



**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name

National Association for Gun Rights Inc PAC

Report Covering the Period: From:  /  /  To:  /  /

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2016"/>		214794.21
(b) Cash on Hand at Beginning of Reporting Period.....	227602.08	
(c) Total Receipts (from Line 19) .....	764.00	47671.00
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	228366.08	262465.21
7. Total Disbursements (from Line 31).....	13308.76	47407.89
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	215057.32	215057.32
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) .....	1743.95	

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 Association for Gun Rights Inc PAC**

Report Covering the Period: From:  /  /  To:  /  /

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).....	0.00	4751.00
(ii) Unitemized .....	764.00	42920.00
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	764.00	47671.00
(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) .....	764.00	47671.00
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.).....	0.00	0.00
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 Transfers (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))..... ▶	764.00	47671.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	764.00	47671.00

**DETAILED SUMMARY PAGE**  
of Disbursements

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated 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 .....	3768.14	7860.27
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	3768.14	7860.27
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	18000.00
24. Independent Expenditures (use Schedule E) .....	5040.62	5040.62
25. Coordinated Party Expenditures (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	7.00
(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	7.00
29. Other Disbursements .....	4500.00	16500.00
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated 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)) ..	13308.76	47407.89
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	13308.76	47407.89

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

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) .....	764.00	47671.00
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	7.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	764.00	47664.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	3768.14	7860.27
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	3768.14	7860.27

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: F3XA

Transaction ID :

Report amended to include items on Schedule D for independent expenditures timely paid in later period than dissemination, and to update Schedule E expenditure with final payment date.

Form/Schedule:

Transaction ID:

**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 Association for Gun Rights Inc PAC**

Full Name (Last, First, Middle Initial)

**A. DB CAPITOL STRATEGIES**

Mailing Address 203 SOUTH UNION STREET  
SUITE 300

City ALEXANDRIA State VA Zip Code 22314-3356

Purpose of Disbursement  
LEGAL AND COMPLIANCE SERVICES

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
04 / 20 / 2016

Transaction ID : SB21B.I84571

Amount of Each Disbursement this Period

3500.00

Memo Item

Full Name (Last, First, Middle Initial)

**B. DIRECT CONNECT LLC**

Mailing Address 3901 CENTERVIEW DR.  
SUITE W

City CHANTILLY State VA Zip Code 20151-3229

Purpose of Disbursement  
MERCHANT PROCESSING FEES

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
04 / 04 / 2016

Transaction ID : SB21B.I84564

Amount of Each Disbursement this Period

249.02

Memo Item

Full Name (Last, First, Middle Initial)

**C. FIRST BANK**

Mailing Address 15250 E MISSISSIPPI AVE

City AURORA State CO Zip Code 80012-3768

Purpose of Disbursement  
BANK FEE

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
04 / 29 / 2016

Transaction ID : SB21B.I84566

Amount of Each Disbursement this Period

0.12

Memo Item

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

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

3749.14

**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 Association for Gun Rights Inc PAC**

Full Name (Last, First, Middle Initial)

**A. GLOBAL PATHFINDER**

Mailing Address 10 GLENLAKE PARKWAY NE  
NORTH TOWER

City ATLANTA State GA Zip Code 30328-3495

Purpose of Disbursement  
MERCHANT PROCESSING FEES

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

/  /

Transaction ID : SB21B.I84565

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**B.**

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

/  /

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

/  /

Amount of Each Disbursement this Period

Memo Item

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

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



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

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

FOR LINE NUMBER:  
(check only one)

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

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 Association for Gun Rights Inc PAC**

Full Name (Last, First, Middle Initial) <b>A. BRISCOE CAIN FOR TEXAS HOUSE</b>		Date of Disbursement MM / DD / YYYY 04 / 28 / 2016
Mailing Address P.O. BOX 7		<b>Transaction ID : SB29.I84573</b>
City DEER PARK	State TX	
Zip Code 77536	Purpose of Disbursement NON-FEDERAL POLITICAL CONTRIBUTION	Amount of Each Disbursement this Period 1000.00
Candidate Name	Category/Type	<input type="checkbox"/> Memo Item
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:		

Full Name (Last, First, Middle Initial) <b>B. FRIENDS OF JIM LUCAS</b>		Date of Disbursement MM / DD / YYYY 04 / 07 / 2016
Mailing Address 1114 EAST 4TH ST.		<b>Transaction ID : SB29.I84568</b>
City SEYMOUR	State IN	
Zip Code 47274	Purpose of Disbursement NON-FEDERAL POLITICAL CONTRIBUTION	Amount of Each Disbursement this Period 500.00
Candidate Name	Category/Type	<input type="checkbox"/> Memo Item
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:		

Full Name (Last, First, Middle Initial) <b>C. KEITH STRAHAN FOR TEXAS STATE HOUSE</b>		Date of Disbursement MM / DD / YYYY 04 / 28 / 2016
Mailing Address 1019 LYNNWOOD AVE		<b>Transaction ID : SB29.I84572</b>
City LIBERTY	State TX	
Zip Code 77575	Purpose of Disbursement NON-FEDERAL POLITICAL CONTRIBUTION	Amount of Each Disbursement this Period 1000.00
Candidate Name	Category/Type	<input type="checkbox"/> Memo Item
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).....▶	2500.00
<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 Association for Gun Rights Inc PAC**

Full Name (Last, First, Middle Initial)

**A. KENT FOR WEST VIRGINIA**

Mailing Address P.O. BOX 18

City MORGANTOWN State WV Zip Code 26507-0018

Purpose of Disbursement  
NON-FEDERAL POLITICAL CONTRIBUTION

Candidate Name

Office Sought:  House  Senate  President

State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
04 / 04 / 2016

Transaction ID : SB29.I84567

Amount of Each Disbursement this Period

500.00

Memo Item

Full Name (Last, First, Middle Initial)

**B. KESSLER FOR SENATE**

Mailing Address 10430 WHITE CEDAR RD.

City FORT WAYNE State IN Zip Code 46814

Purpose of Disbursement  
NON-FEDERAL POLITICAL CONTRIBUTION

Candidate Name

Office Sought:  House  Senate  President

State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
04 / 07 / 2016

Transaction ID : SB29.I84569

Amount of Each Disbursement this Period

500.00

Memo Item

Full Name (Last, First, Middle Initial)

**C. READ KING CAMPAIGN**

Mailing Address P.O. BOX 972

City LAKE DALLAS State TX Zip Code 75065

Purpose of Disbursement  
NON-FEDERAL POLITICAL CONTRIBUTION

Candidate Name

Office Sought:  House  Senate  President

State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
04 / 14 / 2016

Transaction ID : SB29.I84570

Amount of Each Disbursement this Period

1000.00

Memo Item

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

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

2000.00

4500.00

**SCHEDULE D (FEC Form 3X)**

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

(Use separate schedule(s) for each numbered line)	PAGE 11 OF 15
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)  
**National Association for Gun Rights Inc PAC**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>FARIS MAILING, INC.</b>	Nature of Debt (Purpose): PRINTING COSTS
Mailing Address 701 N HOLT RD	
City State Zip Code INDIANAPOLIS IN 46222	

Outstanding Balance Beginning This Period 0.00	<b>Transaction ID : SD.82884</b>	
Amount Incurred This Period 809.32	Payment This Period 0.00	Outstanding Balance at Close of This Period 809.32

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>FARIS MAILING, INC.</b>	Nature of Debt (Purpose): PRINTING COSTS
Mailing Address 701 N HOLT RD	
City State Zip Code INDIANAPOLIS IN 46222	

Outstanding Balance Beginning This Period 0.00	<b>Transaction ID : SD.83873</b>	
Amount Incurred This Period 809.32	Payment This Period 0.00	Outstanding Balance at Close of This Period 809.32

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>FRONT RANGE ENTERPRISES AND COMMUNICATIONS</b>	Nature of Debt (Purpose): FLIERS
Mailing Address 1111 DIAMOND VALLEY DR. SUITE 105	
City State Zip Code WINDSOR CO 80550-4313	

Outstanding Balance Beginning This Period 0.00	<b>Transaction ID : SD.84655</b>	
Amount Incurred This Period 30.05	Payment This Period 0.00	Outstanding Balance at Close of This Period 30.05

1) <b>SUBTOTALS</b> This Period This Page (optional)..... ▶	1648.69
2) <b>TOTALS</b> This Period (last page this line number only)..... ▶	
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only) ..... ▶	
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) ▶	

**SCHEDULE D (FEC Form 3X)**

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

(Use separate schedule(s) for each numbered line)	PAGE 12 OF 15
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)  
**National Association for Gun Rights Inc PAC**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>ON IMPACT STRATEGIES, LLC</b>	Nature of Debt (Purpose): ROBOCALLS
Mailing Address 720 DEER DRIVE	
City State Zip Code RUCKERSVILLE VA 22968-3156	

Outstanding Balance Beginning This Period 0.00	<b>Transaction ID : SD.84656</b>	
Amount Incurred This Period 95.26	Payment This Period 0.00	Outstanding Balance at Close of This Period 95.26

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor	Nature of Debt (Purpose):
Mailing Address	
City State Zip Code	

Outstanding Balance Beginning This Period		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor	Nature of Debt (Purpose):
Mailing Address	
City State Zip Code	

Outstanding Balance Beginning This Period		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period

1) <b>SUBTOTALS</b> This Period This Page (optional)..... ▶	95.26
2) <b>TOTALS</b> This Period (last page this line number only)..... ▶	1743.95
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only) ..... ▶	0.00
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) ▶	1743.95

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

NAME OF COMMITTEE (In Full) <b>National Association for Gun Rights Inc PAC</b>	<b>FEC IDENTIFICATION NUMBER</b> ▼ <b>C</b> C00481200
---	--

Check if  24-hour report  48-hour report  New report  Amends report filed on M M / D D / Y Y Y Y Y Y

Full Name of Payee <b>FARIS MAILING, INC.</b> <input checked="" type="checkbox"/> Memo Item		Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 04 / 18 / 2016	
Mailing Address 701 N HOLT RD		Amount <span style="border: 1px solid black; padding: 2px;">809.32</span>	
City INDIANAPOLIS	State IN	Zip Code 46222	<b>Transaction ID : SE24.82884</b>
Purpose of Expenditure PRINTING COSTS	Category/Type <span style="border: 1px solid black; padding: 2px;"> </span>	Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 05 / 09 / 2016	
Name of Federal Candidate JAMES E BANKS <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose		Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate District: 03 State: IN	
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">6659.26</span>		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶	

Full Name of Payee <b>FARIS MAILING, INC.</b> <input type="checkbox"/> Memo Item		Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 04 / 18 / 2016	
Mailing Address 701 N HOLT RD		Amount <span style="border: 1px solid black; padding: 2px;">1887.45</span>	
City INDIANAPOLIS	State IN	Zip Code 46222	<b>Transaction ID : SE24.82885</b>
Purpose of Expenditure POSTAGE	Category/Type <span style="border: 1px solid black; padding: 2px;"> </span>	Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 04 / 22 / 2016	
Name of Federal Candidate JAMES E BANKS <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose		Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate District: 03 State: IN	
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">6659.26</span>		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶	

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures..... ▶	<span style="border: 1px solid black; padding: 2px;">1887.45</span>
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures ..... ▶	<span style="border: 1px solid black; padding: 2px;"> </span>
(c) <b>TOTAL</b> Independent Expenditures..... ▶	<span style="border: 1px solid black; padding: 2px;"> </span>

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

Signature BARRY WALTER JR. [Electronically Filed] Date M M / D D / Y Y Y Y Y Y  
05 / 20 / 2016

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

NAME OF COMMITTEE (In Full) <b>National Association for Gun Rights Inc PAC</b>	<b>FEC IDENTIFICATION NUMBER</b> ▼ <b>C</b> C00481200
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span>	

Full Name of Payee <b>FARIS MAILING, INC.</b> <input checked="" type="checkbox"/> Memo Item	Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 04 / 26 / 2016
Mailing Address 701 N HOLT RD	Amount <span style="border: 1px solid black; padding: 2px;">809.32</span>
City State Zip Code INDIANAPOLIS IN 46222	<b>Transaction ID : SE24.83873</b> Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 05 / 09 / 2016
Purpose of Expenditure PRINTING COSTS Category/Type <span style="border: 1px solid black; padding: 2px;"> </span>	Name of Federal Candidate JAMES E BANKS <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: IN
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">6659.26</span>	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶

Full Name of Payee <b>FARIS MAILING, INC.</b> <input type="checkbox"/> Memo Item	Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 04 / 26 / 2016
Mailing Address 701 N HOLT RD	Amount <span style="border: 1px solid black; padding: 2px;">3153.17</span>
City State Zip Code INDIANAPOLIS IN 46222	<b>Transaction ID : SE24.83874</b> Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 04 / 25 / 2016
Purpose of Expenditure POSTAGE Category/Type <span style="border: 1px solid black; padding: 2px;"> </span>	Name of Federal Candidate JAMES E BANKS <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: IN
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">6659.26</span>	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures..... ▶	<span style="border: 1px solid black; padding: 2px;">3153.17</span>
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures ..... ▶	<span style="border: 1px solid black; padding: 2px;"> </span>
(c) <b>TOTAL</b> Independent Expenditures..... ▶	<span style="border: 1px solid black; padding: 2px;"> </span>

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

DAN BACKER
[Electronically Filed]
Date M M / D D / Y Y Y Y Y Y 05 / 20 / 2016

Signature

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

NAME OF COMMITTEE (In Full) <b>National Association for Gun Rights Inc PAC</b>	<b>FEC IDENTIFICATION NUMBER</b> ▼ <b>C</b> C00481200
---	--

Check if  24-hour report  48-hour report  New report  Amends report filed on M M / D D / Y Y Y Y Y Y

Full Name of Payee <input checked="" type="checkbox"/> Memo Item <b>FRONT RANGE ENTERPRISES AND COMMUNICATIONS</b>		Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 04 / 07 / 2016	
Mailing Address 1111 DIAMOND VALLEY DR. SUITE 105		Amount <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 30.05	
City WINDSOR	State CO	Zip Code 80550-4313	<b>Transaction ID : SE24.84655</b>
Purpose of Expenditure FLIERS	Category/ Type <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span>	Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 05 / 05 / 2016	
Name of Federal Candidate TIMOTHY PATRICK NEVILLE		<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: <u>CO</u>
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span>		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____	
125.31			

Full Name of Payee <input checked="" type="checkbox"/> Memo Item <b>ON IMPACT STRATEGIES, LLC</b>		Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 04 / 09 / 2016	
Mailing Address 720 DEER DRIVE		Amount <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 95.26	
City RUCKERSVILLE	State VA	Zip Code 22968-3156	<b>Transaction ID : SE24.84656</b>
Purpose of Expenditure ROBOCALLS	Category/ Type <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span>	Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 06 / 08 / 2016	
Name of Federal Candidate TIMOTHY PATRICK NEVILLE		<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: <u>CO</u>
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span>		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____	
125.31			

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures.....▶	<span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 0.00
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures.....▶	<span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span>
(c) <b>TOTAL</b> Independent Expenditures.....▶	<span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 5040.62

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

Signature BARRY WALTER JR. [Electronically Filed] Date M M / D D / Y Y Y Y Y Y  
05 / 20 / 2016