

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

 PAGE 1 OF 2
 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 checked="" type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report		<input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name of Payee Connection Strategy, LLC		Date of Public Distribution/Dissemination MM / DD / YYYY 12 / 08 / 2016	
Mailing Address P.O. Box 2192		Amount 3213.72	
City Arlington	State VA	Zip Code 22202	Transaction ID : 74567024
Purpose of Expenditure Phone Bank	Category/ Type	Date of Disbursement or Obligation MM / DD / YYYY 004	
Name of Federal Candidate Kennedy, John, , ,		Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: LA	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input checked="" type="checkbox"/> Other (specify) ▶ Runoff2016	

Full Name of Payee Connection Strategy, LLC		Date of Public Distribution/Dissemination MM / DD / YYYY 12 / 08 / 2016	
Mailing Address P.O. Box 2192		Amount 122.46	
City Arlington	State VA	Zip Code 22202	Transaction ID : 74567025
Purpose of Expenditure Phone Bank	Category/ Type	Date of Disbursement or Obligation MM / DD / YYYY 004	
Name of Federal Candidate Angelle, Scott, , ,		Office Sought: <input checked="" type="checkbox"/> House District: 03 <input type="checkbox"/> President <input type="checkbox"/> Senate State: LA	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input checked="" type="checkbox"/> Other (specify) ▶ Runoff2016	

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	3336.18
(b) SUBTOTAL of Unitemized Independent Expenditures ▶	
(c) TOTAL Independent Expenditures..... ▶	

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

Adkins, Mary Rose, , ,

[Electronically Filed]

Date

MM / DD / YYYY
12 / 09 / 2016

Signature

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Full Name of Payee Connection Strategy, LLC		Date of Public Distribution/Dissemination MM / DD / YYYY 12 / 08 / 2016	
Mailing Address P.O. Box 2192		Amount 112.49	
City Arlington	State VA	Zip Code 22202	Transaction ID : 74567027
Purpose of Expenditure Phone Bank	Category/Type 004	Date of Disbursement or Obligation MM / DD / YYYY	
Name of Federal Candidate Johnson, James, , ,		<input checked="" type="checkbox"/> Support Office Sought: <input checked="" type="checkbox"/> House District: 04 <input type="checkbox"/> Oppose <input type="checkbox"/> President <input type="checkbox"/> Senate State: LA	
Calendar Year-To-Date Per Election for Office Sought 0.00		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▶ Runoff2016	

Full Name of Payee		Date of Public Distribution/Dissemination MM / DD / YYYY	
Mailing Address		Amount	
City	State	Zip Code	Date of Disbursement or Obligation MM / DD / YYYY
Purpose of Expenditure	Category/Type		
Name of Federal Candidate		<input type="checkbox"/> Support Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> Oppose <input type="checkbox"/> President <input type="checkbox"/> Senate State: _____	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ _____	

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	112.49
(b) SUBTOTAL of Unitemized Independent Expenditures ▶	
(c) TOTAL Independent Expenditures..... ▶	3448.67

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

Adkins, Mary Rose, , ,

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Date

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Signature