

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) **USE FEC MAILING LABEL OR TYPE OR PRINT** Example: If typing, type over the lines
National Rifle Association of America Political Victory Fund

ADDRESS (number and street) 11250 Waples Mill Road
 Check if different than previously reported. (ACC)
Fairfax VA 22030

2. **FEC IDENTIFICATION NUMBER** C00053553
3. IS THIS REPORT NEW (N) **OR** AMENDED (A)

4. **TYPE OF REPORT** (Choose One)
(a) Quarterly Reports:
 April 15 Quarterly Report(Q1)
 July 15 Quarterly Report(Q2)
 October 15 Quarterly Report(Q3)
 January 31 Quarterly Report(YE)
 July 31 Mid-Year Report(Non-election Year Only) (MY)
 Termination Report (TER)
(b) Monthly Report Due On: Feb 20 (M2) May 20 (M5) Aug 20 (M8) Nov 20 (M11) (Non-Election Year Only)
 Mar 20 (M3) Jun 20 (M6) Sep 20 (M9) Dec 20 (M12) (Non-Election Year Only)
 Apr 20 (M4) Jul 20 (M7) Oct 20 (M10) Jan 31 (YE)
(c) 12-Day **PRE-Election** Report for the: Primary (12P) General (12G) Runoff (12R)
 Convention (12C) Special (12G)
Election on _____ in the State of _____
(d) 30-Day **Post -Election** Report for the: General (30G) Runoff (30R) Special (30S)
Election on _____ in the State of _____

5. Covering Period 01 01 2009 through 01 31 2009

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Mary Rose Adkins

Signature of Treasurer Electronically Filed by Mary Rose Adkins Date 02 19 2009

NOTE : Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C 437g.

| | | | | | | | |
|-----------------|--|--|--|--|--|--|--|
| Office Use Only | | | | | | | |
|-----------------|--|--|--|--|--|--|--|

FEC FORM 3X
(Rev. 12/2004)

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name
National Rifle Association of America Political Victory Fund

Report Covering the Period: From:

| | |
|---|---|
| M | M |
| 0 | 1 |

| | |
|---|---|
| D | D |
| 0 | 1 |

| | | | |
|---|---|---|---|
| Y | Y | Y | Y |
| 2 | 0 | 0 | 9 |

 To:

| | |
|---|---|
| M | M |
| 0 | 1 |

| | |
|---|---|
| D | D |
| 3 | 1 |

| | | | |
|---|---|---|---|
| Y | Y | Y | Y |
| 2 | 0 | 0 | 9 |

| | COLUMN A This Period | COLUMN B Calendar Year-to-Date | | | | | | | | |
|---|-------------------------|-----------------------------------|---|---|---|---|---|---|--|------------|
| 6. (a) Cash on Hand January 1 <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>0</td><td>9</td></tr></table> | Y | Y | Y | Y | 2 | 0 | 0 | 9 | | 1634617.77 |
| Y | Y | Y | Y | | | | | | | |
| 2 | 0 | 0 | 9 | | | | | | | |
| (b) Cash on Hand at Beginning of Reporting Period | 1634617.77 | | | | | | | | | |
| (c) Total Receipts (from Line 19) | 390976.06 | 390976.06 | | | | | | | | |
| (d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) | 2025593.83 | 2025593.83 | | | | | | | | |
| 7. Total Disbursements (from Line 31) | 12791.25 | 12791.25 | | | | | | | | |
| 8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) | 2012802.58 | 2012802.58 | | | | | | | | |
| 9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D) | 0.00 | | | | | | | | | |
| 10. Debts and Obligations owed BY the committee (Itemize all on Schedule C and/or Schedule D) | 562489.65 | | | | | | | | | |

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**

Write or Type Committee Name
National Rifle Association of America Political Victory Fund

Report Covering the Period: From:

| | |
|---|---|
| M | M |
| 0 | 1 |

| | |
|---|---|
| D | D |
| 0 | 1 |

| | | | |
|---|---|---|---|
| Y | Y | Y | Y |
| 2 | 0 | 0 | 9 |

 To:

| | |
|---|---|
| M | M |
| 0 | 1 |

| | |
|---|---|
| D | D |
| 3 | 1 |

| | | | |
|---|---|---|---|
| Y | Y | Y | Y |
| 2 | 0 | 0 | 9 |

| 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 | 17050.00 | 17050.00 |
| (i) Itemized (use Schedule A) | 373640.07 | 373640.07 |
| (ii) Unitemized | 390690.07 | 390690.07 |
| (iii) TOTAL (add Lines 11(a)(i) and (ii) | 0.00 | 0.00 |
| (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) | 390690.07 | 390690.07 |
| 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.) | 285.99 | 285.99 |
| 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 Transfer (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)) | 390976.06 | 390976.06 |
| 20. Total Federal Receipts (subtract Line 18(c) from Line 19) | 390976.06 | 390976.06 |

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

| II. DISBURSEMENTS | COLUMN A Total This Period | COLUMN B Calendar Year-to-Date |
|--|---------------------------------------|---|
| 21. Operating Expenditures: | | |
| (a) Shared 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..... | 7841.25 | 7841.25 |
| (c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶ | 7841.25 | 7841.25 |
| 22. Transfers to Affiliated/Other Party Committees..... | 0.00 | 0.00 |
| 23. Contributions to Federal Candidates/Committees..... and Other Political Committees..... | 4950.00 | 4950.00 |
| 24. Independent Expenditure (use Schedule E) | 0.00 | 0.00 |
| 25. Coordinated Expenditures Made by Party Committees (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 | 0.00 |
| (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 | 0.00 |
| 29. Other Disbursements..... | 0.00 | 0.00 |
| 30. Federal Election Activity (2 U.S.C 431(20)) | | |
| (a) Shared 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)).. | 12791.25 | 12791.25 |
| 32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31)..... | 12791.25 | 12791.25 |

DETAILED SUMMARY PAGE
of Disbursements

| 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 | 390690.07 | 390690.07 |
| 34. Total Contribution Refunds (from Line 28(d)) | 0.00 | 0.00 |
| 35. Net Contributions (other than loans) (subtract Line 34 from Line 33) | 390690.07 | 390690.07 |
| 36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))..... | 7841.25 | 7841.25 |
| 37. Offsets to Operating Expenditures (from Line 15, page 3) | 0.00 | 0.00 |
| 38. Net Operating Expenditures (subtract Line 37 from Line 36) | 7841.25 | 7841.25 |

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 6 / 28
(check only one)

11a 11b 11c 12
 13 14 15 16 17

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 Rifle Association of America Political Victory Fund

A. Full Name (Last, First, Middle Initial)
Wachovia Bank

Mailing Address 10501 Main Street

City State Zip Code
Fairfax VA 22030

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
259.69

Date of Receipt
M M / D D / Y Y Y Y Y
0 1 / 1 2 / 2 0 0 9

Transaction ID: 28374451

Amount of Each Receipt this Period
259.69

Interest Income

B. Full Name (Last, First, Middle Initial)
Bank of the West

Mailing Address 224 Box Butte Avenue

City State Zip Code
Alliance NE 69301

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
0.75

Date of Receipt
M M / D D / Y Y Y Y Y
0 1 / 3 1 / 2 0 0 9

Transaction ID: 28374452

Amount of Each Receipt this Period
0.75

Interest Income

C. Full Name (Last, First, Middle Initial)
Wachovia Bank

Mailing Address 10501 Main Street

City State Zip Code
Fairfax VA 22030

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
284.40

Date of Receipt
M M / D D / Y Y Y Y Y
0 1 / 1 2 / 2 0 0 9

Transaction ID: 28374453

Amount of Each Receipt this Period
24.71

Interest Income

SUBTOTAL of Receipts This Page (optional) ► **285.15**

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

| | |
|--|---|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: PAGE 7 / 28 |
| | (check only one) |
| <input type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 | |
| <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input checked="" type="checkbox"/> 17 | |

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NAME OF COMMITTEE (In Full)
National Rifle Association of America Political Victory Fund

| | | | |
|---|--|-------------------------------------|---|
| A. | Full Name (Last, First, Middle Initial) Wachovia Bank | | Date of Receipt |
| | Mailing Address 10501 Main Street | | <input type="text" value="01"/> / <input type="text" value="30"/> / <input type="text" value="2009"/> |
| | City | State | Zip Code |
| | Fairfax | VA | 22030 |
| | FEC ID number of contributing federal political committee. | | <input type="text" value="C"/> |
| Name of Employer | | Occupation | Transaction ID: 28374454 |
| Receipt For: | | Amount of Each Receipt this Period | |
| <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ | <input type="text" value="0.43"/> | |
| | | <input type="text" value="284.83"/> | Interest Income |

| | | | |
|---|--|------------------------------------|---|
| B. | Full Name (Last, First, Middle Initial) BB&T Bank | | Date of Receipt |
| | Mailing Address 11230 Waples Mill Road | | <input type="text" value="01"/> / <input type="text" value="30"/> / <input type="text" value="2009"/> |
| | City | State | Zip Code |
| | Fairfax | VA | 22030 |
| | FEC ID number of contributing federal political committee. | | <input type="text" value="C"/> |
| Name of Employer | | Occupation | Transaction ID: 28374455 |
| Receipt For: | | Amount of Each Receipt this Period | |
| <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ | <input type="text" value="0.41"/> | |
| | | <input type="text" value="0.41"/> | Interest Income |

| | |
|--|-------------------------------------|
| SUBTOTAL of Receipts This Page (optional) | <input type="text" value="0.84"/> |
| TOTAL This Period (last page this line number only) | <input type="text" value="285.99"/> |

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 8 / 28

(check only one)

| | | | |
|---|------------------------------|------------------------------|---|
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 <input type="checkbox"/> 17 |

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NAME OF COMMITTEE (In Full)
National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)
MR STEVE NICHOLAS

Mailing Address 2319 QUINCE AVE

City State Zip Code
PRESCOTT IA 50859-8104

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
SELF-EMPLOYED FARMER/BANKER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 01 / 30 / 2009

Transaction ID: 28375923

Amount of Each Receipt this Period 250.00

B.

Full Name (Last, First, Middle Initial)
MR RONALD W W JACKSON

Mailing Address 5679 MONROE ST APT 1117

City State Zip Code
SYLVANIA OH 43560-2725

FEC ID number of contributing federal political committee. C

Name of Employer Occupation

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt 01 / 26 / 2009

Transaction ID: 28375972

Amount of Each Receipt this Period 300.00

C.

Full Name (Last, First, Middle Initial)
MR SANFORD WHITWELL

Mailing Address 1564 HARBOR RD

City State Zip Code
WILLIAMSBURG VA 23185-7630

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt 01 / 26 / 2009

Transaction ID: 28377082

Amount of Each Receipt this Period 300.00

SUBTOTAL of Receipts This Page (optional) 850.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 9 / 28
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
National Rifle Association of America Political Victory Fund

A. Full Name (Last, First, Middle Initial)
MR KENNETH GROEFSEMA

Mailing Address 3435 E SOUTH BEAR CREEK DR

City State Zip Code
MERCED CA 95340-9453

FEC ID number of contributing federal political committee. C

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
01 / 29 / 2009

Transaction ID: 28377312

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
MR MICHAEL J LONG

Mailing Address W284N6365 HIBRITTEN WAY

City State Zip Code
HARTLAND WI 53029-8228

FEC ID number of contributing federal political committee. C

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
01 / 29 / 2009

Transaction ID: 28377679

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
MR WM L CORBIN

Mailing Address 8485 19TH ST

City State Zip Code
ALTA LOMA CA 91701-4531

FEC ID number of contributing federal political committee. C

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
550.00

Date of Receipt
01 / 26 / 2009

Transaction ID: 28378143

Amount of Each Receipt this Period
550.00

SUBTOTAL of Receipts This Page (optional) 1050.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 10 / 28

(check only one)

| | | | |
|---|------------------------------|------------------------------|---|
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 <input type="checkbox"/> 17 |

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NAME OF COMMITTEE (In Full)
National Rifle Association of America Political Victory Fund

A. Full Name (Last, First, Middle Initial)
MS BARBARA B COWAN

Mailing Address PO BOX 2607

City State Zip Code
HAVRE MT 59501-2607

FEC ID number of contributing federal political committee. C

Name of Employer SELF EMPLOYED Occupation INFORMATION REQUESTED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 01 / 23 / 2009

Transaction ID: 28378524

Amount of Each Receipt this Period 1000.00

B. Full Name (Last, First, Middle Initial)
MR W L DOFFING

Mailing Address 413 COVENTRY RD

City State Zip Code
SPIGEWOOD TX 78669-3113

FEC ID number of contributing federal political committee. C

Name of Employer Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 01 / 26 / 2009

Transaction ID: 28378631

Amount of Each Receipt this Period 1000.00

C. Full Name (Last, First, Middle Initial)
MR KENNETH G PETERSON

Mailing Address 5427 SOMERSET LN S

City State Zip Code
GREENFIELD WI 53221-3243

FEC ID number of contributing federal political committee. C

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt 01 / 27 / 2009

Transaction ID: 28378675

Amount of Each Receipt this Period 300.00

SUBTOTAL of Receipts This Page (optional) 2300.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 11 / 28
(check only one)

| | | | | | | | | | |
|-------------------------------------|-----|--------------------------|-----|--------------------------|-----|--------------------------|----|--------------------------|----|
| <input checked="" type="checkbox"/> | 11a | <input type="checkbox"/> | 11b | <input type="checkbox"/> | 11c | <input type="checkbox"/> | 12 | | |
| <input type="checkbox"/> | 13 | <input type="checkbox"/> | 14 | <input type="checkbox"/> | 15 | <input type="checkbox"/> | 16 | <input type="checkbox"/> | 17 |

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NAME OF COMMITTEE (In Full)
National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)
MR DAVID Y ROGERS

Mailing Address PO BOX 50368

City MIDLAND State TX Zip Code 79710-0368

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt: 01 / 26 / 2009
Transaction ID: 28378764
Amount of Each Receipt this Period: 250.00

B.

Full Name (Last, First, Middle Initial)
MR JAMES ECK

Mailing Address 13575 E MINGUS VISTA DR

City PRESCOTT VALLEY State AZ Zip Code 86314-9721

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt: 01 / 26 / 2009
Transaction ID: 28378916
Amount of Each Receipt this Period: 200.00

C.

Full Name (Last, First, Middle Initial)
MR JAMES A KENNEDY

Mailing Address 11090 ALGONQUIN DR

City PINCKNEY State MI Zip Code 48169-9307

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF EMPLOYED Occupation AERIAL PHOTOGRAPHER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt: 01 / 26 / 2009
Transaction ID: 28379698
Amount of Each Receipt this Period: 250.00

SUBTOTAL of Receipts This Page (optional) ► 700.00

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 12 / 28
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
National Rifle Association of America Political Victory Fund

A. Full Name (Last, First, Middle Initial)
MR VICTOR B TATE, II

Mailing Address 4446 BANNOCK DR

City State Zip Code
BOZEMAN MT 59715-9303

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIREED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
MM / DD / YYYY
01 / 05 / 2009

Transaction ID: 28379961

Amount of Each Receipt this Period
1000.00

B. Full Name (Last, First, Middle Initial)
MR VINCENT J SPINELLA

Mailing Address 39 SPRUCE LN

City State Zip Code
COLTS NECK NJ 07722-1362

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
CLIQUE COMMUNICATIONS, INC PRESIDENT & CEO

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
MM / DD / YYYY
01 / 26 / 2009

Transaction ID: 28379987

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
MR THOMAS R PETERSON

Mailing Address 43 MACINTYRE LN

City State Zip Code
ALLENDALE NJ 07401-1440

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
MM / DD / YYYY
01 / 20 / 2009

Transaction ID: 28380441

Amount of Each Receipt this Period
250.00

SUBTOTAL of Receipts This Page (optional) ► 1500.00

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER: PAGE 13 / 28
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
National Rifle Association of America Political Victory Fund

A. Full Name (Last, First, Middle Initial)
MR STEVE SIMMONS

Mailing Address 2503 STEEPLE CHASE DR

City State Zip Code
TRENT WOODS NC 28562-6635

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 1 | / | 2 | 6 | / | 2 | 0 | 0 | 9 |

Transaction ID: 28380613

Amount of Each Receipt this Period
400.00

B. Full Name (Last, First, Middle Initial)
MR NEIL E ROACH

Mailing Address PO BOX 308

City State Zip Code
AGUA DULCE TX 78330-0308

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
REN SERVICES, INC. PRESIDENT / OWNER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 1 | / | 2 | 6 | / | 2 | 0 | 0 | 9 |

Transaction ID: 28380615

Amount of Each Receipt this Period
300.00

C. Full Name (Last, First, Middle Initial)
MR MATHEW J RENO

Mailing Address PO BOX 399

City State Zip Code
GILLETTE WY 82717

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
FLOYD C RENO & SONS INC RANCH MANAGER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2000.00

Date of Receipt

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 1 | / | 2 | 0 | / | 2 | 0 | 0 | 9 |

Transaction ID: 28380766

Amount of Each Receipt this Period
2000.00

SUBTOTAL of Receipts This Page (optional) ► **2700.00**

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

| | | |
|---|---|--------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 14 / 28 |
| | <input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 | |
| | <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17 | |

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NAME OF COMMITTEE (In Full)
National Rifle Association of America Political Victory Fund

A.

| | | |
|---|-------------------------------------|---|
| Full Name (Last, First, Middle Initial) MR KEITH PEARSON | | Date of Receipt MM / DD / YYYY 01 / 30 / 2009 |
| Mailing Address 22102 CAPE MAY LN | | Transaction ID: 28381867 |
| City HUNTINGTON BEACH | State CA | Zip Code 92646-8415 |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 1000.00 |
| Name of Employer RETIRED | Occupation RETIRED | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 1000.00 | |

B.

| | | |
|---|------------------------------------|---|
| Full Name (Last, First, Middle Initial) MR WILLIAM A KURTZ | | Date of Receipt MM / DD / YYYY 01 / 26 / 2009 |
| Mailing Address 433 DOVER AVE | | Transaction ID: 28382953 |
| City LA GRANGE PARK | State IL | Zip Code 60526-1706 |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 200.00 |
| Name of Employer SELF | Occupation ATTORNEY | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 250.00 | |

C.

| | | |
|---|-------------------------------------|---|
| Full Name (Last, First, Middle Initial) MR ZANE JONES | | Date of Receipt MM / DD / YYYY 01 / 30 / 2009 |
| Mailing Address PO BOX 1474 | | Transaction ID: 28383158 |
| City BELTON | State TX | Zip Code 76513-5474 |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 1000.00 |
| Name of Employer ALBERTSONS, INC. | Occupation PHARMACIST | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 1000.00 | |

| | | |
|--|---|---------|
| SUBTOTAL of Receipts This Page (optional) | ▶ | 2200.00 |
| TOTAL This Period (last page this line number only) | ▶ | |

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

| | | |
|---|------------------------------|------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: | PAGE 15 / 28 |
| | (check only one) | |
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c |
| <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 15 |
| <input type="checkbox"/> 12 | <input type="checkbox"/> 16 | <input type="checkbox"/> 17 |

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NAME OF COMMITTEE (In Full)
National Rifle Association of America Political Victory Fund

| | | | |
|---|--|-------------------------------------|---|
| A. | Full Name (Last, First, Middle Initial) MR ROBERT J DUGAN | | Date of Receipt |
| | Mailing Address PO BOX 5029 | | <input type="text" value="01"/> / <input type="text" value="27"/> / <input type="text" value="2009"/> |
| | City | State | Zip Code |
| | OCEANSIDE | CA | 92052-5029 |
| | FEC ID number of contributing federal political committee. | | <input type="text" value="C"/> |
| Name of Employer | | Occupation | Transaction ID: 28383502 |
| | | RETIRED | |
| Receipt For: | | Aggregate Year-to-Date | Amount of Each Receipt this Period |
| <input type="checkbox"/> Primary <input type="checkbox"/> General | | <input type="text" value="500.00"/> | <input type="text" value="500.00"/> |
| <input type="checkbox"/> Other (specify) ▼ | | | |

| | | | |
|---|--|--------------------------------------|---|
| B. | Full Name (Last, First, Middle Initial) MR PETE M HANNA | | Date of Receipt |
| | Mailing Address PO BOX 558 | | <input type="text" value="01"/> / <input type="text" value="26"/> / <input type="text" value="2009"/> |
| | City | State | Zip Code |
| | FAIRFIELD | AL | 35064-0558 |
| | FEC ID number of contributing federal political committee. | | <input type="text" value="C"/> |
| Name of Employer | | Occupation | Transaction ID: 28383581 |
| HANNA STEEL CORPORATION | | OWNER | |
| Receipt For: | | Aggregate Year-to-Date | Amount of Each Receipt this Period |
| <input type="checkbox"/> Primary <input type="checkbox"/> General | | <input type="text" value="1000.00"/> | <input type="text" value="1000.00"/> |
| <input type="checkbox"/> Other (specify) ▼ | | | |

| | | | |
|---|--|-------------------------------------|---|
| C. | Full Name (Last, First, Middle Initial) MR LAWRENCE H TROTTER | | Date of Receipt |
| | Mailing Address 908 LITTLE DOGWOOD RD | | <input type="text" value="01"/> / <input type="text" value="26"/> / <input type="text" value="2009"/> |
| | City | State | Zip Code |
| | KINGSTON | TN | 37763-5602 |
| | FEC ID number of contributing federal political committee. | | <input type="text" value="C"/> |
| Name of Employer | | Occupation | Transaction ID: 28384374 |
| CONTINENTAL MACHINE | | RETIRED MACHINEST MECHANIC | |
| Receipt For: | | Aggregate Year-to-Date | Amount of Each Receipt this Period |
| <input type="checkbox"/> Primary <input type="checkbox"/> General | | <input type="text" value="250.00"/> | <input type="text" value="250.00"/> |
| <input type="checkbox"/> Other (specify) ▼ | | | |

| | |
|--|--------------------------------------|
| SUBTOTAL of Receipts This Page (optional) | <input type="text" value="1750.00"/> |
| TOTAL This Period (last page this line number only) | <input type="text"/> |

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER: PAGE 16 / 28
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
National Rifle Association of America Political Victory Fund

A. Full Name (Last, First, Middle Initial)
MR BILL AMERINE

Mailing Address 10770 W 69TH AVE

City ARVADA State CO Zip Code 80004-1414

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 0 1 / 2 8 / 2 0 0 9

Transaction ID: 28384728

Amount of Each Receipt this Period
300.00

B. Full Name (Last, First, Middle Initial)
W L KING

Mailing Address 10925 US HIGHWAY 60

City CANADIAN State TX Zip Code 79014-5009

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 0 1 / 3 0 / 2 0 0 9

Transaction ID: 28384829

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
MR DAVID BARTEL

Mailing Address 6 STONERIDGE FARM

City WARSAW State MO Zip Code 65355

FEC ID number of contributing federal political committee. **C**

Name of Employer PHOENIX MANUFACTURING Occupation OWNER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 0 1 / 3 0 / 2 0 0 9

Transaction ID: 28384973

Amount of Each Receipt this Period
250.00

SUBTOTAL of Receipts This Page (optional) ► **1050.00**

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER: PAGE 17 / 28
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
National Rifle Association of America Political Victory Fund

A. Full Name (Last, First, Middle Initial)
MR JIMMY WISEMAN

Mailing Address 6320 HWY 152

City State Zip Code
DUMAS TX 79029-7901

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
M M / D D / Y Y Y Y
0 1 / 2 8 / 2 0 0 9

Transaction ID: 28385681

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
MR THOMAS R ROONEY

Mailing Address 5405 KENNINGTON PL

City State Zip Code
FAIRFAX VA 22032-3253

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
EXMERITUS SOFTWARE FEDERAL SYS BUSINESS OWNER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
M M / D D / Y Y Y Y
0 1 / 2 8 / 2 0 0 9

Transaction ID: 28385782

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
MR CECIL J COUCH

Mailing Address PO BOX 1985

City State Zip Code
ALMA GA 31510-0985

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
M M / D D / Y Y Y Y
0 1 / 2 8 / 2 0 0 9

Transaction ID: 28385945

Amount of Each Receipt this Period
500.00

SUBTOTAL of Receipts This Page (optional) ► **1000.00**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 18 / 28
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
National Rifle Association of America Political Victory Fund

A. Full Name (Last, First, Middle Initial)
CHRIS WASHKO

Mailing Address 1950 FOX MOUNTAIN PT

City State Zip Code
COLORADO SPRINGS CO 80906-6909

FEC ID number of contributing federal political committee. C

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
01 / 28 / 2009

Transaction ID: 28386725

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
JAMES T BELL

Mailing Address 4859 GERANIUM PL

City State Zip Code
OAKLAND CA 94619-3036

FEC ID number of contributing federal political committee. C

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
01 / 05 / 2009

Transaction ID: 28386791

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
MR DAN NORCINI

Mailing Address 12006 WILLOW BRANCH CT

City State Zip Code
HOUSTON TX 77070-1153

FEC ID number of contributing federal political committee. C

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt
01 / 30 / 2009

Transaction ID: 28388008

Amount of Each Receipt this Period
400.00

SUBTOTAL of Receipts This Page (optional) 1150.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

| | | |
|---|------------------------------|------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: | PAGE 19 / 28 |
| | (check only one) | |
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c |
| <input type="checkbox"/> 12 | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 |
| <input type="checkbox"/> 15 | <input type="checkbox"/> 16 | <input type="checkbox"/> 17 |

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NAME OF COMMITTEE (In Full)
National Rifle Association of America Political Victory Fund

A.

| | | |
|---|--|---|
| Full Name (Last, First, Middle Initial) MR ILDEFONSO GOMEZ | | Date of Receipt MM / DD / YYYY 01 / 28 / 2009 |
| Mailing Address 21610 GUADALAJARA AVE | | Transaction ID: 28388190 |
| City BOCA RATON | State FL | Zip Code 33433-7503 |
| FEC ID number of contributing federal political committee. C | Amount of Each Receipt this Period 300.00 | |
| Name of Employer CONTINUICARE MEDICAL GROUP | Occupation PHYSICIAN | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 400.00 | |

B.

| | | |
|---|--|---|
| Full Name (Last, First, Middle Initial) MR STEVE OBRIEN | | Date of Receipt MM / DD / YYYY 01 / 28 / 2009 |
| Mailing Address 1379 SURREY LN | | Transaction ID: 28388815 |
| City WOODBURY | State MN | Zip Code 55125-9165 |
| FEC ID number of contributing federal political committee. C | Amount of Each Receipt this Period 500.00 | |
| Name of Employer | Occupation | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 500.00 | |

| | |
|--|-----------------|
| SUBTOTAL of Receipts This Page (optional) | 800.00 |
| TOTAL This Period (last page this line number only) | 17050.00 |

**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 |

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NAME OF COMMITTEE (In Full)
National Rifle Association of America Political Victory Fund

| | |
|--|--|
| A. Full Name (Last, First, Middle Initial) Wachovia Bank Mailing Address 10501 Main Street City Fairfax State VA Zip Code 22030 Purpose of Disbursement Estimated Federal Taxes Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Transaction ID: 27859149 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 1 5 / 2 0 0 9 |
| | Amount of Each Disbursement this Period 3626.18 Estimated Federal Taxes |

| | |
|--|--|
| B. Full Name (Last, First, Middle Initial) Oklahoma Ethics Commission Mailing Address 2300 N. Lincoln Blvd., Room B-5 City Oklahoma City State OK Zip Code 73105-4812 Purpose of Disbursement Annual Filing Fee Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Transaction ID: 27859928 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 1 5 / 2 0 0 9 |
| | Amount of Each Disbursement this Period 50.00 Annual Filing Fee |

| | |
|--|--|
| C. Full Name (Last, First, Middle Initial) Tennessee Registry of Election Finance Mailing Address 404 James Robertson Pkwy, Suite 1 City Nashville State TN Zip Code 37243 Purpose of Disbursement Registration Fee Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Transaction ID: 28000403 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 2 2 / 2 0 0 9 |
| | Amount of Each Disbursement this Period 100.00 Registration Fee |

| | |
|--|---------|
| SUBTOTAL of Disbursements This Page (optional) ▶ | 3776.18 |
| 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 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 |

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NAME OF COMMITTEE (In Full)
National Rifle Association of America Political Victory Fund

| | |
|---|---|
| <p>A.</p> <p>Full Name (Last, First, Middle Initial) Wisconsin State Elections Board</p> <p>Mailing Address 17 West Main Street, Suite 310 P.O. Box 2973</p> <p>City Madison State WI Zip Code 53701-2973</p> <p>Purpose of Disbursement Annual Filing Fee</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> | <p>Transaction ID: 28071558</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="1"/> / <input type="text" value="3"/> <input type="text" value="1"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="9"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="100.00"/></p> <p>Annual Filing Fee</p> |
| <p>B.</p> <p>Full Name (Last, First, Middle Initial) New Media Communications Inc.</p> <p>Mailing Address 3046 Brecksville Road</p> <p>City Richfield State OH Zip Code 44286</p> <p>Purpose of Disbursement Website Hosting / Service Fee</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> | <p>Transaction ID: 28071559</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="1"/> / <input type="text" value="1"/> <input type="text" value="2"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="9"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="2600.00"/></p> <p>Website Hosting / Service Fee</p> |
| <p>C.</p> <p>Full Name (Last, First, Middle Initial) Wachovia - Account Analysis</p> <p>Mailing Address P.O. Box 2080</p> <p>City Jacksonville State FL Zip Code 32231</p> <p>Purpose of Disbursement Account Analysis Fees</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> | <p>Transaction ID: 28374432</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="1"/> / <input type="text" value="1"/> <input type="text" value="2"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="9"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="249.25"/></p> <p>Account Analysis Fees</p> |

| | |
|--|--------------------------------------|
| SUBTOTAL of Disbursements This Page (optional) | <input type="text" value="2949.25"/> |
| TOTAL This Period (last page this line number only) | <input type="text"/> |

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 |

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NAME OF COMMITTEE (In Full)
National Rifle Association of America Political Victory Fund

| | | | |
|-----------|--|--|--|
| A. | Full Name (Last, First, Middle Initial) Bank of America - NY Mailing Address 671 County Route 1 City Pine Island State NY Zip Code 10969 Purpose of Disbursement Account Analysis Fees Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Transaction ID: 28374435 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 1 5 / 2 0 0 9 | Amount of Each Disbursement this Period 10.08 |
| | | | Account Analysis Fees |
| B. | Full Name (Last, First, Middle Initial) Bank of the West Mailing Address 224 Box Butte Avenue City Alliance State NE Zip Code 69301 Purpose of Disbursement Account Analysis Fees Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Transaction ID: 28374437 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 3 1 / 2 0 0 9 | Amount of Each Disbursement this Period 12.00 |
| | | | Account Analysis Fees |
| C. | Full Name (Last, First, Middle Initial) Wachovia - Account Analysis Mailing Address P.O. Box 2080 City Jacksonville State FL Zip Code 32231 Purpose of Disbursement Account Analysis Fees Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Transaction ID: 28374439 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 1 2 / 2 0 0 9 | Amount of Each Disbursement this Period 12.01 |
| | | | Account Analysis Fees |

| | | |
|--|---|-------|
| SUBTOTAL of Disbursements This Page (optional) | ▶ | 34.09 |
| 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)

PAGE 23 / 28

| | | | | | |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|------------------------------|
| <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 Rifle Association of America Political Victory Fund

| | | |
|----|--|---|
| A. | Full Name (Last, First, Middle Initial) American Express Company | Transaction ID: 28374441 Date of Disbursement 01 / 31 / 2009 |
| | Mailing Address P.O. Box 53852 | |
| | City Phoenix State AZ Zip Code 85072 | Amount of Each Disbursement this Period 102.74 |
| | Purpose of Disbursement Credit Card Fees Candidate Name | 001 Category/ Type |
| | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |
| | | Credit Card Fees |

| | | |
|----|--|---|
| B. | Full Name (Last, First, Middle Initial) Wachovia Bank | Transaction ID: 28374444 Date of Disbursement 01 / 02 / 2009 |
| | Mailing Address 10501 Main Street | |
| | City Fairfax State VA Zip Code 22030 | Amount of Each Disbursement this Period 20.00 |
| | Purpose of Disbursement Credit Card Fees Candidate Name | 001 Category/ Type |
| | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |
| | | Credit Card Fees |

| | | |
|----|--|---|
| C. | Full Name (Last, First, Middle Initial) Wachovia Bank | Transaction ID: 28374445 Date of Disbursement 01 / 05 / 2009 |
| | Mailing Address 10501 Main Street | |
| | City Fairfax State VA Zip Code 22030 | Amount of Each Disbursement this Period 20.47 |
| | Purpose of Disbursement Credit Card Fees Candidate Name | 001 Category/ Type |
| | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |
| | | Credit Card Fees |

| | | |
|--|---|--------|
| SUBTOTAL of Disbursements This Page (optional) | ▶ | 143.21 |
| 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)

PAGE 24 / 28

| | | | | | | | | | | | |
|-------------------------------------|-----|--------------------------|-----|--------------------------|-----|--------------------------|-----|--------------------------|----|--------------------------|-----|
| <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 |

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

PAYMENTECH, INC.

Mailing Address 4 NORTHEASTERN BLVD

City SALEM State NH Zip Code 03079

Purpose of Disbursement
Credit Card Fees

Candidate Name

001
Category/
Type

Office Sought: House
 Senate
 President

State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Transaction ID: 28374446

Date of Disbursement

01 / 31 / 2009

Amount of Each Disbursement this Period

938.52

Credit Card Fees

SUBTOTAL of Disbursements This Page (optional)

938.52

TOTAL This Period (last page this line number only)

7841.25

**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)

PAGE 25 / 28

| | | | | | |
|------------------------------|------------------------------|--|------------------------------|-----------------------------|------------------------------|
| <input type="checkbox"/> 21b | <input type="checkbox"/> 22 | <input checked="" 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 |

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

Kansans For Tiaht

Transaction ID: 28199001

Date of Disbursement

| | | | | | | | | | |
|----------------|----------------|---|----------------|----------------|---|----------------|----------------|----------------|----------------|
| ^M 0 | ^M 1 | / | ^D 3 | ^D 1 | / | ^Y 2 | ^Y 0 | ^Y 0 | ^Y 9 |
|----------------|----------------|---|----------------|----------------|---|----------------|----------------|----------------|----------------|

Mailing Address 2250 N Rock Road
Suite 118a

City Wichita State KS Zip Code 67226

Amount of Each Disbursement this Period

| |
|---------|
| 4950.00 |
|---------|

Purpose of Disbursement

| |
|-------------------|
| 011 |
| Category/ Type |

Candidate Name
Rep. Todd Tiaht

Office Sought: House
 Senate
 President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: KS District: 04

SUBTOTAL of Disbursements This Page (optional) ►

| |
|---------|
| 4950.00 |
|---------|

TOTAL This Period (last page this line number only) ►

| |
|---------|
| 4950.00 |
|---------|

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: (check only one)

9
 10

NAME OF COMMITTEE (In Full)
National Rifle Association of America Political Victory Fund

| | | | |
|---|-------|----------|---|
| A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Edmonds Associates, Inc. | | | Nature of Debt (Purpose): Radio Ad Production Cost - Estimated |
| Mailing Address 8221 Old Courthouse Road, Suite 2 | | | |
| City | State | ZIP Code | |
| Vienna | VA | 22182 | |

| | | | |
|--|--|--|--|
| Outstanding Balance Beginning This Period <input type="text" value="91150.00"/> | | Transaction ID: 28391632 | |
| Amount Incurred This Period <input type="text" value="0.00"/> | Payment This Period <input type="text" value="0.00"/> | Outstanding Balance at Close of This Period <input type="text" value="91150.00"/> | |

| | | | |
|---|-------|----------|--|
| B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Edmonds Associates, Inc. | | | Nature of Debt (Purpose): TV Ad Production - Estimated Cost |
| Mailing Address 8221 Old Courthouse Road, Suite 2 | | | |
| City | State | ZIP Code | |
| Vienna | VA | 22182 | |

| | | | |
|--|--|--|--|
| Outstanding Balance Beginning This Period <input type="text" value="41500.00"/> | | Transaction ID: 28391633 | |
| Amount Incurred This Period <input type="text" value="0.00"/> | Payment This Period <input type="text" value="0.00"/> | Outstanding Balance at Close of This Period <input type="text" value="41500.00"/> | |

| | | | |
|---|-------|----------|--|
| C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Edmonds Associates, Inc. | | | Nature of Debt (Purpose): Magazine Ad Production - Estimated Cost |
| Mailing Address 8221 Old Courthouse Road, Suite 2 | | | |
| City | State | ZIP Code | |
| Vienna | VA | 22182 | |

| | | | |
|---|--|---|--|
| Outstanding Balance Beginning This Period <input type="text" value="3750.00"/> | | Transaction ID: 28391634 | |
| Amount Incurred This Period <input type="text" value="0.00"/> | Payment This Period <input type="text" value="0.00"/> | Outstanding Balance at Close of This Period <input type="text" value="3750.00"/> | |

| | |
|--|--|
| 1) SUBTOTALS This Period This Page (optional)..... | <input type="text" value="510400.00"/> |
| 2) TOTALS This Period (last page this line number only)..... | <input type="text"/> |
| 3) TOTAL OUTSTANDING LOANS from Schedule C (last page only)..... | <input type="text"/> |
| 4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) | <input type="text"/> |

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: (check only one)

9
 10

NAME OF COMMITTEE (In Full)
National Rifle Association of America Political Victory Fund

| | | | |
|---|-------|----------|---|
| A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Edmonds Associates, Inc. | | | Nature of Debt (Purpose): Print 4 Color Flyers - Production Cost |
| Mailing Address 8221 Old Courthouse Road, Suite 2 | | | |
| City | State | ZIP Code | |
| Vienna | VA | 22182 | |

| | | | |
|--|--|--|--|
| Outstanding Balance Beginning This Period <input type="text" value="18125.00"/> | | Transaction ID: 28391635 | |
| Amount Incurred This Period <input type="text" value="0.00"/> | Payment This Period <input type="text" value="0.00"/> | Outstanding Balance at Close of This Period <input type="text" value="18125.00"/> | |

| | | | |
|---|-------|----------|---|
| B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Edmonds Associates, Inc. | | | Nature of Debt (Purpose): Billboard Ad Production Cost |
| Mailing Address 8221 Old Courthouse Road, Suite 2 | | | |
| City | State | ZIP Code | |
| Vienna | VA | 22182 | |

| | | | |
|--|--|--|--|
| Outstanding Balance Beginning This Period <input type="text" value="13795.00"/> | | Transaction ID: 28391636 | |
| Amount Incurred This Period <input type="text" value="0.00"/> | Payment This Period <input type="text" value="0.00"/> | Outstanding Balance at Close of This Period <input type="text" value="13795.00"/> | |

| | | | |
|---|-------|----------|---|
| C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Edmonds Associates, Inc. | | | Nature of Debt (Purpose): Newspaper Ad Production Cost |
| Mailing Address 8221 Old Courthouse Road, Suite 2 | | | |
| City | State | ZIP Code | |
| Vienna | VA | 22182 | |

| | | | |
|---|--|---|--|
| Outstanding Balance Beginning This Period <input type="text" value="9250.00"/> | | Transaction ID: 28391637 | |
| Amount Incurred This Period <input type="text" value="0.00"/> | Payment This Period <input type="text" value="0.00"/> | Outstanding Balance at Close of This Period <input type="text" value="9250.00"/> | |

| | |
|--|---------------------------------------|
| 1) SUBTOTALS This Period This Page (optional)..... | <input type="text" value="41170.00"/> |
| 2) TOTALS This Period (last page this line number only)..... | <input type="text"/> |
| 3) TOTAL OUTSTANDING LOANS from Schedule C (last page only)..... | <input type="text"/> |
| 4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) | <input type="text"/> |

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

| | |
|---|---|
| (Use separate schedule(s) for each numbered line) | PAGE 28 / 28 |
| | FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10 |

NAME OF COMMITTEE (In Full)
National Rifle Association of America Political Victory Fund

| | | | | | | |
|--|---|----------|-------|----------|--------|----|
| <p>A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Edmonds Associates, Inc.</p> | <p>Nature of Debt (Purpose): Shipping Expense</p> | | | | | |
| <p>Mailing Address 8221 Old Courthouse Road, Suite 2</p> | | | | | | |
| <table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 33%;">City</td> <td style="width: 33%;">State</td> <td style="width: 33%;">ZIP Code</td> </tr> <tr> <td>Vienna</td> <td>VA</td> <td>22182</td> </tr> </table> | | City | State | ZIP Code | Vienna | VA |
| City | State | ZIP Code | | | | |
| Vienna | VA | 22182 | | | | |

| | | |
|---|---------------------------------|---|
| Outstanding Balance Beginning This Period | Transaction ID: 28391638 | |
| 10919.65 | | |
| Amount Incurred This Period | Payment This Period | Outstanding Balance at Close of This Period |
| 0.00 | 0.00 | 10919.65 |

| | |
|--|-----------|
| 1) SUBTOTALS This Period This Page (optional)..... | 10919.65 |
| 2) TOTALS This Period (last page this line number only)..... | 562489.65 |
| 3) TOTAL OUTSTANDING LOANS from Schedule C (last page only)..... | 0.00 |
| 4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) | 562489.65 |