

# FEC FORM 3X

# REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

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

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

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

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

5. Covering Period 04 01 2011 through 04 30 2011

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

Type or Print Name of Treasurer Mary Rose Adkins

Signature of Treasurer Electronically Filed by Mary Rose Adkins Date 06 20 2011

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

Office Use Only									
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**FEC FORM 3X**  
(Rev. 12/2004)

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

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

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

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

Report Covering the Period: From: 

M	M
0	4

D	D
0	1

Y	Y	Y	Y
2	0	1	1

 To: 

M	M
0	4

D	D
3	0

Y	Y	Y	Y
2	0	1	1

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1"><tr><td>X</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>1</td><td>1</td></tr></table>	X	Y	Y	Y	2	0	1	1		3129515.72
X	Y	Y	Y							
2	0	1	1							
(b) Cash on Hand at Beginning of Reporting Period .....	3264430.91									
(c) Total Receipts (from Line 19) .....	505677.17	1558299.79								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	3770108.08	4687815.51								
7. Total Disbursements (from Line 31) .....	170676.67	1088384.10								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	3599431.41	3599431.41								
9. Debts and Obligations owed <b>TO</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00									
10. Debts and Obligations owed <b>BY</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00									

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

**For further information contact:**

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

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

**DETAILED SUMMARY PAGE  
OF RECEIPTS**

Write or Type Committee Name

National Rifle Association of America Political Victory Fund

Report Covering the Period: From:    To:

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) .....	16745.50	56502.50
(ii) Unitemized .....	486930.69	1494842.50
(iii) TOTAL (add Lines 11(a)(i) and (ii) .....	503676.19	1551345.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs) .....	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5) .....	503676.19	1551345.00
12. Transfers From Affiliated/Other Party Committees .....	0.00	0.00
13. All Loans Received .....	0.00	0.00
14. Loan Repayments Received .....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5) .....	0.00	0.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees .....	2000.00	6950.00
17. Other Federal Receipts (Dividends, Interest, etc.) .....	0.98	4.79
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)) .....	505677.17	1558299.79
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	505677.17	1558299.79

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share.....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures.....	139514.45	811505.53
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶	139514.45	811505.53
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees..... and Other Political Committees.....	2500.00	79100.00
24. Independent Expenditure (use Schedule E) .....	0.00	-57933.08
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.....	28662.22	255711.65
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))..	170676.67	1088384.10
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	170676.67	1088384.10

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) .....	503676.19	1551345.00
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	503676.19	1551345.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	139514.45	811505.53
37. Offsets to Operating Expenditures (from Line 15, page 3) .....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	139514.45	811505.53

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 7 / 68

(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

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

**A.**

Full Name (Last, First, Middle Initial)  
MR JAMES J BAKER

Mailing Address PO BOX 444

City State Zip Code  
BARNESVILLE MD 20838-0444

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

Name of Employer Occupation  
SELF ATTORNEY

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 / 0 4 / 2 0 1 1

Transaction ID: 40185806

Amount of Each Receipt this Period  
1000.00

**B.**

Full Name (Last, First, Middle Initial)  
MR M S KNUTHS

Mailing Address 5539 FARQUHAR LN

City State Zip Code  
DALLAS TX 75209-3507

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

Name of Employer Occupation  
SELF EMPLOYED LAWYER

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 245.00

Date of Receipt

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

Transaction ID: 40185840

Amount of Each Receipt this Period  
100.00

**C.**

Full Name (Last, First, Middle Initial)  
MR P LOHNEIS

Mailing Address 12437 OVER RIDGE RD

City State Zip Code  
ROCKVILLE MD 20854-3047

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 ▼ 250.00

Date of Receipt

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

Transaction ID: 40185855

Amount of Each Receipt this Period  
250.00

**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 8 / 68  
(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 LYLE S COUSIN

Mailing Address 1960 AVOCET DR

City AMMON State ID Zip Code 83406-6664

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

Name of Employer SELF EMPLOYED Occupation AUTO BODY REPAIR

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt: 04 / 21 / 2011  
Transaction ID: 40186241  
Amount of Each Receipt this Period: 100.00

**B.** Full Name (Last, First, Middle Initial)  
MR RODNEY L GUILBEAULT

Mailing Address 2 WEDGEWOOD DR

City NORTH SMITHFIELD State RI Zip Code 02896-7315

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

Name of Employer CVS PHARMACY, INC Occupation SHIPPING / LOADER

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt: 04 / 05 / 2011  
Transaction ID: 40186244  
Amount of Each Receipt this Period: 100.00

**C.** Full Name (Last, First, Middle Initial)  
MR KURT EBERT

Mailing Address 10110 LAGOS RD

City AGUA DULCE State CA Zip Code 91390-2888

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

Name of Employer Occupation

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt: 04 / 21 / 2011  
Transaction ID: 40186366  
Amount of Each Receipt this Period: 125.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 325.00

**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 9 / 68  
(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

<p><b>A.</b> Full Name (Last, First, Middle Initial) MR DARREL R PALMER</p> <p>Mailing Address 1908 BEAR CREEK DR</p> <p>City State Zip Code <b>DRAPER UT 84020-9114</b></p> <p>FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span></p> <p>Name of Employer Occupation RETIRED RETIRED</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ <span style="border: 1px solid black; padding: 2px;">300.00</span></p>	<p>Date of Receipt <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y</span> 04 / 13 / 2011</p> <p><b>Transaction ID: 40186774</b></p> <p>Amount of Each Receipt this Period <span style="border: 1px solid black; padding: 2px;">300.00</span></p>
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<p><b>B.</b> Full Name (Last, First, Middle Initial) MR HARVEY P KICHLINE</p> <p>Mailing Address 2663 OAKHURST DR</p> <p>City State Zip Code <b>CENTER VALLEY PA 18034-9481</b></p> <p>FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span></p> <p>Name of Employer Occupation SOUTHERN LIEHIGH SCHOOL DIST CUSTODIAN</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ <span style="border: 1px solid black; padding: 2px;">210.00</span></p>	<p>Date of Receipt <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y</span> 04 / 25 / 2011</p> <p><b>Transaction ID: 40187084</b></p> <p>Amount of Each Receipt this Period <span style="border: 1px solid black; padding: 2px;">65.00</span></p>
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<p><b>C.</b> Full Name (Last, First, Middle Initial) MR CHARLES R R CARPENTER</p> <p>Mailing Address PO BOX 14533</p> <p>City State Zip Code <b>ALBUQUERQUE NM 87191-4533</b></p> <p>FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span></p> <p>Name of Employer Occupation RETIRED RETIRED</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ <span style="border: 1px solid black; padding: 2px;">550.00</span></p>	<p>Date of Receipt <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y</span> 04 / 05 / 2011</p> <p><b>Transaction ID: 40187300</b></p> <p>Amount of Each Receipt this Period <span style="border: 1px solid black; padding: 2px;">125.00</span></p>
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<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<span style="border: 1px solid black; padding: 2px;">490.00</span>
<b>TOTAL</b> This Period (last page this line number only) .....	<span style="border: 1px solid black; padding: 2px;"> </span>

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 10 / 68  
(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 RALPH E COMISKEY

Mailing Address 4929 GARDEN TRL

City State Zip Code  
COLORADO SPRINGS CO 80918-4017

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

Name of Employer Occupation  
RETIRE

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 244.00

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

**Transaction ID:** 40187608

Amount of Each Receipt this Period  
45.00

**B.**

Full Name (Last, First, Middle Initial)  
MR RALPH E COMISKEY

Mailing Address 4929 GARDEN TRL

City State Zip Code  
COLORADO SPRINGS CO 80918-4017

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

Name of Employer Occupation  
RETIRE

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 309.00

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

**Transaction ID:** 40187609

Amount of Each Receipt this Period  
65.00

**C.**

Full Name (Last, First, Middle Initial)  
MR JIMMIE G ROBERTS

Mailing Address 51 RITCHIE RD

City State Zip Code  
CAPITOL HEIGHTS MD 20743-3609

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

Name of Employer Occupation  
UNITED SHEET METAL INC OWNER

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 / 2 5 / 2 0 1 1

**Transaction ID:** 40187622

Amount of Each Receipt this Period  
200.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **310.00**

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

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

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

FOR LINE NUMBER: PAGE 11 / 68  
(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 WILBUR R HARRIS  
Mailing Address 41623 222ND AVE SE  
City ENUMCLAW State WA Zip Code 98022-9058  
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 ▼ 234.00  
Date of Receipt 04 / 26 / 2011  
Transaction ID: 40187630  
Amount of Each Receipt this Period 40.00

**B.** Full Name (Last, First, Middle Initial)  
MR ANTHONY BATES  
Mailing Address 5901 W ST  
City WASHOUGAL State WA Zip Code 98671-6616  
FEC ID number of contributing federal political committee. **C**  
Name of Employer UNIVERSITY OF MICHIGAN Occupation RETIRED - LECTURER  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 300.00  
Date of Receipt 04 / 05 / 2011  
Transaction ID: 40188030  
Amount of Each Receipt this Period 75.00

**C.** Full Name (Last, First, Middle Initial)  
MR RONALD R BURROWS  
Mailing Address 2275 OAK ST  
City SALEM State OH Zip Code 44460-2519  
FEC ID number of contributing federal political committee. **C**  
Name of Employer VARIOUS Occupation PIPEFITTER  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 600.00  
Date of Receipt 04 / 26 / 2011  
Transaction ID: 40188144  
Amount of Each Receipt this Period 400.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 515.00  
**TOTAL** This Period (last page this line number only) ..... ►

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 12 / 68  
(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 L ILLES

Mailing Address 1788 AMARONE WAY

City Henderson State NV Zip Code 89012-7220

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

Name of Employer CLIENT DEVELOPMENT SERVICES Occupation PRESIDENT & COO

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 202.00

Date of Receipt 04 / 27 / 2011

Transaction ID: 40188991

Amount of Each Receipt this Period 70.00

**B.**

Full Name (Last, First, Middle Initial)  
MR WILLIAM M LEAMAN, SR

Mailing Address 18308 METZ DR

City GERMANTOWN State MD Zip Code 20874-2410

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 / 20 / 2011

Transaction ID: 40189414

Amount of Each Receipt this Period 144.00

**C.**

Full Name (Last, First, Middle Initial)  
M J BANKHEAD

Mailing Address 3924 SAGAMORE HILL CT

City PLANO State TX Zip Code 75025-2015

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

Name of Employer DEUTSCH INDUSTRIAL Occupation TECH SALES

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt 04 / 25 / 2011

Transaction ID: 40189555

Amount of Each Receipt this Period 100.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 314.00

**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 / 68  
(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 JOHN S COE

Mailing Address 10770 JAMACHA BLVD SPC 73

City State Zip Code  
SPRING VALLEY CA 91978-8073

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 ▼ 300.00

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

**Transaction ID:** 40189842

Amount of Each Receipt this Period  
100.00

**B.** Full Name (Last, First, Middle Initial)  
MR STUART W PRATT

Mailing Address PO BOX 990

City State Zip Code  
ESSEX MA 01929-0018

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

Name of Employer Occupation  
KUNNEMAR CO REAL ESTATE

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 / 2 8 / 2 0 1 1

**Transaction ID:** 40190050

Amount of Each Receipt this Period  
500.00

**C.** Full Name (Last, First, Middle Initial)  
MR JOHNNY CHILTON

Mailing Address 14804 LAKE FOREST DR

City State Zip Code  
DALLAS TX 75254-7616

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 / 2 6 / 2 0 1 1

**Transaction ID:** 40190216

Amount of Each Receipt this Period  
500.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 1100.00

**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 / 68  
(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)  
GERRY O LANGLOIS

Mailing Address PO BOX 4386

City PALM DESERT State CA Zip Code 92261-4386

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

Name of Employer G.O. LANGLOIS CONSTRUCTION INC Occupation GENERAL CONTRACTOR

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt 04 / 05 / 2011

Transaction ID: 40190447

Amount of Each Receipt this Period 100.00

**B.** Full Name (Last, First, Middle Initial)  
DALE MUHLEMAN

Mailing Address 2232 NW WOODLAND DR

City BREMERTON State WA Zip Code 98312-1704

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 / 28 / 2011

Transaction ID: 40190810

Amount of Each Receipt this Period 125.00

**C.** Full Name (Last, First, Middle Initial)  
DALE MUHLEMAN

Mailing Address 2232 NW WOODLAND DR

City BREMERTON State WA Zip Code 98312-1704

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

Name of Employer Occupation RETIRED

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 275.00

Date of Receipt 04 / 08 / 2011

Transaction ID: 40190811

Amount of Each Receipt this Period 75.00

**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 15 / 68

(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 JEFF MATTHEWS

Mailing Address 13612 DUCCIO DR

City

BAKERSFIELD

State

CA

Zip Code

93306-7643

FEC ID number of contributing federal political committee.

**C**

Name of Employer

CALIF DEPT. OF CORRECTIONS

Occupation

DENTIST

Receipt For:

Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

203.00

Date of Receipt

MM / DD / YYYY  
04 / 11 / 2011

Transaction ID: 40190992

Amount of Each Receipt this Period

75.00

**B.**

Full Name (Last, First, Middle Initial)

MR LAWRENCE H MEEKER

Mailing Address 4900 WESTRIDGE AVE APT 13

City

FORT WORTH

State

TX

Zip Code

76116-8243

FEC ID number of contributing federal political committee.

**C**

Name of Employer

MEEKER & COMPANY, INC.

Occupation

PRESIDENT

Receipt For:

Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

MM / DD / YYYY  
04 / 13 / 2011

Transaction ID: 40191256

Amount of Each Receipt this Period

250.00

**C.**

Full Name (Last, First, Middle Initial)

MR CHARLES TAYLOR

Mailing Address 1860 DREYDON AVE

City

CAMBRIA

State

CA

Zip Code

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 ▼

203.00

Date of Receipt

MM / DD / YYYY  
04 / 06 / 2011

Transaction ID: 40191421

Amount of Each Receipt this Period

30.00

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

355.00

**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 / 68

(check only one)

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

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

**A.**

Full Name (Last, First, Middle Initial)

MR CHARLES 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 ▼ 243.00

Date of Receipt

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

Transaction ID: 40191422

Amount of Each Receipt this Period

40.00

**B.**

Full Name (Last, First, Middle Initial)

MR RAYMOND A CAMPBELL

Mailing Address 224 EASY ST

City State Zip Code  
NEW KENSINGTON PA 15068-9435

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 / 2 1 / 2 0 1 1

Transaction ID: 40191698

Amount of Each Receipt this Period

100.00

**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

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 215.00

Date of Receipt

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

Transaction ID: 40191724

Amount of Each Receipt this Period

40.00

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

180.00

**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 / 68

(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 R PETERSON

Mailing Address 43 MACINTYRE LN

City State Zip Code  
ALLENDALE NJ 07401-1440

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

Name of Employer Occupation  
SELF EMPLOYED NEURO SURGEN

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 1

Transaction ID: 40191758

Amount of Each Receipt this Period  
500.00

**B.**

Full Name (Last, First, Middle Initial)  
MR DAVID B HOLLAND

Mailing Address 11615 OPEN MEADOW

City State Zip Code  
SAN ANTONIO TX 78230-2119

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 ▼ 367.50

Date of Receipt

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

Transaction ID: 40191899

Amount of Each Receipt this Period  
367.50

**C.**

Full Name (Last, First, Middle Initial)  
MR GEORGE E MARTIN

Mailing Address 250 RAMBLING CREEK RD

City State Zip Code  
KERRVILLE TX 78028-8257

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 ▼ 245.00

Date of Receipt

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

Transaction ID: 40191948

Amount of Each Receipt this Period  
45.00

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

912.50

**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 / 68

(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 J D GRAHAM

Mailing Address 85 HATHAWAY RD

City State Zip Code  
GOSHEN VT 05733-8436

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

Name of Employer Occupation  
RETIRE

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 215.00

Date of Receipt

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

Transaction ID: 40192361

Amount of Each Receipt this Period  
100.00

**B.**

Full Name (Last, First, Middle Initial)  
MR TOM L MCNEIL

Mailing Address 515 TIMBERLANE TRL

City State Zip Code  
SALISBURY NC 28147-7808

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

Name of Employer Occupation  
GENERAL MOTORS CORP RETIRE

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 240.00

Date of Receipt

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

Transaction ID: 40192451

Amount of Each Receipt this Period  
55.00

**C.**

Full Name (Last, First, Middle Initial)  
MR ROBERT S FABISZAK

Mailing Address 422 LITTLE CLOVE RD

City State Zip Code  
STATEN ISLAND NY 10301-4139

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

Name of Employer Occupation  
PORT AUTHORITY OF NY & NJ POLICE OFFICER

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 1 / 2 0 1 1

Transaction ID: 40192729

Amount of Each Receipt this Period  
100.00

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

255.00

**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 / 68  
(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 GREGORY M LATOWSKI

Mailing Address 1855 N CEDAR RD

City State Zip Code  
FOWLERVILLE MI 48836-8202

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

Name of Employer Occupation  
TS AUTOMATION, INC. PRESIDENT, SALES

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 249.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 4 / 0 8 / 2 0 1 1

**Transaction ID:** 40192800

Amount of Each Receipt this Period  
100.00

**B.**

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 Occupation  
C.G.I. INFORMATION SYSTEMS DATA NETWORK ENGINEER

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 290.00

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

**Transaction ID:** 40192815

Amount of Each Receipt this Period  
20.00

**C.**

Full Name (Last, First, Middle Initial)  
MR JAMES M MILLER

Mailing Address 517 W 113TH ST APT 75

City State Zip Code  
NEW YORK NY 10025-8065

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

Name of Employer Occupation  
CROSS COUNTRY CONSTRUCTION SURVEYOR

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 1 / 2 0 1 1

**Transaction ID:** 40192843

Amount of Each Receipt this Period  
150.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 270.00

**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 / 68  
(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 NORBERT SZABLA

Mailing Address 7271 PINE RD

City State Zip Code  
LEXINGTON MI 48450-8678

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

Name of Employer Occupation  
JOHN MILLER ELECT ELECTRICIAN

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
MM / DD / YYYY  
04 / 21 / 2011

**Transaction ID:** 40193303

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 ▼ 458.00

Date of Receipt  
MM / DD / YYYY  
04 / 25 / 2011

**Transaction ID:** 40193306

Amount of Each Receipt this Period  
100.00

**C.** Full Name (Last, First, Middle Initial)  
MR WILLIAM J SEFTON

Mailing Address 143 W WASHINGTON AVE

City State Zip Code  
ALPENA MI 49707-2759

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

Name of Employer Occupation  
SELF-EMPLOYED RESTAURANT OWNER

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
MM / DD / YYYY  
04 / 26 / 2011

**Transaction ID:** 40193376

Amount of Each Receipt this Period  
500.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **700.00**

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 21 / 68

(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 W SUTTER

Mailing Address 820 E ALBERT ST

City

PORTAGE

State

WI

Zip Code

53901-1420

FEC ID number of contributing federal political committee.

C

Name of Employer  
US MARINE CORP

Occupation  
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 / 2 5 / 2 0 1 1

Transaction ID: 40193523

Amount of Each Receipt this Period

200.00

**B.**

Full Name (Last, First, Middle Initial)

MR ANDREW C FRECHTLING

Mailing Address 1141 GREATHOUSE RD

City

WAXAHACHIE

State

TX

Zip Code

75167-8309

FEC ID number of contributing federal political committee.

C

Name of Employer  
SOUTHWEST AIRLINES

Occupation  
PILOT

Receipt For:

Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

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

Transaction ID: 40193534

Amount of Each Receipt this Period

40.00

**C.**

Full Name (Last, First, Middle Initial)

MR THOMAS A KORN

Mailing Address PO BOX 41

City

PICKRELL

State

NE

Zip Code

68422-0041

FEC ID number of contributing federal political committee.

C

Name of Employer  
STATE OF NEBRASKA

Occupation  
PSYCHOLOGIST

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 6 / 2 0 1 1

Transaction ID: 40193666

Amount of Each Receipt this Period

100.00

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

340.00

**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 / 68  
(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 ADAM

Mailing Address 2621 COUNTY ROAD 59

City State Zip Code  
ALLIANCE NE 69301-5407

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

Name of Employer Occupation  
ADAM ANGUS, INC. MANAGER / PRESIDENT

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 290.00

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

**Transaction ID:** 40193696

Amount of Each Receipt this Period  
40.00

**B.**

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

Mailing Address 1229 PARK ST

City State Zip Code  
FERNDALE WA 98248-9430

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

**Transaction ID:** 40194431

Amount of Each Receipt this Period  
50.00

**C.**

Full Name (Last, First, Middle Initial)  
MR JOHN F KLEYLEIN

Mailing Address 1909 TROUT FARM RD

City State Zip Code  
JARRETTSVILLE MD 21084-2024

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

Name of Employer Occupation  
RETIRED FISCAL ADMINISTRATOR

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 220.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 4 / 2 8 / 2 0 1 1

**Transaction ID:** 40194580

Amount of Each Receipt this Period  
220.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **310.00**

**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 / 68  
(check only one)

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

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

**A.**

Full Name (Last, First, Middle Initial)  
MR ROGER 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 ▼ 250.00

Date of Receipt  
MM / DD / YYYY  
04 / 08 / 2011

**Transaction ID:** 40194622

Amount of Each Receipt this Period  
50.00

**B.**

Full Name (Last, First, Middle Initial)  
DR WILLIAM P MURPHY, JR

Mailing Address 10601 SNAPPER CREEK RD

City State Zip Code  
CORAL GABLES FL 33156-3454

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

Name of Employer Occupation  
SELF EMPLOYED RETIRED

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt  
MM / DD / YYYY  
04 / 25 / 2011

**Transaction ID:** 40194723

Amount of Each Receipt this Period  
100.00

**C.**

Full Name (Last, First, Middle Initial)  
MR A K BRUNSON

Mailing Address 271 COUNTY ROAD 322

City State Zip Code  
CLEVELAND TX 77327-8505

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

Name of Employer Occupation  
FISK ELECT CO ELECTRICAN (RETIRED)

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 205.00

Date of Receipt  
MM / DD / YYYY  
04 / 22 / 2011

**Transaction ID:** 40196304

Amount of Each Receipt this Period  
65.00

**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 24 / 68  
(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 RUSSELL G MILLS

Mailing Address 734 MANOR DR

City RENO State NV Zip Code 89509-1943

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

Name of Employer NONE Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt: 04 / 08 / 2011  
**Transaction ID: 40196356**  
 Amount of Each Receipt this Period: 100.00

**B.**

Full Name (Last, First, Middle Initial)  
MR LAWRENCE H TROTTER

Mailing Address 908 LITTLE DOGWOOD RD

City KINGSTON State TN Zip Code 37763-5602

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

Name of Employer CONTINENTAL MACHINE Occupation RETIRED MACHINIST MECHANIC

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 600.00

Date of Receipt: 04 / 05 / 2011  
**Transaction ID: 40196403**  
 Amount of Each Receipt this Period: 250.00

**C.**

Full Name (Last, First, Middle Initial)  
MR RICHARD DAY

Mailing Address 1112 PARK MANOR ST

City NICHOLS HILLS State OK Zip Code 73116-6005

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

Name of Employer OKLAHOMA GAS & ELECTRIC COMPANY Occupation RETIRED - VP MARKETING

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt: 04 / 01 / 2011  
**Transaction ID: 40196710**  
 Amount of Each Receipt this Period: 200.00

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ **550.00**

**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 / 68

(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 LYNN A FREEMAN

Mailing Address 5363 CRYSTYL RANCH DR

City

CONCORD

State

CA

Zip Code

94521-5412

FEC ID number of contributing federal political committee.

**C**

Name of Employer

Occupation

Receipt For:

Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

MM / DD / YYYY  
04 / 12 / 2011

Transaction ID: 40197558

Amount of Each Receipt this Period

25.00

**B.**

Full Name (Last, First, Middle Initial)

MR JOHN MARINCIC

Mailing Address PO BOX 6

City

OGLESBY

State

IL

Zip Code

61348-0006

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
IL DEPT OF CORRECTIONS

Occupation  
RETIRED - CORRECTIONS OFFICER

Receipt For:

Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

245.00

Date of Receipt

MM / DD / YYYY  
04 / 25 / 2011

Transaction ID: 40197675

Amount of Each Receipt this Period

200.00

**C.**

Full Name (Last, First, Middle Initial)

MR STEPHEN C RYND

Mailing Address 83 OVERLOOK DR

City

CLINTON

State

NJ

Zip Code

08809-1133

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 / 01 / 2011

Transaction ID: 40198698

Amount of Each Receipt this Period

300.00

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

525.00

**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 / 68

(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)

MRS DYNA HICKS

Mailing Address PO BOX 340

City State Zip Code  
BANKS OR 97106-0340

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

Name of Employer Occupation  
HOME MAKER

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 225.00

Date of Receipt

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

Transaction ID: 40198861

Amount of Each Receipt this Period  
50.00

**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  
RETIRED

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 5 / 2 0 1 1

Transaction ID: 40199030

Amount of Each Receipt this Period  
100.00

**C.**

Full Name (Last, First, Middle Initial)

MR HAROLD CURRY

Mailing Address PO BOX 432

City State Zip Code  
WILLIAMSBURG OH 45176-0432

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

Name of Employer Occupation  
RA MUELLER, INC. OPERATIONS MANAGER

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 8 / 2 0 1 1

Transaction ID: 40199046

Amount of Each Receipt this Period  
100.00

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

250.00

**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 / 68  
(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 RICK BALLREICH

Mailing Address 392 PROMONTORY DR W

City State Zip Code  
NEWPORT BEACH CA 92660-7334

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  
MM / DD / YYYY  
04 / 26 / 2011

**Transaction ID:** 40199414

Amount of Each Receipt this Period  
200.00

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

Mailing Address 6751 E MARIA DR

City State Zip Code  
CAVE CREEK AZ 85331-2726

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

Name of Employer Occupation  
RETIREED MACHINIST

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 284.00

Date of Receipt  
MM / DD / YYYY  
04 / 25 / 2011

**Transaction ID:** 40199415

Amount of Each Receipt this Period  
100.00

**C.** Full Name (Last, First, Middle Initial)  
MR CHARLES GRANT

Mailing Address 3198 RIDGECREST ST

City State Zip Code  
MEMPHIS TN 38127-6330

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

Name of Employer Occupation  
US NAVY RETIREED

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
MM / DD / YYYY  
04 / 01 / 2011

**Transaction ID:** 40199555

Amount of Each Receipt this Period  
100.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **400.00**

**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 / 68  
(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 CHARLES GRANT

Mailing Address 3198 RIDGECREST ST

City State Zip Code  
MEMPHIS TN 38127-6330

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 ▼ 600.00

Date of Receipt  
MM / DD / YYYY  
04 / 22 / 2011

**Transaction ID:** 40199556

Amount of Each Receipt this Period  
100.00

**B.** Full Name (Last, First, Middle Initial)  
MR HARVEY KNOWLES, III

Mailing Address 8875 CAMARGO CLUB DR

City State Zip Code  
CINCINNATI OH 45243-3336

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

Name of Employer Occupation  
MERRILL LYNCH FINANCE

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt  
MM / DD / YYYY  
04 / 14 / 2011

**Transaction ID:** 40199634

Amount of Each Receipt this Period  
1000.00

**C.** Full Name (Last, First, Middle Initial)  
MS CHARMAIN WARDEN

Mailing Address 220 PRIVATE ROAD 1011

City State Zip Code  
GILMER TX 75645-7000

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 / 21 / 2011

**Transaction ID:** 40199751

Amount of Each Receipt this Period  
300.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 1400.00

**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 / 68  
(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 HAROLD W KNAPHEIDE, III

Mailing Address PO BOX 7140

City State Zip Code  
QUINCY IL 62305-7140

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

Name of Employer Occupation  
THE KNAPHEIDE MANUFACTURING COMPANY C.E.O.

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

Date of Receipt  
MM / DD / YYYY  
04 / 15 / 2011

**Transaction ID:** 40199821

Amount of Each Receipt this Period  
250.00

**B.**

Full Name (Last, First, Middle Initial)  
MR ANDREW A KOHR

Mailing Address 220 N ENOLA DR

City State Zip Code  
ENOLA PA 17025-2247

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

Name of Employer Occupation  
UNITED PARCEL SERVICE TRUCK DRIVER

Receipt For: Aggregate Year-to-Date  
 Primary  General  
 Other (specify) ▼ 225.00

Date of Receipt  
MM / DD / YYYY  
04 / 22 / 2011

**Transaction ID:** 40200568

Amount of Each Receipt this Period  
100.00

**C.**

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  
RETIRED

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

Date of Receipt  
MM / DD / YYYY  
04 / 14 / 2011

**Transaction ID:** 40200589

Amount of Each Receipt this Period  
300.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 650.00

**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 / 68  
(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 KOETTING

Mailing Address 4301 S FM 1258

City State Zip Code  
AMARILLO TX 79118-7222

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 / 01 / 2011

**Transaction ID:** 40200629

Amount of Each Receipt this Period  
300.00

**B.**

Full Name (Last, First, Middle Initial)  
MR JACK OREN

Mailing Address 1821 S ORANGE BLOSSOM TRL

City State Zip Code  
APOPKA FL 32703-7729

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

Name of Employer Occupation  
WELLER POOLS VICE PRESIDENT

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
MM / DD / YYYY  
04 / 28 / 2011

**Transaction ID:** 40200771

Amount of Each Receipt this Period  
500.00

**C.**

Full Name (Last, First, Middle Initial)  
MR PHILLIP F SANTISTEVAN

Mailing Address PO BOX 5784

City State Zip Code  
SANTA FE NM 87502-5784

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

Name of Employer Occupation  
NEW MEXICO STATE GVT RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
300.00

Date of Receipt  
MM / DD / YYYY  
04 / 05 / 2011

**Transaction ID:** 40200800

Amount of Each Receipt this Period  
100.00

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

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 31 / 68  
(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 JOSEPH R CLOUTIER

Mailing Address PO BOX 32

City EAST ANDOVER State NH Zip Code 03231-0032

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 290.00

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

**Transaction ID:** 40201249

Amount of Each Receipt this Period  
100.00

**B.** Full Name (Last, First, Middle Initial)  
MR JO A GRAVES

Mailing Address 104 PLUM TREE TER APT 429

City HOUSTON State TX Zip Code 77077-5383

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 Y  
0 4 / 0 5 / 2 0 1 1

**Transaction ID:** 40201371

Amount of Each Receipt this Period  
500.00

**C.** Full Name (Last, First, Middle Initial)  
MR JOSEPH J STACHOW

Mailing Address 260 W JACKSON ST

City MARTINSVILLE State IN Zip Code 46151-1918

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

Name of Employer Occupation  
LUBS TECHNOLOGIES, INC  
SERVICE TECH

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 280.00

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

**Transaction ID:** 40201406

Amount of Each Receipt this Period  
30.00

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ **630.00**

**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 / 68  
(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 J WEIS

Mailing Address 8237 RIDGEWAY AVE

City State Zip Code  
SKOKIE IL 60076-3319

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

Name of Employer Occupation  
WALGREENS CO. GROCERY DEPT MANAGER

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 450.00

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

**Transaction ID:** 40201413

Amount of Each Receipt this Period  
200.00

**B.**

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

Mailing Address 10831 SKYLINE DR SE

City State Zip Code  
SANTA ANA CA 92705-2415

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

**Transaction ID:** 40201508

Amount of Each Receipt this Period  
100.00

**C.**

Full Name (Last, First, Middle Initial)  
MR ALEXANDER MITCHELL

Mailing Address 264 DAY ST

City State Zip Code  
SAN FRANCISCO CA 94131-2417

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

**Transaction ID:** 40202118

Amount of Each Receipt this Period  
100.00

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ **400.00**

**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 / 68  
(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 ALEXANDER MITCHELL

Mailing Address 264 DAY ST

City State Zip Code  
SAN FRANCISCO CA 94131-2417

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 ▼ 300.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 4 / 0 7 / 2 0 1 1

**Transaction ID:** 40202119

Amount of Each Receipt this Period  
100.00

**B.** Full Name (Last, First, Middle Initial)  
MATTHEW J WISE

Mailing Address 3963 RICHMOND HENRICO TPKE

City State Zip Code  
RICHMOND VA 23222-1612

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

Name of Employer Occupation  
RICHMOND INTERNATIONAL RA-CEWAY MAINTENANCE / JET DRYER

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 8 / 2 0 1 1

**Transaction ID:** 40202471

Amount of Each Receipt this Period  
100.00

**C.** 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 ▼ 325.00

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

**Transaction ID:** 40202546

Amount of Each Receipt this Period  
200.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **400.00**

**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 / 68  
(check only one)

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

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

**A.**

Full Name (Last, First, Middle Initial)  
JOHN C FILLIUS

Mailing Address 2890 KATHY JO LN

City State Zip Code  
GRAND JUNCTION CO 81503-2968

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

Name of Employer Occupation  
RETIREED

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 220.00

Date of Receipt  
MM / DD / YYYY  
04 / 14 / 2011

**Transaction ID:** 40202640

Amount of Each Receipt this Period  
75.00

**B.**

Full Name (Last, First, Middle Initial)  
MR PAUL U EYMARD

Mailing Address 4910 BOULDER TRACE LN

City State Zip Code  
KATY TX 77449-7706

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

Name of Employer Occupation  
CHEVRON NETWORK CONSULTANT

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 450.00

Date of Receipt  
MM / DD / YYYY  
04 / 04 / 2011

**Transaction ID:** 40202867

Amount of Each Receipt this Period  
100.00

**C.**

Full Name (Last, First, Middle Initial)  
MR RAYMOND MEDINA

Mailing Address 7748 WICKLOW CIR

City State Zip Code  
ORLANDO FL 32817-1581

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

Name of Employer Occupation  
ROADMASTER DRIVERS SCHOOL INSTRUCTOR

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 274.00

Date of Receipt  
MM / DD / YYYY  
04 / 28 / 2011

**Transaction ID:** 40203119

Amount of Each Receipt this Period  
65.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **240.00**

**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 35 / 68  
(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)  
MRS DEBORAH J WOODRUFF  
Mailing Address 304 N 10TH ST  
City State Zip Code  
WOLFFORTH TX 79382-3233  
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 ▼ 225.00  
Date of Receipt: 04 / 25 / 2011  
Transaction ID: 40203156  
Amount of Each Receipt this Period: 50.00

**B.** Full Name (Last, First, Middle Initial)  
MR ROBERT L ROBB  
Mailing Address 704 HACKBERRY CT APT 3107  
City State Zip Code  
BELLEVUE NE 68005-2026  
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: 04 / 26 / 2011  
Transaction ID: 40203241  
Amount of Each Receipt this Period: 100.00

**C.** Full Name (Last, First, Middle Initial)  
MR WESLEY PERINE  
Mailing Address 4423 W DAMSEN AVE  
City State Zip Code  
VISALIA CA 93291-5301  
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 ▼ 225.00  
Date of Receipt: 04 / 28 / 2011  
Transaction ID: 40203753  
Amount of Each Receipt this Period: 40.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 190.00  
**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 36 / 68  
(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 RAMIRO GOMEZ

Mailing Address 3201 HAWK AVE

City State Zip Code  
MCALLEN TX 78504-5074

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

Name of Employer Occupation

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
400.00

Date of Receipt  

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

**Transaction ID:** 40203836

Amount of Each Receipt this Period  
200.00

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

Mailing Address PO BOX 81

City State Zip Code  
FELT OK 73937-0081

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

Name of Employer Occupation  
SELF EMPLOYED FARMER

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	7	/	2	0	1	1

**Transaction ID:** 40203893

Amount of Each Receipt this Period  
100.00

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

Mailing Address 893 ULSTER LANDING RD

City State Zip Code  
SAUGERTIES NY 12477-4535

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
0	4	/	0	7	/	2	0	1	1

**Transaction ID:** 40204144

Amount of Each Receipt this Period  
45.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **345.00**

**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 / 68  
(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 BORCHERDT

Mailing Address 893 ULSTER LANDING RD

City State Zip Code  
SAUGERTIES NY 12477-4535

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

Name of Employer Occupation  
RETIREED

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 265.00

Date of Receipt  
MM / DD / YYYY  
04 / 25 / 2011

**Transaction ID:** 40204145

Amount of Each Receipt this Period  
40.00

**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  
RETIREED - PILOT

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 670.00

Date of Receipt  
MM / DD / YYYY  
04 / 28 / 2011

**Transaction ID:** 40204272

Amount of Each Receipt this Period  
200.00

**C.** 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  
RETIREED - PILOT

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 470.00

Date of Receipt  
MM / DD / YYYY  
04 / 12 / 2011

**Transaction ID:** 40204273

Amount of Each Receipt this Period  
45.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **285.00**

**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 / 68  
(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 D MAGUIRE

Mailing Address 5814 ROLLING PINES CT

City State Zip Code  
KALAMAZOO MI 49009-5922

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

Name of Employer Occupation  
THE KELLOGG COMPANY EXECUTIVE

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

Date of Receipt  
MM / DD / YYYY  
04 / 01 / 2011

**Transaction ID:** 40204305

Amount of Each Receipt this Period  
100.00

**B.** Full Name (Last, First, Middle Initial)  
R G GLOVER

Mailing Address 1271 WASHINGTON AVE #416

City State Zip Code  
SAN LEANDRO CA 94577-3646

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

Name of Employer Occupation

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
MM / DD / YYYY  
04 / 13 / 2011

**Transaction ID:** 40204515

Amount of Each Receipt this Period  
50.00

**C.** Full Name (Last, First, Middle Initial)  
DR J BRUCE CARR

Mailing Address 11851 GA HIGHWAY 103

City State Zip Code  
WEST POINT GA 31833-3800

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

Name of Employer Occupation  
ST FRANCIS HOSPITAL PHYSICIAN

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
MM / DD / YYYY  
04 / 15 / 2011

**Transaction ID:** 40204755

Amount of Each Receipt this Period  
100.00

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ **250.00**

**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 39 / 68  
(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 MARK WIESE

Mailing Address 19236 320TH ST

City State Zip Code  
TREYNOR IA 51575-6080

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

Name of Employer Occupation  
WIESE MECHANICAL, INC. OWNER

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

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

**Transaction ID:** 40205173

Amount of Each Receipt this Period  
65.00

**B.** Full Name (Last, First, Middle Initial)  
MR CHRISTOPHER L BOLT

Mailing Address 27804 108TH AVE SE

City State Zip Code  
KENT WA 98030-8766

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

Name of Employer Occupation  
FERRELL GAS MATERIAL HANDLER

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 210.00

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

**Transaction ID:** 40205317

Amount of Each Receipt this Period  
210.00

**C.** Full Name (Last, First, Middle Initial)  
MR ROGER STRAUB

Mailing Address 12635 US HIGHWAY 26 # A

City State Zip Code  
RIVERTON WY 82501-9258

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

Name of Employer Occupation

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 265.00

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

**Transaction ID:** 40205582

Amount of Each Receipt this Period  
65.00

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ **340.00**

**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 / 68  
(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)  
RICHARD A ROSS

Mailing Address 3201 HIGHWAY 16

City BEACH State ND Zip Code 58621-9202

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

Name of Employer Occupation  
RETIRED - OPERATING ENGINEER

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 275.00

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

Transaction ID: 40205616

Amount of Each Receipt this Period  
100.00

**B.**

Full Name (Last, First, Middle Initial)  
MR WESLEY SAWYER

Mailing Address 9242 ARLEEN AVE

City ZACHARY State LA Zip Code 70791-8321

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 2 / 2 0 1 1

Transaction ID: 40205699

Amount of Each Receipt this Period  
200.00

**C.**

Full Name (Last, First, Middle Initial)  
KEN CLAUSEN

Mailing Address 9315 E CENTER AVE APT 9A

City DENVER State CO Zip Code 80247-1277

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

Name of Employer Occupation  
RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 425.00

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

Transaction ID: 40205776

Amount of Each Receipt this Period  
100.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 400.00

**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 / 68  
(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 BRYAN FLETSCHINGER

Mailing Address PO BOX 1212

City State Zip Code  
CHALMETTE LA 70044-1212

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

Name of Employer Occupation

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
245.00

Date of Receipt  

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

**Transaction ID:** 40205801

Amount of Each Receipt this Period  
100.00

**B.** Full Name (Last, First, Middle Initial)  
MR EARL SETTLES, USN RET

Mailing Address 1316 COLORADO ST

City State Zip Code  
BOULDER CITY NV 89005-2435

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 ▼  
425.00

Date of Receipt  

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

**Transaction ID:** 40205833

Amount of Each Receipt this Period  
100.00

**C.** Full Name (Last, First, Middle Initial)  
MR EARL SETTLES, USN RET

Mailing Address 1316 COLORADO ST

City State Zip Code  
BOULDER CITY NV 89005-2435

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 ▼  
325.00

Date of Receipt  

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

**Transaction ID:** 40205834

Amount of Each Receipt this Period  
75.00

**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 42 / 68  
(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 LANCE WILSON

Mailing Address 4616 260TH AVE

City State Zip Code  
CLARKFIELD MN 56223-3525

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

Name of Employer SELF EMPLOYED      Occupation FARMER

Receipt For:      Aggregate Year-to-Date ▼  
 Primary    General  
 Other (specify) ▼      399.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 4 / 0 8 / 2 0 1 1

**Transaction ID:** 40205983

Amount of Each Receipt this Period  
49.00

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

Mailing Address 4616 260TH AVE

City State Zip Code  
CLARKFIELD MN 56223-3525

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

Name of Employer SELF EMPLOYED      Occupation FARMER

Receipt For:      Aggregate Year-to-Date ▼  
 Primary    General  
 Other (specify) ▼      424.00

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

**Transaction ID:** 40205984

Amount of Each Receipt this Period  
25.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **74.00**

**TOTAL** This Period (last page this line number only) ..... ► **16745.50**

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 43 / 68  
(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)  
BB&T Bank  
Mailing Address 11230 Waples Mill Road

City State Zip Code  
Fairfax VA 22030

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1.05

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

**Transaction ID:** 40209599

Amount of Each Receipt this Period  
0.26

Interest Income

**B.** Full Name (Last, First, Middle Initial)  
Wachovia Bank  
Mailing Address 10501 Main Street

City State Zip Code  
Fairfax VA 22030

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1.53

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

**Transaction ID:** 40209600

Amount of Each Receipt this Period  
0.37

Interest Income

**C.** Full Name (Last, First, Middle Initial)  
Bank of the West  
Mailing Address 224 Box Butte Avenue

City State Zip Code  
Alliance NE 69301

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 2.21

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

**Transaction ID:** 40209600

Amount of Each Receipt this Period  
0.35

Interest Income

**SUBTOTAL** of Receipts This Page (optional) ..... ► 0.98

**TOTAL** This Period (last page this line number only) ..... ► 0.98

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 44 / 68
	(check only one)	
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input checked="" 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) Austin Scott For Congress Inc		Date of Receipt
	Mailing Address PO Box 27750		<input type="text" value="04"/> / <input type="text" value="14"/> / <input type="text" value="2011"/>
	City	State	Zip Code
	Macon	GA	31221
	FEC ID number of contributing federal political committee.		<input type="text" value="C00482737"/>
	Name of Employer		Occupation
Receipt For: 2010		Aggregate Year-to-Date ▼	Transaction ID: 40209611
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General		<input type="text" value="2000.00"/>	Amount of Each Receipt this Period
<input type="checkbox"/> Other (specify) ▼		<input type="text" value="2000.00"/>	<input type="text" value="2000.00"/>
			Return Contribution

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<input type="text" value="2000.00"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text" value="2000.00"/>

# 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

<p><b>A.</b> Full Name (Last, First, Middle Initial) National Rifle Association of America</p> <p>Mailing Address 11250 Waples Mill Road</p> <p>City Fairfax State VA Zip Code 22030</p> <p>Purpose of Disbursement Website Hosting / Service Fee</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 39541716</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="4"/> / <input type="text" value="0"/> <input type="text" value="4"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="1"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="1500.00"/></p> <p>Website Hosting / Service Fee</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Image Direct, LLC</p> <p>Mailing Address 200 Monroe Avenue, Bldg. 4</p> <p>City Frederick State MD Zip Code 21701</p> <p>Purpose of Disbursement NRA-PVF Fundraising Postage</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 39613901</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="4"/> / <input type="text" value="0"/> <input type="text" value="7"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="1"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="77121.47"/></p> <p>NRA-PVF Fundraising Postage</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) United States Treasury</p> <p>Mailing Address</p> <p>City Ogden State UT Zip Code 84201-0039</p> <p>Purpose of Disbursement 2010 Federal Taxes</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 39679822</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="4"/> / <input type="text" value="1"/> <input type="text" value="8"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="1"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="626.27"/></p> <p>2010 Federal Taxes</p>

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

**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)  
Communications Corporation of America

Mailing Address 13195 Freedom Way

City Boston State VA Zip Code 22713

Purpose of Disbursement  
NRA-PVF Fundraising Printing & Mailing  
Candidate Name

003  
Category/  
Type

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

Transaction ID: 39838273  
Date of Disbursement

04 / 27 / 2011

Amount of Each Disbursement this Period

56077.78

NRA-PVF Fundraising Printing & Mailing

**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

001  
Category/  
Type

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

Transaction ID: 40209613  
Date of Disbursement

04 / 11 / 2011

Amount of Each Disbursement this Period

167.35

Account Analysis Fees

**C.** Full Name (Last, First, Middle Initial)  
Wachovia - Account Analysis

Mailing Address P.O. Box 2080

City Jacksonville State FL Zip Code 32231

Purpose of Disbursement  
Account Analysis Fees  
Candidate Name

001  
Category/  
Type

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

Transaction ID: 40209614  
Date of Disbursement

04 / 11 / 2011

Amount of Each Disbursement this Period

413.75

Account Analysis Fees

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

56658.88

**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) 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: 40209616 Date of Disbursement 04 / 15 / 2011 Amount of Each Disbursement this Period 19.56 001 Category/Type Account Analysis Fees	
B.	Full Name (Last, First, Middle Initial) Bank of the West Mailing Address 224 Box Butte Avenue City Alliance State NE Zip Code 69301 Purpose of Disbursement Account Analysis Fees Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 40209618 Date of Disbursement 04 / 29 / 2011 Amount of Each Disbursement this Period 12.00 001 Category/Type Account Analysis Fees	
C.	Full Name (Last, First, Middle Initial) Wachovia - Account Analysis Mailing Address P.O. Box 2080 City Jacksonville State FL Zip Code 32231 Purpose of Disbursement Account Analysis Fees Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 40209622 Date of Disbursement 04 / 11 / 2011 Amount of Each Disbursement this Period 15.25 001 Category/Type Account Analysis Fees	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	46.81
<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	Transaction ID: 40209625 Date of Disbursement 04 / 11 / 2011
	Amount of Each Disbursement this Period 1427.18 Account Analysis Fees
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) ▼	Category/Type 001

<b>B.</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	Transaction ID: 40209629 Date of Disbursement 04 / 11 / 2011
	Amount of Each Disbursement this Period 111.77 Account Analysis Fees
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) ▼	Category/Type 001

<b>C.</b> Full Name (Last, First, Middle Initial) Bank of America - MO Mailing Address 1500 St. Louis Avenue City St. Louis State MO Zip Code 63106 Purpose of Disbursement Account Analysis Fees Candidate Name	Transaction ID: 40209632 Date of Disbursement 04 / 11 / 2011
	Amount of Each Disbursement this Period 14.00 Account Analysis Fees
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) ▼	Category/Type 001

**SUBTOTAL** of Disbursements This Page (optional) ..... ► 1552.95

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

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

A.	Full Name (Last, First, Middle Initial) American Express Company	Transaction ID: 40209650 Date of Disbursement
	Mailing Address P.O. Box 53852	<input type="text" value="04"/> / <input type="text" value="30"/> / <input type="text" value="2011"/>
	City Phoenix State AZ Zip Code 85072	Amount of Each Disbursement this Period
	Purpose of Disbursement Credit Card Fees	<input type="text" value="141.19"/>
	Candidate Name	<input type="text" value="001"/> Category/ Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Credit Card Fees
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

B.	Full Name (Last, First, Middle Initial) PAYMENTECH, INC.	Transaction ID: 40209651 Date of Disbursement
	Mailing Address 4 NORTHEASTERN BLVD	<input type="text" value="04"/> / <input type="text" value="30"/> / <input type="text" value="2011"/>
	City SALEM State NH Zip Code 03079	Amount of Each Disbursement this Period
	Purpose of Disbursement Credit Card Fees	<input type="text" value="1684.97"/>
	Candidate Name	<input type="text" value="001"/> Category/ Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Credit Card Fees
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

C.	Full Name (Last, First, Middle Initial) Wachovia Bank	Transaction ID: 40209653 Date of Disbursement
	Mailing Address 10501 Main Street	<input type="text" value="04"/> / <input type="text" value="04"/> / <input type="text" value="2011"/>
	City Fairfax State VA Zip Code 22030	Amount of Each Disbursement this Period
	Purpose of Disbursement Credit Card Fees	<input type="text" value="116.91"/>
	Candidate Name	<input type="text" value="001"/> Category/ Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Credit Card Fees
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<input type="text" value="1943.07"/>
<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)

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

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

A.

Full Name (Last, First, Middle Initial)

Wachovia Bank

Mailing Address 10501 Main Street

City State Zip Code  
Fairfax VA 22030

Purpose of Disbursement  
Credit Card Fees

Candidate Name

001  
Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: 40209655

Date of Disbursement

04 / 01 / 2011

Amount of Each Disbursement this Period

65.00

Credit Card Fees

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

65.00

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

139514.45

**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)

Diane Black For Congress

Mailing Address PO Box 1437

City State Zip Code  
Gallatin TN 37066

Purpose of Disbursement  
Debt Retirement

Candidate Name  
Ms. Diane Black

Office Sought:  House  
 Senate  
 President

State: TN District: 06

Disbursement For: 2010  
 Primary  General  
 Other (specify) ▼  
Primary Debt 2010

Transaction ID: 39613993

Date of Disbursement

/   /

Amount of Each Disbursement this Period

Debt Retirement

Category/  
Type

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

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) Friends of Gordon Fox  Mailing Address P.O. Box 185  City Providence State RI Zip Code 02903  Purpose of Disbursement Gordon Fox, STATE HOUSE 4th RI Candidate Name Gordon Fox Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: RI District: 04	<b>Transaction ID:</b> 39640144 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 4 / 1 2 / 2 0 1 1	Amount of Each Disbursement this Period  800.00
<b>B.</b>	Full Name (Last, First, Middle Initial) Friends of Brian Patrick Kennedy  Mailing Address P.O. Box 1001  City Ashaway State RI Zip Code 02804  Purpose of Disbursement Brian Kennedy, STATE HOUSE 38th RI Candidate Name Brian Kennedy Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: RI District: 38	<b>Transaction ID:</b> 39640145 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 4 / 1 2 / 2 0 1 1	Amount of Each Disbursement this Period  375.00
<b>C.</b>	Full Name (Last, First, Middle Initial) Representative Donald J. Lally, Jr. Committee  Mailing Address 17 Linden Road  City Narragansett State RI Zip Code 02882  Purpose of Disbursement DONALD LALLY, STATE HOUSE 33rd RI Candidate Name DONALD LALLY Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: RI District: 33	<b>Transaction ID:</b> 39640146 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 4 / 1 2 / 2 0 1 1	Amount of Each Disbursement this Period  300.00

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	1475.00
<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></p> <p>Full Name (Last, First, Middle Initial) Friends of Helio Melo</p> <p>Mailing Address P.O. Box 14317</p> <p>City East Providence State RI Zip Code 02914</p> <p>Purpose of Disbursement Helio Melo, STATE HOUSE 64th RI</p> <p>Candidate Name RI Rep. Helio Melo</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: RI District: 64</p> <p>Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 39640147 <b>Date of Disbursement</b> 04 / 12 / 2011</p> <p>Amount of Each Disbursement this Period 200.00</p> <p>Helio Melo, STATE HOUSE 64th RI</p>
<p><b>B.</b></p> <p>Full Name (Last, First, Middle Initial) Friends of Patricia Serpa</p> <p>Mailing Address 194 Kimberly Lane</p> <p>City West Warwick State RI Zip Code 02893</p> <p>Purpose of Disbursement Patricia Serpa, STATE HOUSE 27th RI</p> <p>Candidate Name RI Rep. Patricia Serpa</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: RI District: 27</p> <p>Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 39640148 <b>Date of Disbursement</b> 04 / 12 / 2011</p> <p>Amount of Each Disbursement this Period 200.00</p> <p>Patricia Serpa, STATE HOU- SE 27th RI</p>
<p><b>C.</b></p> <p>Full Name (Last, First, Middle Initial) Watson Campaign Committee</p> <p>Mailing Address 103 South Pierce Road</p> <p>City East Greenwich State RI Zip Code 02818</p> <p>Purpose of Disbursement Robert Watson, STATE HOUSE 30th RI</p> <p>Candidate Name Robert Watson</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: RI District: 30</p> <p>Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 39640149 <b>Date of Disbursement</b> 04 / 12 / 2011</p> <p>Amount of Each Disbursement this Period 400.00</p> <p>Robert Watson, STATE HOUSE 30th RI</p>

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

800.00

**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

A.

Full Name (Last, First, Middle Initial)  
Friends of Maryellen Goodwin

Mailing Address 325 Smith Street

City Providence State RI Zip Code 02908

Purpose of Disbursement  
Maryellen Goodwin, STATE SENATE 4th RI

Candidate Name  
Maryellen Goodwin

011  
Category/  
Type

Office Sought:  House  Senate  President  
Disbursement For: 2012  Primary  General  Other (specify) ▼

State: RI District:

Transaction ID: 39640150

Date of Disbursement

04 / 12 / 2011

Amount of Each Disbursement this Period

200.00

Maryellen Goodwin, STATE SENATE 4th RI

B.

Full Name (Last, First, Middle Initial)  
McCaffrey for State Senate

Mailing Address 115 Twin Oak Drive

City Warwick State RI Zip Code 02889

Purpose of Disbursement  
MICHAEL MCCAFFREY, STATE SENATE 29th RI

Candidate Name  
MICHAEL MCCAFFREY

011  
Category/  
Type

Office Sought:  House  Senate  President  
Disbursement For: 2012  Primary  General  Other (specify) ▼

State: RI District:

Transaction ID: 39640152

Date of Disbursement

04 / 12 / 2011

Amount of Each Disbursement this Period

750.00

MICHAEL MCCAFFREY, STATE SENATE 29th RI

C.

Full Name (Last, First, Middle Initial)  
Sosnowski for Senate

Mailing Address P.O. Box 722

City West Kingston State RI Zip Code 02892

Purpose of Disbursement  
V. Susan Sosnowski, STATE SENATE 37th RI

Candidate Name  
Senator V. Susan Sosnowski

011  
Category/  
Type

Office Sought:  House  Senate  President  
Disbursement For: 2012  Primary  General  Other (specify) ▼

State: RI District:

Transaction ID: 39640154

Date of Disbursement

04 / 12 / 2011

Amount of Each Disbursement this Period

200.00

V. Susan Sosnowski, STATE SENATE 37th RI

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) Senator John Tassoni Committee</p> <p>Mailing Address 33B Waterview Drive</p> <p>City Smithfield State RI Zip Code 02917</p> <p>Purpose of Disbursement John Tassoni, STATE SENATE 22nd RI</p> <p>Candidate Name John Tassoni</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: RI District:</p> <p>Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 39640156 <b>Date of Disbursement</b> 04 / 12 / 2011</p> <p>Amount of Each Disbursement this Period 300.00</p> <p>John Tassoni, STATE SENATE 22nd RI</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Bill Walaska for State Senate</p> <p>Mailing Address 140 Aldrich Avenue</p> <p>City Warwick State RI Zip Code 02889</p> <p>Purpose of Disbursement William Walaska, STATE SENATE 30th RI</p> <p>Candidate Name Senator William Walaska</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: RI District:</p> <p>Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 39640158 <b>Date of Disbursement</b> 04 / 12 / 2011</p> <p>Amount of Each Disbursement this Period 300.00</p> <p>William Walaska, STATE SENATE 30th RI</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Committee to Elect Jon Brien</p> <p>Mailing Address 521 South Main Street</p> <p>City Woonsocket State RI Zip Code 02895</p> <p>Purpose of Disbursement Jon Brien, STATE HOUSE 50th RI</p> <p>Candidate Name RI Rep. Jon Brien</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: RI District: 50</p> <p>Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 39640160 <b>Date of Disbursement</b> 04 / 12 / 2011</p> <p>Amount of Each Disbursement this Period 200.00</p> <p>Jon Brien, STATE HOUSE 50th RI</p>

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

800.00

**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) Friends of John Carnevale</p> <p>Mailing Address 150 Barbara Street</p> <p>City Providence State RI Zip Code 02909</p> <p>Purpose of Disbursement John Carnevale, STATE HOUSE 13th RI</p> <p>Candidate Name RI Rep. John Carnevale</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: RI District: 13</p> <p>Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 39640161 <b>Date of Disbursement</b> 04 / 12 / 2011</p> <p>Amount of Each Disbursement this Period 200.00</p> <p>John Carnevale, STATE HOUSE 13th RI</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Committee to Elect Bob Flaherty</p> <p>Mailing Address 936 Buttonwoods Avenue</p> <p>City Warwick State RI Zip Code 02886</p> <p>Purpose of Disbursement Bob Flaherty, STATE HOUSE 23rd RI</p> <p>Candidate Name Bob Flaherty</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: RI District: 23</p> <p>Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 39640162 <b>Date of Disbursement</b> 04 / 12 / 2011</p> <p>Amount of Each Disbursement this Period 300.00</p> <p>Bob Flaherty, STATE HOUSE 23rd RI</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Friends of John McCauley, Jr.</p> <p>Mailing Address 71 Common Street</p> <p>City Providence State RI Zip Code 02908</p> <p>Purpose of Disbursement John McCauley, STATE HOUSE 1st RI</p> <p>Candidate Name John McCauley</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: RI District: 01</p> <p>Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 39640163 <b>Date of Disbursement</b> 04 / 12 / 2011</p> <p>Amount of Each Disbursement this Period 200.00</p> <p>John McCauley, STATE HOUSE 1st RI</p>

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

700.00

**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) Friends of Bill San Bento</p> <p>Mailing Address 494 Smithfield Avenue</p> <p>City Pawtucket State RI Zip Code 02860</p> <p>Purpose of Disbursement BILL SAN BENTO, STATE HOUSE 58th RI</p> <p>Candidate Name BILL SAN BENTO</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: RI District: 58</p> <p>Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 39640164 <b>Date of Disbursement</b> 04 / 12 / 2011</p> <p>Amount of Each Disbursement this Period 300.00</p> <p>BILL SAN BENTO, STATE HOUSE 58th RI</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Friends of Gus Silva</p> <p>Mailing Address 82 Ledge Street, 1st Fl</p> <p>City Central Falls State RI Zip Code 02863</p> <p>Purpose of Disbursement Agostinho Silva, STATE HOUSE 56th RI</p> <p>Candidate Name RI Rep. Agostinho Silva</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: RI District: 56</p> <p>Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 39640165 <b>Date of Disbursement</b> 04 / 12 / 2011</p> <p>Amount of Each Disbursement this Period 200.00</p> <p>Agostinho Silva, STATE HOUSE 56th RI</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Committee to Elect Donna Walsh</p> <p>Mailing Address P.O. Box 1380</p> <p>City Charlestown State RI Zip Code 02813</p> <p>Purpose of Disbursement DONNA WALSH, STATE HOUSE 36th RI</p> <p>Candidate Name DONNA WALSH</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: RI District: 36</p> <p>Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 39640166 <b>Date of Disbursement</b> 04 / 12 / 2011</p> <p>Amount of Each Disbursement this Period 300.00</p> <p>DONNA WALSH, STATE HOUSE 36th RI</p>

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>800.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

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

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

FOR LINE NUMBER: (check only one)

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

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

A.	Full Name (Last, First, Middle Initial) Ciccone for Senator	Transaction ID: 39640168 Date of Disbursement 04 / 12 / 2011
	Mailing Address 15 Mercy Street	Amount of Each Disbursement this Period 300.00
	City Providence State RI Zip Code 02909	
	Purpose of Disbursement Frank Ciccone, STATE SENATE 7th RI	011 Category/ Type
	Candidate Name Frank A Ciccone	
	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: RI District:	Frank Ciccone, STATE SENATE 7th RI

B.	Full Name (Last, First, Middle Initial) Friends of Daniel DaPonte	Transaction ID: 39640170 Date of Disbursement 04 / 12 / 2011
	Mailing Address 48 Vine Street	Amount of Each Disbursement this Period 200.00
	City East Providence State RI Zip Code 02914	
	Purpose of Disbursement Daniel DaPonte, STATE SENATE 14th RI	011 Category/ Type
	Candidate Name Senator Daniel DaPonte	
	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: RI District:	Daniel DaPonte, STATE SENATE 14th RI

C.	Full Name (Last, First, Middle Initial) Friends of Frank DeVall	Transaction ID: 39640171 Date of Disbursement 04 / 12 / 2011
	Mailing Address 27 Monmouth Drive	Amount of Each Disbursement this Period 200.00
	City East Providence State RI Zip Code 02915	
	Purpose of Disbursement Frank DeVall, STATE SENATE 18th RI	011 Category/ Type
	Candidate Name RI Sen. Frank DeVall, Jr.	
	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: RI District:	Frank DeVall, STATE SENATE 18th RI

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	700.00
<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) Friends of Wally Felag	Transaction ID: 39640172 Date of Disbursement 04 / 12 / 2011
	Mailing Address 51 Overhill Road	Amount of Each Disbursement this Period 300.00
	City Warren State RI Zip Code 02885	
	Purpose of Disbursement WALLY FELAG, STATE SENATE 10th RI	011 Category/ Type
	Candidate Name WALLY FELAG	
	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: RI District:	WALLY FELAG, STATE SENATE 10th RI

B.	Full Name (Last, First, Middle Initial) Bea Lanzi Campaign Committee	Transaction ID: 39640173 Date of Disbursement 04 / 12 / 2011
	Mailing Address 70 Scituate Farms Drive	Amount of Each Disbursement this Period 200.00
	City Cranston State RI Zip Code 02921	
	Purpose of Disbursement Beatrice Lanzi, STATE HOUSE 26th RI	011 Category/ Type
	Candidate Name Beatrice Lanzi	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: RI District: 26	Beatrice Lanzi, STATE HOUSE 26th RI

C.	Full Name (Last, First, Middle Initial) Friends of Erin P. Lynch	Transaction ID: 39640174 Date of Disbursement 04 / 12 / 2011
	Mailing Address 600 Tollgate Road	Amount of Each Disbursement this Period 200.00
	City Warwick State RI Zip Code 02886	
	Purpose of Disbursement Erin Lynch, STATE SENATE 31st RI	011 Category/ Type
	Candidate Name RI Sen. Erin Lynch	
	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: RI District:	Erin Lynch, STATE SENATE 31st RI

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	700.00
<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) Friends of Elaine A. Coderre Mailing Address 18 Angle Street City Pawtucket State RI Zip Code 02860 Purpose of Disbursement Elaine Coderre, STATE HOUSE 78th RI Candidate Name Elaine Coderre Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: RI District: 78 Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 39640175 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 1 2 / 2 0 1 1
	Amount of Each Disbursement this Period 200.00 Elaine Coderre, STATE HOUSE 78th RI

<b>B.</b> Full Name (Last, First, Middle Initial) Deborah Fellela Campaign Committee Mailing Address 3 Diaz Street City Johnston State RI Zip Code 02919 Purpose of Disbursement Deborah Fellela, STATE HOUSE 43rd RI Candidate Name Deborah Fellela Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: RI District: 43 Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 39640176 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 1 2 / 2 0 1 1
	Amount of Each Disbursement this Period 200.00 Deborah Fellela, STATE HOUSE 43rd RI

<b>C.</b> Full Name (Last, First, Middle Initial) Elect Jacquard for State House Mailing Address 34 Sagamore Road City Cranston State RI Zip Code 02920 Purpose of Disbursement Robert Jacquard, STATE HOUSE 17th RI Candidate Name Robert Jacquard Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: RI District: 17 Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 39640180 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 1 2 / 2 0 1 1
	Amount of Each Disbursement this Period 200.00 Robert Jacquard, STATE HOUSE 17th RI

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	600.00
<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)

<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 Jan Malik</p> <p>Mailing Address 23 Hezekiah Drive</p> <p>City Warren State RI Zip Code 02885</p> <p>Purpose of Disbursement JAN MALIK, STATE HOUSE 67th RI</p> <p>Candidate Name JAN MALIK</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: RI District: 67</p> <p>Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 39640182 <b>Date of Disbursement</b> 04 / 12 / 2011</p> <p>Amount of Each Disbursement this Period 300.00</p> <p>011 Category/ Type</p> <p>JAN MALIK, STATE HOUSE 67- th RI</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Friends of Karen MacBeth</p> <p>Mailing Address 75 Newell Drive</p> <p>City Cumberland State RI Zip Code 02864</p> <p>Purpose of Disbursement Karen MacBeth, STATE HOUSE 52nd RI</p> <p>Candidate Name RI Rep. Karen MacBeth</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: RI District: 52</p> <p>Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 39640183 <b>Date of Disbursement</b> 04 / 12 / 2011</p> <p>Amount of Each Disbursement this Period 200.00</p> <p>011 Category/ Type</p> <p>Karen MacBeth, STATE HOUSE 52nd RI</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Friends of Joe McNamara</p> <p>Mailing Address 23 Howie Avenue</p> <p>City Warwick State RI Zip Code 02888</p> <p>Purpose of Disbursement Joseph McNamara, STATE HOUSE 19th RI</p> <p>Candidate Name Joseph McNamara</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: RI District: 19</p> <p>Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 39640185 <b>Date of Disbursement</b> 04 / 12 / 2011</p> <p>Amount of Each Disbursement this Period 200.00</p> <p>011 Category/ Type</p> <p>Joseph McNamara, STATE HO- USE 19th RI</p>

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

700.00

**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) Friends of Rene Menard Mailing Address 3 Sunset Drive City Manville State RI Zip Code 02838 Purpose of Disbursement RENE MENARD, STATE HOUSE 45th RI Candidate Name RENE MENARD Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: RI District: 45 Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 39640187 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 1 2 / 2 0 1 1
	Amount of Each Disbursement this Period 200.00
	RENE MENARD, STATE HOUSE 45th RI
	011 Category/ Type

<b>B.</b> Full Name (Last, First, Middle Initial) Friends of Brian Newberry Mailing Address P.O. Box 755 City Slatersville State RI Zip Code 02876 Purpose of Disbursement Brian Newberry, STATE HOUSE 48th RI Candidate Name Brian Newberry Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: RI District: 48 Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 39640188 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 1 2 / 2 0 1 1
	Amount of Each Disbursement this Period 200.00
	Brian Newberry, STATE HOU- SE 48th RI
	011 Category/ Type

<b>C.</b> Full Name (Last, First, Middle Initial) Friends of Peter Palumbo Mailing Address 67 Kearney Street City Cranston State RI Zip Code 02920 Purpose of Disbursement Pete Palumbo, STATE HOUSE 16th RI Candidate Name Pete Palumbo Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: RI District: 16 Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 39640189 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 1 2 / 2 0 1 1
	Amount of Each Disbursement this Period 300.00
	Pete Palumbo, STATE HOUSE 16th RI
	011 Category/ Type

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	700.00
<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)

<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) Friends of Joseph Trillo	Transaction ID: 39640190 Date of Disbursement 04 / 12 / 2011
	Mailing Address 643 East Avenue	Amount of Each Disbursement this Period 200.00
	City Warwick State RI Zip Code 02886	
	Purpose of Disbursement Joseph Trillo, STATE HOUSE 24th RI	011 Category/ Type
	Candidate Name RI Rep. Joseph Trillo	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: RI District: 24	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		Joseph Trillo, STATE HOUSE 24th RI

B.	Full Name (Last, First, Middle Initial) Friends of Stephen R. Ucci	Transaction ID: 39640191 Date of Disbursement 04 / 12 / 2011
	Mailing Address 42 John Street, #2	Amount of Each Disbursement this Period 200.00
	City Johnston State RI Zip Code 02919	
	Purpose of Disbursement Stephen Ucci, STATE HOUSE 42nd RI	011 Category/ Type
	Candidate Name Stephen R. Ucci	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: RI District: 42	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		Stephen Ucci, STATE HOUSE 42nd RI

C.	Full Name (Last, First, Middle Initial) Friends of Hanna M. Gallo	Transaction ID: 39640192 Date of Disbursement 04 / 12 / 2011
	Mailing Address 285 Meshanticut Vally Parkway	Amount of Each Disbursement this Period 200.00
	City Cranston State RI Zip Code 02920	
	Purpose of Disbursement HANNA GALLO, STATE SENATE 27th RI	011 Category/ Type
	Candidate Name HANNA GALLO	
	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: RI District:	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		HANNA GALLO, STATE SENATE 27th RI

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	600.00
<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) Friends of Thomas Winfield	Transaction ID: 39640193 Date of Disbursement
	Mailing Address 4 Church Street	<input type="text" value="04"/> / <input type="text" value="12"/> / <input type="text" value="2011"/>
	City Smithfield State RI Zip Code 02828	Amount of Each Disbursement this Period
	Purpose of Disbursement Thomas Winfield, STATE HOUSE 53rd RI	<input type="text" value="200.00"/>
	Candidate Name Representa Thomas Winfield	<input type="text" value="011"/> Category/Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: RI District: 53	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		Thomas Winfield, STATE HOUSE 53rd RI

B.	Full Name (Last, First, Middle Initial) Prolist Inc.	Transaction ID: 39706655 Date of Disbursement
	Mailing Address 8341 Beechcraft Avenue	<input type="text" value="04"/> / <input type="text" value="21"/> / <input type="text" value="2011"/>
	City Gaithersburg State MD Zip Code 20879-1509	Amount of Each Disbursement this Period
	Purpose of Disbursement In-Kind - Shipping & Handling	<input type="text" value="95.00"/>
	Candidate Name	<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: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		In-Kind - Shipping & Handling

C.	Full Name (Last, First, Middle Initial) District 30 Republicans	Transaction ID: 39706783 Date of Disbursement
	Mailing Address 1899 Bonn Blvd	<input type="text" value="04"/> / <input type="text" value="21"/> / <input type="text" value="2011"/>
	City Bismarck State ND Zip Code 58504	Amount of Each Disbursement this Period
	Purpose of Disbursement In-Kind - Shipping & Handling	<input type="text" value="95.00"/>
	Candidate Name	<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: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		<b>[MEMO ITEM]</b> In-Kind - Shipping & Handling

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<input type="text" value="295.00"/>
<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 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: 39706784 Date of Disbursement 04 / 21 / 2011
	Mailing Address 8341 Beechcraft Avenue	Amount of Each Disbursement this Period -95.00
	City Gaithersburg State MD Zip Code 20879-1509	
	Purpose of Disbursement Void - Prolist Inc.	011 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) ▼
		Void - Prolist Inc.

B.	Full Name (Last, First, Middle Initial) Prolist Inc.	Transaction ID: 39850050 Date of Disbursement 04 / 30 / 2011
	Mailing Address 8341 Beechcraft Avenue	Amount of Each Disbursement this Period 3924.93
	City Gaithersburg State MD Zip Code 20879-1509	
	Purpose of Disbursement Independent Expenditure - Postage	011 Category/ Type
	Candidate Name Mike Hogan	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2011 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		Independent Expenditure - Postage

C.	Full Name (Last, First, Middle Initial) Prolist Inc.	Transaction ID: 39850052 Date of Disbursement 04 / 30 / 2011
	Mailing Address 8341 Beechcraft Avenue	Amount of Each Disbursement this Period 1340.14
	City Gaithersburg State MD Zip Code 20879-1509	
	Purpose of Disbursement Independent Expenditure - Postcards	011 Category/ Type
	Candidate Name Mike Hogan	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2011 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		Independent Expenditure - Postcards

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

5170.07

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) Prolist Inc. <hr/> Mailing Address 8341 Beechcraft Avenue <hr/> City Gaithersburg State MD Zip Code 20879-1509 Purpose of Disbursement Independent Expenditure - Postage Candidate Name Dick Kravtiz Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2011 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 39850055 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 3 0 / 2 0 1 1
	Amount of Each Disbursement this Period 2113.42 Independent Expenditure - Postage
<b>B.</b> Full Name (Last, First, Middle Initial) Prolist Inc. <hr/> Mailing Address 8341 Beechcraft Avenue <hr/> City Gaithersburg State MD Zip Code 20879-1509 Purpose of Disbursement Independent Expenditure - Postcards Candidate Name Dick Kravtiz Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2011 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 39850057 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 3 0 / 2 0 1 1
	Amount of Each Disbursement this Period 721.61 Independent Expenditure - Postcards
<b>C.</b> Full Name (Last, First, Middle Initial) Prolist Inc. <hr/> Mailing Address 8341 Beechcraft Avenue <hr/> City Gaithersburg State MD Zip Code 20879-1509 Purpose of Disbursement Independent Expenditure - Postage Candidate Name Duey Stroebel Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: WI District: 60 Disbursement For: 2011 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Special-General2011	Transaction ID: 39895965 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 3 0 / 2 0 1 1
	Amount of Each Disbursement this Period 170.04 Independent Expenditure - Postage

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>3005.07</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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

A.	Full Name (Last, First, Middle Initial) Prolist Inc.	Transaction ID: 39896145 Date of Disbursement 04 / 30 / 2011
	Mailing Address 8341 Beechcraft Avenue	Amount of Each Disbursement this Period 179.37
	City Gaithersburg State MD Zip Code 20879-1509	
	Purpose of Disbursement Independent Expenditure - Postage	011 Category/Type
	Candidate Name Dave Craig	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: WI District: 83	Disbursement For: 2011 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Special-General2011
		Independent Expenditure - Postage

B.	Full Name (Last, First, Middle Initial) Prolist Inc.	Transaction ID: 39896258 Date of Disbursement 04 / 30 / 2011
	Mailing Address 8341 Beechcraft Avenue	Amount of Each Disbursement this Period 147.28
	City Gaithersburg State MD Zip Code 20879-1509	
	Purpose of Disbursement Independent Expenditure - Postage	011 Category/Type
	Candidate Name Duey Stroebel	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: WI District: 60	Disbursement For: 2011 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Special-General2011
		Independent Expenditure - Postage

C.	Full Name (Last, First, Middle Initial) Prolist Inc.	Transaction ID: 39896350 Date of Disbursement 04 / 30 / 2011
	Mailing Address 8341 Beechcraft Avenue	Amount of Each Disbursement this Period 151.94
	City Gaithersburg State MD Zip Code 20879-1509	
	Purpose of Disbursement Independent Expenditure - Postcards	011 Category/Type
	Candidate Name Dave Craig	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: WI District: 83	Disbursement For: 2011 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Special-General2011
		Independent Expenditure - Postcards

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>478.59</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

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

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

FOR LINE NUMBER:  
(check only one)

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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)

Prolist Inc.

Mailing Address 8341 Beechcraft Avenue

City Gaithersburg State MD Zip Code 20879-1509

Purpose of Disbursement  
Independent Expenditure - Postage

Candidate Name  
David Prosser

011  
Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2011  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: 40210254

Date of Disbursement

04 / 07 / 2011

Amount of Each Disbursement this Period

8380.99

Independent Expenditure -  
Postage

B.

Full Name (Last, First, Middle Initial)

Prolist Inc.

Mailing Address 8341 Beechcraft Avenue

City Gaithersburg State MD Zip Code 20879-1509

Purpose of Disbursement  
Independent Expenditure - Postcards

Candidate Name  
David Prosser

011  
Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2011  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: 40210256

Date of Disbursement

04 / 07 / 2011

Amount of Each Disbursement this Period

1607.50

Independent Expenditure -  
Postcards

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

9988.49

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

28662.22