

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund	FEC IDENTIFICATION NUMBER C C00053553
Check if <input type="checkbox"/> 24-hour 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
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Purpose of Expenditure Postage	Category/ Type 004
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Name of Federal Candidate supported or Opposed by expenditure:
Barack Obama

Calendar Year-To-Date Per Election for Office Sought	9748425.48
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Date
M M / D D / Y Y Y Y
1 1 / 2 4 / 2 0 0 8

Amount
707.57

Transaction ID: 27277699

Office Sought: House State: _____
 Senate District: _____
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2008

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 Postage	Category/ Type 004
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Name of Federal Candidate supported or Opposed by expenditure:
John S. McCain

Calendar Year-To-Date Per Election for Office Sought	9749133.05
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Date
M M / D D / Y Y Y Y
1 1 / 2 4 / 2 0 0 8

Amount
707.57

Transaction ID: 27277702

Office Sought: House State: _____
 Senate District: _____
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2008

(a) SUBTOTAL of Itemized Independent Expenditures	1415.14
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	

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

Mary Rose Adkins _____ Date M M / D D / Y Y Y Y
Signature 0 6 / 2 9 / 2 0 1 0