323 Date of Disbursement 02 / 25 / 2010
	Mailing Address 2345 Grand, Suite 2400	Amount of Each Disbursement this Period 1500.00
	City Kansas City State MO Zip Code 64108	
	Purpose of Disbursement	011 Category/ Type
	Candidate Name Rep. Samuel B. Graves, Jr.	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MO District: 06	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Lee Terry For Congress	Transaction ID: 33720325 Date of Disbursement 02 / 25 / 2010
	Mailing Address PO Box 540098	Amount of Each Disbursement this Period 450.00
	City Omaha State NE Zip Code 68154	
	Purpose of Disbursement	011 Category/ Type
	Candidate Name Rep. Lee Terry	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NE District: 02	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

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

3950.00

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

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

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

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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) Lee Terry For Congress <hr/> Mailing Address PO Box 540098 <hr/> City Omaha State NE Zip Code 68154 <hr/> Purpose of Disbursement <hr/> Candidate Name Rep. Lee Terry <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NE District: 02 <hr/> Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> 33720331 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 2 / 2 5 / 2 0 1 0
	Amount of Each Disbursement this Period 550.00
	011 Category/ Type
	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>B.</b> Full Name (Last, First, Middle Initial) Heller For Congress <hr/> Mailing Address PO Box 750580 <hr/> City Las Vegas State NV Zip Code 89136 <hr/> Purpose of Disbursement <hr/> Candidate Name Mr. Dean Heller <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NV District: 02 <hr/> Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> 33720333 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 2 / 2 5 / 2 0 1 0
	Amount of Each Disbursement this Period 1000.00
	011 Category/ Type
	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>C.</b> Full Name (Last, First, Middle Initial) Garrett For Congress <hr/> Mailing Address PO Box 905 <hr/> City Newton State NJ Zip Code 07860 <hr/> Purpose of Disbursement <hr/> Candidate Name E Scott Garrett <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NJ District: 05 <hr/> Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> 33720335 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 2 / 2 5 / 2 0 1 0
	Amount of Each Disbursement this Period 1000.00
	011 Category/ Type
	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

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

2550.00

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

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

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

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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) Chris Lee For Congress	Transaction ID: 33720336 Date of Disbursement 02 / 25 / 2010
	Mailing Address PO Box 15395	Amount of Each Disbursement this Period 1000.00
	City Rochester State NY Zip Code 14615	
	Purpose of Disbursement	011 Category/ Type
	Candidate Name Mr. Christopher Lee	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 26	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Coble For Congress	Transaction ID: 33720339 Date of Disbursement 02 / 25 / 2010
	Mailing Address PO Box 1177	Amount of Each Disbursement this Period 1000.00
	City Greensboro State NC Zip Code 27402	
	Purpose of Disbursement	011 Category/ Type
	Candidate Name Rep. Howard Coble	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NC District: 06	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Steve Chabot For Congress	Transaction ID: 33720340 Date of Disbursement 02 / 25 / 2010
	Mailing Address 3030 Harrison Avenue	Amount of Each Disbursement this Period 2000.00
	City Cincinnati State OH Zip Code 45211	
	Purpose of Disbursement	011 Category/ Type
	Candidate Name Rep. Steve Chabot	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: OH District: 01	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	4000.00
<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)

PAGE 29 / 51

<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

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) Jim Jordan For Congress <hr/> Mailing Address 1709 State Route 560 South <hr/> City Urbana State OH Zip Code 43078 <hr/> Purpose of Disbursement <hr/> Candidate Name Mr. James Jordan <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: OH District: 04 <hr/> Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> 33720343 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 2 / 2 5 / 2 0 1 0
	Amount of Each Disbursement this Period 1000.00
	011 Category/ Type
	Full Name (Last, First, Middle Initial) Friends Of John Boehner <hr/> Mailing Address 7908 Cincinnati Dayton Road Suite I <hr/> City West Chester State OH Zip Code 45069 <hr/> Purpose of Disbursement <hr/> Candidate Name Rep. John A. Boehner <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: OH District: 08 <hr/> Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Amount of Each Disbursement this Period 2500.00	
011 Category/ Type	<b>Transaction ID:</b> 33720346 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 2 / 2 5 / 2 0 1 0
Amount of Each Disbursement this Period 1000.00	011 Category/ Type
Full Name (Last, First, Middle Initial) Tiberi For Congress <hr/> Mailing Address 2931 E Dublin Granville Road Suite 190 <hr/> City Columbus State OH Zip Code 43231 <hr/> Purpose of Disbursement <hr/> Candidate Name Rep. Patrick J. Tiberi <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: OH District: 12 <hr/> Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> 33720346 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 2 / 2 5 / 2 0 1 0
Amount of Each Disbursement this Period 1000.00	011 Category/ Type

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

4500.00

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

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

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

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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) Stivers For Congress	Transaction ID: 33720347 Date of Disbursement
	Mailing Address 4679 Winterset Drive	<input type="text" value="02"/> <input type="text" value="25"/> / <input type="text" value="20"/> <input type="text" value="10"/>
	City Columbus State OH Zip Code 43220	Amount of Each Disbursement this Period
	Purpose of Disbursement	<input type="text" value="2000.00"/>
	Candidate Name Mr. Steve Stivers	<input type="text" value="011"/> Category/Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: OH District: 15	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Zack Space For Congress Committee	Transaction ID: 33720349 Date of Disbursement
	Mailing Address 726 Sixteenth Street, NE	<input type="text" value="02"/> <input type="text" value="25"/> / <input type="text" value="20"/> <input type="text" value="10"/>
	City Massillon State OH Zip Code 44646	Amount of Each Disbursement this Period
	Purpose of Disbursement	<input type="text" value="1000.00"/>
	Candidate Name Rep. Zachary T. Space	<input type="text" value="011"/> Category/Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: OH District: 18	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) John Sullivan For Congress Inc	Transaction ID: 33720351 Date of Disbursement
	Mailing Address Post Office Box 470840	<input type="text" value="02"/> <input type="text" value="25"/> / <input type="text" value="20"/> <input type="text" value="10"/>
	City Tulsa State OK Zip Code 74147	Amount of Each Disbursement this Period
	Purpose of Disbursement	<input type="text" value="1000.00"/>
	Candidate Name Rep. John Sullivan	<input type="text" value="011"/> Category/Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: OK District: 01	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<input type="text" value="4000.00"/>
<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

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) Lucas For Congress <hr/> Mailing Address Post Office Box 1726 <hr/> City Oklahoma City State OK Zip Code 73101 <hr/> Purpose of Disbursement <hr/> Candidate Name Rep. Frank D. Lucas <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: OK District: 03 Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 33720352 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 2 5 / 2 0 1 0	
	Amount of Each Disbursement this Period 1000.00	
	011 Category/ Type	
	Full Name (Last, First, Middle Initial) Citizens For Altmire <hr/> Mailing Address P.O. Box 1776 <hr/> City Freedom State PA Zip Code 15042 <hr/> Purpose of Disbursement <hr/> Candidate Name Rep. Jason Altmire <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 04 Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 33720353 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 2 5 / 2 0 1 0
Amount of Each Disbursement this Period 1500.00		
011 Category/ Type	Full Name (Last, First, Middle Initial) Charlie Dent For Congress <hr/> Mailing Address PO Box 442 <hr/> City Allentown State PA Zip Code 18105 <hr/> Purpose of Disbursement <hr/> Candidate Name Mr. Charles Dent <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 15 Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 33720382 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 2 5 / 2 0 1 0
Amount of Each Disbursement this Period 2950.00		
011 Category/ Type		

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	5450.00
<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 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

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) Demint For Senate Committee Inc <hr/> Mailing Address PO Box 12425 <hr/> City Columbia State SC Zip Code 29211 <hr/> Purpose of Disbursement <hr/> Candidate Name Mr. James Demint <hr/> Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: SC District: Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 33720383 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 2 5 / 2 0 1 0
	Amount of Each Disbursement this Period 3000.00
	011 Category/ Type
	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>B.</b> Full Name (Last, First, Middle Initial) Duncan For Congress <hr/> Mailing Address PO Box 2646 <hr/> City Knoxville State TN Zip Code 37901 <hr/> Purpose of Disbursement <hr/> Candidate Name Rep. John J. Duncan, Jr. <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: TN District: 02 Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 33720384 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 2 5 / 2 0 1 0
	Amount of Each Disbursement this Period 1000.00
	011 Category/ Type
	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>C.</b> Full Name (Last, First, Middle Initial) Lincoln Davis For Congress <hr/> Mailing Address PO Box 350 <hr/> City Jamestown State TN Zip Code 38556 <hr/> Purpose of Disbursement <hr/> Candidate Name Rep. Lincoln Davis <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: TN District: 04 Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 33720385 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 2 5 / 2 0 1 0
	Amount of Each Disbursement this Period 1500.00
	011 Category/ Type
	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

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

5500.00

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

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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) Welch For Congress	Transaction ID: 33720387 Date of Disbursement 02 / 25 / 2010
	Mailing Address PO Box 1682	Amount of Each Disbursement this Period 1000.00
	City Burlington State VT Zip Code 05402	
	Purpose of Disbursement	011 Category/Type
	Candidate Name Rep. Peter Welch	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: VT District: 01	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Friends Of Doc Hastings	Transaction ID: 33720389 Date of Disbursement 02 / 25 / 2010
	Mailing Address PO Box 2926	Amount of Each Disbursement this Period 1000.00
	City Pasco State WA Zip Code 99302	
	Purpose of Disbursement	011 Category/Type
	Candidate Name Rep. Richard Hastings	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: WA District: 04	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Keep Nick Rahall In Congress Committee	Transaction ID: 33720390 Date of Disbursement 02 / 25 / 2010
	Mailing Address P O Box 64	Amount of Each Disbursement this Period 1000.00
	City Beckley State WV Zip Code 25802	
	Purpose of Disbursement	011 Category/Type
	Candidate Name Rep. Nick Joe Rahall, II	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: WV District: 03	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	3000.00
<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)

PAGE 34 / 51

<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

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)  
National Republican Senatorial Committee

Mailing Address 425 2nd Street, NE

City Washington State DC Zip Code 20002

Purpose of Disbursement

011  
Category/  
Type

Candidate Name  
National Republican Senatorial Committee

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

State: District:

Transaction ID: 33720392

Date of Disbursement

02 / 25 / 2010

Amount of Each Disbursement this Period

15000.00

B.

Full Name (Last, First, Middle Initial)  
National Republican Congressional Committee

Mailing Address 320 First Street, SE

City Washington State DC Zip Code 20003

Purpose of Disbursement

011  
Category/  
Type

Candidate Name  
National Republican Congressional Committee

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

State: District:

Transaction ID: 33720393

Date of Disbursement

02 / 25 / 2010

Amount of Each Disbursement this Period

15000.00

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

30000.00

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

89250.00

# 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

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) Senate Majority  Mailing Address 420 E. Jefferson Street  City Tallahassee State FL Zip Code 32301  Purpose of Disbursement  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) ▼	<b>Transaction ID:</b> 33359231 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 2 / 0 2 / 2 0 1 0	<b>Amount of Each Disbursement this Period</b> 10000.00
<b>B.</b>	Full Name (Last, First, Middle Initial) Committee to Elect Barbara McGuire  Mailing Address P.O. Box 613  City Kearny State AZ Zip Code 85237  Purpose of Disbursement Void - Committee to Elect Barbara McGuire  Candidate Name AZ Rep. Barbara McGuire  Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: AZ District: 23  Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> 33528204 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 2 / 1 2 / 2 0 1 0	<b>Amount of Each Disbursement this Period</b> -250.00  Void - Committee to Elect Barbara McGuire
<b>C.</b>	Full Name (Last, First, Middle Initial) Betty Brown Campaign  Mailing Address P.O. Box 1477  City Terrell State TX Zip Code 75160  Purpose of Disbursement BETTY BROWN, STATE HOUSE 4th TX  Candidate Name BETTY BROWN  Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: TX District: 04  Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> 33551699 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 2 / 1 6 / 2 0 1 0	<b>Amount of Each Disbursement this Period</b> 500.00  BETTY BROWN, STATE HOUSE 4th TX

**SUBTOTAL** of Disbursements This Page (optional) ..... ► **10250.00**

**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

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) Friends for Fred Brown <hr/> Mailing Address P.O. Box 7214 <hr/> City Bryan State TX Zip Code 77802 <hr/> Purpose of Disbursement Fred Brown, STATE HOUSE 14th TX <hr/> Candidate Name Representa Fred Brown <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: TX District: 14 Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 33551733 Date of Disbursement 02 / 16 / 2010 <hr/> Amount of Each Disbursement this Period 500.00 <hr/> Fred Brown, STATE HOUSE 14th TX
B.	Full Name (Last, First, Middle Initial) Edmund Kuempel Campaign <hr/> Mailing Address 523 E. Donegan #102 <hr/> City Seguin State TX Zip Code 78155 <hr/> Purpose of Disbursement EDMUND KUEMPEL, STATE HOUSE 44th TX <hr/> Candidate Name EDMUND KUEMPEL <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: TX District: 44 Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 33552108 Date of Disbursement 02 / 16 / 2010 <hr/> Amount of Each Disbursement this Period 500.00 <hr/> EDMUND KUEMPEL, STATE HOU- SE 44th TX
C.	Full Name (Last, First, Middle Initial) Rob Orr for State House <hr/> Mailing Address P.O. Box 1781 <hr/> City Burlison State TX Zip Code 76097 <hr/> Purpose of Disbursement Rob Orr, STATE HOUSE 58th TX <hr/> Candidate Name Rob Orr <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: TX District: 58 Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 33552163 Date of Disbursement 02 / 16 / 2010 <hr/> Amount of Each Disbursement this Period 500.00 <hr/> Rob Orr, STATE HOUSE 58th TX

**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

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

<p><b>A.</b> Full Name (Last, First, Middle Initial) Sid Miller Campaign</p> <p>Mailing Address 597 County Road 279</p> <p>City Dublin State TX Zip Code 76446</p> <p>Purpose of Disbursement Sid Miller, STATE HOUSE 59th TX</p> <p>Candidate Name TX Rep. Sid Miller</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: TX District: 59</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> 33552252</p> <p>Date of Disbursement MM / DD / YYYY 02 / 16 / 2010</p> <p>Amount of Each Disbursement this Period 500.00</p> <p>011 Category/ Type</p> <p>Sid Miller, STATE HOUSE 59th TX</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Elect Burt Solomons</p> <p>Mailing Address P.O. Box 117284</p> <p>City Carrollton State TX Zip Code 76446</p> <p>Purpose of Disbursement Burt Solomons, STATE HOUSE 65th TX</p> <p>Candidate Name Representa Burt Solomons</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: TX District: 65</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> 33552697</p> <p>Date of Disbursement MM / DD / YYYY 02 / 16 / 2010</p> <p>Amount of Each Disbursement this Period 500.00</p> <p>011 Category/ Type</p> <p>Burt Solomons, STATE HOUSE 65th TX</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Myra Crownover Campaign</p> <p>Mailing Address P.O. Box 535</p> <p>City Lake Dallas State TX Zip Code 75065</p> <p>Purpose of Disbursement Myra Crownover, STATE HOUSE 64th TX</p> <p>Candidate Name Representa Myra Crownover</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: TX District: 64</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> 33552751</p> <p>Date of Disbursement MM / DD / YYYY 02 / 16 / 2010</p> <p>Amount of Each Disbursement this Period 500.00</p> <p>011 Category/ Type</p> <p>Myra Crownover, STATE HOU- SE 64th TX</p>

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

1500.00

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

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 38 / 51

<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) Friends of Bill Zedler  Mailing Address P.O. Box 175473  City Arlington State TX Zip Code 76003  Purpose of Disbursement Bill Zedler, STATE HOUSE 96th TX Candidate Name TX Rep. Bill Zedler Office Sought: <input checked="" type="checkbox"/> House <input 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: TX District: 96	<b>Transaction ID:</b> 33552783 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 2 / 1 6 / 2 0 1 0	Amount of Each Disbursement this Period 500.00  Bill Zedler, STATE HOUSE 96th TX
<b>B.</b>	Full Name (Last, First, Middle Initial) Todd Smith Campaign  Mailing Address 1608 Airport Freeway, #100  City Bedford State TX Zip Code 76022  Purpose of Disbursement Todd Smith, STATE HOUSE 92nd TX Candidate Name Representa Todd Smith Office Sought: <input checked="" type="checkbox"/> House <input 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: TX District: 92	<b>Transaction ID:</b> 33552904 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 2 / 1 6 / 2 0 1 0	Amount of Each Disbursement this Period 500.00  Todd Smith, STATE HOUSE 92nd TX
<b>C.</b>	Full Name (Last, First, Middle Initial) Truitt for District 98  Mailing Address P.O. Box 886  City Keller State TX Zip Code 76244  Purpose of Disbursement VICKI TRUITT, STATE HOUSE 98th TX Candidate Name VICKI TRUITT Office Sought: <input checked="" type="checkbox"/> House <input 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: TX District: 98	<b>Transaction ID:</b> 33553113 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 2 / 1 6 / 2 0 1 0	Amount of Each Disbursement this Period 500.00  VICKI TRUITT, STATE HOUSE 98th TX

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>1500.00</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)

<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) State Rep. Joe Driver Campaign	Transaction ID: 33553245 Date of Disbursement 02 / 16 / 2010
	Mailing Address 201 S. Glenbrook Drive	Amount of Each Disbursement this Period 500.00
	City Garland State TX Zip Code 75040	
	Purpose of Disbursement JOE DRIVER, STATE HOUSE 113th TX	011 Category/ Type
	Candidate Name JOE DRIVER	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	JOE DRIVER, STATE HOUSE 113th TX
	State: TX District: 13	

B.	Full Name (Last, First, Middle Initial) Rob Eissler for Texas House District 15	Transaction ID: 33553288 Date of Disbursement 02 / 16 / 2010
	Mailing Address 29 Coralvine Court	Amount of Each Disbursement this Period 500.00
	City The Woodlands State TX Zip Code 77380	
	Purpose of Disbursement Rob Eissler, STATE HOUSE 15th TX	011 Category/ Type
	Candidate Name TX Rep. Rob Eissler	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Rob Eissler, STATE HOUSE 15th TX
	State: TX District: 15	

C.	Full Name (Last, First, Middle Initial) Kent County Republican Committee	Transaction ID: 33561467 Date of Disbursement 02 / 17 / 2010
	Mailing Address 736-A North DuPont Highway	Amount of Each Disbursement this Period 1000.00
	City Dover State DE Zip Code 19901	
	Purpose of Disbursement	011 Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	2000.00
<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 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

<p><b>A.</b> Full Name (Last, First, Middle Initial) The Governor Heinman Committee</p> <p>Mailing Address P.O. Box 80296</p> <p>City Lincoln State NE Zip Code 68501</p> <p>Purpose of Disbursement David Heineman, GOVERNOR NE</p> <p>Candidate Name David Heineman</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</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> 33561470 <b>Date of Disbursement</b> 02 / 17 / 2010</p> <p>Amount of Each Disbursement this Period 1000.00</p> <p>011 Category/ Type</p> <p>David Heineman, GOVERNOR NE</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Armando Martinez Campaign</p> <p>Mailing Address P.O. Box 1651</p> <p>City Weslaco State TX Zip Code 78596</p> <p>Purpose of Disbursement Armando Martinez, STATE HOUSE 39th TX</p> <p>Candidate Name TX Rep. Armando Martinez</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: TX District: 39</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> 33644666 <b>Date of Disbursement</b> 02 / 24 / 2010</p> <p>Amount of Each Disbursement this Period 500.00</p> <p>011 Category/ Type</p> <p>Armando Martinez, STATE HOUSE 39th TX</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Texans for John Davis</p> <p>Mailing Address 1 E. Greenway Plaza, Suite 225</p> <p>City Houston State TX Zip Code 77046</p> <p>Purpose of Disbursement John Davis, STATE HOUSE 129th TX</p> <p>Candidate Name Representa John Davis</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: TX District: 29</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> 33644921 <b>Date of Disbursement</b> 02 / 24 / 2010</p> <p>Amount of Each Disbursement this Period 500.00</p> <p>011 Category/ Type</p> <p>John Davis, STATE HOUSE 129th TX</p>

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

2000.00

**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

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) Friends of Tim Seip Committee	Transaction ID: 33645344 Date of Disbursement 02 / 24 / 2010
	Mailing Address 7 Maple Avenue	Amount of Each Disbursement this Period 250.00
	City Pine Grove State PA Zip Code 17963	
	Purpose of Disbursement Tim Seip, STATE HOUSE 125th PA	011 Category/ Type
	Candidate Name PA Rep. Tim Seip	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 25	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		Tim Seip, STATE HOUSE 125th PA

B.	Full Name (Last, First, Middle Initial) Brad Little for Idaho	Transaction ID: 33645674 Date of Disbursement 02 / 24 / 2010
	Mailing Address P.O. Box 2664	Amount of Each Disbursement this Period 50.00
	City Boise State ID Zip Code 83701	
	Purpose of Disbursement Brad Little, GOVERNOR ID	011 Category/ Type
	Candidate Name Brad Little	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		Brad Little, GOVERNOR ID

C.	Full Name (Last, First, Middle Initial) Tom Corbett for Governor	Transaction ID: 33646464 Date of Disbursement 02 / 24 / 2010
	Mailing Address P.O. Box 1145	Amount of Each Disbursement this Period 1000.00
	City Harrisburg State PA Zip Code 17108	
	Purpose of Disbursement Tom Corbett, GOVERNOR PA	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 checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		Tom Corbett, GOVERNOR PA

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	▶	1300.00
<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)

PAGE 42 / 51

<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) Friends of Gordon Fox	Transaction ID: 33647390 Date of Disbursement 02 / 24 / 2010
	Mailing Address P.O. Box 185	Amount of Each Disbursement this Period 600.00
	City Providence State RI Zip Code 02903	
	Purpose of Disbursement Gordon Fox, STATE HOUSE 4th RI	011 Category/ Type
	Candidate Name Gordon Fox	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: RI District: 04	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		Gordon Fox, STATE HOUSE 4th RI

B.	Full Name (Last, First, Middle Initial) Friends of Elaine A. Coderre	Transaction ID: 33647709 Date of Disbursement 02 / 24 / 2010
	Mailing Address 18 Angle Street	Amount of Each Disbursement this Period 200.00
	City Pawtucket State RI Zip Code 02860	
	Purpose of Disbursement Elaine Coderre, STATE HOUSE 78th RI	011 Category/ Type
	Candidate Name Elaine Coderre	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: RI District: 78	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		Elaine Coderre, STATE HOU- SE 78th RI

C.	Full Name (Last, First, Middle Initial) Friends of Ken Carter	Transaction ID: 33647817 Date of Disbursement 02 / 24 / 2010
	Mailing Address P.O. Box 423	Amount of Each Disbursement this Period 200.00
	City North Kingstown State RI Zip Code 02852	
	Purpose of Disbursement Kenneth Carter, STATE HOUSE 31st RI	011 Category/ Type
	Candidate Name Kenneth Carter	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: RI District: 31	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		Kenneth Carter, STATE HOU- SE 31st RI

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	1000.00
<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 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)  
Friends of Brian Newberry

Mailing Address P.O. Box 755

City Slatersville State RI Zip Code 02876

Purpose of Disbursement  
Brian Newberry, STATE HOUSE 48th RI

Candidate Name  
Brian Newberry

011  
Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2010  
 Primary  General  
 Other (specify) ▼

State: RI District: 48

Transaction ID: 33647909  
Date of Disbursement

02 / 24 / 2010

Amount of Each Disbursement this Period

150.00

Brian Newberry, STATE HOUSE 48th RI

B.

Full Name (Last, First, Middle Initial)  
Friends of Helio Melo

Mailing Address P.O. Box 14317

City East Providence State RI Zip Code 02914

Purpose of Disbursement  
Helio Melo, STATE HOUSE 64th RI

Candidate Name  
RI Rep. Helio Melo

011  
Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2010  
 Primary  General  
 Other (specify) ▼

State: RI District: 64

Transaction ID: 33648029  
Date of Disbursement

02 / 24 / 2010

Amount of Each Disbursement this Period

225.00

Helio Melo, STATE HOUSE 64th RI

C.

Full Name (Last, First, Middle Initial)  
Teresa Paiva Weed for Senate Committee

Mailing Address 139 Van Zandt Avenue

City Newport State RI Zip Code 02840

Purpose of Disbursement  
Teresa Paiva - Weed, STATE SENATE 13th RI

Candidate Name  
Teresa Paiva - Weed

011  
Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2010  
 Primary  General  
 Other (specify) ▼

State: RI District:

Transaction ID: 33648855  
Date of Disbursement

02 / 24 / 2010

Amount of Each Disbursement this Period

1000.00

Teresa Paiva - Weed, STATE SENATE 13th RI

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

1375.00

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

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)  
Senator John Tassoni Committee

Mailing Address 33B Waterview Drive

City State Zip Code  
Smithfield RI 02917

Purpose of Disbursement  
John Tassoni, STATE SENATE 22nd RI

Candidate Name  
John Tassoni

011  
Category/  
Type

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

State: RI District:

Transaction ID: 33648982

Date of Disbursement

02 / 24 / 2010

Amount of Each Disbursement this Period

300.00

John Tassoni, STATE SENATE 22nd RI

**B.** Full Name (Last, First, Middle Initial)  
Connors Campaign Committee

Mailing Address 370 Bryant Street

City State Zip Code  
Cumberland RI 02864

Purpose of Disbursement  
DANIEL CONNORS, STATE SENATE 19th RI

Candidate Name  
DANIEL CONNORS

011  
Category/  
Type

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

State: RI District:

Transaction ID: 33649057

Date of Disbursement

02 / 24 / 2010

Amount of Each Disbursement this Period

450.00

DANIEL CONNORS, STATE SENATE 19th RI

**C.** Full Name (Last, First, Middle Initial)  
Friends of Daniel DaPonte

Mailing Address 48 Vine Street

City State Zip Code  
East Providence RI 02914

Purpose of Disbursement  
Daniel DaPonte, STATE SENATE 14th RI

Candidate Name  
Senator Daniel DaPonte

011  
Category/  
Type

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

State: RI District:

Transaction ID: 33649157

Date of Disbursement

02 / 24 / 2010

Amount of Each Disbursement this Period

200.00

Daniel DaPonte, STATE SENATE 14th RI

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

950.00

**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

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) Sosnowski for Senate	Transaction ID: 33649738 Date of Disbursement 02 / 24 / 2010
	Mailing Address P.O. Box 722	Amount of Each Disbursement this Period 200.00
	City West Kingston State RI Zip Code 02892	
	Purpose of Disbursement V. Susan Sosnowski, STATE SENATE 37th RI	011 Category/Type
	Candidate Name Senator V. Susan Sosnowski	
	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) ▼	V. Susan Sosnowski, STATE SENATE 37th RI
	State: RI District:	

B.	Full Name (Last, First, Middle Initial) Committee to Elect Charles Levesque	Transaction ID: 33650200 Date of Disbursement 02 / 24 / 2010
	Mailing Address 81 Freeborn Street	Amount of Each Disbursement this Period 200.00
	City Portsmouth State RI Zip Code 02871	
	Purpose of Disbursement CHARLES LEVESQUE, STATE HOUSE 11th RI	011 Category/Type
	Candidate Name CHARLES LEVESQUE	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	CHARLES LEVESQUE, STATE HOUSE 11th RI
	State: RI District: 11	

C.	Full Name (Last, First, Middle Initial) Friends of Wally Felag	Transaction ID: 33650596 Date of Disbursement 02 / 24 / 2010
	Mailing Address 51 Overhill Road	Amount of Each Disbursement this Period 300.00
	City Warren State RI Zip Code 02885	
	Purpose of Disbursement WALLY FELAG, STATE SENATE 10th RI	011 Category/Type
	Candidate Name WALLY FELAG	
	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) ▼	WALLY FELAG, STATE SENATE 10th RI
	State: RI District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>700.00</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)

<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) Bea Lanzi Campaign Committee <hr/> Mailing Address 70 Scituate Farms Drive <hr/> City Cranston State RI Zip Code 02921 <hr/> Purpose of Disbursement Beatrice Lanzi, STATE HOUSE 26th RI Candidate Name Beatrice Lanzi Office Sought: <input checked="" type="checkbox"/> House <input 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: RI District: 26	<b>Transaction ID:</b> 33650725 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 2 / 2 4 / 2 0 1 0	Amount of Each Disbursement this Period 150.00
<b>B.</b>	Full Name (Last, First, Middle Initial) Van Hollen For Attorney General <hr/> Mailing Address P.O. Box 843 <hr/> City Madison State WI Zip Code 53701 <hr/> Purpose of Disbursement J.B. Van Hollen, ATTORNEY GENERAL WI Candidate Name J.B. Van Hollen Office Sought: <input type="checkbox"/> House <input 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: District:	<b>Transaction ID:</b> 33650906 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 2 / 2 4 / 2 0 1 0	Amount of Each Disbursement this Period 500.00
<b>C.</b>	Full Name (Last, First, Middle Initial) Friends for the Election of Dean G. Skelos <hr/> Mailing Address 31 Roxen Road <hr/> City Rockville Centre State NY Zip Code 11570 <hr/> Purpose of Disbursement Dean Skelos, STATE SENATE 9th NY Candidate Name Dean G Skelos 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: NY District:	<b>Transaction ID:</b> 33651940 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 2 / 2 4 / 2 0 1 0	Amount of Each Disbursement this Period 1000.00

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>1650.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	<b>25725.00</b>

**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

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) BB&T Bank Mailing Address 11230 Waples Mill Road City State Zip Code Fairfax VA 22030 Purpose of Disbursement Bank Fee Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 33907286 Date of Disbursement MM / DD / YYYY 02 / 22 / 2010
	Amount of Each Disbursement this Period 20.00
	Category/ Type 001
	Bank Fee

<b>B.</b> Full Name (Last, First, Middle Initial) Wachovia - Account Analysis Mailing Address P.O. Box 2080 City State Zip Code Jacksonville FL 32231 Purpose of Disbursement Bank Fee Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 33907287 Date of Disbursement MM / DD / YYYY 02 / 09 / 2010
	Amount of Each Disbursement this Period 40.00
	Category/ Type 001
	Bank Fee

<b>C.</b> Full Name (Last, First, Middle Initial) Wachovia - Account Analysis Mailing Address P.O. Box 2080 City State Zip Code Jacksonville FL 32231 Purpose of Disbursement Account Analysis Fees Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 33907288 Date of Disbursement MM / DD / YYYY 02 / 09 / 2010
	Amount of Each Disbursement this Period 7.41
	Category/ Type 001
	Account Analysis Fees

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	67.41
<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 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

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) Wachovia - Account Analysis Mailing Address P.O. Box 2080 City Jacksonville State FL Zip Code 32231 Purpose of Disbursement Account Analysis Fees Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 33907289 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 0 9 / 2 0 1 0
	Amount of Each Disbursement this Period 15.17 Account Analysis Fees

<b>B.</b> Full Name (Last, First, Middle Initial) Bank of America - NY Mailing Address 671 County Route 1 City Pine Island State NY Zip Code 10969 Purpose of Disbursement Account Analysis Fees Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 33907290 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 1 6 / 2 0 1 0
	Amount of Each Disbursement this Period 19.01 Account Analysis Fees

<b>C.</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 Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 33907291 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 0 9 / 2 0 1 0
	Amount of Each Disbursement this Period 652.92 Account Analysis Fees

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	687.10
<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 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

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) Wachovia Bank	Transaction ID: 33907292 Date of Disbursement 02 / 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	001 Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		Credit Card Fees

B.	Full Name (Last, First, Middle Initial) Wachovia Bank	Transaction ID: 33907293 Date of Disbursement 02 / 02 / 2010
	Mailing Address 10501 Main Street	Amount of Each Disbursement this Period 82.67
	City Fairfax State VA Zip Code 22030	
	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

C.	Full Name (Last, First, Middle Initial) American Express Company	Transaction ID: 33907294 Date of Disbursement 02 / 28 / 2010
	Mailing Address P.O. Box 53852	Amount of Each Disbursement this Period 243.04
	City Phoenix State AZ Zip Code 85072	
	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>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>335.71</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 50 / 51

<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

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)

PAYMENTECH, INC.

Mailing Address 4 NORTHEASTERN BLVD

City SALEM State NH Zip Code 03079

Purpose of Disbursement  
Credit Card Fees

Candidate Name

001  
Category/  
Type

Office Sought:  House  
 Senate  
 President

State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Transaction ID: 33907295

Date of Disbursement

02 / 28 / 2010

Amount of Each Disbursement this Period

2347.57

Credit Card Fees

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

2347.57

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

3437.79

**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
----------------------	-------------	------------------------

---

Purpose of Expenditure Postage	Category/ Type 004
-----------------------------------	--------------------------

---

Name of Federal Candidate supported or Opposed by expenditure:  
Mr. Scott Brown

---

Calendar Year-To-Date Per Election for Office Sought	35296.48
---	----------

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

Amount  
15494.52

Transaction ID: 33597746

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

Check One:  Support  Oppose

Disbursement For:  Primary  General  
 Other (specify) : Special-General  
2010

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

---

Mailing Address  
8341 Beechcraft Avenue

---

City Gaithersburg	State MD	Zip Code 20879-1509
----------------------	-------------	------------------------

---

Purpose of Expenditure Postcards	Category/ Type 004
-------------------------------------	--------------------------

---

Name of Federal Candidate supported or Opposed by expenditure:  
Mr. Scott Brown

---

Calendar Year-To-Date Per Election for Office Sought	36224.64
---	----------

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

Amount  
928.16

Transaction ID: 33597749

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

Check One:  Support  Oppose

Disbursement For:  Primary  General  
 Other (specify) : Special-General  
2010

(a) SUBTOTAL of Itemized Independent Expenditures .....	16422.68
(b) SUBTOTAL of Unitemized Independent Expenditures .....	
(c) TOTAL Independent Expenditures .....	16422.68

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Mary Rose Adkins  
Signature

Date M M / D D / Y Y Y Y  
0 4 / 1 6 / 2 0 1 0