

# 24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES (SCHEDULE E)

PAGE 1 OF 1  
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) <b>National Rifle Association of America Political Victory Fund</b>		FEC IDENTIFICATION NUMBER <b>C C00053553</b>
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 (Last, First, Middle Initial) of Payee <b>St. Croix County Fairgrounds</b>		Date MM / DD / YYYY <b>07 / 19 / 2012</b>
Mailing Address <b>210 Fair Grounds Road</b>		Amount <b>145.00</b>
City <b>Glenwood City</b>	State <b>WI</b>	Zip Code <b>54013</b>
Purpose of Expenditure <b>Booth Rental</b>	Category/Type <b>004</b>	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: <b>Barack Obama</b>		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <b>0.00</b>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

Transaction ID : 46430984

Full Name (Last, First, Middle Initial) of Payee <b>NRA Institute for Legislative Action</b>		Date MM / DD / YYYY <b>07 / 20 / 2012</b>
Mailing Address <b>11250 Waples Mill Road</b>		Amount <b>500.00</b>
City <b>Fairfax</b>	State <b>VA</b>	Zip Code <b>22030</b>
Purpose of Expenditure <b>Booth Rental</b>	Category/Type <b>004</b>	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: <b>Barack Obama</b>		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <b>0.00</b>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

Transaction ID : 46430986

(a) SUBTOTAL of Itemized Independent Expenditures.....	<b>645.00</b>
(b) SUBTOTAL of Unitemized Independent Expenditures .....	
(c) TOTAL Independent Expenditures.....	<b>645.00</b>

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 \_\_\_\_\_ [Electronically Filed] Date MM / DD / YYYY **07 / 20 / 2012**