

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

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

FEC IDENTIFICATION NUMBER
C C00053553

Check if 24-hour notice 48-hour notice

Full Name (Last, First, Middle, Initial) of Payee
Edmonds - Hackney & Associates, Inc.

Date
M M / D D / Y Y Y Y
0 2 / 2 8 / 2 0 0 5

Mailing Address
900 Second Street, NE #11B

Amount
40660.00

City State Zip Code
Washington DC 20002

Transaction ID: 5728105

Purpose of Expenditure Category/Type
Television Ad Production Cost 004

Office Sought: House State: SD
X Senate District: 2
Presidential

Name of Federal Candidate supported or Opposed by expenditure:
John Thune

Check One: Support Oppose

Calendar Year-To-Date Per Election for Office Sought 49300.00

Disbursement For: Primary General 2004
Other (specify): 2004 US General Elec

Full Name (Last, First, Middle, Initial) of Payee
Edmonds - Hackney & Associates, Inc.

Date
M M / D D / Y Y Y Y
0 2 / 2 8 / 2 0 0 5

Mailing Address
900 Second Street, NE #11B

Amount
6490.00

City State Zip Code
Washington DC 20002

Transaction ID: 5728107

Purpose of Expenditure Category/Type
Television Ad Production Cost 004

Office Sought: House State: WI
X Senate District: 2
Presidential

Name of Federal Candidate supported or Opposed by expenditure:
Mr. Tim Michels

Check One: Support Oppose

Calendar Year-To-Date Per Election for Office Sought 6490.00

Disbursement For: Primary General 2004
Other (specify): 2004 US General Elec

(a) SUBTOTAL of Itemized Independent Expenditures	47150.00	
(b) SUBTOTAL of Unitemized Independent Expenditures	0.00	
(c) TOTAL Independent Expenditures		
<p>Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.</p>		
Mary Rose Adkins _____ Signature	Date	M M / D D / Y Y Y Y 0 8 / 3 0 / 2 0 0 5