

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES
(Schedule E)PAGE 1 OF 3
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fund		FEC IDENTIFICATION NUMBER ▼ C C00053553
Check if <input checked="" type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on		MM / DD / YYYY

Full Name of Payee Starboard Strategic, Inc.		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 19 / 2018
Mailing Address 705 Melvin Avenue, #105		Amount 33986.12
City Annapolis	State MD	Zip Code 21401
Purpose of Expenditure Media Placement - Cable	Category/Type 004	Transaction ID : 78800496 Date of Disbursement or Obligation MM / DD / YYYY
Name of Federal Candidate Hawley, Joshua, ,		Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: MO
Calendar Year-To-Date Per Election for Office Sought 0.00		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶ _____

Full Name of Payee Starboard Strategic, Inc.		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 19 / 2018
Mailing Address 705 Melvin Avenue, #105		Amount 33986.11
City Annapolis	State MD	Zip Code 21401
Purpose of Expenditure Media Placement - Cable	Category/Type 004	Transaction ID : 78800497 Date of Disbursement or Obligation MM / DD / YYYY
Name of Federal Candidate McCaskill, Claire, ,		Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: MO
Calendar Year-To-Date Per Election for Office Sought 0.00		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶ _____

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	67972.23
(b) SUBTOTAL of Unitemized Independent Expenditures ▶	
(c) TOTAL Independent Expenditures..... ▶	

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

*Owens, G, , Robert,**[Electronically Filed]*

Date

MM / DD / YYYY
10 / 19 / 2018

Signature

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Check if <input checked="" type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report		<input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name of Payee Starboard Strategic, Inc.		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 19 / 2018	
Mailing Address 705 Melvin Avenue, #105		Amount 18187.50	
City Annapolis	State MD	Zip Code 21401	Transaction ID : 78800513
Purpose of Expenditure Media Placement - Digital	Category/Type 004	Date of Disbursement or Obligation MM / DD / YYYY	
Name of Federal Candidate Hawley, Joshua, ,		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 0.00		Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: MO Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶ _____	

Full Name of Payee Starboard Strategic, Inc.		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 19 / 2018	
Mailing Address 705 Melvin Avenue, #105		Amount 18187.50	
City Annapolis	State MD	Zip Code 21401	Transaction ID : 78800514
Purpose of Expenditure Media Placement - Digital	Category/Type 004	Date of Disbursement or Obligation MM / DD / YYYY	
Name of Federal Candidate McCaskill, Claire, ,		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 0.00		Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: MO Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶ _____	

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	36375.00
(b) SUBTOTAL of Unitemized Independent Expenditures ▶	
(c) TOTAL Independent Expenditures..... ▶	

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Owens, G, , Robert,

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Full Name of Payee Starboard Strategic, Inc.			Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 19 / 2018		
Mailing Address 705 Melvin Avenue, #105			Amount 93746.13		
City Annapolis	State MD	Zip Code 21401	Transaction ID : 78782060		
Purpose of Expenditure Media Buy - Radio		Category/Type 004	Date of Disbursement or Obligation MM / DD / YYYY		
Name of Federal Candidate Tester, Jon, , Sen.,		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: MT		
Calendar Year-To-Date Per Election for Office Sought		0.00	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶		

Full Name of Payee Redprint Strategy, LLC			Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 19 / 2018		
Mailing Address 1050 Johnnie Dodds Blvd. Unit 2414			Amount 5000.00		
City Mount Pleasant	State SC	Zip Code 29465	Transaction ID : 78800010		
Purpose of Expenditure Production - Radio		Category/Type 004	Date of Disbursement or Obligation MM / DD / YYYY		
Name of Federal Candidate Tester, Jon, , Sen.,		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: MT		
Calendar Year-To-Date Per Election for Office Sought		0.00	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶		

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	98746.13
(b) SUBTOTAL of Unitemized Independent Expenditures▶	
(c) TOTAL Independent Expenditures.....▶	203093.36

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.

Owens, G, , Robert,

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Signature