

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES

(Schedule E)

PAGE 1 OF 1
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 Williams, Ltd.		Date of Public Distribution/Dissemination MM / DD / YYYY 09 / 26 / 2018	
Mailing Address 4005 Riverhaven Drive		Amount 120.00	
City Reno	State NV	Zip Code 89519	Transaction ID : 78541421
Purpose of Expenditure Booth Rental		Category/Type 004	Date of Disbursement or Obligation MM / DD / YYYY
Name of Federal Candidate Heller, Dean, , Sen.,		<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: NV
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶	

Full Name of Payee Williams, Ltd.		Date of Public Distribution/Dissemination MM / DD / YYYY 09 / 26 / 2018	
Mailing Address 4005 Riverhaven Drive		Amount 120.00	
City Reno	State NV	Zip Code 89519	Transaction ID : 78541422
Purpose of Expenditure Booth Rental		Category/Type 004	Date of Disbursement or Obligation MM / DD / YYYY
Name of Federal Candidate Rosen, Jacklyn, , ,		<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: NV
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶	

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	240.00
(b) SUBTOTAL of Unitemized Independent Expenditures▶	
(c) TOTAL Independent Expenditures.....▶	240.00

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,

[Electronically Filed]

Date

MM / DD / YYYY
09 / 26 / 2018

Signature