



**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	4

D	D
0	1

Y	Y	Y	Y
2	0	1	0

 To: 

M	M
0	4

D	D
3	0

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 .....	10135427.57									
(c) Total Receipts (from Line 19) .....	584888.69	2628630.21								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	10720316.26	11027316.53								
7. Total Disbursements (from Line 31) .....	86217.41	393217.68								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	10634098.85	10634098.85								
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) .....	15206.30									

This Committee has qualified as a multicandidate committee. (see FEC FORM 1M)

**For further information contact:**

Federal Election Commission  
999 E street, NW  
Washington, DC 20463

Toll Free 800-424-9530  
Local 202-694-1100

**DETAILED SUMMARY PAGE  
OF RECEIPTS**

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name

National Rifle Association of America Political Victory Fund

Report Covering the Period: From: 

M	M
0	4

D	D
0	1

Y	Y	Y	Y
2	0	1	0

 To: 

M	M
0	4

D	D
3	0

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) .....	32381.00	84358.30
(ii) Unitemized .....	549240.13	2534937.05
(iii) TOTAL (add Lines 11(a)(i) and (ii) .....	581621.13	2619295.35
(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) .....	581621.13	2619295.35
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) .....	1265.85	1265.85
16. Refunds of Contributions Made to Federal candidates and Other Political Committees .....	0.00	1100.00
17. Other Federal Receipts (Dividends, Interest, etc.) .....	2001.71	6969.01
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)) .....	584888.69	2628630.21
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	584888.69	2628630.21

**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.....	19337.14	36317.83
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶	19337.14	36317.83
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	28250.00	193600.00
24. Independent Expenditure (use Schedule E) .....	17917.95	37719.91
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.....	20712.32	125579.94
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))..	86217.41	393217.68
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	86217.41	393217.68

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 02/2003)

5 / 100

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) .....	581621.13	2619295.35
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	581621.13	2619295.35
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	19337.14	36317.83
37. Offsets to Operating Expenditures (from Line 15, page 3) .....	1265.85	1265.85
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	18071.29	35051.98

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:		PAGE 6 / 100	
	(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 checked="" type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 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

<b>A.</b>	Full Name (Last, First, Middle Initial) United States Treasury		Date of Receipt
	Mailing Address		<input type="text" value="04"/> / <input type="text" value="27"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	Austin	TX	
	FEC ID number of contributing federal political committee.		Transaction ID: 34607543
	C		Amount of Each Receipt this Period
Name of Employer		Occupation	<input type="text" value="1265.85"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Estimated Federal Taxes
		<input type="text" value="1265.85"/>	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<input type="text" value="1265.85"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text" value="1265.85"/>

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 7 / 100  
(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 checked="" type="checkbox"/> 17

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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) Wachovia Bank</p> <p>Mailing Address 10501 Main Street</p> <p>City State Zip Code Fairfax VA 22030</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer Occupation</p> <p>Receipt For:  <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 6964.74</p>	<p>Date of Receipt MM / DD / YYYY 04 / 09 / 2010</p> <p><b>Transaction ID:</b> 34761096</p> <p>Amount of Each Receipt this Period 2000.38</p> <p>Interest Income</p>
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<p><b>B.</b> Full Name (Last, First, Middle Initial) Bank of the West</p> <p>Mailing Address 224 Box Butte Avenue</p> <p>City State Zip Code Alliance NE 69301</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer Occupation</p> <p>Receipt For:  <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 2.80</p>	<p>Date of Receipt MM / DD / YYYY 04 / 30 / 2010</p> <p><b>Transaction ID:</b> 34761220</p> <p>Amount of Each Receipt this Period 0.65</p> <p>Interest Income</p>
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<p><b>C.</b> Full Name (Last, First, Middle Initial) Wachovia Bank</p> <p>Mailing Address 10501 Main Street</p> <p>City State Zip Code Fairfax VA 22030</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer Occupation</p> <p>Receipt For:  <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 6965.16</p>	<p>Date of Receipt MM / DD / YYYY 04 / 30 / 2010</p> <p><b>Transaction ID:</b> 34761222</p> <p>Amount of Each Receipt this Period 0.42</p> <p>Interest Income</p>
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<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>2001.45</b>
<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 8 / 100	
	(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

**A.**

Full Name (Last, First, Middle Initial) BB&T Bank		Date of Receipt
Mailing Address 11230 Waples Mill Road		<input type="text" value="04"/> / <input type="text" value="30"/> / <input type="text" value="2010"/>
City	State	Zip Code
Fairfax	VA	22030
FEC ID number of contributing federal political committee.		Transaction ID: 34761223
<input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="0.26"/>
Name of Employer	Occupation	Interest Income
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="1.05"/>	
<input type="checkbox"/> Other (specify) ▼		

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<input type="text" value="0.26"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text" value="2001.71"/>



# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 9 / 100  
(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 MICHAEL J BROUSSARD

Mailing Address 316 173RD AVE E

City NORTH REDINGTON BE State FL Zip Code 33708-1333

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 229.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 4 / 1 9 / 2 0 1 0

**Transaction ID:** 34828444

Amount of Each Receipt this Period  
54.00

**B.**

Full Name (Last, First, Middle Initial)  
MR ROBERT REAVES

Mailing Address 10831 SE SKYLINE DR

City SANTA ANA State CA Zip Code 92705-2415

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

Name of Employer Occupation  
RETIRED PHYSICIAN

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 4 / 2 0 / 2 0 1 0

**Transaction ID:** 34829595

Amount of Each Receipt this Period  
150.00

**C.**

Full Name (Last, First, Middle Initial)  
MR ANDREW B SMITH

Mailing Address 647 24TH AVE

City SAN FRANCISCO State CA Zip Code 94121-2910

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  
M M / D D / Y Y Y Y Y  
0 4 / 1 9 / 2 0 1 0

**Transaction ID:** 34829600

Amount of Each Receipt this Period  
1000.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **1204.00**

**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 / 100  
(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 ▼ 500.00

Date of Receipt  
MM / DD / YYYY  
04 / 12 / 2010

**Transaction ID:** 34829843

Amount of Each Receipt this Period  
250.00

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

Mailing Address 255 FOOTHILLS SOUTH DR

City State Zip Code  
SEDONA AZ 86336-5029

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

Name of Employer Occupation  
UNITED AIR LINES INC RETIRED

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 304.00

Date of Receipt  
MM / DD / YYYY  
04 / 16 / 2010

**Transaction ID:** 34830109

Amount of Each Receipt this Period  
54.00

**C.** Full Name (Last, First, Middle Initial)  
MR WILLEY K NICE

Mailing Address 25 OAK DRIVE CIR

City State Zip Code  
WHEELING WV 26003-4877

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

Name of Employer Occupation

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 204.00

Date of Receipt  
MM / DD / YYYY  
04 / 16 / 2010

**Transaction ID:** 34830165

Amount of Each Receipt this Period  
54.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 358.00

**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 11 / 100
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<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

<b>A.</b>	Full Name (Last, First, Middle Initial) MR D G GUMPERTZ	Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 2 0 / 2 0 1 0
	Mailing Address PO BOX 2450	<b>Transaction ID:</b> 34830232
	City State Zip Code TOLUCA LAKE CA 91610-0450	Amount of Each Receipt this Period 250.00
	FEC ID number of contributing federal political committee. <b>C</b>	
Name of Employer Occupation RETIRED	Aggregate Year-to-Date ▼ 425.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

<b>B.</b>	Full Name (Last, First, Middle Initial) MR HARVEY E MUNSCH	Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 2 7 / 2 0 1 0
	Mailing Address 1215 RITA CIR	<b>Transaction ID:</b> 34830731
	City State Zip Code SAN ANGELO TX 76905-4201	Amount of Each Receipt this Period 54.00
	FEC ID number of contributing federal political committee. <b>C</b>	
Name of Employer Occupation ELECT ENGR	Aggregate Year-to-Date ▼ 207.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

<b>C.</b>	Full Name (Last, First, Middle Initial) MR PETER SULZER	Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 2 0 / 2 0 1 0
	Mailing Address 6068 BASKET SWITCH RD	<b>Transaction ID:</b> 34830754
	City State Zip Code SNOW HILL MD 21863-2657	Amount of Each Receipt this Period 100.00
	FEC ID number of contributing federal political committee. <b>C</b>	
Name of Employer Occupation RETIRED	Aggregate Year-to-Date ▼ 250.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>404.00</b>
<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 12 / 100  
(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 HARVEY P KICHLINE

Mailing Address 2663 OAKHURST DR

City State Zip Code  
CENTER VALLEY PA 18034-9481

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

Name of Employer Occupation  
SOUTHERN LIEHIGH SCHOOL CUSTODIAN  
DIST

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 229.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 4 / 2 3 / 2 0 1 0

**Transaction ID:** 34831137

Amount of Each Receipt this Period  
54.00

**B.**

Full Name (Last, First, Middle Initial)  
MR CHARLES R R CARPENTER

Mailing Address PO BOX 14533

City State Zip Code  
ALBUQUERQUE NM 87191-4533

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

Name of Employer Occupation  
RETIRED RETIRED

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 575.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 4 / 1 6 / 2 0 1 0

**Transaction ID:** 34831797

Amount of Each Receipt this Period  
150.00

**C.**

Full Name (Last, First, Middle Initial)  
MR GENE MINICK

Mailing Address 301 S BOUKNIGHT FERRY RD

City State Zip Code  
SALUDA SC 29138-1719

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

Name of Employer Occupation  
RETIRED - MILLWRIGHT

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 354.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 4 / 2 6 / 2 0 1 0

**Transaction ID:** 34832306

Amount of Each Receipt this Period  
54.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **258.00**

**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 / 100  
(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)  
LEE A BEAMAN

Mailing Address 1525 BROADWAY

City State Zip Code  
NASHVILLE TN 37203-3121

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  

M	M	/	D	D	/	Y	Y	Y	Y
0	4	/	1	9	/	2	0	1	0

**Transaction ID:** 34833171

Amount of Each Receipt this Period  
1000.00

**B.** Full Name (Last, First, Middle Initial)  
MR IRA N CARLETON

Mailing Address PO BOX 1208

City State Zip Code  
PINEHURST TX 77362-1208

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

Name of Employer Occupation

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
256.00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	4	/	2	3	/	2	0	1	0

**Transaction ID:** 34833819

Amount of Each Receipt this Period  
54.00

**C.** Full Name (Last, First, Middle Initial)  
ALTAMONT DICKERSON

Mailing Address 12201 W PATRICK HENRY RD

City State Zip Code  
ASHLAND VA 23005-7202

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

Name of Employer Occupation  
DEPT OF REHABILITATION SE-  
RVICE RETIRED

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	4	/	1	5	/	2	0	1	0

**Transaction ID:** 34834323

Amount of Each Receipt this Period  
150.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **1204.00**

**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 / 100  
(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 CARLTON L BOSWELL

Mailing Address 555 WATT ST

City State Zip Code  
PITTSBURGH PA 15219-4931

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
209.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 4 / 2 3 / 2 0 1 0

**Transaction ID:** 34834660

Amount of Each Receipt this Period  
54.00

**B.** Full Name (Last, First, Middle Initial)  
MR JAMES P LUMPKIN

Mailing Address PO BOX 505

City State Zip Code  
LOUISBURG NC 27549-0505

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

Name of Employer Occupation  
RAYMOND JAMES FINANCIAL SERVICE FINANCIAL PLANNER

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 4 / 1 3 / 2 0 1 0

**Transaction ID:** 34834988

Amount of Each Receipt this Period  
500.00

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

Mailing Address 17317 LOS ALIMOS ST

City State Zip Code  
GRANADA HILLS CA 91344-4748

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

Name of Employer Occupation  
RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
320.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 4 / 2 3 / 2 0 1 0

**Transaction ID:** 34835616

Amount of Each Receipt this Period  
100.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **654.00**

**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 / 100  
(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 DAVE FILMER		Date of Receipt MM / DD / YYYY 04 / 19 / 2010
	Mailing Address 405 S CENTER ST		<b>Transaction ID:</b> 34835659
	City LAKE CITY	State IA	Zip Code 51449-2007
	FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 100.00
	Name of Employer SELF	Occupation AUTO REPAIR SHOP OWNER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 230.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) MR K M CAMIZZI		Date of Receipt MM / DD / YYYY 04 / 27 / 2010
	Mailing Address 6172 GARDEN CITY RD		<b>Transaction ID:</b> 34835832
	City CRESTVIEW	State FL	Zip Code 32539-9186
	FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 54.00
	Name of Employer FEDERAL CIVIL SERVICE	Occupation FORESTRY TECHNICIAN	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 257.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) MR GEORGE A NEHER		Date of Receipt MM / DD / YYYY 04 / 06 / 2010
	Mailing Address PO BOX 40		<b>Transaction ID:</b> 34835915
	City FULTON	State CA	Zip Code 95439-0040
	FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 50.00
	Name of Employer CO OF SONOMA WATER AGENCY	Occupation MAINT WORKER III	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 202.00	

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

204.00

**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 / 100  
(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 PAUL A CAIN

Mailing Address 6131 PINE MEADOWS DR

City State Zip Code  
LOVELAND OH 45140-6558

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

Name of Employer Occupation  
CITY OF NORWOOD POLICE LIEUTENANT

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 217.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 4 / 1 9 / 2 0 1 0

**Transaction ID: 34835958**

Amount of Each Receipt this Period  
54.00

**B.** Full Name (Last, First, Middle Initial)  
MR ROBERT HOOPER

Mailing Address 20537 TULIP CIR

City State Zip Code  
MONTROSE CO 81403-7770

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

Name of Employer Occupation  
RETIRED

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 203.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 4 / 1 2 / 2 0 1 0

**Transaction ID: 34836183**

Amount of Each Receipt this Period  
100.00

**C.** Full Name (Last, First, Middle Initial)  
MR BRUCE BIENZ

Mailing Address 11054 VENTURA BLVD # 240

City State Zip Code  
STUDIO CITY CA 91604-3546

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 4 / 2 7 / 2 0 1 0

**Transaction ID: 34836897**

Amount of Each Receipt this Period  
500.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **654.00**

**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 / 100  
(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 EDWIN M PHILLIPS

Mailing Address PO BOX 199

City State Zip Code  
REDWOOD VALLEY CA 95470-0199

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
229.00

Date of Receipt  
MM / DD / YYYY  
04 / 19 / 2010

**Transaction ID:** 34837951

Amount of Each Receipt this Period  
54.00

**B.**

Full Name (Last, First, Middle Initial)  
MR WALTER HAUCK

Mailing Address 178 N 6TH ST

City State Zip Code  
GRAMPIAN PA 16838-9309

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

Name of Employer Occupation  
RETIRED RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
259.00

Date of Receipt  
MM / DD / YYYY  
04 / 16 / 2010

**Transaction ID:** 34838053

Amount of Each Receipt this Period  
54.00

**C.**

Full Name (Last, First, Middle Initial)  
MR ROBERT E E WHITE

Mailing Address 2538 FURMINT WAY

City State Zip Code  
RANCHO CORDOVA CA 95670-3620

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
204.00

Date of Receipt  
MM / DD / YYYY  
04 / 26 / 2010

**Transaction ID:** 34838063

Amount of Each Receipt this Period  
54.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **162.00**

**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 / 100

(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 C J MCALLISTER

Mailing Address PO BOX 498

City State Zip Code  
ENCAMPMENT WY 82325-0498

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

Name of Employer Occupation  
RETIREED

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 636.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	9		2	0	1	0

Transaction ID: 34838470

Amount of Each Receipt this Period

54.00
-------

**B.**

Full Name (Last, First, Middle Initial)

MR DONALD B THOMPSON

Mailing Address 389 NW 21ST DR

City State Zip Code  
PENDLETON OR 97801-1103

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

Name of Employer Occupation  
EMPIRE AIRLINES AIRCRAFT PILOT

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 300.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	1		2	0	1	0

Transaction ID: 34838604

Amount of Each Receipt this Period

100.00
--------

**C.**

Full Name (Last, First, Middle Initial)

MR BRYAN JAMAR

Mailing Address PO BOX 9263

City State Zip Code  
SANTA ROSA CA 95405-1263

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

Name of Employer Occupation  
RETIREED - SUPERIOR COURT JUDGE

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 302.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		2	0		2	0	1	0

Transaction ID: 34838667

Amount of Each Receipt this Period

100.00
--------

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

254.00

**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 / 100  
(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 W MOWBRAY

Mailing Address 98 WADSWORTH BLVD  
UNIT 127 PMB 263

City State Zip Code  
LAKEWOOD CO 80226-1553

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

Name of Employer Occupation  
MARTEN TRANSPORT LTD OTR TRUCK DRIVER

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 250.00

Date of Receipt

M M / D D / Y Y Y Y  
0 4 / 1 5 / 2 0 1 0

Transaction ID: 34839017

Amount of Each Receipt this Period

100.00

**B.**

Full Name (Last, First, Middle Initial)  
MR JEFF MATTHEWS

Mailing Address 13612 DUCCIO DR

City State Zip Code  
BAKERSFIELD CA 93306-7643

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

Name of Employer Occupation  
CALIF DEPT. OF CORRECTIONS DENTIST

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 204.00

Date of Receipt

M M / D D / Y Y Y Y  
0 4 / 2 7 / 2 0 1 0

Transaction ID: 34839029

Amount of Each Receipt this Period

54.00

**C.**

Full Name (Last, First, Middle Initial)  
SIDNEY JOHNSON

Mailing Address 7183 E MIGHTY SAGUARO WAY

City State Zip Code  
SCOTTSDALE AZ 85266-7325

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

Name of Employer Occupation  
EASTERN AIRLINES INC RETIRED

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 206.00

Date of Receipt

M M / D D / Y Y Y Y  
0 4 / 2 1 / 2 0 1 0

Transaction ID: 34839032

Amount of Each Receipt this Period

55.00

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

209.00

**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 / 100  
(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 WILLIAM J J CRITCHFIELD

Mailing Address 21914 EVALYN AVE

City State Zip Code  
TORRANCE CA 90503-6953

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

Name of Employer Occupation  
US, DOT FAA LEAD AIRPORT/SAFETY

Receipt For: Aggregate Year-to-Date ▼  
 Primary    General  
 Other (specify) ▼ 300.00

Date of Receipt  
MM / DD / YYYY  
04 / 26 / 2010

**Transaction ID:** 34839111

Amount of Each Receipt this Period  
100.00

**B.** Full Name (Last, First, Middle Initial)  
DR BENJAMIN L HARPER

Mailing Address 2501 E CHAPMAN AVE

City State Zip Code  
ORANGE CA 92869-3204

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

Name of Employer Occupation  
YORBA PARK MEDICAL PHYSICIAN

Receipt For: Aggregate Year-to-Date ▼  
 Primary    General  
 Other (specify) ▼ 400.00

Date of Receipt  
MM / DD / YYYY  
04 / 20 / 2010

**Transaction ID:** 34839558

Amount of Each Receipt this Period  
400.00

**C.** Full Name (Last, First, Middle Initial)  
MR ROBERT M MORGAN

Mailing Address 251 CLAYMOOR CT

City State Zip Code  
CASTLE ROCK CO 80108-3425

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

Name of Employer Occupation  
COBITCO INC ENGINEER

Receipt For: Aggregate Year-to-Date ▼  
 Primary    General  
 Other (specify) ▼ 250.00

Date of Receipt  
MM / DD / YYYY  
04 / 16 / 2010

**Transaction ID:** 34839665

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 21 / 100

(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 GEORGE R VENTI

Mailing Address 4680 ADAM RD

City State Zip Code  
SIMI VALLEY CA 93063-2430

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
202.00

Date of Receipt

M M / D D / Y Y Y Y  
0 4 / 2 6 / 2 0 1 0

Transaction ID: 34839701

Amount of Each Receipt this Period

100.00

**B.**

Full Name (Last, First, Middle Initial)  
MR CHARLES TAYLOR

Mailing Address 1860 DREYDON AVE

City State Zip Code  
CAMBRIA CA 93428-5744

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

Name of Employer Occupation  
RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
223.00

Date of Receipt

M M / D D / Y Y Y Y  
0 4 / 2 3 / 2 0 1 0

Transaction ID: 34839979

Amount of Each Receipt this Period

54.00

**C.**

Full Name (Last, First, Middle Initial)  
MR TRUETT DUNN

Mailing Address 1096 HOMESTEAD RD

City State Zip Code  
TRANSYLVANIA LA 71286-6864

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

Name of Employer Occupation  
BILLY JACK'S, INC. CLERK

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
300.00

Date of Receipt

M M / D D / Y Y Y Y  
0 4 / 1 9 / 2 0 1 0

Transaction ID: 34840868

Amount of Each Receipt this Period

100.00

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

254.00

**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 22 / 100  
(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 JIMM R METZLER

Mailing Address 1361 INGLEWOOD DR

City State Zip Code  
STEPHENVILLE TX 76401-1612

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

Name of Employer Occupation  
TXU ELECTRIC POWERPLANT OPERATOR

Receipt For: Aggregate Year-to-Date ▼  
 Primary    General  
 Other (specify) ▼ 250.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
04 / 19 / 2010

**Transaction ID:** 34841155

Amount of Each Receipt this Period  
100.00

**B.** Full Name (Last, First, Middle Initial)  
MR HUGH BOLTON

Mailing Address 8002 NE HIGHWAY 99 # 276

City State Zip Code  
VANCOUVER WA 98665-8876

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

Name of Employer Occupation  
RETIRED RETIRED

Receipt For: Aggregate Year-to-Date ▼  
 Primary    General  
 Other (specify) ▼ 226.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
04 / 30 / 2010

**Transaction ID:** 34841197

Amount of Each Receipt this Period  
54.00

**C.** Full Name (Last, First, Middle Initial)  
MR GEORGE LARZA

Mailing Address 216 COUNTY ROAD 437

City State Zip Code  
EDDY TX 76524-2450

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

Name of Employer Occupation  
RETIRED RETIRED

Receipt For: Aggregate Year-to-Date ▼  
 Primary    General  
 Other (specify) ▼ 251.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
04 / 26 / 2010

**Transaction ID:** 34841243

Amount of Each Receipt this Period  
54.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 208.00

**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 23 / 100  
(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 FRANK S COX

Mailing Address 631 RIDER RIDGE RD

City State Zip Code  
LONGMONT CO 80501-4018

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	4	/	1	9	/	2	0	1	0

**Transaction ID:** 34841264

Amount of Each Receipt this Period  
250.00

**B.** Full Name (Last, First, Middle Initial)  
MR KYLE W W COX

Mailing Address 4698 TEALTOWN RD

City State Zip Code  
MILFORD OH 45150-9730

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

Name of Employer Occupation  
RETIRED

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
264.00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	4	/	1	9	/	2	0	1	0

**Transaction ID:** 34841621

Amount of Each Receipt this Period  
54.00

**C.** Full Name (Last, First, Middle Initial)  
MR JOHN L KEYSER

Mailing Address 423 28TH AVE

City State Zip Code  
GREELEY CO 80634-2632

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

Name of Employer Occupation  
KEYSER COAL & TRUCKING, INC  
PRESIDENT / DRIVER

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
209.00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	4	/	2	3	/	2	0	1	0

**Transaction ID:** 34841828

Amount of Each Receipt this Period  
54.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **358.00**

**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 24 / 100  
(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 DARRYL S LONG

Mailing Address 27668 E KATY TRACK RD

City State Zip Code  
WALKER MO 64790-9198

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

Name of Employer Occupation  
RETIRED RETIRED

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 227.00

Date of Receipt  
MM / DD / YYYY  
04 / 05 / 2010

**Transaction ID:** 34842060

Amount of Each Receipt this Period  
100.00

**B.** Full Name (Last, First, Middle Initial)  
MR JOHN M DRAPER

Mailing Address 7401 US HIGHWAY 40

City State Zip Code  
KREMMLING CO 80459-9634

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

Name of Employer Occupation  
LIBERTY MEDIA CORP. ATTORNEY (CABLE TV)

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt  
MM / DD / YYYY  
04 / 02 / 2010

**Transaction ID:** 34842172

Amount of Each Receipt this Period  
1000.00

**C.** Full Name (Last, First, Middle Initial)  
MR PAUL E JACKSON

Mailing Address 917 MARINA DR

City State Zip Code  
PANAMA CITY FL 32407-5523

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

Name of Employer Occupation  
RETIRED RETIRED

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 252.00

Date of Receipt  
MM / DD / YYYY  
04 / 14 / 2010

**Transaction ID:** 34842351

Amount of Each Receipt this Period  
50.00

**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 25 / 100

(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 RICHARD BURNHAM

Mailing Address 7701 N MOONLIGHT LN

City State Zip Code  
PARADISE VALLEY AZ 85253-2936

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

Name of Employer Occupation  
GAMMAGE & BURNHAM ATTORNEY

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 300.00

Date of Receipt

M M / D D / Y Y Y Y  
0 4 / 2 0 / 2 0 1 0

Transaction ID: 34842527

Amount of Each Receipt this Period

150.00

**B.**

Full Name (Last, First, Middle Initial)

MR IRA M STEIN

Mailing Address 3170 OAKWOOD CT

City State Zip Code  
YORKTOWN HEIGHTS NY 10598-2514

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

Name of Employer Occupation  
DISABLED DISABLED

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 254.00

Date of Receipt

M M / D D / Y Y Y Y  
0 4 / 1 9 / 2 0 1 0

Transaction ID: 34842635

Amount of Each Receipt this Period

54.00

**C.**

Full Name (Last, First, Middle Initial)

MR FREDERICK R ZIVNUSKA

Mailing Address 4 CRICKLEWOOD PL

City State Zip Code  
SAINT LOUIS MO 63131-3311

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

Name of Employer Occupation  
RETIRED RETIRED

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 204.00

Date of Receipt

M M / D D / Y Y Y Y  
0 4 / 1 6 / 2 0 1 0

Transaction ID: 34842786

Amount of Each Receipt this Period

54.00

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

258.00

**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 26 / 100  
(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 THOMAS J GUZZO

Mailing Address PO BOX 2942

City State Zip Code  
PEACHTREE CITY GA 30269-0942

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

Name of Employer SELF-EMPLOYED Occupation ATTORNEY

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt: 04 / 16 / 2010  
Transaction ID: 34843092  
Amount of Each Receipt this Period: 1000.00

**B.** Full Name (Last, First, Middle Initial)  
MR ORVIN S ECKERT

Mailing Address 14 SULKY DR

City State Zip Code  
NEWBURGH NY 12550-3861

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 ▼ 205.00

Date of Receipt: 04 / 20 / 2010  
Transaction ID: 34843244  
Amount of Each Receipt this Period: 54.00

**C.** Full Name (Last, First, Middle Initial)  
MR JOHN C MIKULA

Mailing Address 2824 STANBRIDGE AVE

City State Zip Code  
LONG BEACH CA 90815-1059

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

Name of Employer C.G.I. INFORMATION SYSTEMS Occupation DATA NETWORK ENGINEER

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt: 04 / 20 / 2010  
Transaction ID: 34843947  
Amount of Each Receipt this Period: 100.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 1154.00

**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 27 / 100  
(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 RICHARD L CARTY

Mailing Address PO BOX 3725

City SALEM State OR Zip Code 97302-0725

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

Name of Employer Occupation  
RETIRED ENGINEER

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 283.00

Date of Receipt: 04 / 02 / 2010  
Transaction ID: 34843972  
Amount of Each Receipt this Period: 30.00

**B.** Full Name (Last, First, Middle Initial)  
MR WILLIAM A DAVEY

Mailing Address 6130 BOXWOOD DR APT 5

City ROCKFORD State IL Zip Code 61114-6582

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

Name of Employer Occupation  
RETIRED

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt: 04 / 19 / 2010  
Transaction ID: 34844022  
Amount of Each Receipt this Period: 100.00

**C.** Full Name (Last, First, Middle Initial)  
MR JIM HARPER

Mailing Address 680 VINEWOOD AVE

City BIRMINGHAM State MI Zip Code 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 ▼ 404.00

Date of Receipt: 04 / 26 / 2010  
Transaction ID: 34844044  
Amount of Each Receipt this Period: 54.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 184.00

**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 28 / 100

(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 EUGENE R CUMMINGS

Mailing Address 9774 RIVER J 5 LN

City State Zip Code  
CORNELL MI 49818-9550

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

Name of Employer Occupation  
RETIRE - ELECTRICIAN

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 350.00

Date of Receipt

M M / D D / Y Y Y Y  
0 4 / 1 9 / 2 0 1 0

Transaction ID: 34844195

Amount of Each Receipt this Period

100.00

**B.**

Full Name (Last, First, Middle Initial)

MR ERIC BARACH

Mailing Address 8788 INDIAN TRL

City State Zip Code  
CLARKSTON MI 48348-2536

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

Name of Employer Occupation  
HURLEY HOSPITAL EMERGENCY DEPT M.D.

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 354.00

Date of Receipt

M M / D D / Y Y Y Y  
0 4 / 1 9 / 2 0 1 0

Transaction ID: 34844278

Amount of Each Receipt this Period

54.00

**C.**

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 ▼ 500.00

Date of Receipt

M M / D D / Y Y Y Y  
0 4 / 2 8 / 2 0 1 0

Transaction ID: 34844609

Amount of Each Receipt this Period

250.00

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

404.00

**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 29 / 100  
(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 GUY M BOWERS

Mailing Address PO BOX 98115

City LUBBOCK State TX Zip Code 79499-8115

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

Name of Employer Occupation INVESTOR

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 200.00

Date of Receipt 04 / 12 / 2010

Transaction ID: 34845086

Amount of Each Receipt this Period 100.00

**B.** Full Name (Last, First, Middle Initial)  
MR GUY M BOWERS

Mailing Address PO BOX 98115

City LUBBOCK State TX Zip Code 79499-8115

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

Name of Employer Occupation INVESTOR

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1200.00

Date of Receipt 04 / 12 / 2010

Transaction ID: 34845091

Amount of Each Receipt this Period 1000.00

**C.** Full Name (Last, First, Middle Initial)  
MR GUY M BOWERS

Mailing Address PO BOX 98115

City LUBBOCK State TX Zip Code 79499-8115

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

Name of Employer Occupation INVESTOR

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1300.00

Date of Receipt 04 / 29 / 2010

Transaction ID: 34845094

Amount of Each Receipt this Period 100.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 1200.00

**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 30 / 100  
(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 JOSEPH J CAMPBELL

Mailing Address 12317 NAVY ST

City State Zip Code  
LOS ANGELES CA 90066-1048

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

Name of Employer Occupation  
RETIREED

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 254.00

Date of Receipt  
MM / DD / YYYY  
04 / 26 / 2010

**Transaction ID: 34845191**

Amount of Each Receipt this Period  
54.00

**B.** Full Name (Last, First, Middle Initial)  
MR RONALD L CARROW

Mailing Address 4131 N 60TH AVE

City State Zip Code  
OMAHA NE 68104-2712

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

Name of Employer Occupation  
RETIREED

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 255.00

Date of Receipt  
MM / DD / YYYY  
04 / 29 / 2010

**Transaction ID: 34845266**

Amount of Each Receipt this Period  
55.00

**C.** Full Name (Last, First, Middle Initial)  
MR R R OLSON, JR

Mailing Address 94 SUNDOWN TRL

City State Zip Code  
WILLIAMSVILLE NY 14221-2221

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

Name of Employer Occupation  
UNION CARBIDE ENGINEER

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 202.66

Date of Receipt  
MM / DD / YYYY  
04 / 29 / 2010

**Transaction ID: 34845790**

Amount of Each Receipt this Period  
54.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **163.00**

**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 31 / 100  
(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 JOHNNIE D STOLZ

Mailing Address 17950 S VIRGINIA ST

City State Zip Code  
RENO NV 89521-9785

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

Name of Employer Occupation  
OMBOLI INTERIORS, INC PRESIDENT / OWNER

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 310.00

Date of Receipt

M M / D D / Y Y Y Y  
0 4 / 1 9 / 2 0 1 0

Transaction ID: 34845809

Amount of Each Receipt this Period

60.00

**B.**

Full Name (Last, First, Middle Initial)  
MR FRANK W ALLEN

Mailing Address 11024 HARRISON WAY

City State Zip Code  
WALTON KY 41094-9600

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  
0 4 / 0 1 / 2 0 1 0

Transaction ID: 34845826

Amount of Each Receipt this Period

100.00

**C.**

Full Name (Last, First, Middle Initial)  
MR JOHN SEBER

Mailing Address 632 BIRCH ST

City State Zip Code  
JEANNETTE PA 15644-2807

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

Name of Employer Occupation  
UN-EMPLOYED

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 255.00

Date of Receipt

M M / D D / Y Y Y Y  
0 4 / 1 9 / 2 0 1 0

Transaction ID: 34845917

Amount of Each Receipt this Period

55.00

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

215.00

**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 32 / 100  
(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 JOSHUA D HOUSEKNECHT

Mailing Address 13 MAPLE ST

City State Zip Code  
SCOTTSVILLE NY 14546-1222

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

Name of Employer Occupation  
CROSMVALEO ELECTRICAL SY- MACHINE OPERATOR  
STEMS

Receipt For: Aggregate Year-to-Date ▼  
 Primary    General  
 Other (specify) ▼ 309.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 4 / 2 0 / 2 0 1 0

**Transaction ID:** 34846327

Amount of Each Receipt this Period  
54.00

**B.** Full Name (Last, First, Middle Initial)  
MR ROBERT H HURLBUT

Mailing Address 200 SHELDON RD

City State Zip Code  
HONEOYE FALLS NY 14472-9316

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

Name of Employer Occupation

Receipt For: Aggregate Year-to-Date ▼  
 Primary    General  
 Other (specify) ▼ 250.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 4 / 1 6 / 2 0 1 0

**Transaction ID:** 34846582

Amount of Each Receipt this Period  
250.00

**C.** Full Name (Last, First, Middle Initial)  
MR GREGORY A GOSLOW

Mailing Address 223 SAINT CLAIRE DR

City State Zip Code  
CHILLICOTHE OH 45601-2129

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

Name of Employer Occupation  
U.S. ENRICHMENT CORP ENVIRONMENTAL ENGINEER

Receipt For: Aggregate Year-to-Date ▼  
 Primary    General  
 Other (specify) ▼ 300.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 4 / 0 1 / 2 0 1 0

**Transaction ID:** 34846899

Amount of Each Receipt this Period  
100.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **404.00**

**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 33 / 100  
(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 ROGER BEITZEL

Mailing Address PO BOX 560

City State Zip Code  
FOYIL OK 74031-0560

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

Name of Employer Occupation  
HC PRICE COMPANY PIPELINE CONTRACTOR

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 326.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 4 / 2 6 / 2 0 1 0

**Transaction ID:** 34847007

Amount of Each Receipt this Period  
100.00

**B.** Full Name (Last, First, Middle Initial)  
MR HARRY S DULA

Mailing Address 5418 GARRETT RD

City State Zip Code  
DURHAM NC 27707-5047

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

Name of Employer Occupation  
RETIRED

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 4 / 1 9 / 2 0 1 0

**Transaction ID:** 34848535

Amount of Each Receipt this Period  
75.00

**C.** Full Name (Last, First, Middle Initial)  
DR ROBERT M JOHNSON

Mailing Address 210 DERBY GLEN LN

City State Zip Code  
BRENTWOOD TN 37027-4865

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

Name of Employer Occupation  
INTERNAL MEDICINE CONSULTANTS PHYSICIAN

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 4 / 2 0 / 2 0 1 0

**Transaction ID:** 34848587

Amount of Each Receipt this Period  
100.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **275.00**

**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 34 / 100

(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 A KURTZ

Mailing Address 433 DOVER AVE

City

LA GRANGE PARK

State

IL

Zip Code

60526-1706

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
SELF

Occupation  
ATTORNEY

Receipt For:

Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

MM / DD / YYYY  
04 / 16 / 2010

Transaction ID: 34848751

Amount of Each Receipt this Period

100.00

**B.**

Full Name (Last, First, Middle Initial)

MR LARRY SWIFT

Mailing Address 29229 170TH AVE SE

City

KENT

State

WA

Zip Code

98042-9438

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

MM / DD / YYYY  
04 / 23 / 2010

Transaction ID: 34848801

Amount of Each Receipt this Period

500.00

**C.**

Full Name (Last, First, Middle Initial)

MR WILLIAM T DODD

Mailing Address 6008 27TH AVE

City

VINTON

State

IA

Zip Code

52349-9215

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
QUAKER OATS COMPANY

Occupation  
RETIRED

Receipt For:

Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

354.00

Date of Receipt

MM / DD / YYYY  
04 / 19 / 2010

Transaction ID: 34848860

Amount of Each Receipt this Period

54.00

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

654.00

**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 35 / 100
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<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 MIKE TERSTRIEP	Date of Receipt MM / DD / YYYY 04 / 27 / 2010
	Mailing Address 1205 ALYDAR DR	<b>Transaction ID:</b> 34849851
	City MAHOMET State IL Zip Code 61853-3732	Amount of Each Receipt this Period 100.00
	FEC ID number of contributing federal political committee. <b>C</b>	
	Name of Employer Occupation RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) MR RICHARD L CORRIGAN	Date of Receipt MM / DD / YYYY 04 / 21 / 2010
	Mailing Address 37179 DEVON WICK LN	<b>Transaction ID:</b> 34849877
	City PURCELLVILLE State VA Zip Code 20132-5056	Amount of Each Receipt this Period 250.00
	FEC ID number of contributing federal political committee. <b>C</b>	
	Name of Employer Occupation CH2M HILL EXECUTIVE	
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) COL WILLIAM L DICKENS USMCR, RET	Date of Receipt MM / DD / YYYY 04 / 23 / 2010
	Mailing Address 1059 AUGUSTA ST	<b>Transaction ID:</b> 34850371
	City MOBILE State AL Zip Code 36604-3042	Amount of Each Receipt this Period 45.00
	FEC ID number of contributing federal political committee. <b>C</b>	
	Name of Employer Occupation SELF EMPLOYED REAL EST DEVELOPMENT	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 200.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>395.00</b>
<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 36 / 100  
(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)  
COL WILLIAM L DICKENS USMCR, RET  
Mailing Address 1059 AUGUSTA ST

City State Zip Code  
MOBILE AL 36604-3042

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

Name of Employer SELF EMPLOYED Occupation REAL EST DEVELOPMENT

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 213.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 4 / 2 3 / 2 0 1 0  
Transaction ID: 34850374  
Amount of Each Receipt this Period 13.00

**B.** Full Name (Last, First, Middle Initial)  
COL WILLIAM L DICKENS USMCR, RET  
Mailing Address 1059 AUGUSTA ST

City State Zip Code  
MOBILE AL 36604-3042

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

Name of Employer SELF EMPLOYED Occupation REAL EST DEVELOPMENT

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 228.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 4 / 2 8 / 2 0 1 0  
Transaction ID: 34850375  
Amount of Each Receipt this Period 15.00

**C.** Full Name (Last, First, Middle Initial)  
MR STEPHEN J MCKELVEY  
Mailing Address 7 LA ROSA CT

City State Zip Code  
LOS ALAMOS NM 87544-3818

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

Name of Employer COMPA INDUSTRIES Occupation PROJECT ENGINEER

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 329.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 4 / 1 9 / 2 0 1 0  
Transaction ID: 34850442  
Amount of Each Receipt this Period 54.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 82.00

**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 37 / 100  
(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 STEVEN SMITH

Mailing Address PO BOX 271

City State Zip Code  
NELLISTON NY 13410-0271

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

Name of Employer Occupation  
SERVICE TECHNICIAN

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 342.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 4 / 2 9 / 2 0 1 0

Transaction ID: 34850514

Amount of Each Receipt this Period  
18.00

**B.**

Full Name (Last, First, Middle Initial)  
MR STEVEN SMITH

Mailing Address PO BOX 271

City State Zip Code  
NELLISTON NY 13410-0271

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

Name of Employer Occupation  
SERVICE TECHNICIAN

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 360.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 4 / 2 9 / 2 0 1 0

Transaction ID: 34850516

Amount of Each Receipt this Period  
18.00

**C.**

Full Name (Last, First, Middle Initial)  
MR STEVEN SMITH

Mailing Address PO BOX 271

City State Zip Code  
NELLISTON NY 13410-0271

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

Name of Employer Occupation  
SERVICE TECHNICIAN

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 378.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 4 / 2 9 / 2 0 1 0

Transaction ID: 34850517

Amount of Each Receipt this Period  
18.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **54.00**

**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 38 / 100  
(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 CLAIR I COLVIN		Date of Receipt M M / D D / Y Y Y Y 0 4 / 2 3 / 2 0 1 0		
	Mailing Address 112 PINENEEDLE RD		<b>Transaction ID:</b> 34850699		
	City STATESBORO	State GA	Zip Code 30458-6039	Amount of Each Receipt this Period 100.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer GEORGIA SOUTHERN COLLEGE	Occupation CHEMIST PROFESSOR			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 252.00			

<b>B.</b>	Full Name (Last, First, Middle Initial) MR LEWIS G PLACE		Date of Receipt M M / D D / Y Y Y Y 0 4 / 2 1 / 2 0 1 0		
	Mailing Address 12150 SPENCERVILLE DELPHOS RD		<b>Transaction ID:</b> 34850765		
	City DELPHOS	State OH	Zip Code 45833-9219	Amount of Each Receipt this Period 54.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer AMERICAN ELECTRIC POWER	Occupation RETIRED			
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 DAVID CLABORN		Date of Receipt M M / D D / Y Y Y Y 0 4 / 0 6 / 2 0 1 0		
	Mailing Address 12332 S AVENUE C		<b>Transaction ID:</b> 34850838		
	City YUMA	State AZ	Zip Code 85365-9791	Amount of Each Receipt this Period 250.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer	Occupation			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 250.00			

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	404.00
<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 39 / 100

(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 JOHN J ROSS

Mailing Address 340 W CLARK ST

City State Zip Code  
UPLAND CA 91784-1948

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

Name of Employer Occupation  
ROLYN OPTICS COMPANY OWNER

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 280.00

Date of Receipt

M M / D D / Y Y Y Y  
0 4 / 1 6 / 2 0 1 0

Transaction ID: 34851365

Amount of Each Receipt this Period

80.00

**B.**

Full Name (Last, First, Middle Initial)  
MR RUSSELL G MILLS

Mailing Address 734 MANOR DR

City State Zip Code  
RENO NV 89509-1943

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

Name of Employer Occupation  
NONE RETIRED

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 400.00

Date of Receipt

M M / D D / Y Y Y Y  
0 4 / 0 5 / 2 0 1 0

Transaction ID: 34851560

Amount of Each Receipt this Period

100.00

**C.**

Full Name (Last, First, Middle Initial)  
MR RUSSELL G MILLS

Mailing Address 734 MANOR DR

City State Zip Code  
RENO NV 89509-1943

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

Name of Employer Occupation  
NONE RETIRED

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 454.00

Date of Receipt

M M / D D / Y Y Y Y  
0 4 / 2 6 / 2 0 1 0

Transaction ID: 34851565

Amount of Each Receipt this Period

54.00

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

234.00

**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 40 / 100

(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 ANTHONY GORRO

Mailing Address 27245 SPRING ARBOR DR

City State Zip Code  
SOUTHFIELD MI 48076-3542

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

Name of Employer Occupation  
RETIRED RETIRED

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 202.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 4 / 2 0 / 2 0 1 0

Transaction ID: 34851600

Amount of Each Receipt this Period

54.00

**B.**

Full Name (Last, First, Middle Initial)

MR HUGH CORRIGAN

Mailing Address 2 LIVE OAK DR

City State Zip Code  
MIDLAND TX 79705-8727

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

Name of Employer Occupation  
RETIRED RETIRED

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 4 / 0 2 / 2 0 1 0

Transaction ID: 34852006

Amount of Each Receipt this Period

500.00

**C.**

Full Name (Last, First, Middle Initial)

MR HARLEY B GUYNN

Mailing Address 1052 SHADOW LAWN ST

City State Zip Code  
INDIANAPOLIS IN 46260-2231

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

Name of Employer Occupation  
RETIRED RETIRED

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 223.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 4 / 2 6 / 2 0 1 0

Transaction ID: 34852164

Amount of Each Receipt this Period

55.00

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

609.00

**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 41 / 100  
(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 JOHNNY M BRITTAIN

Mailing Address 6071 GOLDEN LNDG

City State Zip Code  
CANTON GA 30114-8962

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

Name of Employer Occupation  
GENERAL MOTORS PIPEFITTER

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 304.00

Date of Receipt  
MM / DD / YYYY  
04 / 19 / 2010

**Transaction ID:** 34852539

Amount of Each Receipt this Period  
54.00

**B.** Full Name (Last, First, Middle Initial)  
MR RON M ODELL

Mailing Address 2 MCGOVERN DR

City State Zip Code  
GARNERVILLE NY 10923-1118

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

Name of Employer Occupation  
ORANGE & ROLKLAND UTILITIES UNDERGROUND LINE FOREMAN

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 210.00

Date of Receipt  
MM / DD / YYYY  
04 / 19 / 2010

**Transaction ID:** 34852971

Amount of Each Receipt this Period  
100.00

**C.** Full Name (Last, First, Middle Initial)  
MR FRANK KOZEL

Mailing Address 560 EPSILON DR STE 1

City State Zip Code  
PITTSBURGH PA 15238-2815

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  
MM / DD / YYYY  
04 / 05 / 2010

**Transaction ID:** 34852998

Amount of Each Receipt this Period  
500.00

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ **654.00**

**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 42 / 100

(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 ROBERT LOWE

Mailing Address 276 MYERS CT

City

SAN LEANDRO

State

CA

Zip Code

94577-2029

FEC ID number of contributing federal political committee.

**C**

Name of Employer

Occupation

Receipt For:

Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

229.00

Date of Receipt

MM / DD / YYYY  
04 / 20 / 2010

Transaction ID: 34854494

Amount of Each Receipt this Period

54.00

**B.**

Full Name (Last, First, Middle Initial)

MR JOHN L LAYTON

Mailing Address 518 PLAINVIEW RD

City

LA CROSSE

State

WI

Zip Code

54603-1143

FEC ID number of contributing federal political committee.

**C**

Name of Employer

BN RR

Occupation

Receipt For:

Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

MM / DD / YYYY  
04 / 12 / 2010

Transaction ID: 34854554

Amount of Each Receipt this Period

500.00

**C.**

Full Name (Last, First, Middle Initial)

MR THOMAS R ROONEY

Mailing Address 5405 KENNINGTON PL

City

FAIRFAX

State

VA

Zip Code

22032-3253

FEC ID number of contributing federal political committee.

**C**

Name of Employer

EXMERITUS SOFTWARE FEDERAL  
SYS

Occupation

BUSINESS OWNER

Receipt For:

Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

338.00

Date of Receipt

MM / DD / YYYY  
04 / 19 / 2010

Transaction ID: 34855555

Amount of Each Receipt this Period

162.00

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

716.00

**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 43 / 100

(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 REBECCA SUGDEN

Mailing Address 2150 KURT CT

City

APOPKA

State

FL

Zip Code

32703-9405

FEC ID number of contributing federal political committee.

C

Name of Employer

Occupation

RETIRED

Receipt For:

Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	6		2	0	1	0

Transaction ID: 34856161

Amount of Each Receipt this Period

5000.00

**B.**

Full Name (Last, First, Middle Initial)

MR LAWRENCE EDWARDS

Mailing Address 714 PARAMOUNT WAY

City

BRICK

State

NJ

Zip Code

08724-1135

FEC ID number of contributing federal political committee.

C

Name of Employer  
EDWARDS TIRE CO INC.

Occupation

OWNER

Receipt For:

Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	6		2	0	1	0

Transaction ID: 34856177

Amount of Each Receipt this Period

500.00

**C.**

Full Name (Last, First, Middle Initial)

WILLIAM H CHASE

Mailing Address 31 BISHOP RD

City

WEST HARTFORD

State

CT

Zip Code

06119-1503

FEC ID number of contributing federal political committee.

C

Name of Employer

Occupation

Receipt For:

Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

254.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		3	0		2	0	1	0

Transaction ID: 34856407

Amount of Each Receipt this Period

54.00

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

5554.00

**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 44 / 100  
(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 DENNIS M BENNETT

Mailing Address 6393 MARKHAM LN

City State Zip Code  
BATTLE CREEK MI 49014-9301

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

Name of Employer Occupation

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
201.00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	4	/	2	1	/	2	0	1	0

**Transaction ID:** 34856507

Amount of Each Receipt this Period  
201.00

**B.** Full Name (Last, First, Middle Initial)  
MR DONALD A STINE

Mailing Address 2311 FALLWATER LN

City State Zip Code  
CARMICHAEL CA 95608-7404

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

Name of Employer Occupation

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
204.00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	4	/	2	0	/	2	0	1	0

**Transaction ID:** 34856880

Amount of Each Receipt this Period  
54.00

**C.** Full Name (Last, First, Middle Initial)  
COL FREDERICK E JOHNSTON, III

Mailing Address 19355 CYPRESS RIDGE TER UNIT 1

City State Zip Code  
LEESBURG VA 20176-6910

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  

M	M	/	D	D	/	Y	Y	Y	Y
0	4	/	1	9	/	2	0	1	0

**Transaction ID:** 34856928

Amount of Each Receipt this Period  
500.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **755.00**

**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 45 / 100  
(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 RAY U TANNER

Mailing Address 14 WHITSITT PARK

City JACKSON State TN Zip Code 38301-3466

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

Name of Employer Occupation  
RETIRED

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt: 04 / 26 / 2010  
Transaction ID: 34857146  
Amount of Each Receipt this Period: 100.00

**B.** Full Name (Last, First, Middle Initial)  
CAPT JAMES M DUNLOP, USN RET

Mailing Address 1007 MARVONE LN

City NEPTUNE BEACH State FL Zip Code 32266-3615

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

Name of Employer Occupation  
US NAVY RETIRED

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 219.00

Date of Receipt: 04 / 27 / 2010  
Transaction ID: 34857292  
Amount of Each Receipt this Period: 54.00

**C.** Full Name (Last, First, Middle Initial)  
MR GREGORY D LEVEQUE

Mailing Address 2930 KENNEWICK PL NE

City RENTON State WA Zip Code 98056-2283

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: 04 / 26 / 2010  
Transaction ID: 34858230  
Amount of Each Receipt this Period: 100.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 254.00

**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 46 / 100  
(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 F W BOBBITT

Mailing Address 401 N PRICE AVE

City State Zip Code  
HOMINY OK 74035-1009

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

Name of Employer Occupation  
RETIREED

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 239.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 4 / 2 6 / 2 0 1 0

**Transaction ID:** 34858258

Amount of Each Receipt this Period  
54.00

**B.** Full Name (Last, First, Middle Initial)  
MR T ANTHONY BROOKS

Mailing Address PO BOX 819

City State Zip Code  
TETON VILLAGE WY 83025-0819

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

Name of Employer Occupation  
RETIREED

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 4 / 0 5 / 2 0 1 0

**Transaction ID:** 34858467

Amount of Each Receipt this Period  
100.00

**C.** Full Name (Last, First, Middle Initial)  
MR STANLEY J DECKER

Mailing Address 501 WESTWOOD DR

City State Zip Code  
WARNER ROBINS GA 31088-5860

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

Name of Employer Occupation  
RETIREED

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 232.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 4 / 2 6 / 2 0 1 0

**Transaction ID:** 34858478

Amount of Each Receipt this Period  
100.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **254.00**

**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 47 / 100  
(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 CARRIE COLLETT

Mailing Address PO BOX 26767

City State Zip Code  
SANTA ANA CA 92799-6767

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

Name of Employer Occupation  
TICOR TITLE COMPANY PAYOFF CLERK

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
MM / DD / YYYY  
04 / 20 / 2010

**Transaction ID:** 34858739

Amount of Each Receipt this Period  
100.00

**B.**

Full Name (Last, First, Middle Initial)  
RONALD GASSNER

Mailing Address 9917 DERWENT DR

City State Zip Code  
PLANO TX 75025-6595

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  
MM / DD / YYYY  
04 / 19 / 2010

**Transaction ID:** 34859686

Amount of Each Receipt this Period  
200.00

**C.**

Full Name (Last, First, Middle Initial)  
MR GARY GUYON

Mailing Address 631 SCOTT DRIVE

City State Zip Code  
PAYSON AZ 85541

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

Name of Employer Occupation  
RETIRED

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 304.00

Date of Receipt  
MM / DD / YYYY  
04 / 16 / 2010

**Transaction ID:** 34859953

Amount of Each Receipt this Period  
54.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **354.00**

**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 48 / 100  
(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)

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

US CUSTOMS & BORDER PROTECTION

Occupation

BORDER PROTECTION OFFICER

Receipt For:

Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

550.00

Date of Receipt

MM / DD / YYYY  
04 / 30 / 2010

Transaction ID: 34860646

Amount of Each Receipt this Period

100.00

**B.**

Full Name (Last, First, Middle Initial)

MR ROBERT D CARSWELL

Mailing Address 2120 MONTEVALLO RD

City

LEEDS

State

AL

Zip Code

35094-3738

FEC ID number of contributing federal political committee.

C

Name of Employer

Occupation

Receipt For:

Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

254.00

Date of Receipt

MM / DD / YYYY  
04 / 27 / 2010

Transaction ID: 34861770

Amount of Each Receipt this Period

54.00

**C.**

Full Name (Last, First, Middle Initial)

MR BILLY W TUCKER

Mailing Address 1405 S MESA AVE

City

MONTROSE

State

CO

Zip Code

81401-5020

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 ▼

300.00

Date of Receipt

MM / DD / YYYY  
04 / 06 / 2010

Transaction ID: 34861839

Amount of Each Receipt this Period

200.00

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

354.00

**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 49 / 100  
(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 BILLY W TUCKER

Mailing Address 1405 S MESA AVE

City State Zip Code  
MONTROSE CO 81401-5020

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

Name of Employer Occupation  
RETIRED RETIRED

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 4 / 2 6 / 2 0 1 0

**Transaction ID:** 34861841

Amount of Each Receipt this Period  
100.00

**B.**

Full Name (Last, First, Middle Initial)  
MR PAUL C ANDERSON

Mailing Address PO BOX 4531

City State Zip Code  
RIVERSIDE CA 92514-4531

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

Name of Employer Occupation

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 232.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 4 / 2 0 / 2 0 1 0

**Transaction ID:** 34861922

Amount of Each Receipt this Period  
100.00

**C.**

Full Name (Last, First, Middle Initial)  
MR ILDEFONSO GOMEZ

Mailing Address 21610 GUADALAJARA AVE

City State Zip Code  
BOCA RATON FL 33433-7503

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

Name of Employer Occupation  
CONTINUACARE MEDICAL GROUP PHYSICIAN

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 234.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 4 / 2 1 / 2 0 1 0

**Transaction ID:** 34862285

Amount of Each Receipt this Period  
100.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **300.00**

**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 50 / 100  
(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 ROBERT G ROHWER

Mailing Address 2105 JORDAN

City State Zip Code  
STILLWATER OK 74074-1303

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

Name of Employer Occupation  
RETIRED RETIRED

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 251.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 4 / 2 1 / 2 0 1 0

**Transaction ID:** 34862301

Amount of Each Receipt this Period  
75.00

**B.** Full Name (Last, First, Middle Initial)  
LES E LETTERMAN

Mailing Address 122 RHODODENDRON DR

City State Zip Code  
SEQUIM WA 98382-9633

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

Name of Employer Occupation  
RETIRED RETIRED

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 254.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 4 / 1 9 / 2 0 1 0

**Transaction ID:** 34862329

Amount of Each Receipt this Period  
54.00

**C.** Full Name (Last, First, Middle Initial)  
MR JAMES MARTIN

Mailing Address 1000 POTATO ROLL LN

City State Zip Code  
CHAMBERSBURG PA 17202-8897

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  
M M / D D / Y Y Y Y Y  
0 4 / 0 5 / 2 0 1 0

**Transaction ID:** 34862606

Amount of Each Receipt this Period  
1000.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **1129.00**

**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 51 / 100  
(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)  
DONALD M KIPP

Mailing Address 810 RALFALLEN ST

City HOUSTON State TX Zip Code 77008-4558

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

Name of Employer FABRICATING SYSTEMS, INC Occupation SHEETMETAL FABRICATOR

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 203.00

Date of Receipt: 04 / 26 / 2010  
**Transaction ID: 34862772**  
 Amount of Each Receipt this Period: 54.00

**B.** Full Name (Last, First, Middle Initial)  
MR JAMES E CONNELLY

Mailing Address 17313 SW BAKER ST

City ALOHA State OR Zip Code 97007-5354

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

Name of Employer Occupation

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 220.00

Date of Receipt: 04 / 19 / 2010  
**Transaction ID: 34863011**  
 Amount of Each Receipt this Period: 220.00

**C.** Full Name (Last, First, Middle Initial)  
WILLIE LEE LUMPKIN, III

Mailing Address PO BOX 120

City LOUISBURG State NC Zip Code 27549-0120

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

Name of Employer STATE OF NORTH CAROLINA Occupation RETIRED - DISTRICT COURT JUDGE

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt: 04 / 13 / 2010  
**Transaction ID: 34863157**  
 Amount of Each Receipt this Period: 500.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 774.00

**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 52 / 100  
(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 ROBERT RUMPEL

Mailing Address PO BOX 1002

City State Zip Code  
MORGANTON NC 28680-1002

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

Name of Employer Occupation  
BROUGHTON HOSPITAL RETRIED - CNA

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 229.00

Date of Receipt  
MM / DD / YYYY  
04 / 16 / 2010

**Transaction ID:** 34863164

Amount of Each Receipt this Period  
54.00

**B.** Full Name (Last, First, Middle Initial)  
TAMMIS DAY

Mailing Address PO BOX 37

City State Zip Code  
SULA MT 59871-0037

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

Name of Employer Occupation

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 100.00

Date of Receipt  
MM / DD / YYYY  
04 / 19 / 2010

**Transaction ID:** 34863222

Amount of Each Receipt this Period  
100.00

**C.** Full Name (Last, First, Middle Initial)  
TAMMIS DAY

Mailing Address PO BOX 37

City State Zip Code  
SULA MT 59871-0037

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

Name of Employer Occupation

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 200.00

Date of Receipt  
MM / DD / YYYY  
04 / 19 / 2010

**Transaction ID:** 34863224

Amount of Each Receipt this Period  
100.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **254.00**

**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 53 / 100  
(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)  
TAMMIS DAY

Mailing Address PO BOX 37

City State Zip Code  
SULA MT 59871-0037

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  
0 4 / 1 9 / 2 0 1 0

Transaction ID: 34863226

Amount of Each Receipt this Period

100.00

**B.**

Full Name (Last, First, Middle Initial)  
FRY MATT

Mailing Address 28407 E ORIENT CEMETERY RD

City State Zip Code  
HARRISONVILLE MO 64701-3161

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

Name of Employer Occupation  
SELF EMPLOYED ROOFER

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
220.00

Date of Receipt

M M / D D / Y Y Y Y  
0 4 / 1 9 / 2 0 1 0

Transaction ID: 34863340

Amount of Each Receipt this Period

54.00

**C.**

Full Name (Last, First, Middle Initial)  
MR GARNETT SMITH

Mailing Address 1994 MERRIMAN WAY RD

City State Zip Code  
MONETA VA 24121-3182

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 4 / 2 6 / 2 0 1 0

Transaction ID: 34863745

Amount of Each Receipt this Period

250.00

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

404.00

**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 54 / 100

(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 JULIANNE F PRINGLE

Mailing Address 2300 RIVERSIDE DR UNIT 4D

City State Zip Code  
TULSA OK 74114-2402

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

Name of Employer Occupation  
HOUSEWIFE

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 250.00

Date of Receipt

M M / D D / Y Y Y Y  
0 4 / 1 2 / 2 0 1 0

Transaction ID: 34863814

Amount of Each Receipt this Period

250.00

**B.**

Full Name (Last, First, Middle Initial)

MR FLOYD W DEORSAM

Mailing Address 833 BLAISDALE RD

City State Zip Code  
RICHMOND TX 77406-1901

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

Name of Employer Occupation

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 376.00

Date of Receipt

M M / D D / Y Y Y Y  
0 4 / 1 6 / 2 0 1 0

Transaction ID: 34863862

Amount of Each Receipt this Period

100.00

**C.**

Full Name (Last, First, Middle Initial)

MR FLOYD W DEORSAM

Mailing Address 833 BLAISDALE RD

City State Zip Code  
RICHMOND TX 77406-1901

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

Name of Employer Occupation

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 476.00

Date of Receipt

M M / D D / Y Y Y Y  
0 4 / 2 3 / 2 0 1 0

Transaction ID: 34863864

Amount of Each Receipt this Period

100.00

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

450.00

**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 55 / 100  
(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 JACK L HODSON

Mailing Address 27260 NICOLAS RD APT B103

City State Zip Code  
TEMECULA CA 92591-7357

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

Name of Employer Occupation

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
304.00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	4	/	2	7	/	2	0	1	0

**Transaction ID:** 34863870

Amount of Each Receipt this Period  
54.00

**B.** Full Name (Last, First, Middle Initial)  
MR HOWARD SCHUMACHER

Mailing Address 72 AZURE PINE CT

City State Zip Code  
BUFFALO NY 14228-1872

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

Name of Employer Occupation  
STATE UNIVERSITY OF NY BU-FFALO TECHNOLOGY PROFESSIONAL

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	4	/	2	7	/	2	0	1	0

**Transaction ID:** 34863924

Amount of Each Receipt this Period  
100.00

**C.** Full Name (Last, First, Middle Initial)  
MR HOWARD SCHUMACHER

Mailing Address 72 AZURE PINE CT

City State Zip Code  
BUFFALO NY 14228-1872

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

Name of Employer Occupation  
STATE UNIVERSITY OF NY BU-FFALO TECHNOLOGY PROFESSIONAL

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
300.00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	4	/	0	6	/	2	0	1	0

**Transaction ID:** 34863926

Amount of Each Receipt this Period  
100.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **254.00**

**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 56 / 100  
(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 HOWARD SCHUMACHER

Mailing Address 72 AZURE PINE CT

City State Zip Code  
BUFFALO NY 14228-1872

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

Name of Employer STATE UNIVERSITY OF NY BU-FFALO  
Occupation TECHNOLOGY PROFESSIONAL

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
400.00

Date of Receipt  
MM / DD / YYYY  
04 / 06 / 2010

**Transaction ID:** 34863927

Amount of Each Receipt this Period  
100.00

**B.**

Full Name (Last, First, Middle Initial)  
MR KEN BRISTOL

Mailing Address 157 S ARLINGTON AVE

City State Zip Code  
ELMHURST IL 60126-3501

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

Name of Employer  
Occupation RETIRED - BANKER

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
400.00

Date of Receipt  
MM / DD / YYYY  
04 / 26 / 2010

**Transaction ID:** 34864080

Amount of Each Receipt this Period  
100.00

**C.**

Full Name (Last, First, Middle Initial)  
MR GEORGE S HACK

Mailing Address 4287 HUNTING TRL

City State Zip Code  
LAKE WORTH FL 33467-3515

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

Name of Employer LOGUS MFG CORP  
Occupation EXECUTIVE

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
254.00

Date of Receipt  
MM / DD / YYYY  
04 / 19 / 2010

**Transaction ID:** 34864236

Amount of Each Receipt this Period  
54.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **254.00**

**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 57 / 100  
(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 LUCAS J ZABALLOS

Mailing Address 338 ISBEL DR

City State Zip Code  
SANTA CRUZ CA 95060-1922

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  
MM / DD / YYYY  
04 / 07 / 2010

Transaction ID: 34864271

Amount of Each Receipt this Period  
200.00

**B.** Full Name (Last, First, Middle Initial)  
MR PAUL CREEGAN

Mailing Address 176 E 81ST ST

City State Zip Code  
NEW YORK NY 10028-1865

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

Name of Employer Occupation  
CON EDISON MECHANIC

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
352.00

Date of Receipt  
MM / DD / YYYY  
04 / 05 / 2010

Transaction ID: 34864452

Amount of Each Receipt this Period  
50.00

**C.** Full Name (Last, First, Middle Initial)  
ANDY J SLABAUGH

Mailing Address 16644 231ST AVE

City State Zip Code  
LONG PRAIRIE MN 56347-5197

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
700.00

Date of Receipt  
MM / DD / YYYY  
04 / 28 / 2010

Transaction ID: 34864467

Amount of Each Receipt this Period  
500.00

**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 58 / 100

(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 TERRENCE R DOLAN

Mailing Address 7012 MARK TERRACE DR

City State Zip Code  
MINNEAPOLIS MN 55439-1626

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 4 / 2 6 / 2 0 1 0

Transaction ID: 34864984

Amount of Each Receipt this Period

250.00

**B.**

Full Name (Last, First, Middle Initial)  
MR NEIL TWILLA

Mailing Address PO BOX 10964

City State Zip Code  
MURFREESBORO TN 37129-0020

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

M M / D D / Y Y Y Y  
0 4 / 2 0 / 2 0 1 0

Transaction ID: 34865430

Amount of Each Receipt this Period

1000.00

**C.**

Full Name (Last, First, Middle Initial)  
MR BOB F BROWN

Mailing Address 5030 OLD SONOMA RD

City State Zip Code  
NAPA CA 94559-9704

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  
0 4 / 0 5 / 2 0 1 0

Transaction ID: 34865488

Amount of Each Receipt this Period

100.00

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

1350.00

**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 59 / 100  
(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 RODNEY MORGAN

Mailing Address 435 WILDWOOD LOOP

City State Zip Code  
DALEVILLE AL 36322-9479

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

Name of Employer Occupation  
US GOVERNMENT HELICOPTER FLIGHT INSTRUCTOR

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 204.00

Date of Receipt  
MM / DD / YYYY  
04 / 16 / 2010

**Transaction ID:** 34865887

Amount of Each Receipt this Period  
54.00

**B.** Full Name (Last, First, Middle Initial)  
MR HUBERT L CROWE

Mailing Address 2358 NW MASER DR

City State Zip Code  
CORVALLIS OR 97330-2220

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  
MM / DD / YYYY  
04 / 19 / 2010

**Transaction ID:** 34866276

Amount of Each Receipt this Period  
500.00

**C.** Full Name (Last, First, Middle Initial)  
MR LYNN H HAYES

Mailing Address 3427 OAK HILL ST

City State Zip Code  
SIERRA VISTA AZ 85650-5146

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  
MM / DD / YYYY  
04 / 12 / 2010

**Transaction ID:** 34866482

Amount of Each Receipt this Period  
100.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **654.00**

**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 60 / 100  
(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 LAWRENCE BULDUC

Mailing Address 17935 QUAIL RIDGE RD

City State Zip Code  
COTTONWOOD CA 96022-9057

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 4 / 0 5 / 2 0 1 0

Transaction ID: 34866624

Amount of Each Receipt this Period  
100.00

**B.**

Full Name (Last, First, Middle Initial)  
MR BOBBY LEWIS

Mailing Address PO BOX 352917

City State Zip Code  
PALM COAST FL 32135-2917

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
251.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 4 / 0 5 / 2 0 1 0

Transaction ID: 34866906

Amount of Each Receipt this Period  
100.00

**C.**

Full Name (Last, First, Middle Initial)  
MR JAMES HASSINGER, JR

Mailing Address 2855 EARLY ST APT A

City State Zip Code  
NORFOLK VA 23513-3830

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

Name of Employer Occupation  
RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
254.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 4 / 1 5 / 2 0 1 0

Transaction ID: 34867102

Amount of Each Receipt this Period  
54.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **254.00**

**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 61 / 100

(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 LAWRENCE H TROTTER

Mailing Address 908 LITTLE DOGWOOD RD

City State Zip Code  
KINGSTON TN 37763-5602

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

Name of Employer Occupation  
CONTINENTAL MACHINE RETIRED MACHINEST MECHANIC

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 328.00

Date of Receipt

M M / D D / Y Y Y Y  
0 4 / 2 6 / 2 0 1 0

Transaction ID: 34867315

Amount of Each Receipt this Period

54.00

**B.**

Full Name (Last, First, Middle Initial)

MR CAMERON D GLINEWELL

Mailing Address 1227 LE GRAY AVE

City State Zip Code  
LOS ANGELES CA 90042-1949

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

Name of Employer Occupation

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 351.00

Date of Receipt

M M / D D / Y Y Y Y  
0 4 / 0 1 / 2 0 1 0

Transaction ID: 34867365

Amount of Each Receipt this Period

100.00

**C.**

Full Name (Last, First, Middle Initial)

MR CAMERON D GLINEWELL

Mailing Address 1227 LE GRAY AVE

City State Zip Code  
LOS ANGELES CA 90042-1949

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

Name of Employer Occupation

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 405.00

Date of Receipt

M M / D D / Y Y Y Y  
0 4 / 1 9 / 2 0 1 0

Transaction ID: 34867366

Amount of Each Receipt this Period

54.00

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

208.00

**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 62 / 100  
(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 AARON MILYARD

Mailing Address 9635 LITTLE RICHMOND RD

City State Zip Code  
BROOKVILLE OH 45309-9320

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
226.00

Date of Receipt  
MM / DD / YYYY  
04 / 19 / 2010

**Transaction ID:** 34867981

Amount of Each Receipt this Period  
18.00

**B.**

Full Name (Last, First, Middle Initial)  
MR LEO HINKLEY

Mailing Address 4101 N HIATUS RD APT 514

City State Zip Code  
SUNRISE FL 33351-7556

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
326.00

Date of Receipt  
MM / DD / YYYY  
04 / 19 / 2010

**Transaction ID:** 34868389

Amount of Each Receipt this Period  
100.00

**C.**

Full Name (Last, First, Middle Initial)  
MR DARRELL R CLINE

Mailing Address PO BOX 250

City State Zip Code  
NEW MATAMORAS OH 45767-0250

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  
MM / DD / YYYY  
04 / 01 / 2010

**Transaction ID:** 34869086

Amount of Each Receipt this Period  
25.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **143.00**

**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 63 / 100  
(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 LARRY D SANDS

Mailing Address 3426 SERRA RD

City MALIBU State CA Zip Code 90265-4913

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

Name of Employer OPTICAL SHOP INTERNATIONAL Occupation CEO

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 232.00

Date of Receipt: 04 / 16 / 2010  
**Transaction ID: 34869430**  
 Amount of Each Receipt this Period: 30.00

**B.** Full Name (Last, First, Middle Initial)  
DENNIS R AUTRY

Mailing Address 229 LISA LN

City GUTHRIE State OK Zip Code 73044-7723

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

Name of Employer Occupation

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 238.00

Date of Receipt: 04 / 20 / 2010  
**Transaction ID: 34869477**  
 Amount of Each Receipt this Period: 100.00

**C.** Full Name (Last, First, Middle Initial)  
MR THOMAS NOTTINGHAM

Mailing Address 4111 SW 29TH AVE

City CAPE CORAL State FL Zip Code 33914-6073

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

Name of Employer Occupation

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 254.00

Date of Receipt: 04 / 30 / 2010  
**Transaction ID: 34869583**  
 Amount of Each Receipt this Period: 54.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 184.00

**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 64 / 100  
(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 JIM GODWIN, I

Mailing Address 10 DUNNAM LN

City HOUSTON State TX Zip Code 77024-6543

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 275.00

Date of Receipt: 04 / 30 / 2010  
Transaction ID: 34869630  
Amount of Each Receipt this Period: 200.00

**B.** Full Name (Last, First, Middle Initial)  
MR ANDREW GREENBERG

Mailing Address 3225 NW 60TH ST

City BOCA RATON State FL Zip Code 33496-3373

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 206.00

Date of Receipt: 04 / 26 / 2010  
Transaction ID: 34869797  
Amount of Each Receipt this Period: 54.00

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

Mailing Address 8797 HAMMERLY BLVD APT 2202

City HOUSTON State TX Zip Code 77080-6624

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 298.00

Date of Receipt: 04 / 27 / 2010  
Transaction ID: 34869955  
Amount of Each Receipt this Period: 54.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 308.00

**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 65 / 100  
(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 IUNGERICH

Mailing Address 8797 HAMMERLY BLVD APT 2202

City HOUSTON State TX Zip Code 77080-6624

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 190.00

Date of Receipt: 04 / 19 / 2010  
**Transaction ID: 34869956**  
Amount of Each Receipt this Period: 54.00

**B.**

Full Name (Last, First, Middle Initial)  
MR DAVID IUNGERICH

Mailing Address 8797 HAMMERLY BLVD APT 2202

City HOUSTON State TX Zip Code 77080-6624

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 244.00

Date of Receipt: 04 / 19 / 2010  
**Transaction ID: 34869957**  
Amount of Each Receipt this Period: 54.00

**C.**

Full Name (Last, First, Middle Initial)  
MR GEORGE A SCHAEFER, JR

Mailing Address 851 DELAWARE RIDGE LN

City CINCINNATI State OH Zip Code 45226-1758

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: 04 / 06 / 2010  
**Transaction ID: 34870130**  
Amount of Each Receipt this Period: 500.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 608.00

**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 66 / 100

(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 TONY N SHUBERT

Mailing Address 2306 HARDMAN MORRIS RD

City State Zip Code  
COLBERT GA 30628-3623

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

Name of Employer Occupation

Receipt For:

Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

229.00

Date of Receipt

M M / D D / Y Y Y Y  
0 4 / 2 6 / 2 0 1 0

Transaction ID: 34870564

Amount of Each Receipt this Period

54.00

**B.**

Full Name (Last, First, Middle Initial)

MR STEVEN WAIT

Mailing Address 464 E BAYTON ST

City State Zip Code  
ALLIANCE OH 44601-8818

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

Name of Employer Occupation  
CUYAHOGA VALLEY SCENIC RA-ILROA PRESIDENT & CEO

Receipt For:

Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

261.00

Date of Receipt

M M / D D / Y Y Y Y  
0 4 / 2 8 / 2 0 1 0

Transaction ID: 34871434

Amount of Each Receipt this Period

54.00

**C.**

Full Name (Last, First, Middle Initial)

MR WILLIAM H ROLLINS

Mailing Address 18341 HUNTERS GLEN RD

City State Zip Code  
N FT MYERS FL 33917-4757

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

Name of Employer Occupation

Receipt For:

Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

204.00

Date of Receipt

M M / D D / Y Y Y Y  
0 4 / 1 9 / 2 0 1 0

Transaction ID: 34871577

Amount of Each Receipt this Period

54.00

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

162.00

**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 67 / 100  
(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 EARL F NOEL, JR		Date of Receipt MM / DD / YYYY 04 / 16 / 2010	
Mailing Address 165 ACORN RD		<b>Transaction ID:</b> 34871618	
City SPRING GROVE	State PA	Zip Code 17362-8918	Amount of Each Receipt this Period 54.00
FEC ID number of contributing federal political committee. C			
Name of Employer YAZOO MILLS, INC	Occupation CHAIRMAN & CEO		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 429.00		

**B.**

Full Name (Last, First, Middle Initial) MR RONALD JORDAN		Date of Receipt MM / DD / YYYY 04 / 20 / 2010	
Mailing Address 228 W SKYLINE CT		<b>Transaction ID:</b> 34871677	
City MANKATO	State MN	Zip Code 56001-1923	Amount of Each Receipt this Period 18.00
FEC ID number of contributing federal political committee. C			
Name of Employer WESTERN SPECIALIZED INC.	Occupation OTR DRIVER		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 205.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	72.00
<b>TOTAL</b> This Period (last page this line number only) .....	32381.00

**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) Federal Capitol Communications Corporation	Transaction ID: 34200450 Date of Disbursement
	Mailing Address 1120 G Street, NW #600	<input type="text" value="04"/> / <input type="text" value="02"/> / <input type="text" value="2010"/>
	City Washington State DC Zip Code 20005	Amount of Each Disbursement this Period
	Purpose of Disbursement Graphic Art Design	<input type="text" value="850.00"/>
	Candidate Name	Category/Type <input type="text" value="006"/>
	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) ▼
		Graphic Art Design

B.	Full Name (Last, First, Middle Initial) New Media Communications Inc.	Transaction ID: 34200451 Date of Disbursement
	Mailing Address 3046 Brecksville Road	<input type="text" value="04"/> / <input type="text" value="02"/> / <input type="text" value="2010"/>
	City Richfield State OH Zip Code 44286	Amount of Each Disbursement this Period
	Purpose of Disbursement Website Hosting / Service Fee	<input type="text" value="2600.00"/>
	Candidate Name	Category/Type <input type="text" value="001"/>
	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) ▼
		Website Hosting / Service Fee

C.	Full Name (Last, First, Middle Initial) Virginia Department of Taxation	Transaction ID: 34340098 Date of Disbursement
	Mailing Address VA Tax ID 35-521083020F-001 P.O. Box 1500	<input type="text" value="04"/> / <input type="text" value="12"/> / <input type="text" value="2010"/>
	City Richmond State VA Zip Code 23218-1500	Amount of Each Disbursement this Period
	Purpose of Disbursement Estimated State Taxes	<input type="text" value="298.04"/>
	Candidate Name	Category/Type <input type="text" value="001"/>
	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) ▼
		Estimated State Taxes

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<input type="text" value="3748.04"/>
<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)

PAGE 69 / 100

<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) Wachovia Bank</p> <p>Mailing Address 10501 Main Street</p> <p>City Fairfax State VA Zip Code 22030</p> <p>Purpose of Disbursement Estimated Federal Taxes</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> 34347619 <b>Date of Disbursement</b> 04 / 13 / 2010</p> <p>Amount of Each Disbursement this Period 1738.56</p> <p>Estimated Federal Taxes</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) NJi New Media, LLC</p> <p>Mailing Address 201 King Street, Suite 202</p> <p>City Alexandria State VA Zip Code 22134</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 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> 34443571 <b>Date of Disbursement</b> 04 / 20 / 2010</p> <p>Amount of Each Disbursement this Period 10400.00</p> <p>Website Hosting / Service Fee</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) American Express Company</p> <p>Mailing Address P.O. Box 53852</p> <p>City Phoenix State AZ Zip Code 85072</p> <p>Purpose of Disbursement Credit Card 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> 34760929 <b>Date of Disbursement</b> 04 / 30 / 2010</p> <p>Amount of Each Disbursement this Period 157.04</p> <p>Credit Card Fees</p>

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

12295.60

**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) PAYMENTECH, INC.	Transaction ID: 34760930 Date of Disbursement 04 / 30 / 2010
	Mailing Address 4 NORTHEASTERN BLVD	Amount of Each Disbursement this Period 1361.58
	City SALEM State NH Zip Code 03079	
	Purpose of Disbursement Credit Card Fees	001 Category/ Type
	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) ▼
		Credit Card Fees

B.	Full Name (Last, First, Middle Initial) Wachovia Bank	Transaction ID: 34760931 Date of Disbursement 04 / 01 / 2010
	Mailing Address 10501 Main Street	Amount of Each Disbursement this Period 65.00
	City Fairfax State VA Zip Code 22030	
	Purpose of Disbursement Credit Card Fees	001 Category/ Type
	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) ▼
		Credit Card Fees

C.	Full Name (Last, First, Middle Initial) Wachovia Bank	Transaction ID: 34760994 Date of Disbursement 04 / 02 / 2010
	Mailing Address 10501 Main Street	Amount of Each Disbursement this Period 239.19
	City Fairfax State VA Zip Code 22030	
	Purpose of Disbursement Credit Card Fees	001 Category/ Type
	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) ▼
		Credit Card Fees

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	▶	1665.77
<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 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) 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: 34760998 Date of Disbursement 04 / 09 / 2010
	Amount of Each Disbursement this Period 1541.96 Account Analysis Fees

<b>B.</b> 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: 34761005 Date of Disbursement 04 / 15 / 2010
	Amount of Each Disbursement this Period 19.01 Account Analysis Fees

<b>C.</b> 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: 34761081 Date of Disbursement 04 / 09 / 2010
	Amount of Each Disbursement this Period 15.17 Account Analysis Fees

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	1576.14
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	(Empty box)

**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 72 / 100

<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 - Account Analysis

Mailing Address P.O. Box 2080

City Jacksonville State FL Zip Code 32231

Purpose of Disbursement  
Account Analysis Fees

Candidate Name

001  
Category/  
Type

Office Sought:  House  
 Senate  
 President

State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Transaction ID: 34761088

Date of Disbursement

04 / 09 / 2010

Amount of Each Disbursement this Period

51.59

Account Analysis Fees

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

51.59

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

19337.14



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

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

FOR LINE NUMBER:  
(check only one)

<input 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) Russell M. Fulcher for Senate	Transaction ID: 34337849 Date of Disbursement 04 / 09 / 2010
	Mailing Address 4035 S. Linder Road	Amount of Each Disbursement this Period -500.00
	City Meridian State ID Zip Code 83642	
	Purpose of Disbursement Void - Russell M. Fulcher for Senate	011 Category/ Type
	Candidate Name ID Sen. Russell Fulcher	
	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Void - Russell M. Fulcher for Senate
	State: ID District:	

B.	Full Name (Last, First, Middle Initial) Russell M. Fulcher for Senate	Transaction ID: 34337850 Date of Disbursement 04 / 09 / 2010
	Mailing Address 4035 S. Linder Road	Amount of Each Disbursement this Period 500.00
	City Meridian State ID Zip Code 83642	
	Purpose of Disbursement Russell Fulcher, STATE SENATE 21st ID	011 Category/ Type
	Candidate Name ID Sen. Russell Fulcher	
	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Russell Fulcher, STATE SE- NATE 21st ID
	State: ID District:	

C.	Full Name (Last, First, Middle Initial) Tennessee Republican Party - Non-Federal Account	Transaction ID: 34455228 Date of Disbursement 04 / 20 / 2010
	Mailing Address 2424 21st Avenue Suite 200	Amount of Each Disbursement this Period 3000.00
	City Nashville State TN Zip Code 37212	
	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:	

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

3000.00

**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

<b>A.</b>	Full Name (Last, First, Middle Initial) David Dewhurst Committee  Mailing Address P.O. Box 756  City Austin State TX Zip Code 78767  Purpose of Disbursement Void - David Dewhurst Committee  Candidate Name David Dewhurst  Office Sought: <input 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) ▼  State: District:	Transaction ID: 34535623 Date of Disbursement 04 / 21 / 2010  Amount of Each Disbursement this Period -1000.00  Void - David Dewhurst Committee
<b>B.</b>	Full Name (Last, First, Middle Initial) David Dewhurst Committee  Mailing Address P.O. Box 756  City Austin State TX Zip Code 78767  Purpose of Disbursement David Dewhurst, LT. GOVERNOR TX  Candidate Name David Dewhurst  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼  State: District:	Transaction ID: 34535624 Date of Disbursement 04 / 21 / 2010  Amount of Each Disbursement this Period 1000.00  David Dewhurst, LT. GOVERNOR TX
<b>C.</b>	Full Name (Last, First, Middle Initial) Citizens for Bischoff  Mailing Address 1137 Carroll Avenue  City Lawrenceburg State IN Zip Code 47025  Purpose of Disbursement Robert Bischoff, STATE HOUSE 68th IN  Candidate Name Robert Bischoff  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) ▼  State: IN District: 68	Transaction ID: 34544670 Date of Disbursement 04 / 26 / 2010  Amount of Each Disbursement this Period 500.00  Robert Bischoff, STATE HOUSE 68th IN

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	500.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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

**A.** Full Name (Last, First, Middle Initial)  
Russ Stilwell for State Representative

Mailing Address 311 Bluestem Court

City Boonville State IN Zip Code 47601

Purpose of Disbursement  
Russell Stilwell, STATE HOUSE 74th IN

Candidate Name  
Representa Russell Stilwell

011  
Category/  
Type

Office Sought:  House  Senate  President  
Disbursement For: 2010  Primary  General  Other (specify) ▼

State: IN District: 74

Transaction ID: 34544703

Date of Disbursement

04 / 26 / 2010

Amount of Each Disbursement this Period

350.00

Russell Stilwell, STATE HOUSE 74th IN

**B.** Full Name (Last, First, Middle Initial)  
Committee to Elect John M. Waterman State Senate

Mailing Address 7452 North County Road 375 East

City Shelburn State IN Zip Code 47879

Purpose of Disbursement  
John Waterman, STATE SENATE 39th IN

Candidate Name  
John Waterman

011  
Category/  
Type

Office Sought:  House  Senate  President  
Disbursement For: 2010  Primary  General  Other (specify) ▼

State: IN District:

Transaction ID: 34544704

Date of Disbursement

04 / 26 / 2010

Amount of Each Disbursement this Period

300.00

John Waterman, STATE SENATE 39th IN

**C.** Full Name (Last, First, Middle Initial)  
Johnny Nugent Victory Team

Mailing Address 920 Pribble Circle

City Lawrenceburg State IN Zip Code 47025

Purpose of Disbursement  
JOHN NUGENT, STATE SENATE 43rd IN

Candidate Name  
JOHN NUGENT

011  
Category/  
Type

Office Sought:  House  Senate  President  
Disbursement For: 2010  Primary  General  Other (specify) ▼

State: IN District:

Transaction ID: 34544708

Date of Disbursement

04 / 26 / 2010

Amount of Each Disbursement this Period

500.00

JOHN NUGENT, STATE SENATE 43rd IN

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

1150.00

**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) Committee to Elect Jimmie Hall</p> <p>Mailing Address 13008 Gray Hills Road, NE</p> <p>City Albuquerque State NM Zip Code 87111</p> <p>Purpose of Disbursement Jimmie Hall, STATE HOUSE 28th NM</p> <p>Candidate Name NM Rep. Jimmie Hall</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NM District: 28</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> 34544709</p> <p>Date of Disbursement 04 / 26 / 2010</p> <p>Amount of Each Disbursement this Period 500.00</p> <p>Jimmie Hall, STATE HOUSE 28th NM</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Committee to Elect John Huffman</p> <p>Mailing Address P.O. Box 104</p> <p>City The Dalles State OR Zip Code 97058</p> <p>Purpose of Disbursement John Huffman, STATE HOUSE 59th OR</p> <p>Candidate Name OR Rep. John Huffman</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: OR District: 59</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> 34544711</p> <p>Date of Disbursement 04 / 26 / 2010</p> <p>Amount of Each Disbursement this Period 500.00</p> <p>John Huffman, STATE HOUSE 59th OR</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Committee to Elect Bill Garrard</p> <p>Mailing Address 5845 Basin View Drive</p> <p>City Kalamath Falls State OR Zip Code 97603</p> <p>Purpose of Disbursement BILL GARRARD, STATE HOUSE 56th OR</p> <p>Candidate Name BILL GARRARD</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: OR District: 56</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> 34544713</p> <p>Date of Disbursement 04 / 26 / 2010</p> <p>Amount of Each Disbursement this Period 500.00</p> <p>BILL GARRARD, STATE HOUSE 56th OR</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)

<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) Committee to Re-Elect Bob Jenson</p> <p>Mailing Address 2126 NW Despain Avenue</p> <p>City Pendleton State OR Zip Code 97801</p> <p>Purpose of Disbursement Bob Jenson, STATE HOUSE 58th OR</p> <p>Candidate Name Representa Bob Jenson</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: OR District: 58</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> 34544714 <b>Date of Disbursement</b> 04 / 26 / 2010</p> <p>Amount of Each Disbursement this Period 500.00</p> <p>011 Category/ Type</p> <p>Bob Jenson, STATE HOUSE 58th OR</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Committee to Re-Elect Greg Smith</p> <p>Mailing Address P.O. Box 219</p> <p>City Heppner State OR Zip Code 97836</p> <p>Purpose of Disbursement GREG SMITH, STATE HOUSE 57th OR</p> <p>Candidate Name GREG SMITH</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: OR District: 57</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> 34544715 <b>Date of Disbursement</b> 04 / 26 / 2010</p> <p>Amount of Each Disbursement this Period 500.00</p> <p>011 Category/ Type</p> <p>GREG SMITH, STATE HOUSE 57th OR</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Friends of Kim Thatcher</p> <p>Mailing Address P.O. Box 9111</p> <p>City Salem State OR Zip Code 97305</p> <p>Purpose of Disbursement Kim Thatcher, STATE HOUSE 25th OR</p> <p>Candidate Name Kim Thatcher</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: OR District: 25</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> 34544718 <b>Date of Disbursement</b> 04 / 26 / 2010</p> <p>Amount of Each Disbursement this Period 500.00</p> <p>011 Category/ Type</p> <p>Kim Thatcher, STATE HOUSE 25th OR</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 78 / 100

<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 Sherrie Sprenger</p> <p>Mailing Address P.O. Box 702</p> <p>City Scio State OR Zip Code 97374</p> <p>Purpose of Disbursement Sherrie Sprenger, STATE HOUSE 17th OR</p> <p>Candidate Name OR Rep. Sherrie Sprenger</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: OR District: 17</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> 34544724 <b>Date of Disbursement</b> 04 / 26 / 2010</p> <p>Amount of Each Disbursement this Period 500.00</p> <p>011 Category/ Type</p> <p>Sherrie Sprenger, STATE HOUSE 17th OR</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Friends of Jackie Winters</p> <p>Mailing Address P.O. Box 126</p> <p>City Salem State OR Zip Code 97308</p> <p>Purpose of Disbursement Jackie Winters, STATE SENATE 10th OR</p> <p>Candidate Name OR Sen. Jackie Winters</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: OR 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> 34544725 <b>Date of Disbursement</b> 04 / 26 / 2010</p> <p>Amount of Each Disbursement this Period 500.00</p> <p>011 Category/ Type</p> <p>Jackie Winters, STATE SEN- ATE 10th OR</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Citizens for Jim Christiana</p> <p>Mailing Address 740 Turnpike Street, Suite 10</p> <p>City Beaver State PA Zip Code 15009</p> <p>Purpose of Disbursement Jim Christiana, STATE HOUSE 15th PA</p> <p>Candidate Name PA Rep. Jim Christiana</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: PA District: 15</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> 34544757 <b>Date of Disbursement</b> 04 / 26 / 2010</p> <p>Amount of Each Disbursement this Period 250.00</p> <p>011 Category/ Type</p> <p>Jim Christiana, STATE HOU- SE 15th PA</p>

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	1250.00
<b>TOTAL</b> This Period (last page this line number only) .....	

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

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

FOR LINE NUMBER: (check only one)

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

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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) Committee to Elect Marc Gergely</p> <p>Mailing Address P.O. Box 221</p> <p>City McKeesport State PA Zip Code 15134</p> <p>Purpose of Disbursement Marc Gergely, STATE HOUSE 35th PA</p> <p>Candidate Name PA Rep. Marc Gergely</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 35</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> 34544768 <b>Date of Disbursement</b> 04 / 26 / 2010</p> <p>Amount of Each Disbursement this Period 350.00</p> <p>Marc Gergely, STATE HOUSE 35th PA</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) People for Pyle</p> <p>Mailing Address P.O. Box 227</p> <p>City Ford City State PA Zip Code 16226</p> <p>Purpose of Disbursement Jeffrey Pyle, STATE HOUSE 60th PA</p> <p>Candidate Name PA Rep. Jeffrey Pyle</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 60</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> 34544769 <b>Date of Disbursement</b> 04 / 26 / 2010</p> <p>Amount of Each Disbursement this Period 500.00</p> <p>Jeffrey Pyle, STATE HOUSE 60th PA</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Bill DeWeese Campaign Committee</p> <p>Mailing Address P.O. Box 513</p> <p>City Harrisburg State PA Zip Code 17108</p> <p>Purpose of Disbursement Bill DeWeese, STATE HOUSE 50th PA</p> <p>Candidate Name Bill DeWeese</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 50</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> 34544772 <b>Date of Disbursement</b> 04 / 26 / 2010</p> <p>Amount of Each Disbursement this Period 250.00</p> <p>Bill DeWeese, STATE HOUSE 50th PA</p>

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	1100.00
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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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 Jim Wansacz</p> <p>Mailing Address P.O. Box 206</p> <p>City Old Forge / Taylor State PA Zip Code 18517</p> <p>Purpose of Disbursement Jim Wansacz, STATE HOUSE 114th PA</p> <p>Candidate Name Jim Wansacz</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 14</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> 34544773 <b>Date of Disbursement</b> 04 / 26 / 2010</p> <p>Amount of Each Disbursement this Period 500.00</p> <p>011 Category/ Type</p> <p>Jim Wansacz, STATE HOUSE 114th PA</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Friends of Rich Alloway</p> <p>Mailing Address 62 S. Main Street</p> <p>City Chambersburg State PA Zip Code 17201</p> <p>Purpose of Disbursement Rich Alloway, STATE SENATE 33rd PA</p> <p>Candidate Name Rich Alloway</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: PA 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> 34544775 <b>Date of Disbursement</b> 04 / 26 / 2010</p> <p>Amount of Each Disbursement this Period 500.00</p> <p>011 Category/ Type</p> <p>Rich Alloway, STATE SENATE 33rd PA</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Robbins for Senate Committee</p> <p>Mailing Address 353 Greenville Road</p> <p>City Greenville State PA Zip Code 16125</p> <p>Purpose of Disbursement Bob Robbins, STATE SENATE 50th PA</p> <p>Candidate Name Bob Robbins</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: PA 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> 34544776 <b>Date of Disbursement</b> 04 / 26 / 2010</p> <p>Amount of Each Disbursement this Period 500.00</p> <p>011 Category/ Type</p> <p>Bob Robbins, STATE SENATE 50th PA</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)

<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) Elect Bill Kortz Committee</p> <p>Mailing Address 514 Ridgeview Drive</p> <p>City Dravosburg State PA Zip Code 15034</p> <p>Purpose of Disbursement William Kortz, STATE HOUSE 38th PA</p> <p>Candidate Name PA Rep. William Kortz, II</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 38</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> 34544777 <b>Date of Disbursement</b> 04 / 26 / 2010</p> <p>Amount of Each Disbursement this Period 250.00</p> <p>011 Category/ Type</p> <p>William Kortz, STATE HOUSE 38th PA</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Elias Barela for State Representative</p> <p>Mailing Address 1191 John Road</p> <p>City Belen State NM Zip Code 87002</p> <p>Purpose of Disbursement Elias Barela, STATE HOUSE 8th NM</p> <p>Candidate Name NM Rep. Elias Barela</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NM District: 08</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> 34544779 <b>Date of Disbursement</b> 04 / 26 / 2010</p> <p>Amount of Each Disbursement this Period 500.00</p> <p>011 Category/ Type</p> <p>Elias Barela, STATE HOUSE 8th NM</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Anna Crook Campaign</p> <p>Mailing Address 1041 Fairway Terrace</p> <p>City Clovis State NM Zip Code 88101</p> <p>Purpose of Disbursement ANNA CROOK, STATE HOUSE 64th NM</p> <p>Candidate Name ANNA CROOK</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NM District: 64</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> 34544780 <b>Date of Disbursement</b> 04 / 26 / 2010</p> <p>Amount of Each Disbursement this Period 500.00</p> <p>011 Category/ Type</p> <p>ANNA CROOK, STATE HOUSE 64th NM</p>

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

1250.00

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

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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<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) Van Taylor Campaign	Transaction ID: 34544804 Date of Disbursement 04 / 26 / 2010
	Mailing Address 3520 Ranchero Road	Amount of Each Disbursement this Period 500.00
	City Plano State TX Zip Code 75093	
	Purpose of Disbursement Debt Retirement	011 Category/ Type
	Candidate Name Nicholas Van Taylor	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: TX District: 66	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Primary Debt 2010
		Debt Retirement

B.	Full Name (Last, First, Middle Initial) John Frullo Campaign	Transaction ID: 34545778 Date of Disbursement 04 / 26 / 2010
	Mailing Address 1616 Texas Avenue	Amount of Each Disbursement this Period 500.00
	City Lubbock State TX Zip Code 79401	
	Purpose of Disbursement Debt Retirement	011 Category/ Type
	Candidate Name John Frullo	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: TX District: 84	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Primary Debt 2010
		Debt Retirement

C.	Full Name (Last, First, Middle Initial) Charles Perry for State Representative	Transaction ID: 34545924 Date of Disbursement 04 / 26 / 2010
	Mailing Address 4216 102nd Street	Amount of Each Disbursement this Period 500.00
	City Lubbock State TX Zip Code 79423	
	Purpose of Disbursement Debt Retirement	011 Category/ Type
	Candidate Name Charles Perry	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: TX District: 83	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Primary Debt 2010
		Debt Retirement

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	1500.00
<b>TOTAL</b> This Period (last page this line number only) .....	

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

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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

<b>A.</b>	Full Name (Last, First, Middle Initial) Jim McReynolds Campaign  Mailing Address P.O. Box 155056  City Lufkin State TX Zip Code 75915  Purpose of Disbursement Jim McReynolds, STATE HOUSE 12th TX Candidate Name Jim McReynolds Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: TX District: 12	Transaction ID: 34546667 Date of Disbursement 04 / 26 / 2010	Amount of Each Disbursement this Period 500.00  Jim McReynolds, STATE HOUSE 12th TX
<b>B.</b>	Full Name (Last, First, Middle Initial) Jim Murphy Campaign  Mailing Address 1 E. Greenway Plaza, Suite 225  City Houston State TX Zip Code 77046  Purpose of Disbursement Jim Murphy, STATE HOUSE 133rd TX Candidate Name TX Rep. Jim Murphy Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: TX District: 33	Transaction ID: 34546721 Date of Disbursement 04 / 26 / 2010	Amount of Each Disbursement this Period 500.00  Jim Murphy, STATE HOUSE 133rd TX
<b>C.</b>	Full Name (Last, First, Middle Initial) Lance Gooden for State Representative  Mailing Address P.O. Box 2125  City Terrell State TX Zip Code 75160  Purpose of Disbursement Lance Gooden, STATE HOUSE 4th TX Candidate Name Lance Gooden Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: TX District: 04	Transaction ID: 34546815 Date of Disbursement 04 / 26 / 2010	Amount of Each Disbursement this Period 250.00  Lance Gooden, STATE HOUSE 4th TX

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	1250.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

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<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) Larry Gonzales Campaign</p> <p>Mailing Address P.O. Box 2501</p> <p>City Round Rock State TX Zip Code 78680</p> <p>Purpose of Disbursement Larry Gonzales, STATE HOUSE 52nd TX</p> <p>Candidate Name Larry Gonzales</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: TX District: 52</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 34546870 <b>Date of Disbursement:</b> 04 / 26 / 2010</p> <p>Amount of Each Disbursement this Period 500.00</p> <p>Larry Gonzales, STATE HOUSE 52nd TX</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Lyle Larson for State Representative</p> <p>Mailing Address P.O. Box 171148</p> <p>City San Antonio State TX Zip Code 78217</p> <p>Purpose of Disbursement Lyle Larson, STATE HOUSE 122nd TX</p> <p>Candidate Name Lyle Larson</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: TX District: 22</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 34546871 <b>Date of Disbursement:</b> 04 / 26 / 2010</p> <p>Amount of Each Disbursement this Period 500.00</p> <p>Lyle Larson, STATE HOUSE 122nd TX</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Solomon Ortiz, Jr. Campaign</p> <p>Mailing Address P.O. Box 270909</p> <p>City Corpus Christi State TX Zip Code 78427</p> <p>Purpose of Disbursement Soloman Ortiz, STATE HOUSE 33rd TX</p> <p>Candidate Name TX Rep. Solomon Ortiz, Jr.</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: TX District: 33</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 34546872 <b>Date of Disbursement:</b> 04 / 26 / 2010</p> <p>Amount of Each Disbursement this Period 500.00</p> <p>Soloman Ortiz, STATE HOUSE 33rd TX</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)

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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

A.	Full Name (Last, First, Middle Initial) Workman for Texas Campaign	Transaction ID: 34546873 Date of Disbursement
	Mailing Address 4415 R.O. Drive	<input type="text" value="04"/> / <input type="text" value="26"/> / <input type="text" value="2010"/>
	City Spicewood State TX Zip Code 78669	Amount of Each Disbursement this Period
	Purpose of Disbursement Paul Workman, STATE HOUSE 47th TX	<input type="text" value="500.00"/>
	Candidate Name Paul Workman	<input type="text" value="011"/> Category/Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: TX District: 47	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		Paul Workman, STATE HOUSE 47th TX

B.	Full Name (Last, First, Middle Initial) Patterson for Land Commissioner	Transaction ID: 34546875 Date of Disbursement
	Mailing Address P.O. Box 40218	<input type="text" value="04"/> / <input type="text" value="26"/> / <input type="text" value="2010"/>
	City Austin State TX Zip Code 78704	Amount of Each Disbursement this Period
	Purpose of Disbursement Jerry Patterson, LAND COMMISSIONER TX	<input type="text" value="500.00"/>
	Candidate Name Jerry Patterson	<input type="text" value="011"/> Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		Jerry Patterson, LAND COMMISSIONER TX

C.	Full Name (Last, First, Middle Initial) FLS Connect, LLC	Transaction ID: 34578829 Date of Disbursement
	Mailing Address 7300 Hudson Blvd., Suite 270	<input type="text" value="04"/> / <input type="text" value="19"/> / <input type="text" value="2010"/>
	City St. Paul State MN Zip Code 55128	Amount of Each Disbursement this Period
	Purpose of Disbursement Phone Bank	<input type="text" value="222.09"/>
	Candidate Name Matt Gaetz	<input type="text" value="011"/> Category/Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: 04	Disbursement For: 2010 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Special-Primary2010
		Phone Bank

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<input type="text" value="1222.09"/>
<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 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: 34578841 Date of Disbursement 04 / 19 / 2010
	Mailing Address 8341 Beechcraft Avenue	Amount of Each Disbursement this Period 76.29
	City Gaithersburg State MD Zip Code 20879-1509	
	Purpose of Disbursement Phone Data Matching	011 Category/ Type
	Candidate Name Matt Gaetz	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2010 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Special-Primary2010
	State: FL District: 04	Phone Data Matching

B.	Full Name (Last, First, Middle Initial) Prolist Inc.	Transaction ID: 34578843 Date of Disbursement 04 / 19 / 2010
	Mailing Address 8341 Beechcraft Avenue	Amount of Each Disbursement this Period 1430.74
	City Gaithersburg State MD Zip Code 20879-1509	
	Purpose of Disbursement Postage	011 Category/ Type
	Candidate Name Matt Gaetz	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2010 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Special-Primary2010
	State: FL District: 04	Postage

C.	Full Name (Last, First, Middle Initial) Prolist Inc.	Transaction ID: 34578853 Date of Disbursement 04 / 19 / 2010
	Mailing Address 8341 Beechcraft Avenue	Amount of Each Disbursement this Period 983.20
	City Gaithersburg State MD Zip Code 20879-1509	
	Purpose of Disbursement Postcards	011 Category/ Type
	Candidate Name Matt Gaetz	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2010 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Special-Primary2010
	State: FL District: 04	Postcards

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>2490.23</b>
<b>TOTAL</b> This Period (last page this line number only) .....	<b>20712.32</b>

# 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 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) Friends Of John Boehner	Transaction ID: 34543766 Date of Disbursement
	Mailing Address 7908 Cincinnati Dayton Road Suite I	<input type="text" value="04"/> / <input type="text" value="23"/> / <input type="text" value="2010"/>
	City West Chester State OH Zip Code 45069	Amount of Each Disbursement this Period
	Purpose of Disbursement	<input type="text" value="2450.00"/>
	Candidate Name Rep. John A. Boehner	<input type="text" value="011"/> Category/Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: OH District: 08	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Portman For Senate Committee	Transaction ID: 34543767 Date of Disbursement
	Mailing Address 8331 Little Harbor Drive	<input type="text" value="04"/> / <input type="text" value="23"/> / <input type="text" value="2010"/>
	City Cincinnati State OH Zip Code 45244	Amount of Each Disbursement this Period
	Purpose of Disbursement	<input type="text" value="4950.00"/>
	Candidate Name Mr. Rob Portman	<input type="text" value="011"/> Category/Type
	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: OH District:	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) McHenry For Congress	Transaction ID: 34543769 Date of Disbursement
	Mailing Address PO Box 1406	<input type="text" value="04"/> / <input type="text" value="23"/> / <input type="text" value="2010"/>
	City Hickory State NC Zip Code 28603	Amount of Each Disbursement this Period
	Purpose of Disbursement	<input type="text" value="1950.00"/>
	Candidate Name Mr. Patrick McHenry	<input type="text" value="011"/> Category/Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NC District: 10	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<input type="text" value="9350.00"/>
<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 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) Mike McIntyre For Congress  Mailing Address P.O. Box 1  City Lumberton State NC Zip Code 28359  Purpose of Disbursement <span style="float: right; border: 1px solid black; padding: 2px;">011</span> Candidate Name Rep. Mike McIntyre 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) ▼ State: NC District: 07	Transaction ID: 34543770 Date of Disbursement <table border="1" style="font-size: small;"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>4</td><td></td><td>2</td><td>3</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table> Amount of Each Disbursement this Period <div style="border: 1px solid black; text-align: center; padding: 5px;">1000.00</div>	M	M	/	D	D	/	Y	Y	Y	Y	0	4		2	3		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y													
0	4		2	3		2	0	1	0													
<b>B.</b>	Full Name (Last, First, Middle Initial) Walter Jones Committee  Mailing Address PO Box 3962  City Greenville State NC Zip Code 27836  Purpose of Disbursement <span style="float: right; border: 1px solid black; padding: 2px;">011</span> Candidate Name Rep. Walter B. Jones, Jr. 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) ▼ State: NC District: 03	Transaction ID: 34543771 Date of Disbursement <table border="1" style="font-size: small;"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>4</td><td></td><td>2</td><td>3</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table> Amount of Each Disbursement this Period <div style="border: 1px solid black; text-align: center; padding: 5px;">1000.00</div>	M	M	/	D	D	/	Y	Y	Y	Y	0	4		2	3		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y													
0	4		2	3		2	0	1	0													
<b>C.</b>	Full Name (Last, First, Middle Initial) Adrian Smith For Congress  Mailing Address 3321 Avenue I Suite 6  City Scottsbluff State NE Zip Code 69361  Purpose of Disbursement <span style="float: right; border: 1px solid black; padding: 2px;">011</span> Candidate Name Adrian Smith 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) ▼ State: NE District: 03	Transaction ID: 34543772 Date of Disbursement <table border="1" style="font-size: small;"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>4</td><td></td><td>2</td><td>3</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table> Amount of Each Disbursement this Period <div style="border: 1px solid black; text-align: center; padding: 5px;">1000.00</div>	M	M	/	D	D	/	Y	Y	Y	Y	0	4		2	3		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y													
0	4		2	3		2	0	1	0													

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	<div style="border: 1px solid black; padding: 5px; font-weight: bold;">3000.00</div>
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	<div style="border: 1px solid black; height: 20px; width: 100%;"></div>



# 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 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

<p><b>A.</b> Full Name (Last, First, Middle Initial) Hal Rogers For Congress</p> <p>Mailing Address P.O. Box 1214 East Mt Vernon St</p> <p>City Somerset State KY Zip Code 42502</p> <p>Purpose of Disbursement <span style="border: 1px solid black; padding: 2px;">011</span> Category/Type</p> <p>Candidate Name Rep. Harold Dallas Rogers</p> <p>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) ▼</p> <p>State: KY District: 05</p>	<p><b>Transaction ID:</b> 34543773 <b>Date of Disbursement</b> <span style="border: 1px solid black; padding: 2px;">04</span> / <span style="border: 1px solid black; padding: 2px;">23</span> / <span style="border: 1px solid black; padding: 2px;">2010</span></p> <p><b>Amount of Each Disbursement this Period</b> <span style="border: 1px solid black; padding: 2px; display: block; text-align: center;">1000.00</span></p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Jim Gerlach For Congress Committee</p> <p>Mailing Address PO Box 87</p> <p>City Uwchland State PA Zip Code 19480</p> <p>Purpose of Disbursement <span style="border: 1px solid black; padding: 2px;">011</span> Category/Type</p> <p>Candidate Name Mr. Jim Gerlach</p> <p>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) ▼</p> <p>State: PA District: 06</p>	<p><b>Transaction ID:</b> 34543775 <b>Date of Disbursement</b> <span style="border: 1px solid black; padding: 2px;">04</span> / <span style="border: 1px solid black; padding: 2px;">23</span> / <span style="border: 1px solid black; padding: 2px;">2010</span></p> <p><b>Amount of Each Disbursement this Period</b> <span style="border: 1px solid black; padding: 2px; display: block; text-align: center;">2500.00</span></p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Carney For Congress</p> <p>Mailing Address P.O. Box A</p> <p>City Clarks Summit State PA Zip Code 18411</p> <p>Purpose of Disbursement <span style="border: 1px solid black; padding: 2px;">011</span> Category/Type</p> <p>Candidate Name Rep. Christopher P. Carney</p> <p>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) ▼</p> <p>State: PA District: 10</p>	<p><b>Transaction ID:</b> 34543776 <b>Date of Disbursement</b> <span style="border: 1px solid black; padding: 2px;">04</span> / <span style="border: 1px solid black; padding: 2px;">23</span> / <span style="border: 1px solid black; padding: 2px;">2010</span></p> <p><b>Amount of Each Disbursement this Period</b> <span style="border: 1px solid black; padding: 2px; display: block; text-align: center;">2500.00</span></p>

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

6000.00

**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)

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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

A.	Full Name (Last, First, Middle Initial) Pennsylvanians For Kanjorski	Transaction ID: 34543777 Date of Disbursement 04 / 23 / 2010
	Mailing Address 103 South Hanover Street	Amount of Each Disbursement this Period 1500.00
	City Nanticoke State PA Zip Code 18634	
	Purpose of Disbursement	011 Category/ Type
	Candidate Name Rep. Paul E. Kanjorski	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 11	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Earl Pomeroy For Congress	Transaction ID: 34543784 Date of Disbursement 04 / 23 / 2010
	Mailing Address Post Office Box 9336	Amount of Each Disbursement this Period 1000.00
	City Fargo State ND Zip Code 58106	
	Purpose of Disbursement	011 Category/ Type
	Candidate Name Rep. Earl Pomeroy	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: ND District: 01	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Bennett Election Committee Inc	Transaction ID: 34543785 Date of Disbursement 04 / 23 / 2010
	Mailing Address 175 South West Temple Suite 650	Amount of Each Disbursement this Period 1450.00
	City Salt Lake City State UT Zip Code 84101	
	Purpose of Disbursement	011 Category/ Type
	Candidate Name Sen. Robert F. Bennett	
	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: UT District:	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	▶	3950.00
<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:  
(check only one)

<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

<p><b>A.</b> Full Name (Last, First, Middle Initial) Ellsworth For Indiana</p> <p>Mailing Address P.O. Box 62</p> <p>City Evansville State IN Zip Code 47701</p> <p>Purpose of Disbursement</p> <p>Candidate Name Mr. Brad Ellsworth</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: IN 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> 34544664 <b>Date of Disbursement</b> 04 / 26 / 2010</p> <p>Amount of Each Disbursement this Period 2000.00</p> <p>011 Category/ Type</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Djou For Hawaii</p> <p>Mailing Address PO Box 235280</p> <p>City Honolulu State HI Zip Code 96823</p> <p>Purpose of Disbursement</p> <p>Candidate Name Mr. Charles Djou</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: HI District: 01</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> 34558020 <b>Date of Disbursement</b> 04 / 28 / 2010</p> <p>Amount of Each Disbursement this Period 4950.00</p> <p>011 Category/ Type</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Welch For Congress</p> <p>Mailing Address PO Box 1682</p> <p>City Burlington State VT Zip Code 05402</p> <p>Purpose of Disbursement Void - Welch For Congress</p> <p>Candidate Name Rep. Peter Welch</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: VT District: 01</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> 34607345 <b>Date of Disbursement</b> 04 / 30 / 2010</p> <p>Amount of Each Disbursement this Period -1000.00</p> <p>011 Category/ Type</p> <p>Void - Welch For Congress</p>

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	5950.00
<b>TOTAL</b> This Period (last page this line number only) .....	28250.00

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

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

(Use separate schedule(s) for each numbered line)	PAGE 92 / 100
	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

<b>A.</b> Full Name (Last, First, Middle Initial) of Debtor or Creditor Prolist, Inc.	Nature of Debt (Purpose): Postage & Postcards
Mailing Address 8341 Beechcraft Avenue	
City State ZIP Code Gaithersburg MD 20879	

Outstanding Balance Beginning This Period	<b>Transaction ID: 34911927</b>	
0.00		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
15206.30	0.00	15206.30

1) <b>SUBTOTALS</b> This Period This Page (optional).....	15206.30
2) <b>TOTALS</b> This Period (last page this line number only).....	15206.30
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only).....	0.00
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only)	15206.30

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

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund	<b>FEC IDENTIFICATION NUMBER</b> ▼ <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.		
Mailing Address 8341 Beechcraft Avenue		
City Gaithersburg	State MD	Zip Code 20879-1509
Purpose of Expenditure Postage	Category/ Type <span style="border: 1px solid black; padding: 2px;">004</span>	
Name of Federal Candidate supported or Opposed by expenditure: Rep. Mark E. Souder		
Calendar Year-To-Date Per Election for Office Sought	<span style="border: 1px solid black; padding: 2px;">1939.28</span>	

Date	<span style="border: 1px solid black; padding: 2px;">04</span> / <span style="border: 1px solid black; padding: 2px;">23</span> / <span style="border: 1px solid black; padding: 2px;">2010</span>
Amount	<span style="border: 1px solid black; padding: 2px;">1939.28</span>
<b>Transaction ID:</b> 34538986	
Office Sought:	<input checked="" type="checkbox"/> House State: <u>IN</u> <input type="checkbox"/> Senate District: <u>03</u> <input type="checkbox"/> Presidential
Check One:	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Disbursement For:	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____
2010 <b>[MEMO ITEM]</b>	
Postage	

Full Name (Last, First, Middle, Initial) of Payee Prolist Inc.		
Mailing Address 8341 Beechcraft Avenue		
City Gaithersburg	State MD	Zip Code 20879-1509
Purpose of Expenditure Postage	Category/ Type <span style="border: 1px solid black; padding: 2px;">004</span>	
Name of Federal Candidate supported or Opposed by expenditure: Rep. Dan Burton		
Calendar Year-To-Date Per Election for Office Sought	<span style="border: 1px solid black; padding: 2px;">2649.01</span>	

Date	<span style="border: 1px solid black; padding: 2px;">04</span> / <span style="border: 1px solid black; padding: 2px;">23</span> / <span style="border: 1px solid black; padding: 2px;">2010</span>
Amount	<span style="border: 1px solid black; padding: 2px;">2649.01</span>
<b>Transaction ID:</b> 34538987	
Office Sought:	<input checked="" type="checkbox"/> House State: <u>IN</u> <input type="checkbox"/> Senate District: <u>05</u> <input type="checkbox"/> Presidential
Check One:	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Disbursement For:	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____
2010 <b>[MEMO ITEM]</b>	
Postage	

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

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

Mary Rose Adkins  
Signature

Date 05 / 19 / 2010

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

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund	<b>FEC IDENTIFICATION NUMBER</b> ▼ <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.		
Mailing Address 8341 Beechcraft Avenue		
City Gaithersburg	State MD	Zip Code 20879-1509
Purpose of Expenditure Postcards	Category/ Type <span style="border: 1px solid black; padding: 2px;">004</span>	
Name of Federal Candidate supported or Opposed by expenditure: Rep. Mark E. Souder		
Calendar Year-To-Date Per Election for Office Sought	<span style="border: 1px solid black; padding: 2px;">3076.11</span>	

Date	<table border="1" style="font-size: small;"> <tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr> <tr><td>0</td><td>4</td><td></td><td>2</td><td>3</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td></tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	4		2	3		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	4		2	3		2	0	1	0												
Amount	<span style="border: 1px solid black; padding: 2px;">1136.83</span>																				
<b>Transaction ID:</b> 34538989																					
Office Sought:	<input checked="" type="checkbox"/> House State: <u>IN</u> <input type="checkbox"/> Senate District: <u>03</u> <input type="checkbox"/> Presidential																				
Check One:	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose																				
Disbursement For:	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____																				
2010 <b>[MEMO ITEM]</b>																					
Postcards																					

Full Name (Last, First, Middle, Initial) of Payee Prolist Inc.		
Mailing Address 8341 Beechcraft Avenue		
City Gaithersburg	State MD	Zip Code 20879-1509
Purpose of Expenditure Postcards	Category/ Type <span style="border: 1px solid black; padding: 2px;">004</span>	
Name of Federal Candidate supported or Opposed by expenditure: Rep. Dan Burton		
Calendar Year-To-Date Per Election for Office Sought	<span style="border: 1px solid black; padding: 2px;">3558.45</span>	

Date	<table border="1" style="font-size: small;"> <tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr> <tr><td>0</td><td>4</td><td></td><td>2</td><td>3</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td></tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	4		2	3		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	4		2	3		2	0	1	0												
Amount	<span style="border: 1px solid black; padding: 2px;">909.44</span>																				
<b>Transaction ID:</b> 34538990																					
Office Sought:	<input checked="" type="checkbox"/> House State: <u>IN</u> <input type="checkbox"/> Senate District: <u>05</u> <input type="checkbox"/> Presidential																				
Check One:	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose																				
Disbursement For:	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____																				
2010 <b>[MEMO ITEM]</b>																					
Postcards																					

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

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

Mary Rose Adkins \_\_\_\_\_ Date 

M	M	/	D	D	/	Y	Y	Y	Y
0	5		1	9		2	0	1	0

Signature

# 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.

Mailing Address  
8341 Beechcraft Avenue

City State Zip Code  
Gaithersburg MD 20879-1509

Purpose of Expenditure Category/Type  
Postage 004

Name of Federal Candidate supported or Opposed by expenditure:  
Mr. Daniel Coats

Calendar Year-To-Date Per Election for Office Sought  
15098.61

Date  
MM / DD / YYYY  
04 / 23 / 2010

Amount  
15098.61  
Transaction ID: 34538993

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

Check One:  Support  Oppose

Disbursement For:  Primary  General  
 Other (specify) : \_\_\_\_\_  
2010  
**[MEMO ITEM]**

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

Mailing Address  
8341 Beechcraft Avenue

City State Zip Code  
Gaithersburg MD 20879-1509

Purpose of Expenditure Category/Type  
Postcards 004

Name of Federal Candidate supported or Opposed by expenditure:  
Mr. Daniel Coats

Calendar Year-To-Date Per Election for Office Sought  
17917.95

Date  
MM / DD / YYYY  
04 / 23 / 2010

Amount  
2819.34  
Transaction ID: 34538998

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

Check One:  Support  Oppose

Disbursement For:  Primary  General  
 Other (specify) : \_\_\_\_\_  
2010  
**[MEMO ITEM]**

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures .....	0.00
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures .....	
(c) <b>TOTAL</b> 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  
Signature

Date  
MM / DD / YYYY  
05 / 19 / 2010

# 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:  
Rep. Alan B. Mollohan

Date  
MM / DD / YYYY  
04 / 23 / 2010

Amount  
1508.68

Transaction ID: 34539006

Office Sought:  House State: WV  
 Senate District: 01  
 Presidential

Check One:  Support  Oppose

Disbursement For:  Primary  General  
 Other (specify) : \_\_\_\_\_

2010 **[MEMO ITEM]**

Postage

Calendar Year-To-Date Per Election  
for Office Sought 1508.68

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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 Postcards	Category/ Type 004
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Name of Federal Candidate supported or Opposed by expenditure:  
Rep. Alan B. Mollohan

Date  
MM / DD / YYYY  
04 / 23 / 2010

Amount  
847.96

Transaction ID: 34539008

Office Sought:  House State: WV  
 Senate District: 01  
 Presidential

Check One:  Support  Oppose

Disbursement For:  Primary  General  
 Other (specify) : \_\_\_\_\_

2010 **[MEMO ITEM]**

Postcards

(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  
Signature

Date MM / DD / YYYY  
05 / 19 / 2010



# 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.

Mailing Address  
8341 Beechcraft Avenue

City Gaithersburg State MD Zip Code 20879-1509

Purpose of Expenditure  
Postage Category/Type 004

Name of Federal Candidate supported or Opposed by expenditure:  
Mr. Charles Djou

Calendar Year-To-Date Per Election for Office Sought 1265.12

Date 04 / 27 / 2010

Amount 1265.12

Transaction ID: 34558017

Office Sought:  House State: HI  
 Senate District: 01  
 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

City Gaithersburg State MD Zip Code 20879-1509

Purpose of Expenditure  
Postcards Category/Type 004

Name of Federal Candidate supported or Opposed by expenditure:  
Mr. Charles Djou

Calendar Year-To-Date Per Election for Office Sought 2017.55

Date 04 / 27 / 2010

Amount 752.43

Transaction ID: 34558019

Office Sought:  House State: HI  
 Senate District: 01  
 Presidential

Check One:  Support  Oppose

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

Postcards

(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  
Signature

Date 05 / 19 / 2010

# 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:  
Rep. Mark E. Souder

---

Calendar Year-To-Date Per Election for Office Sought	3492.07
---	---------

Date  
MM / DD / YYYY  
04 / 29 / 2010

Amount  
415.96

Transaction ID: 34559646

Office Sought:  House State: IN  
 Senate District: 03  
 Presidential

Check One:  Support  Oppose

Disbursement For:  Primary  General  
 Other (specify) : \_\_\_\_\_

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 Postage	Category/ Type 004
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Name of Federal Candidate supported or Opposed by expenditure:  
Rep. Alan B. Mollohan

---

Calendar Year-To-Date Per Election for Office Sought	2942.02
---	---------

Date  
MM / DD / YYYY  
04 / 29 / 2010

Amount  
585.38

Transaction ID: 34559649

Office Sought:  House State: WV  
 Senate District: 01  
 Presidential

Check One:  Support  Oppose

Disbursement For:  Primary  General  
 Other (specify) : \_\_\_\_\_

2010 **[MEMO ITEM]**

Postage

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures .....	0.00
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures .....	
(c) <b>TOTAL</b> 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  
Signature

Date MM / DD / YYYY  
05 / 19 / 2010

**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 Postcards	Category/ Type 004
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Name of Federal Candidate supported or Opposed by expenditure:  
Rep. Mark E. Souder

---

Calendar Year-To-Date Per Election for Office Sought	3757.52
---	---------

Date  
M M / D D / Y Y Y Y  
0 4 / 2 9 / 2 0 1 0

Amount  
265.45

Transaction ID: 34559654

Office Sought:  House State: IN  
 Senate District: 03  
 Presidential

Check One:  Support  Oppose

Disbursement For:  Primary  General  
 Other (specify) : \_\_\_\_\_

2010 **[MEMO ITEM]**

Postcards

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 Postcards	Category/ Type 004
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Name of Federal Candidate supported or Opposed by expenditure:  
Rep. Alan B. Mollohan

---

Calendar Year-To-Date Per Election for Office Sought	3295.96
---	---------

Date  
M M / D D / Y Y Y Y  
0 4 / 2 9 / 2 0 1 0

Amount  
353.94

Transaction ID: 34559656

Office Sought:  House State: WV  
 Senate District: 01  
 Presidential

Check One:  Support  Oppose

Disbursement For:  Primary  General  
 Other (specify) : \_\_\_\_\_

2010 **[MEMO ITEM]**

Postcards

(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  
Signature

Date M M / D D / Y Y Y Y  
0 5 / 1 9 / 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  
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. Daniel Coats

---

Calendar Year-To-Date Per Election for Office Sought	33016.56
---	----------

Date  
MM / DD / YYYY  
04 / 30 / 2010

Amount  
15098.61

Transaction ID: 34578825

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

Check One:  Support  Oppose

Disbursement For:  Primary  General  
 Other (specify) : \_\_\_\_\_  
2010

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

---

Mailing Address  
8341 Beechcraft Avenue

---

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

---

Calendar Year-To-Date Per Election for Office Sought	35835.90
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Date  
MM / DD / YYYY  
04 / 30 / 2010

Amount  
2819.34

Transaction ID: 34578827

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

Check One:  Support  Oppose

Disbursement For:  Primary  General  
 Other (specify) : \_\_\_\_\_  
2010

(a) SUBTOTAL of Itemized Independent Expenditures .....	17917.95
(b) SUBTOTAL of Unitemized Independent Expenditures .....	
(c) TOTAL Independent Expenditures .....	17917.95

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 MM / DD / YYYY  
05 / 19 / 2010