

# 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 2010 through 01 31 2010

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 03 18 2010

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)

A. Form/Schedule : **F3XA**  
Transaction ID :

This amendment updates any employment information for Line 11, Schedule A, which has been received since the original filing.

**SUMMARY PAGE**  
**OF RECEIPTS AND DISBURSEMENTS**

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	1	0

 To: 

M	M
0	1

D	D
3	1

Y	Y	Y	Y
2	0	1	0

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>1</td><td>0</td></tr></table>	Y	Y	Y	Y	2	0	1	0		8398686.32
Y	Y	Y	Y							
2	0	1	0							
(b) Cash on Hand at Beginning of Reporting Period .....	8398686.32									
(c) Total Receipts (from Line 19) .....	325913.72	325913.72								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	8724600.04	8724600.04								
7. Total Disbursements (from Line 31) .....	35781.68	35781.68								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	8688818.36	8688818.36								
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) .....	0.00									

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	1	0

 To: 

M	M
0	1

D	D
3	1

Y	Y	Y	Y
2	0	1	0

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) .....	14500.00	14500.00
(ii) Unitemized .....	309666.22	309666.22
(iii) TOTAL (add Lines 11(a)(i) and (ii) .....	324166.22	324166.22
(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) .....	324166.22	324166.22
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.) .....	1747.50	1747.50
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)) .....	325913.72	325913.72
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	325913.72	325913.72

**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

<b>II. DISBURSEMENTS</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Calendar Year-to-Date</b>
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.....	3463.08	3463.08
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶	3463.08	3463.08
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	7650.00	7650.00
24. Independent Expenditure (use Schedule E) .....	3379.28	3379.28
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.....	21289.32	21289.32
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))..	35781.68	35781.68
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	35781.68	35781.68

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 02/2003)

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) .....	324166.22	324166.22
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	324166.22	324166.22
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	3463.08	3463.08
37. Offsets to Operating Expenditures (from Line 15, page 3) .....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	3463.08	3463.08

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

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

FOR LINE NUMBER: PAGE 7 / 34  
(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)  
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 ▼ 1746.03  
Date of Receipt: 01 / 12 / 2010  
Transaction ID: 33528131  
Amount of Each Receipt this Period: 1746.03  
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 ▼ 0.79  
Date of Receipt: 01 / 29 / 2010  
Transaction ID: 33528132  
Amount of Each Receipt this Period: 0.79  
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 ▼ 1746.44  
Date of Receipt: 01 / 29 / 2010  
Transaction ID: 33528133  
Amount of Each Receipt this Period: 0.41  
Interest Income

**SUBTOTAL** of Receipts This Page (optional) ..... ► 1747.23  
**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 8 / 34	
	(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"/> 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

<b>A.</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="29"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	Fairfax	VA	22030
	FEC ID number of contributing federal political committee.		Transaction ID: 33528134
	C		Amount of Each Receipt this Period
Name of Employer		Occupation	<input type="text" value="0.27"/>
Receipt For:		Aggregate Year-to-Date ▼	Interest Income
<input type="checkbox"/> Primary <input type="checkbox"/> General		<input type="text" value="0.27"/>	
<input type="checkbox"/> Other (specify) ▼			

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<input type="text" value="0.27"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text" value="1747.50"/>

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 9 / 34

(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 MARK F DODGE

Mailing Address 1460 GOLF DR

City State Zip Code  
GILBERTSVILLE PA 19525-8815

FEC ID number of contributing federal political committee. C

Name of Employer Occupation  
PFIZER, INC RESEARCH & DEVELOPEMENT

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 / 0 7 / 2 0 1 0

**Transaction ID:** 33528332

Amount of Each Receipt this Period 250.00

**B.** Full Name (Last, First, Middle Initial)  
MR ARTHUR HANCOCK

Mailing Address 200 STONEY POINT RD

City State Zip Code  
PARIS KY 40361-9144

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 / 1 9 / 2 0 1 0

**Transaction ID:** 33528934

Amount of Each Receipt this Period 500.00

**C.** Full Name (Last, First, Middle Initial)  
MR JOE HALL

Mailing Address PO BOX 445

City State Zip Code  
ANAHUAC TX 77514-0445

FEC ID number of contributing federal political committee. C

Name of Employer Occupation  
SELF EMPLOYED ATTORNEY

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 1 0

**Transaction ID:** 33529059

Amount of Each Receipt this Period 500.00

**SUBTOTAL** of Receipts This Page (optional) ..... 1250.00

**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 10 / 34
	<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

<b>A.</b>	Full Name (Last, First, Middle Initial) MR JAMES R FETTER, JR		Date of Receipt	
	Mailing Address PO BOX 205		M M / D D / Y Y Y Y Y 0 1 / 2 2 / 2 0 1 0	
	City	State	Zip Code	<b>Transaction ID:</b> 33529105
	MUNCY	PA	17756-0205	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. <b>C</b>		300.00	
Name of Employer MUNCY MACHINE & TOOL COMP-ANY, INC		Occupation MANAGER		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼		
		300.00		

<b>B.</b>	Full Name (Last, First, Middle Initial) MR SHANE MACAULAY		Date of Receipt	
	Mailing Address 3832 132ND AVE NE		M M / D D / Y Y Y Y Y 0 1 / 2 9 / 2 0 1 0	
	City	State	Zip Code	<b>Transaction ID:</b> 33529586
	BELLEVUE	WA	98005-1308	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. <b>C</b>		250.00	
Name of Employer RADIOLOGY CONSULTANTA OF WASHI		Occupation PHYSICIAN		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼		
		250.00		

<b>C.</b>	Full Name (Last, First, Middle Initial) MR CARL W JOBSKY		Date of Receipt	
	Mailing Address 12937 195TH PL NE		M M / D D / Y Y Y Y Y 0 1 / 2 6 / 2 0 1 0	
	City	State	Zip Code	<b>Transaction ID:</b> 33530949
	WOODINVILLE	WA	98077-5645	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. <b>C</b>		300.00	
Name of Employer		Occupation RETIRED		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼		
		300.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	850.00
<b>TOTAL</b> 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 / 34

(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 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  
RETIRED

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 1 / 0 7 / 2 0 1 0

Transaction ID: 33531167

Amount of Each Receipt this Period

1000.00

**B.**

Full Name (Last, First, Middle Initial)

MR B R KNIFLEY

Mailing Address 4531 ANTHOSTON FROG ISLAND RD

City State Zip Code  
HENDERSON KY 42420-9328

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 Y  
0 1 / 1 4 / 2 0 1 0

Transaction ID: 33531259

Amount of Each Receipt this Period

250.00

**C.**

Full Name (Last, First, Middle Initial)

MR JIM HARPER

Mailing Address 680 VINEWOOD AVE

City State Zip Code  
BIRMINGHAM MI 48009-1311

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

Name of Employer Occupation  
GREATER MEDIA RAIDO ANNOUNCER

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 / 2 8 / 2 0 1 0

Transaction ID: 33531279

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 12 / 34  
(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 RANDY G DARLING

Mailing Address 12920 CHARDON WINDSOR RD

City CHARDON State OH Zip Code 44024-8972

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

Name of Employer AYRSHIRE, INC Occupation PRESIDENT

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt: 01 / 25 / 2010  
Transaction ID: 33531750  
Amount of Each Receipt this Period: 250.00

**B.** Full Name (Last, First, Middle Initial)  
MR KEITH PEARSON

Mailing Address 22102 CAPE MAY LN

City HUNTINGTON BEACH State CA Zip Code 92646-8415

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

Name of Employer RETIRED Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt: 01 / 05 / 2010  
Transaction ID: 33532622  
Amount of Each Receipt this Period: 500.00

**C.** Full Name (Last, First, Middle Initial)  
MR RAY M M HAWKINS

Mailing Address 1423 CLAYTON ST

City PERRYVILLE State MD Zip Code 21903-2533

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

Name of Employer Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt: 01 / 21 / 2010  
Transaction ID: 33532792  
Amount of Each Receipt this Period: 500.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 1250.00

**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 / 34

(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 WILLIAM SMITH

Mailing Address 35 CEDARWOOD TER

City State Zip Code  
WOODLAND PARK NJ 07424-3710

FEC ID number of contributing federal political committee. C

Name of Employer Occupation  
UNITED STATES ELEVATOR, INC SALES MANAGER

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 01 / 20 / 2010

**Transaction ID:** 33532815

Amount of Each Receipt this Period 250.00

**B.**

Full Name (Last, First, Middle Initial)  
MR ANDREW C FRECHTLING

Mailing Address 1141 GREATHOUSE RD

City State Zip Code  
WAXAHACHIE TX 75167-8309

FEC ID number of contributing federal political committee. C

Name of Employer Occupation  
SOUTHWEST AIRLINES PILOT

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 01 / 26 / 2010

**Transaction ID:** 33533124

Amount of Each Receipt this Period 250.00

**C.**

Full Name (Last, First, Middle Initial)  
MR ARLAN A HESSE

Mailing Address 1716 COUNTY ROAD 69

City State Zip Code  
PROCTORVILLE OH 45669-8950

FEC ID number of contributing federal political committee. C

Name of Employer Occupation  
INCO ALLOYS INTERNATIONAL RETIRED - METALLURGIST

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt 01 / 20 / 2010

**Transaction ID:** 33533399

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 14 / 34  
(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 KEVIN J KRIEG

Mailing Address PO BOX 339

City State Zip Code  
MC ALLISTER MT 59740-0339

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

Name of Employer Occupation  
SELF EMPLOYED RANCHER

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt: 01 / 28 / 2010  
Transaction ID: 33533574  
Amount of Each Receipt this Period: 400.00

**B.** Full Name (Last, First, Middle Initial)  
MR RICHARD C BURNSIDE

Mailing Address 1002 TONEY DR SE

City State Zip Code  
HUNTSVILLE AL 35802-1123

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

Name of Employer Occupation  
THE ORTHOPEDIC CENTER PHYSICIAN

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt: 01 / 25 / 2010  
Transaction ID: 33533736  
Amount of Each Receipt this Period: 250.00

**C.** Full Name (Last, First, Middle Initial)  
MR LARRY W BOLTON

Mailing Address 4822 W STATE ROUTE 62

City State Zip Code  
BOONVILLE IN 47601-9514

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

Name of Employer Occupation  
WHIRLPOOL RETIRED

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt: 01 / 26 / 2010  
Transaction ID: 33534091  
Amount of Each Receipt this Period: 250.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 900.00

**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 / 34

(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 CHARLES H GOODWIN

Mailing Address PO BOX 2917

City

HIGH SPRINGS

State

FL

Zip Code

32655-2917

FEC ID number of contributing federal political committee.

C

Name of Employer  
SELF EMPLOYED

Occupation

RETIRED FARMER / TIMBER / INVESTMENTS

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 7 / 2 0 1 0

Transaction ID: 33534964

Amount of Each Receipt this Period

250.00

**B.**

Full Name (Last, First, Middle Initial)

MR TIM LANGDON

Mailing Address 2804 DRY BRANCH DR

City

HARRISON

State

AR

Zip Code

72601-9717

FEC ID number of contributing federal political committee.

C

Name of Employer  
GULF INTRACOASTAL CONSTRU-  
CTORS

Occupation

EQUIPMENT MANAGER

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 / 0 7 / 2 0 1 0

Transaction ID: 33535015

Amount of Each Receipt this Period

250.00

**C.**

Full Name (Last, First, Middle Initial)

DR HOLLACE D CHASTAIN, II

Mailing Address 1819 BRAEMAR DR

City

FORT WAYNE

State

IN

Zip Code

46814-9364

FEC ID number of contributing federal political committee.

C

Name of Employer  
FORT WAYNE CARDIOLOGY

Occupation

CARDIOLOGIST

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 2 / 2 0 1 0

Transaction ID: 33535016

Amount of Each Receipt this Period

250.00

**SUBTOTAL** of Receipts This Page (optional) .....

750.00

**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 16 / 34  
(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 ROGER RIEDEL

Mailing Address 168 HICKORY ST

City MAHTOMEDI State MN Zip Code 55115-1764

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

Name of Employer: ROGER RIEDEL CONSULTING Occupation: ENGINEERING CONSULTANT

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt: 01 / 19 / 2010  
**Transaction ID: 33535051**  
 Amount of Each Receipt this Period: 250.00

**B.**

Full Name (Last, First, Middle Initial)  
MR THOMAS R ZEIGLER

Mailing Address PO BOX 185

City GARDNERS State PA Zip Code 17324-0185

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

Name of Employer: ZEIGLER BROTHERS, INC Occupation: SENIOR TECHNICAL ADVISOR

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt: 01 / 29 / 2010  
**Transaction ID: 33535543**  
 Amount of Each Receipt this Period: 500.00

**C.**

Full Name (Last, First, Middle Initial)  
TIMOTHY BROWN

Mailing Address 210 VINE ST

City DENVER State CO Zip Code 80206-4653

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

Name of Employer: NRC BROADCASTING Occupation: CEO

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt: 01 / 22 / 2010  
**Transaction ID: 33535564**  
 Amount of Each Receipt this Period: 250.00

**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 17 / 34  
(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
							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 JAMES THORNE

Mailing Address 15170 234TH ST

City State Zip Code  
TONGANOXIE KS 66086-3322

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  
MM / DD / YYYY  
01 / 26 / 2010

**Transaction ID:** 33536161

Amount of Each Receipt this Period  
1000.00

**B.**

Full Name (Last, First, Middle Initial)  
MR DARRELL AULDS

Mailing Address 29 SPARTINA POINT DR

City State Zip Code  
HILTON HEAD ISLAND SC 29926-1076

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

Name of Employer Occupation  
NDA & ASSOCIATES, LLC OWNER / CONSULTANT

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  
MM / DD / YYYY  
01 / 26 / 2010

**Transaction ID:** 33536204

Amount of Each Receipt this Period  
1000.00

**C.**

Full Name (Last, First, Middle Initial)  
MR FLOYD BOELENS

Mailing Address PO BOX 352

City State Zip Code  
THERMOPOLIS WY 82443-0352

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

Name of Employer Occupation  
BOELENS' WALL SERVICE, LLC OWNER

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
MM / DD / YYYY  
01 / 26 / 2010

**Transaction ID:** 33536453

Amount of Each Receipt this Period  
250.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **2250.00**

**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 / 34  
(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 HARRY J FOLEY

Mailing Address 12252 SUNVIEW CT

City SOUTH LYON State MI Zip Code 48178-8164

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

Name of Employer AMERITECH (AT&T) Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
MM / DD / YYYY  
01 / 25 / 2010

**Transaction ID:** 33536735

Amount of Each Receipt this Period  
250.00

**B.**

Full Name (Last, First, Middle Initial)  
NATHAN BLALOCK, III

Mailing Address PO BOX 1308

City SKAGWAY State AK Zip Code 99840-1308

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 / 07 / 2010

**Transaction ID:** 33537377

Amount of Each Receipt this Period  
250.00

**C.**

Full Name (Last, First, Middle Initial)  
MR JOSEPH C LAYMAN

Mailing Address 915 RIVER ESTATES CT

City POWHATAN State VA Zip Code 23139-7242

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

Name of Employer LAYMAN & SON ENTERPRISES, LLC Occupation CONTRACTOR

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
MM / DD / YYYY  
01 / 04 / 2010

**Transaction ID:** 33537395

Amount of Each Receipt this Period  
250.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **750.00**

**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 / 34

(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)

JOHN L HOLMES

Mailing Address 103 WEATHERS CIR

City State Zip Code  
FOUNTAIN INN SC 29644-1647

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 6 / 2 0 1 0

Transaction ID: 33537826

Amount of Each Receipt this Period

500.00

**B.**

Full Name (Last, First, Middle Initial)

MR MIKE MCDONNELL

Mailing Address 5430 W HARTFORD AVE

City State Zip Code  
GLENDALE AZ 85308-5323

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

Name of Employer Occupation  
HIGH-TECH INSTITUTE ADMINISTRATOR

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 / 1 3 / 2 0 1 0

Transaction ID: 33537856

Amount of Each Receipt this Period

250.00

**C.**

Full Name (Last, First, Middle Initial)

MR ROBERT CARLSON

Mailing Address PO BOX 63

City State Zip Code  
HILLSBORO OR 97123-0063

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

Name of Employer Occupation  
SELF EMPLOYED ROOFING CONTRACTOR

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 6 / 2 0 1 0

Transaction ID: 33538060

Amount of Each Receipt this Period

250.00

**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 20 / 34  
(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 DAVID M BUSH

Mailing Address 13630 COUNTY ROAD 100

City State Zip Code  
BIG PRAIRIE OH 44611-9525

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

Name of Employer Occupation  
ADENA CORPORATION DIRECTOR (BOARD OF DIRECTORS)

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt  
MM / DD / YYYY  
01 / 26 / 2010

**Transaction ID:** 33538143

Amount of Each Receipt this Period  
1000.00

**B.** Full Name (Last, First, Middle Initial)  
MR DENNIS GAY

Mailing Address 6168 FIELD ROSE DR

City State Zip Code  
SALT LAKE CITY UT 84121-1568

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

Name of Employer Occupation  
BYDEX MANAGEMENT

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
MM / DD / YYYY  
01 / 27 / 2010

**Transaction ID:** 33538562

Amount of Each Receipt this Period  
500.00

**C.** Full Name (Last, First, Middle Initial)  
MR WALTER DAVIS

Mailing Address 2411 STABLERIDGE DR

City State Zip Code  
CONROE TX 77384-3365

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 / 25 / 2010

**Transaction ID:** 33538851

Amount of Each Receipt this Period  
250.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 1750.00

**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 21 / 34  
(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

<b>A.</b>	Full Name (Last, First, Middle Initial) MR EDWARD D KRATOVIL		Date of Receipt	
	Mailing Address 3300 N VERMONT ST		M M / D D / Y Y Y Y 0 1 / 2 5 / 2 0 1 0	
	City	State	Zip Code	<b>Transaction ID: 33538979</b>
	ARLINGTON	VA	22207-4469	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.		C	250.00
Name of Employer		Occupation		
		NONE		
Receipt For:		Aggregate Year-to-Date ▼		
<input type="checkbox"/> Primary <input type="checkbox"/> General		250.00		
<input type="checkbox"/> Other (specify) ▼				

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	250.00
<b>TOTAL</b> This Period (last page this line number only) .....	14500.00

**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 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

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

<p><b>A.</b> Full Name (Last, First, Middle Initial) Ralston for Representative Committee</p> <p>Mailing Address P.O. Box 1196</p> <p>City Blue Ridge State GA Zip Code 30513</p> <p>Purpose of Disbursement David Ralston, STATE HOUSE 7th GA</p> <p>Candidate Name GA Rep. David Ralston</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: GA District: 07</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 33012324 <b>Date of Disbursement</b> 01 / 07 / 2010</p> <p>Amount of Each Disbursement this Period 1000.00</p> <p>011 Category/ Type</p> <p>David Ralston, STATE HOUSE 7th GA</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Adams for District Attorney</p> <p>Mailing Address 20 Alpine Drive</p> <p>City Mohnton State PA Zip Code 19540</p> <p>Purpose of Disbursement John Adams, LOCAL PA</p> <p>Candidate Name John Adams</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 33024311 <b>Date of Disbursement</b> 01 / 11 / 2010</p> <p>Amount of Each Disbursement this Period 250.00</p> <p>011 Category/ Type</p> <p>John Adams, LOCAL PA</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Bart Davis Campaign</p> <p>Mailing Address 2638 Bellin Circle</p> <p>City Idaho Falls State ID Zip Code 83402</p> <p>Purpose of Disbursement Bart Davis, STATE SENATE 33rd ID</p> <p>Candidate Name Senator Bart Davis</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: ID District:</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 33024407 <b>Date of Disbursement</b> 01 / 11 / 2010</p> <p>Amount of Each Disbursement this Period 500.00</p> <p>011 Category/ Type</p> <p>Bart Davis, STATE SENATE 33rd ID</p>

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

1750.00

**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

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

<p><b>A.</b> Full Name (Last, First, Middle Initial) Curt McKenzie Campaign</p> <p>Mailing Address 1004 W. Fort Street</p> <p>City Boise State ID Zip Code 83702</p> <p>Purpose of Disbursement Curt McKenzie, STATE SENATE 12th ID</p> <p>Candidate Name ID Sen. Curt McKenzie</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: ID District:</p>	<p><b>Transaction ID:</b> 33024410</p> <p>Date of Disbursement 01 / 11 / 2010</p> <p>Amount of Each Disbursement this Period 500.00</p> <p>011 Category/ Type</p> <p>Curt McKenzie, STATE SENA- TE 12th ID</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Ken Roberts Campaign</p> <p>Mailing Address P.O. Box 1177</p> <p>City Donnelly State ID Zip Code 83615</p> <p>Purpose of Disbursement Ken Roberts, STATE HOUSE 8th ID</p> <p>Candidate Name Ken Roberts</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: ID District: 08</p>	<p><b>Transaction ID:</b> 33024412</p> <p>Date of Disbursement 01 / 11 / 2010</p> <p>Amount of Each Disbursement this Period 500.00</p> <p>011 Category/ Type</p> <p>Ken Roberts, STATE HOUSE 8th ID</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Russell M. Fulcher for Senate</p> <p>Mailing Address 4035 S. Linder Road</p> <p>City Meridian State ID Zip Code 83642</p> <p>Purpose of Disbursement Russell Fulcher, STATE SENATE 21st ID</p> <p>Candidate Name ID Sen. Russell Fulcher</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: ID District:</p>	<p><b>Transaction ID:</b> 33024414</p> <p>Date of Disbursement 01 / 11 / 2010</p> <p>Amount of Each Disbursement this Period 500.00</p> <p>011 Category/ Type</p> <p>Russell Fulcher, STATE SE- NATE 21st ID</p>

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

1500.00

**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 / 34

<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

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

A.	Full Name (Last, First, Middle Initial) Committee to Elect Mike Moyle	Transaction ID: 33024415 Date of Disbursement 01 / 11 / 2010
	Mailing Address 480 N. Plummer Road	Amount of Each Disbursement this Period 750.00
	City Star State ID Zip Code 83669	
	Purpose of Disbursement Mike Moyle, STATE HOUSE 14th ID	011 Category/ Type
	Candidate Name Representa Mike Moyle	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Mike Moyle, STATE HOUSE 14th ID
	State: ID District: 14	

B.	Full Name (Last, First, Middle Initial) Committee to Elect Judy Boyle	Transaction ID: 33024416 Date of Disbursement 01 / 11 / 2010
	Mailing Address P.O. Box 57	Amount of Each Disbursement this Period 750.00
	City Midvale State ID Zip Code 83645	
	Purpose of Disbursement Judy Boyle, STATE HOUSE 9th ID	011 Category/ Type
	Candidate Name Judy Boyle	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Judy Boyle, STATE HOUSE 9th ID
	State: ID District: 09	

C.	Full Name (Last, First, Middle Initial) Idaho Senate Republican PAC	Transaction ID: 33027006 Date of Disbursement 01 / 11 / 2010
	Mailing Address 610 W. Grove Street	Amount of Each Disbursement this Period 50.00
	City Boise State ID Zip Code 83702	
	Purpose of Disbursement	011 Category/ Type
	Candidate Name	
	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) .....	1550.00
<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)

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<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

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

<p><b>A.</b> Full Name (Last, First, Middle Initial) OnMessage, Inc.</p> <p>Mailing Address 2130 Priest Bridge Drive, #11</p> <p>City Crofton State MD Zip Code 21114</p> <p>Purpose of Disbursement Opinion Research</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 33027415 <b>Date of Disbursement</b> 01 / 11 / 2010</p> <p>Amount of Each Disbursement this Period 14508.00</p> <p>005 Category/ Type</p> <p>Opinion Research</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Aiming Higher PAC</p> <p>Mailing Address 47 S. Meridian Street, Suite 200</p> <p>City Indianapolis State IN Zip Code 46204</p> <p>Purpose of Disbursement</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 33037262 <b>Date of Disbursement</b> 01 / 13 / 2010</p> <p>Amount of Each Disbursement this Period 1000.00</p> <p>011 Category/ Type</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Master Print, Inc.</p> <p>Mailing Address P.O. Box 1467</p> <p>City Newington State VA Zip Code 22122</p> <p>Purpose of Disbursement Independent Expenditure - Print 4 Color Cards</p> <p>Candidate Name Steve Hunt</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: VA District:</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Special-General2010</p>	<p><b>Transaction ID:</b> 33043279 <b>Date of Disbursement</b> 01 / 13 / 2010</p> <p>Amount of Each Disbursement this Period 1028.20</p> <p>011 Category/ Type</p> <p>Independent Expenditure - Print 4 Color Cards</p>

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

16536.20

**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

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

A.	Full Name (Last, First, Middle Initial) Prolist Inc.	Transaction ID: 33346956 Date of Disbursement 01 / 29 / 2010
	Mailing Address 8341 Beechcraft Avenue	Amount of Each Disbursement this Period 1471.51
	City Gaithersburg State MD Zip Code 20879-1509	
	Purpose of Disbursement Independent Expenditure - Postage	011 Category/ Type
	Candidate Name Steve Hunt	
	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: VA District:	Disbursement For: 2010 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Special-General2010
		Independent Expenditure - Postage

B.	Full Name (Last, First, Middle Initial) Prolist Inc.	Transaction ID: 33346960 Date of Disbursement 01 / 29 / 2010
	Mailing Address 8341 Beechcraft Avenue	Amount of Each Disbursement this Period 141.61
	City Gaithersburg State MD Zip Code 20879-1509	
	Purpose of Disbursement Independent Expenditure - Postcards	011 Category/ Type
	Candidate Name Steve Hunt	
	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: VA District:	Disbursement For: 2010 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Special-General2010
		Independent Expenditure - Postcards

C.	Full Name (Last, First, Middle Initial) Diane Black for State Senate	Transaction ID: 33382926 Date of Disbursement 01 / 31 / 2010
	Mailing Address 819 Plantation Blvd.	Amount of Each Disbursement this Period -750.00
	City Gallatin State TN Zip Code 37066	
	Purpose of Disbursement Void - Diane Black for State Senate	011 Category/ Type
	Candidate Name TN Sen. Diane Black	
	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: TN District:	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		Void - Diane Black for St-ate Senate

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>863.12</b>
<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

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

<p><b>A.</b> Full Name (Last, First, Middle Initial) Friends of John McComish</p> <p>Mailing Address 4463 E. Desert View Dirve</p> <p>City Phoenix State AZ Zip Code 85044</p> <p>Purpose of Disbursement Void - Friends of John McComish</p> <p>Candidate Name AZ Rep. John McComish</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: AZ District: 20</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 33382927 <b>Date of Disbursement</b> 01 / 31 / 2010</p> <p>Amount of Each Disbursement this Period -200.00</p> <p>011 Category/ Type</p> <p>Void - Friends of John Mc- Comish</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Elect Kirk Adams</p> <p>Mailing Address 3851 East Main Street</p> <p>City Mesa State AZ Zip Code 85205</p> <p>Purpose of Disbursement Void - Elect Kirk Adams</p> <p>Candidate Name AZ Rep. Kirk Adams</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: AZ District: 19</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 33382928 <b>Date of Disbursement</b> 01 / 31 / 2010</p> <p>Amount of Each Disbursement this Period -410.00</p> <p>011 Category/ Type</p> <p>Void - Elect Kirk Adams</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) People for Scott Gunderson</p> <p>Mailing Address P.O. Box 7</p> <p>City Waterford State WI Zip Code 53185</p> <p>Purpose of Disbursement Void - People for Scott Gunderson</p> <p>Candidate Name SCOTT L. GUNDERSON</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: WI District: 83</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 33382929 <b>Date of Disbursement</b> 01 / 31 / 2010</p> <p>Amount of Each Disbursement this Period -300.00</p> <p>011 Category/ Type</p> <p>Void - People for Scott Gunderson</p>

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

-910.00

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

21289.32

**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)

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<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

<b>A.</b>	Full Name (Last, First, Middle Initial) The Blue Dog PAC  Mailing Address 6849 Old Dominion Drive, Suite 22  City McLean State VA Zip Code 22101  Purpose of Disbursement  Candidate Name The Blue Dog PAC  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) ▼	<b>Transaction ID:</b> 33023860 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 1 / 1 1 / 2 0 1 0	Amount of Each Disbursement this Period  5000.00
<b>B.</b>	Full Name (Last, First, Middle Initial) Randy Hultgren For Congress  Mailing Address P.O. Box 39  City Batavia State IL Zip Code 60510  Purpose of Disbursement  Candidate Name Mr. Randy Hultgren  Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 14  Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> 33326418 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 1 / 2 7 / 2 0 1 0	Amount of Each Disbursement this Period  2500.00
<b>C.</b>	Full Name (Last, First, Middle Initial) NRA Institute for Legislative Action  Mailing Address 11250 Waples Mill Road  City Fairfax State VA Zip Code 22030  Purpose of Disbursement In-Kind - Reception Room Rental  Candidate Name Rep. Richard W. Pombo  Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CA District: 11  Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> 33356679 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 1 / 2 9 / 2 0 1 0	Amount of Each Disbursement this Period  150.00  In-Kind - Reception Room Rental

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	7650.00
<b>TOTAL</b> This Period (last page this line number only) .....	7650.00

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

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Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<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

<b>A.</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 Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	<b>Transaction ID:</b> 33034450 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 1 / 1 2 / 2 0 1 0	Amount of Each Disbursement this Period 50.00  Annual Filing Fee
<b>B.</b>	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 Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	<b>Transaction ID:</b> 33155884 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 1 / 1 5 / 2 0 1 0	Amount of Each Disbursement this Period 1303.97  Estimated Federal Taxes
<b>C.</b>	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 Annual Registration Fee Candidate Name  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>Transaction ID:</b> 33167587 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 1 / 1 9 / 2 0 1 0	Amount of Each Disbursement this Period 100.00  Annual Registration Fee

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....		<b>1453.97</b>	
<b>TOTAL</b> This Period (last page this line number only) .....			

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

Use separate schedule(s)  
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FOR LINE NUMBER:  
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<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

<b>A.</b>	Full Name (Last, First, Middle Initial) Wisconsin Government Accountability Board - Elections Division Mailing Address 212 E. Washington Ave., 3rd Floor P.O. Box 7984 City Madison State WI Zip Code 53707-7984 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: 33326118 Date of Disbursement 01 / 27 / 2010 Amount of Each Disbursement this Period 100.00 Annual Filing Fee	001 Category/ Type
<b>B.</b>	Full Name (Last, First, Middle Initial) Wachovia Bank Mailing Address 10501 Main Street City Fairfax State VA Zip Code 22030 Purpose of Disbursement Credit Card 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: 33528110 Date of Disbursement 01 / 04 / 2010 Amount of Each Disbursement this Period 10.00 Credit Card Fees	001 Category/ Type
<b>C.</b>	Full Name (Last, First, Middle Initial) Wachovia Bank Mailing Address 10501 Main Street City Fairfax State VA Zip Code 22030 Purpose of Disbursement Credit Card 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: 33528112 Date of Disbursement 01 / 05 / 2010 Amount of Each Disbursement this Period 71.12 Credit Card Fees	001 Category/ Type

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

181.12

**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

A.	Full Name (Last, First, Middle Initial) American Express Company	Transaction ID: 33528124 Date of Disbursement
	Mailing Address P.O. Box 53852	<input type="text" value="01"/> / <input type="text" value="31"/> / <input type="text" value="2010"/>
	City Phoenix State AZ Zip Code 85072	Amount of Each Disbursement this Period
	Purpose of Disbursement Credit Card Fees	<input type="text" value="114.59"/>
	Candidate Name	<input type="text" value="001"/> Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Credit Card Fees
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

B.	Full Name (Last, First, Middle Initial) PAYMENTECH, INC.	Transaction ID: 33528126 Date of Disbursement
	Mailing Address 4 NORTHEASTERN BLVD	<input type="text" value="01"/> / <input type="text" value="31"/> / <input type="text" value="2010"/>
	City SALEM State NH Zip Code 03079	Amount of Each Disbursement this Period
	Purpose of Disbursement Credit Card Fees	<input type="text" value="730.36"/>
	Candidate Name	<input type="text" value="001"/> Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Credit Card Fees
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

C.	Full Name (Last, First, Middle Initial) Wachovia - Account Analysis	Transaction ID: 33528127 Date of Disbursement
	Mailing Address P.O. Box 2080	<input type="text" value="01"/> / <input type="text" value="12"/> / <input type="text" value="2010"/>
	City Jacksonville State FL Zip Code 32231	Amount of Each Disbursement this Period
	Purpose of Disbursement Account Analysis Fees	<input type="text" value="923.75"/>
	Candidate Name	<input type="text" value="001"/> Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Account Analysis Fees
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<input type="text" value="1768.70"/>
<b>TOTAL</b> 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

<p><b>A.</b> Full Name (Last, First, Middle Initial) Bank of America - NY</p> <p>Mailing Address 671 County Route 1</p> <p>City Pine Island State NY Zip Code 10969</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 State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 33528128 <b>Date of Disbursement</b> 01 / 15 / 2010</p> <p>Amount of Each Disbursement this Period 19.01</p> <p>001 Category/ Type</p> <p>Account Analysis Fees</p>
<p><b>B.</b> 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 State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 33528129 <b>Date of Disbursement</b> 01 / 12 / 2010</p> <p>Amount of Each Disbursement this Period 14.87</p> <p>001 Category/ Type</p> <p>Account Analysis Fees</p>
<p><b>C.</b> 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 State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 33528130 <b>Date of Disbursement</b> 01 / 12 / 2010</p> <p>Amount of Each Disbursement this Period 25.41</p> <p>001 Category/ Type</p> <p>Account Analysis Fees</p>

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

59.29

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

3463.08

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

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund	FEC IDENTIFICATION NUMBER <b>C</b> C00053553
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee  
Prolist Inc.

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Mailing Address  
8341 Beechcraft Avenue

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City Gaithersburg	State MD	Zip Code 20879-1509
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Purpose of Expenditure Postage	Category/ Type 004
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Name of Federal Candidate supported or Opposed by expenditure:  
Mr. Scott Brown

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Calendar Year-To-Date Per Election for Office Sought	15494.52
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Date  
M M / D D / Y Y Y Y  
0 1 / 1 2 / 2 0 1 0

Amount  
15494.52

Transaction ID: 33036401

Office Sought:  House State: MA  
 Senate District: \_\_\_\_\_  
 Presidential

Check One:  Support  Oppose

Disbursement For:  Primary  General  
 Other (specify) : Special-General  
2010  
**[MEMO ITEM]**

Postage

Full Name (Last, First, Middle, Initial) of Payee  
Prolist Inc.

---

Mailing Address  
8341 Beechcraft Avenue

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City Gaithersburg	State MD	Zip Code 20879-1509
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Purpose of Expenditure Postcards - Data and Mailing	Category/ Type 004
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Name of Federal Candidate supported or Opposed by expenditure:  
Mr. Scott Brown

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Calendar Year-To-Date Per Election for Office Sought	16422.68
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Date  
M M / D D / Y Y Y Y  
0 1 / 1 2 / 2 0 1 0

Amount  
928.16

Transaction ID: 33036403

Office Sought:  House State: MA  
 Senate District: \_\_\_\_\_  
 Presidential

Check One:  Support  Oppose

Disbursement For:  Primary  General  
 Other (specify) : Special-General  
2010  
**[MEMO ITEM]**

Postcards - Data and Mailing

(a) SUBTOTAL of Itemized Independent Expenditures .....	0.00
(b) SUBTOTAL of Unitemized Independent Expenditures .....	
(c) TOTAL Independent Expenditures .....	

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

Mary Rose Adkins \_\_\_\_\_ Date M M / D D / Y Y Y Y  
Signature 0 3 / 1 8 / 2 0 1 0

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

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund		FEC IDENTIFICATION NUMBER <b>C</b> C00053553	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee Master Print, Inc.		Date M M / D D / Y Y Y Y 0 1 / 1 2 / 2 0 1 0	
Mailing Address P.O. Box 1467		Amount 3379.28	
City Newington		State VA	Zip Code 22122
Purpose of Expenditure Print 4 Color Cards		Category/ Type	004
Name of Federal Candidate supported or Opposed by expenditure: Mr. Scott Brown		Transaction ID: 33036398	
Calendar Year-To-Date Per Election for Office Sought		19801.96	
		Office Sought: <input type="checkbox"/> House State: MA <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> Presidential	
		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) : <u>Special-General</u> 2010	

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures .....	3379.28
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures .....	
(c) <b>TOTAL</b> Independent Expenditures .....	3379.28
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	Date M M / D D / Y Y Y Y 0 3 / 1 8 / 2 0 1 0