

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES

(Schedule E)

PAGE 1 OF 14
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund		FEC IDENTIFICATION NUMBER ▼ C C00053553	
Check if <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report		<input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <div style="display: inline-block; border: 1px solid black; padding: 2px;">M M M / D D D / Y Y Y Y Y Y</div>	

Full Name of Payee I360, LLC		Date of Public Distribution/Dissemination <div style="display: inline-block; border: 1px solid black; padding: 2px;">M M M / D D D / Y Y Y Y Y Y</div> 09 / 24 / 2020	
Mailing Address 29374 NETWORK PLACE		Amount <div style="display: inline-block; border: 1px solid black; padding: 2px;">0.15</div>	
City CHICAGO	State IL	Zip Code 60673-1293	Transaction ID : 82960516
Purpose of Expenditure IE - Phone Banks (see payment on Sch. B)	Category/Type 004	Date of Disbursement or Obligation <div style="display: inline-block; border: 1px solid black; padding: 2px;">M M M / D D D / Y Y Y Y Y Y</div> 09 / 24 / 2020	
Name of Federal Candidate TILLIS, THOM, , ,		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: NC
Calendar Year-To-Date Per Election for Office Sought <div style="display: inline-block; border: 1px solid black; padding: 2px;">0.00</div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ▶ _____	

Full Name of Payee I360, LLC		Date of Public Distribution/Dissemination <div style="display: inline-block; border: 1px solid black; padding: 2px;">M M M / D D D / Y Y Y Y Y Y</div> 09 / 24 / 2020	
Mailing Address 29374 NETWORK PLACE		Amount <div style="display: inline-block; border: 1px solid black; padding: 2px;">0.15</div>	
City CHICAGO	State IL	Zip Code 60673-1293	Transaction ID : 82960509
Purpose of Expenditure IE - Phone Banks (see payment on Sch. B)	Category/Type 004	Date of Disbursement or Obligation <div style="display: inline-block; border: 1px solid black; padding: 2px;">M M M / D D D / Y Y Y Y Y Y</div> 09 / 24 / 2020	
Name of Federal Candidate TRUMP, DONALD, J, ,		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____
Calendar Year-To-Date Per Election for Office Sought <div style="display: inline-block; border: 1px solid black; padding: 2px;">0.00</div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ▶ _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	<div style="display: inline-block; border: 1px solid black; padding: 2px;">0.30</div>
(b) SUBTOTAL of Unitemized Independent Expenditures▶	<div style="display: inline-block; border: 1px solid black; padding: 2px;"></div>
(c) TOTAL Independent Expenditures.....▶	<div style="display: inline-block; border: 1px solid black; padding: 2px;"></div>

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

Owens, G, , Robert,

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NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund		FEC IDENTIFICATION NUMBER ▼ C C00053553	
Check if <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report		<input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name of Payee I360, LLC		Date of Public Distribution/Dissemination MM / DD / YYYY 09 / 24 / 2020	
Mailing Address 29374 NETWORK PLACE		Amount 0.21	
City CHICAGO	State IL	Zip Code 60673-1293	Transaction ID : 82960499
Purpose of Expenditure IE - P2P Texting (see payment on Sch. B)		Category/Type 004	Date of Disbursement or Obligation MM / DD / YYYY 09 / 24 / 2020
Name of Federal Candidate ADKINS, AMANDA, ,		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House District: 03 <input type="checkbox"/> President <input type="checkbox"/> Senate State: KS
Calendar Year-To-Date Per Election for Office Sought 0.00		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ▶	

Full Name of Payee I360, LLC		Date of Public Distribution/Dissemination MM / DD / YYYY 09 / 24 / 2020	
Mailing Address 29374 NETWORK PLACE		Amount 0.24	
City CHICAGO	State IL	Zip Code 60673-1293	Transaction ID : 82960498
Purpose of Expenditure IE - P2P Texting (see payment on Sch. B)		Category/Type 004	Date of Disbursement or Obligation MM / DD / YYYY 09 / 24 / 2020
Name of Federal Candidate IVES, JEANNE, ,		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House District: 06 <input type="checkbox"/> President <input type="checkbox"/> Senate State: IL
Calendar Year-To-Date Per Election for Office Sought 0.00		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ▶	

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	0.45
(b) SUBTOTAL of Unitemized Independent Expenditures▶	
(c) TOTAL Independent Expenditures.....▶	

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NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund		FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00053553 </div>
Check if <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report <input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <div style="display: inline-block; border: 1px solid black; padding: 2px; margin-left: 10px;"> M M M / D D D / Y Y Y Y Y Y </div>		

Full Name of Payee I360, LLC		Date of Public Distribution/Dissemination <div style="display: inline-block; border: 1px solid black; padding: 2px; margin-left: 10px;"> M M M / D D D / Y Y Y Y Y Y 09 / 24 / 2020 </div>	
Mailing Address 29374 NETWORK PLACE		Amount <div style="border: 1px solid black; padding: 2px; width: 100%; text-align: right;">0.39</div>	
City CHICAGO	State IL	Zip Code 60673-1293	Transaction ID : 82960505 Date of Disbursement or Obligation <div style="display: inline-block; border: 1px solid black; padding: 2px; margin-left: 10px;"> M M M / D D D / Y Y Y Y Y Y 09 / 24 / 2020 </div>
Purpose of Expenditure IE - P2P Texting (see payment on Sch. B)	Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">004</div>		
Name of Federal Candidate PERRY, SCOTT, , REP.,		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House District: 10 <input type="checkbox"/> President <input type="checkbox"/> Senate State: PA
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; width: 100%; text-align: right;">0.00</div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ►	

Full Name of Payee I360, LLC		Date of Public Distribution/Dissemination <div style="display: inline-block; border: 1px solid black; padding: 2px; margin-left: 10px;"> M M M / D D D / Y Y Y Y Y Y 09 / 24 / 2020 </div>	
Mailing Address 29374 NETWORK PLACE		Amount <div style="border: 1px solid black; padding: 2px; width: 100%; text-align: right;">1.08</div>	
City CHICAGO	State IL	Zip Code 60673-1293	Transaction ID : 82960500 Date of Disbursement or Obligation <div style="display: inline-block; border: 1px solid black; padding: 2px; margin-left: 10px;"> M M M / D D D / Y Y Y Y Y Y 09 / 24 / 2020 </div>
Purpose of Expenditure IE - P2P Texting (see payment on Sch. B)	Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">004</div>		
Name of Federal Candidate HAGEDORN, JAMES, ,		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House District: 01 <input type="checkbox"/> President <input type="checkbox"/> Senate State: MN
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; width: 100%; text-align: right;">0.00</div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ►	

(a) SUBTOTAL of Itemized Independent Expenditures..... ►	<div style="border: 1px solid black; padding: 2px; width: 100%; text-align: right;">1.47</div>
(b) SUBTOTAL of Unitemized Independent Expenditures ►	<div style="border: 1px solid black; padding: 2px; width: 100%; text-align: right;"> </div>
(c) TOTAL Independent Expenditures..... ►	<div style="border: 1px solid black; padding: 2px; width: 100%; text-align: right;"> </div>

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NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund		FEC IDENTIFICATION NUMBER ▼ C C00053553	
Check if <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report		<input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name of Payee I360, LLC		Date of Public Distribution/Dissemination MM / DD / YYYY 09 / 24 / 2020	
Mailing Address 29374 NETWORK PLACE		Amount 1.35	
City CHICAGO	State IL	Zip Code 60673-1293	Transaction ID : 82960510
Purpose of Expenditure IE - P2P Texting (see payment on Sch. B)		Category/Type 004	Date of Disbursement or Obligation MM / DD / YYYY 09 / 24 / 2020
Name of Federal Candidate MCSALLY, MARTHA, , ,		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: AZ
Calendar Year-To-Date Per Election for Office Sought 0.00		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ▶ _____	

Full Name of Payee I360, LLC		Date of Public Distribution/Dissemination MM / DD / YYYY 09 / 24 / 2020	
Mailing Address 29374 NETWORK PLACE		Amount 1.44	
City CHICAGO	State IL	Zip Code 60673-1293	Transaction ID : 82960511
Purpose of Expenditure IE - P2P Texting (see payment on Sch. B)		Category/Type 004	Date of Disbursement or Obligation MM / DD / YYYY 09 / 24 / 2020
Name of Federal Candidate GARDNER, CORY, , ,		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: CO
Calendar Year-To-Date Per Election for Office Sought 0.00		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ▶ _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	2.79
(b) SUBTOTAL of Unitemized Independent Expenditures.....▶	
(c) TOTAL Independent Expenditures.....▶	

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Check if <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report		<input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name of Payee I360, LLC		Date of Public Distribution/Dissemination MM / DD / YYYY 09 / 24 / 2020	
Mailing Address 29374 NETWORK PLACE		Amount 1.44	
City CHICAGO	State IL	Zip Code 60673-1293	Transaction ID : 82960504
Purpose of Expenditure IE - P2P Texting (see payment on Sch. B)		Category/Type 004	Date of Disbursement or Obligation MM / DD / YYYY 09 / 24 / 2020
Name of Federal Candidate Balderson, William, , ,		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House District: 12 <input type="checkbox"/> President <input type="checkbox"/> Senate State: OH
Calendar Year-To-Date Per Election for Office Sought 0.00		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ▶	

Full Name of Payee I360, LLC		Date of Public Distribution/Dissemination MM / DD / YYYY 09 / 24 / 2020	
Mailing Address 29374 NETWORK PLACE		Amount 2.04	
City CHICAGO	State IL	Zip Code 60673-1293	Transaction ID : 82960502
Purpose of Expenditure IE - P2P Texting (see payment on Sch. B)		Category/Type 004	Date of Disbursement or Obligation MM / DD / YYYY 09 / 24 / 2020
Name of Federal Candidate CHABOT, STEVE, , REP.,		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House District: 01 <input type="checkbox"/> President <input type="checkbox"/> Senate State: OH
Calendar Year-To-Date Per Election for Office Sought 0.00		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ▶	

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	3.48
(b) SUBTOTAL of Unitemized Independent Expenditures▶	
(c) TOTAL Independent Expenditures.....▶	

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NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund		FEC IDENTIFICATION NUMBER ▼ C C00053553
Check if <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report <input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on		MM / DD / YYYY

Full Name of Payee I360, LLC		Date of Public Distribution/Dissemination MM / DD / YYYY 09 / 24 / 2020
Mailing Address 29374 NETWORK PLACE		Amount 148.62
City CHICAGO	State IL	Zip Code 60673-1293
Purpose of Expenditure IE - P2P Texting (see payment on Sch. B)	Category/Type 004	Transaction ID : 82960506 Date of Disbursement or Obligation MM / DD / YYYY 09 / 24 / 2020
Name of Federal Candidate PARNELL, RICHARD, ,		Office Sought: <input checked="" type="checkbox"/> House District: 17 <input type="checkbox"/> President <input type="checkbox"/> Senate State: PA
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ▶

Full Name of Payee The Gathering Room		Date of Public Distribution/Dissemination MM / DD / YYYY 09 / 24 / 2020
Mailing Address 1900 Madison Avenue		Amount 213.67
City Council Bluffs	State IA	Zip Code 51503
Purpose of Expenditure IE - Event Space Rental	Category/Type 004	Transaction ID : 82960490 Date of Disbursement or Obligation MM / DD / YYYY 09 / 24 / 2020
Name of Federal Candidate BIDEN, JOSEPH, R., , JR		Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	362.29
(b) SUBTOTAL of Unitemized Independent Expenditures▶	
(c) TOTAL Independent Expenditures.....▶	

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NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund		FEC IDENTIFICATION NUMBER ▼ C C00053553
Check if <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report		<input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on

Full Name of Payee The Gathering Room		Date of Public Distribution/Dissemination MM / DD / YYYY 09 / 24 / 2020	
Mailing Address 1900 Madison Avenue		Amount 213.67	
City Council Bluffs	State IA	Zip Code 51503	Transaction ID : 82960492
Purpose of Expenditure IE - Event Space Rental		Category/ Type 004	Date of Disbursement or Obligation MM / DD / YYYY 09 / 24 / 2020
Name of Federal Candidate GREENFIELD, THERESA, ,		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: IA
Calendar Year-To-Date Per Election for Office Sought 0.00		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ▶ _____	

Full Name of Payee The Gathering Room		Date of Public Distribution/Dissemination MM / DD / YYYY 09 / 24 / 2020	
Mailing Address 1900 Madison Avenue		Amount 213.67	
City Council Bluffs	State IA	Zip Code 51503	Transaction ID : 82960488
Purpose of Expenditure IE - Event Space Rental		Category/ Type 004	Date of Disbursement or Obligation MM / DD / YYYY 09 / 24 / 2020
Name of Federal Candidate TRUMP, DONALD, J, ,		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____
Calendar Year-To-Date Per Election for Office Sought 0.00		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ▶ _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	427.34
(b) SUBTOTAL of Unitemized Independent Expenditures▶	
(c) TOTAL Independent Expenditures.....▶	

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Full Name of Payee The Gathering Room		Date of Public Distribution/Dissemination MM / DD / YYYY 09 / 24 / 2020
Mailing Address 1900 Madison Avenue		Amount 213.67
City Council Bluffs	State IA	Zip Code 51503
Purpose of Expenditure IE - Event Space Rental	Category/Type 004	Transaction ID : 82960491 Date of Disbursement or Obligation MM / DD / YYYY 09 / 24 / 2020
Name of Federal Candidate ERNST, JONI, ,		Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: IA
Calendar Year-To-Date Per Election for Office Sought 0.00		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ▶ _____

Full Name of Payee GRAND JUNCTION, LLC		Date of Public Distribution/Dissemination MM / DD / YYYY 09 / 24 / 2020
Mailing Address 743 HORIZON DRIVE		Amount 214.88
City GRAND JUNCTION	State CO	Zip Code 81506
Purpose of Expenditure IE - Event Space Rental	Category/Type 004	Transaction ID : 82960472 Date of Disbursement or Obligation MM / DD / YYYY 09 / 24 / 2020
Name of Federal Candidate GARDNER, CORY, ,		Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: CO
Calendar Year-To-Date Per Election for Office Sought 0.00		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ▶ _____

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	428.55
(b) SUBTOTAL of Unitemized Independent Expenditures▶	
(c) TOTAL Independent Expenditures.....▶	

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Check if <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report		<input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name of Payee GRAND JUNCTION, LLC		Date of Public Distribution/Dissemination MM / DD / YYYY 09 / 24 / 2020	
Mailing Address 743 HORIZON DRIVE		Amount 214.88	
City GRAND JUNCTION	State CO	Zip Code 81506	Transaction ID : 82960469
Purpose of Expenditure IE - Event Space Rental		Category/ Type 004	Date of Disbursement or Obligation MM / DD / YYYY 09 / 24 / 2020
Name of Federal Candidate TRUMP, DONALD, J, ,		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ▶ _____	

Full Name of Payee GRAND JUNCTION, LLC		Date of Public Distribution/Dissemination MM / DD / YYYY 09 / 24 / 2020	
Mailing Address 743 HORIZON DRIVE		Amount 214.88	
City GRAND JUNCTION	State CO	Zip Code 81506	Transaction ID : 82960470
Purpose of Expenditure IE - Event Space Rental		Category/ Type 004	Date of Disbursement or Obligation MM / DD / YYYY 09 / 24 / 2020
Name of Federal Candidate BIDEN, JOSEPH, R., , JR		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ▶ _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	429.76
(b) SUBTOTAL of Unitemized Independent Expenditures▶	
(c) TOTAL Independent Expenditures.....▶	

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Check if <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report <input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on		

Full Name of Payee GRAND JUNCTION, LLC		Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between;"> <div>MM / DD / YYYY 09 / 24 / 2020</div> </div>	
Mailing Address 743 HORIZON DRIVE		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">214.88</div>	
City GRAND JUNCTION	State CO	Zip Code 81506	Transaction ID : 82960471 Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between;"> <div>MM / DD / YYYY 09 / 24 / 2020</div> </div>
Purpose of Expenditure IE - Event Space Rental		Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">004</div>	
Name of Federal Candidate HICKENLOOPER, JOHN, ,		<div style="display: flex; justify-content: space-between;"> <div> <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose </div> <div> Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: CO </div> </div>	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ►	

Full Name of Payee I360, LLC		Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between;"> <div>MM / DD / YYYY 09 / 24 / 2020</div> </div>	
Mailing Address 29374 NETWORK PLACE		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">300.12</div>	
City CHICAGO	State IL	Zip Code 60673-1293	Transaction ID : 82960501 Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between;"> <div>MM / DD / YYYY 09 / 24 / 2020</div> </div>
Purpose of Expenditure IE - P2P Texting (see payment on Sch. B)		Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">004</div>	
Name of Federal Candidate HERRELL, STELLA, ,		<div style="display: flex; justify-content: space-between;"> <div> <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose </div> <div> Office Sought: <input checked="" type="checkbox"/> House District: 02 <input type="checkbox"/> President <input type="checkbox"/> Senate State: NM </div> </div>	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ►	

(a) SUBTOTAL of Itemized Independent Expenditures..... ►	<div style="border: 1px solid black; padding: 2px; display: inline-block;">515.00</div>
(b) SUBTOTAL of Unitemized Independent Expenditures ►	<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>
(c) TOTAL Independent Expenditures..... ►	<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>

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

Owens, G, , Robert,

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Date

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09 / 25 / 2020

Signature

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES
(Schedule E)PAGE 11 OF 14
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund		FEC IDENTIFICATION NUMBER ▼ C C00053553
Check if <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report		<input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on

Full Name of Payee I360, LLC		Date of Public Distribution/Dissemination MM / DD / YYYY 09 / 24 / 2020
Mailing Address 29374 NETWORK PLACE		Amount 306.36
City CHICAGO	State IL	Zip Code 60673-1293
Purpose of Expenditure IE - P2P Texting (see payment on Sch. B)	Category/Type 004	Transaction ID : 82960497 Date of Disbursement or Obligation MM / DD / YYYY 09 / 24 / 2020
Name of Federal Candidate ARENHOLZ, ASHLEY, , ,		Office Sought: <input checked="" type="checkbox"/> House District: 01 <input type="checkbox"/> President <input type="checkbox"/> Senate State: IA
Calendar Year-To-Date Per Election for Office Sought 0.00		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ▶

Full Name of Payee I360, LLC		Date of Public Distribution/Dissemination MM / DD / YYYY 09 / 24 / 2020
Mailing Address 29374 NETWORK PLACE		Amount 306.36
City CHICAGO	State IL	Zip Code 60673-1293
Purpose of Expenditure IE - P2P Texting (see payment on Sch. B)	Category/Type 004	Transaction ID : 82960513 Date of Disbursement or Obligation MM / DD / YYYY 09 / 24 / 2020
Name of Federal Candidate ERNST, JONI, , ,		Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: IA
Calendar Year-To-Date Per Election for Office Sought 0.00		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	612.72
(b) SUBTOTAL of Unitemized Independent Expenditures▶	
(c) TOTAL Independent Expenditures.....▶	

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*Owens, G, , Robert,**[Electronically Filed]*

Date

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09 / 25 / 2020

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NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund		FEC IDENTIFICATION NUMBER ▼ C C00053553	
Check if <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report		<input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name of Payee I360, LLC		Date of Public Distribution/Dissemination MM / DD / YYYY 09 / 24 / 2020	
Mailing Address 29374 NETWORK PLACE		Amount 421.35	
City CHICAGO	State IL	Zip Code 60673-1293	Transaction ID : 82960515
Purpose of Expenditure IE - P2P Texting (see payment on Sch. B)		Category/Type 004	Date of Disbursement or Obligation MM / DD / YYYY 09 / 24 / 2020
Name of Federal Candidate TILLIS, THOM, , ,		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: NC
Calendar Year-To-Date Per Election for Office Sought 0.00		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ▶ _____	

Full Name of Payee I360, LLC		Date of Public Distribution/Dissemination MM / DD / YYYY 09 / 24 / 2020	
Mailing Address 29374 NETWORK PLACE		Amount 530.16	
City CHICAGO	State IL	Zip Code 60673-1293	Transaction ID : 82960512
Purpose of Expenditure IE - P2P Texting (see payment on Sch. B)		Category/Type 004	Date of Disbursement or Obligation MM / DD / YYYY 09 / 24 / 2020
Name of Federal Candidate PERDUE, DAVID, , ,		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: GA
Calendar Year-To-Date Per Election for Office Sought 0.00		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ▶ _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	951.51
(b) SUBTOTAL of Unitemized Independent Expenditures▶	
(c) TOTAL Independent Expenditures.....▶	

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24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES
(Schedule E)PAGE 13 OF 14
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund		FEC IDENTIFICATION NUMBER ▼ C C00053553	
Check if <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report		<input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name of Payee I360, LLC		Date of Public Distribution/Dissemination MM / DD / YYYY 09 / 24 / 2020	
Mailing Address 29374 NETWORK PLACE		Amount 738.69	
City CHICAGO	State IL	Zip Code 60673-1293	Transaction ID : 82960514
Purpose of Expenditure IE - P2P Texting (see payment on Sch. B)		Category/Type 004	Date of Disbursement or Obligation MM / DD / YYYY 09 / 24 / 2020
Name of Federal Candidate JAMES, JOHN, , ,		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: MI
Calendar Year-To-Date Per Election for Office Sought 0.00		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ▶ _____	

Full Name of Payee NATIONAL RIFLE ASSOCIATION OF AMERICA		Date of Public Distribution/Dissemination MM / DD / YYYY 09 / 23 / 2020	
Mailing Address 11250 WAPLES MILL ROAD		Amount 798.77	
City FAIRFAX	State VA	Zip Code 22030	Transaction ID : 82960259
Purpose of Expenditure IE - Staff Time (September 23, 2020)		Category/Type 001	Date of Disbursement or Obligation MM / DD / YYYY 09 / 25 / 2020
Name of Federal Candidate TRUMP, DONALD, J, ,		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____
Calendar Year-To-Date Per Election for Office Sought 0.00		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ▶ _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	1537.46
(b) SUBTOTAL of Unitemized Independent Expenditures▶	
(c) TOTAL Independent Expenditures.....▶	

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

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NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund		FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00053553 </div>
Check if <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report <input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on		

Full Name of Payee PROLIST INC.		Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between;"> <div>MM / DD / YYYY 09 / 24 / 2020</div> </div>	
Mailing Address 4510 BUCKEYSTOWN PIKE, SUITE M		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">1958.25</div>	
City FREDERICK	State MD	Zip Code 21704-7539	Transaction ID : 82960262 Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between;"> <div>MM / DD / YYYY 09 / 25 / 2020</div> </div>
Purpose of Expenditure IE - Direct Mail	Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">004</div>		
Name of Federal Candidate TRUMP, DONALD, J, ,		<div style="display: flex; justify-content: space-between;"> <div> <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose </div> <div> Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____ </div> </div>	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ▶ _____	

0.00

Full Name of Payee I360, LLC		Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between;"> <div>MM / DD / YYYY 09 / 24 / 2020</div> </div>	
Mailing Address 29374 NETWORK PLACE		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">2729.07</div>	
City CHICAGO	State IL	Zip Code 60673-1293	Transaction ID : 82960508 Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between;"> <div>MM / DD / YYYY 09 / 24 / 2020</div> </div>
Purpose of Expenditure IE - P2P Texting (see payment on Sch. B)	Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">004</div>		
Name of Federal Candidate TRUMP, DONALD, J, ,		<div style="display: flex; justify-content: space-between;"> <div> <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose </div> <div> Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____ </div> </div>	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ▶ _____	

0.00

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	<div style="border: 1px solid black; padding: 2px; display: inline-block;">4687.32</div>
(b) SUBTOTAL of Unitemized Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>
(c) TOTAL Independent Expenditures..... ▶	<div style="border: 1px solid black; padding: 2px; display: inline-block;">9960.44</div>

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