

# 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 05 01 2007 through 05 31 2007

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 08 20 2007

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

**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	D D	Y Y Y Y
0 5	0 1	2 0 0 7

 To: 

M M	D D	Y Y Y Y
0 5	3 1	2 0 0 7

	<b>COLUMN A This Period</b>	<b>COLUMN B Calendar Year-to-Date</b>		
6. (a) Cash on Hand January 1 <table border="1"><tr><td>Y Y Y Y</td></tr><tr><td>2 0 0 7</td></tr></table>	Y Y Y Y	2 0 0 7		1891657.82
Y Y Y Y				
2 0 0 7				
(b) Cash on Hand at Beginning of Reporting Period .....	2675204.76			
(c) Total Receipts (from Line 19) .....	602229.26	2663165.96		
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	3277434.02	4554823.78		
7. Total Disbursements (from Line 31) .....	396207.37	1673597.13		
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	2881226.65	2881226.65		
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) .....	35196.57			

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: 

M	M
0	5

D	D
0	1

Y	Y	Y	Y
2	0	0	7

 To: 

M	M
0	5

D	D
3	1

Y	Y	Y	Y
2	0	0	7

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	40884.60	121627.98
(i) Itemized (use Schedule A) .....	553539.81	2499945.54
(ii) Unitemized .....	594424.41	2621573.52
(iii) TOTAL (add Lines 11(a)(i) and (ii) .....	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 Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5) .....	594424.41	2621573.52
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) .....	5.00	2747.90
16. Refunds of Contributions Made to Federal candidates and Other Political Committees .....	0.00	150.00
17. Other Federal Receipts (Dividends, Interest, etc.) .....	7799.85	38694.54
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)) .....	602229.26	2663165.96
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	602229.26	2663165.96

## DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

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.....	208375.69	895936.30
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b)).....	208375.69	895936.30
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	81345.00	220895.00
24. Independent Expenditure (use Schedule E) .....	0.00	124676.71
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.....	106486.68	432089.12
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))..	396207.37	1673597.13
32. Total Federal Disbursements (subtract Line 21(a)(ii) from Line 30(a)(ii) from Line 31).....	396207.37	1673597.13

**DETAILED SUMMARY PAGE**  
of Disbursements

<b>III. Net Contributions/Operating Expenditures</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Calendar Year-to-Date</b>
33. Total Contributions (other than loans) from Line 11(d), page 3) .....	594424.41	2621573.52
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	594424.41	2621573.52
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	208375.69	895936.30
37. Offsets to Operating Expenditures (from Line 15, page 3) .....	5.00	2747.90
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	208370.69	893188.40

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 / 160
	<input type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input checked="" type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

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

**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.

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	5	/	0	9	/	2	0	0	7

Transaction ID: 20445637

Amount of Each Receipt this Period

Refund Account Analysis Fees

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<input type="text" value="5.00"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text" value="5.00"/>

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

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

FOR LINE NUMBER: PAGE 7 / 160  
(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)  
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 ▼  
35923.20

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	5	/	0	9	/	2	0	0	7

Transaction ID: 20445639

Amount of Each Receipt this Period  
6895.64

Interest Income

**B.** 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 ▼  
1.38

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	5	/	3	1	/	2	0	0	7

Transaction ID: 20445641

Amount of Each Receipt this Period  
0.27

Interest Income

**C.** 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 ▼  
36826.43

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	5	/	0	9	/	2	0	0	7

Transaction ID: 20445642

Amount of Each Receipt this Period  
903.23

Interest Income

**SUBTOTAL** of Receipts This Page (optional) ..... ► **7799.14**

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 8 / 160

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input checked="" type="checkbox"/> 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)  
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 ▼ 36826.46

Date of Receipt  
05 / 31 / 2007

**Transaction ID:** 20445646

Amount of Each Receipt this Period  
0.03

Interest Income

**B.** 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 ▼ 1876.70

Date of Receipt  
05 / 31 / 2007

**Transaction ID:** 20445648

Amount of Each Receipt this Period  
0.68

Interest Income

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<span style="border: 1px solid black; padding: 2px;">0.71</span>
<b>TOTAL</b> This Period (last page this line number only) .....	<span style="border: 1px solid black; padding: 2px;">7799.85</span>

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

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

FOR LINE NUMBER: PAGE 9 / 160  
(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 DON MATTOS</p> <p>Mailing Address 4710 S BREWER RD</p> <p>City State Zip Code PLEASANT GROVE CA 95668-9611</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</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  <table style="width: 100%; border-collapse: collapse;"> <tr> <td style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y</td> </tr> <tr> <td style="border: 1px solid black; padding: 2px;">0 5 / 1 7 / 2 0 0 7</td> </tr> </table> <p><b>Transaction ID:</b> 20446417</p> <p>Amount of Each Receipt this Period  <span style="border: 1px solid black; padding: 2px;">300.00</span></p> </p>	M M / D D / Y Y Y Y	0 5 / 1 7 / 2 0 0 7
M M / D D / Y Y Y Y			
0 5 / 1 7 / 2 0 0 7			

<p><b>B.</b> Full Name (Last, First, Middle Initial) MR JAMES M LEE</p> <p>Mailing Address 144 RAINBOW DR # 4484</p> <p>City State Zip Code LIVINGSTON TX 77399-1044</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 US AIR FORCE PURCHASING</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;">250.00</span></p>	<p>Date of Receipt  <table style="width: 100%; border-collapse: collapse;"> <tr> <td style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y</td> </tr> <tr> <td style="border: 1px solid black; padding: 2px;">0 5 / 1 7 / 2 0 0 7</td> </tr> </table> <p><b>Transaction ID:</b> 20446492</p> <p>Amount of Each Receipt this Period  <span style="border: 1px solid black; padding: 2px;">100.00</span></p> </p>	M M / D D / Y Y Y Y	0 5 / 1 7 / 2 0 0 7
M M / D D / Y Y Y Y			
0 5 / 1 7 / 2 0 0 7			

<p><b>C.</b> Full Name (Last, First, Middle Initial) MR JOHN C SCOTT</p> <p>Mailing Address 7027 GLOVER RD</p> <p>City State Zip Code CHATTANOOGA TN 37416-1009</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 SELF EMPLOYED INVESTOR</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  <table style="width: 100%; border-collapse: collapse;"> <tr> <td style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y</td> </tr> <tr> <td style="border: 1px solid black; padding: 2px;">0 5 / 2 4 / 2 0 0 7</td> </tr> </table> <p><b>Transaction ID:</b> 20446594</p> <p>Amount of Each Receipt this Period  <span style="border: 1px solid black; padding: 2px;">100.00</span></p> </p>	M M / D D / Y Y Y Y	0 5 / 2 4 / 2 0 0 7
M M / D D / Y Y Y Y			
0 5 / 2 4 / 2 0 0 7			

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<span style="border: 1px solid black; padding: 2px;">500.00</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)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 10 / 160

(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 ALFRED L FRONZOLI

Mailing Address 585 PARKER RD

City JOHNSTOWN State PA Zip Code 15904-2241

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

Name of Employer CORLE BUILDING SYSTEMS Occupation WELDER

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 245.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	5		1	5		2	0	0	7

Transaction ID: 20446708

Amount of Each Receipt this Period

50.00
-------

**B.** Full Name (Last, First, Middle Initial)  
MR DENNIS S LITTLE

Mailing Address 7708 E RAINVIEW CT

City ANAHEIM State CA Zip Code 92808-2118

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

Name of Employer CARPETS-4-U, INC Occupation STORE MANAGER

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 75.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	5		2	3		2	0	0	7

Transaction ID: 20446763

Amount of Each Receipt this Period

75.00
-------

**C.** Full Name (Last, First, Middle Initial)  
MR DENNIS S LITTLE

Mailing Address 7708 E RAINVIEW CT

City ANAHEIM State CA Zip Code 92808-2118

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

Name of Employer CARPETS-4-U, INC Occupation STORE MANAGER

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 150.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	5		2	3		2	0	0	7

Transaction ID: 20446764

Amount of Each Receipt this Period

75.00
-------

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

200.00

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 / 160
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	<input type="checkbox"/> 12
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

**A.** Full Name (Last, First, Middle Initial)  
MR O J MCDONALD

Mailing Address 17570 METCALF AVE

City State Zip Code  
STILWELL KS 66085-9104

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

Name of Employer Occupation  
RETIRED RETIRED

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 700.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 5 / 1 4 / 2 0 0 7

Transaction ID: 20446801

Amount of Each Receipt this Period  
100.00

**B.** 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: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 250.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 5 / 2 4 / 2 0 0 7

Transaction ID: 20446859

Amount of Each Receipt this Period  
150.00

**C.** Full Name (Last, First, Middle Initial)  
MR MICHAEL T EGAN

Mailing Address 21705 W 58TH ST

City State Zip Code  
SHAWNEE KS 66218-8933

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

Name of Employer Occupation  
LUDWIKOSKI & ASSOCIATES, INC SALES

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 205.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 5 / 1 8 / 2 0 0 7

Transaction ID: 20446918

Amount of Each Receipt this Period  
30.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 280.00

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 12 / 160  
(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 KEITH E FOX

Mailing Address 8542 BARROW FURNACE LN

City State Zip Code  
LORTON VA 22079-5003

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

Name of Employer SAIC Occupation ENGINEER

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 275.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 05 / 15 / 2007

**Transaction ID:** 20447104

Amount of Each Receipt this Period  
 50.00

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

Mailing Address 1177 TEABERRY RD

City State Zip Code  
WARRENSVILLE NC 28693-9567

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 Y  
 05 / 29 / 2007

**Transaction ID:** 20447272

Amount of Each Receipt this Period  
 50.00

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

Mailing Address 438 ALLOWAY FRIESBURG RD

City State Zip Code  
BRIDGETON NJ 08302-5532

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  
 05 / 21 / 2007

**Transaction ID:** 20447426

Amount of Each Receipt this Period  
 50.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 150.00

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 13 / 160

(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"/>		<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>	17

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

Full Name (Last, First, Middle Initial) <b>A. MR DENNIS S LITTLE</b>		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 2 3 / 2 0 0 7	
Mailing Address 7708 E RAINVIEW CT		<b>Transaction ID: 20447468</b>	
City ANAHEIM	State CA	Zip Code 92808-2118	Amount of Each Receipt this Period 75.00
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer CARPETS-4-U, INC	Occupation STORE MANAGER		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 225.00		

Full Name (Last, First, Middle Initial) <b>B. MR WILLIAM MILEY</b>		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 5 / 2 0 0 7	
Mailing Address 6497 4 MILE STATE LINE RD		<b>Transaction ID: 20447596</b>	
City EATON	State OH	Zip Code 45320-9583	Amount of Each Receipt this Period 50.00
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer MIAMI UNIVERSITY	Occupation ASST. DIRECTOR INFO SYSTEMS		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 230.00		

Full Name (Last, First, Middle Initial) <b>C. MR MATT OSTE</b>		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 2 9 / 2 0 0 7	
Mailing Address 1447 PIPER CT		<b>Transaction ID: 20447625</b>	
City CONCORD	State NC	Zip Code 28025-9121	Amount of Each Receipt this Period 30.00
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer AGV PRODUCTS	Occupation CSM		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 210.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	155.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 14 / 160

(check only one)

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

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

<b>A.</b> Full Name (Last, First, Middle Initial) MR LEONARD S CLOW		Date of Receipt M M / D D / Y Y Y Y Y 05 / 09 / 2007	
Mailing Address 600 5TH AVE, FL 20F		<b>Transaction ID:</b> 20447667	
City NEW YORK	State NY	Amount of Each Receipt this Period 100.00	
Zip Code 10020		FEC ID number of contributing federal political committee. <b>C</b>	
Name of Employer MACQUARIE INTERNATIONAL	Occupation FINANCIER	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
Aggregate Year-to-Date ▼ 400.00			

<b>B.</b> Full Name (Last, First, Middle Initial) MR LEONARD S CLOW		Date of Receipt M M / D D / Y Y Y Y Y 05 / 30 / 2007	
Mailing Address 600 5TH AVE, FL 20F		<b>Transaction ID:</b> 20447668	
City NEW YORK	State NY	Amount of Each Receipt this Period 100.00	
Zip Code 10020		FEC ID number of contributing federal political committee. <b>C</b>	
Name of Employer MACQUARIE INTERNATIONAL	Occupation FINANCIER	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
Aggregate Year-to-Date ▼ 500.00			

<b>C.</b> Full Name (Last, First, Middle Initial) MR JOHN W COLLINS, III		Date of Receipt M M / D D / Y Y Y Y Y 05 / 29 / 2007	
Mailing Address 7534 ESCALA DR		<b>Transaction ID:</b> 20447672	
City AUSTIN	State TX	Amount of Each Receipt this Period 100.00	
Zip Code 78735-1523		FEC ID number of contributing federal political committee. <b>C</b>	
Name of Employer	Occupation RETIRED	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
Aggregate Year-to-Date ▼ 300.00			

**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) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 15 / 160						
	(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

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

Full Name (Last, First, Middle Initial) <b>A. MR GENE R WARD</b>		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 2 1 / 2 0 0 7	
Mailing Address PO BOX 1		<b>Transaction ID: 20447923</b>	
City <b>MATAGORDA</b>	State TX	Zip Code 77457-0001	Amount of Each Receipt this Period 50.00
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation RETIRED			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 350.00	

Full Name (Last, First, Middle Initial) <b>B. MR B B BLOOMQUIST</b>		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 2 1 / 2 0 0 7	
Mailing Address 255 FOOTHILLS SOUTH DR		<b>Transaction ID: 20447941</b>	
City <b>SEDONA</b>	State AZ	Zip Code 86336-5029	Amount of Each Receipt this Period 50.00
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation RETIRED			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 450.00	

Full Name (Last, First, Middle Initial) <b>C. MR B B BLOOMQUIST</b>		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 0 4 / 2 0 0 7	
Mailing Address 255 FOOTHILLS SOUTH DR		<b>Transaction ID: 20447942</b>	
City <b>SEDONA</b>	State AZ	Zip Code 86336-5029	Amount of Each Receipt this Period 50.00
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation RETIRED			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 400.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	150.00
<b>TOTAL</b> This Period (last page this line number only) .....	0.00

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 16 / 160

(check only one)

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

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

**A.** Full Name (Last, First, Middle Initial)  
MR DAVID JOLLY

Mailing Address 240 S RIVER RD

City State Zip Code  
MUNROE FALLS OH 44262-1614

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

Name of Employer Occupation  
FORD MOTOR COMPANY MATERIAL CONTROL CK

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 220.00

Date of Receipt  
05 / 25 / 2007

Transaction ID: 20448051

Amount of Each Receipt this Period  
30.00

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

Mailing Address 82 DEVONSHIRE RD

City State Zip Code  
CEDAR GROVE NJ 07009-2022

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

Name of Employer Occupation  
NY DEPT OF PUBLIC SERVICE ENGINEER

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
05 / 07 / 2007

Transaction ID: 20448068

Amount of Each Receipt this Period  
100.00

**C.** Full Name (Last, First, Middle Initial)  
MR R P STATHAM

Mailing Address 219 E MONROE AVE

City State Zip Code  
ORANGE CA 92867-4848

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

Name of Employer Occupation  
RETIRED

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

Date of Receipt  
05 / 07 / 2007

Transaction ID: 20448217

Amount of Each Receipt this Period  
50.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	180.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 17 / 160						
	(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

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

<b>A.</b> Full Name (Last, First, Middle Initial) MR R P STATHAM Mailing Address 219 E MONROE AVE City ORANGE State CA Zip Code 92867-4848 FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 2 2 / 2 0 0 7 <b>Transaction ID:</b> 20448245 Amount of Each Receipt this Period 50.00
Name of Employer Occupation RETIRED Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	

<b>B.</b> Full Name (Last, First, Middle Initial) MR GREGG E LIND Mailing Address 16406 S 63RD ST City PAPILLION State NE Zip Code 68133-2631 FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 8 / 2 0 0 7 <b>Transaction ID:</b> 20448385 Amount of Each Receipt this Period 30.00
Name of Employer Occupation CARPENTER Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 230.00	

<b>C.</b> Full Name (Last, First, Middle Initial) MR JAMES R MCCAIN Mailing Address 4802 IVY ST City PASADENA State TX Zip Code 77505-2131 FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 0 1 / 2 0 0 7 <b>Transaction ID:</b> 20448425 Amount of Each Receipt this Period 50.00
Name of Employer Occupation MACHINIST Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 205.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	130.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 18 / 160

(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 ERIC F FINK, JR

Mailing Address 353 JAMBOREE DR

City State Zip Code  
MANCHESTER MO 63021-5130

FEC ID number of contributing federal political committee. C

Name of Employer  
JEFFERSON LODGE ASSISTED  
LIVIN

Occupation  
OWNER / OPERATOR

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
220.00

Date of Receipt  
05 / 29 / 2007

Transaction ID: 20448437

Amount of Each Receipt this Period  
50.00

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

Mailing Address PO BOX 14533

City State Zip Code  
ALBUQUERQUE NM 87191-4533

FEC ID number of contributing federal political committee. C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
480.00

Date of Receipt  
05 / 25 / 2007

Transaction ID: 20448510

Amount of Each Receipt this Period  
50.00

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

Mailing Address 500 BAY RD

City State Zip Code  
ALGOMA WI 54201-9321

FEC ID number of contributing federal political committee. C

Name of Employer  
BAY ROAD, INC.

Occupation  
ADMINISTRATOR

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
05 / 30 / 2007

Transaction ID: 20448629

Amount of Each Receipt this Period  
250.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<span style="border: 1px solid black; padding: 2px;">350.00</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)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 19 / 160

(check only one)

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

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

<b>A.</b> Full Name (Last, First, Middle Initial) MR RAY MURPHY		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 0 / 2 0 0 7	
Mailing Address 410 BISHOP ST		<b>Transaction ID:</b> 20448663	
City WILLIAMSON	State WV	Zip Code 25661-3911	Amount of Each Receipt this Period 50.00
FEC ID number of contributing federal political committee. C			
Name of Employer <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation RETIRED	Aggregate Year-to-Date ▼ 210.00	

<b>B.</b> Full Name (Last, First, Middle Initial) MR LEE J BRIDGES		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 4 / 2 0 0 7	
Mailing Address 9050 E SUGAR SUMAC ST		<b>Transaction ID:</b> 20448754	
City TUCSON	State AZ	Zip Code 85747-5328	Amount of Each Receipt this Period 50.00
FEC ID number of contributing federal political committee. C			
Name of Employer US AIR FORCE	Occupation MILITARY OFFICER	Aggregate Year-to-Date ▼ 220.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

<b>C.</b> Full Name (Last, First, Middle Initial) MR KENNETH L GRELL		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 1 / 2 0 0 7	
Mailing Address 7825 BUENA VISTA RD		<b>Transaction ID:</b> 20448762	
City DIXON	State IA	Zip Code 52745-9728	Amount of Each Receipt this Period 30.00
FEC ID number of contributing federal political committee. C			
Name of Employer	Occupation RETIRED	Aggregate Year-to-Date ▼ 330.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	130.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 20 / 160
	<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

Full Name (Last, First, Middle Initial) <b>A. MR RAY MURPHY</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 8 / 2 0 0 7	
Mailing Address 410 BISHOP ST		Transaction ID: 20448858	
City State Zip Code WILLIAMSON WV 25661-3911		Amount of Each Receipt this Period 30.00	
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Occupation Occupation RETIRED			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 240.00	

Full Name (Last, First, Middle Initial) <b>B. MR LARRY GURIAN</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 0 / 2 0 0 7	
Mailing Address 5043 S GLENHAVEN AVE		Transaction ID: 20449183	
City State Zip Code SPRINGFIELD MO 65804-7800		Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Occupation FERRELL DUNCAN CLINIC PHYSICIAN			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 400.00	

Full Name (Last, First, Middle Initial) <b>C. MR JAMES A GUSTAFSON</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 1 / 2 0 0 7	
Mailing Address 2578 OUTLOOK CV		Transaction ID: 20449257	
City State Zip Code PORT HUENEME CA 93041-1566		Amount of Each Receipt this Period 30.00	
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Occupation Occupation COUNSELOR			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 210.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	160.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	(Empty box)

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 21 / 160

(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"/>		<input type="checkbox"/>		<input type="checkbox"/>		<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 JAMES B FISHER

Mailing Address 3040 JAVA RD

City State Zip Code  
COSTA MESA CA 92626-3506

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

Name of Employer Occupation  
RETIREED

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 430.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 5 / 2 1 / 2 0 0 7

Transaction ID: 20449392

Amount of Each Receipt this Period  
30.00

**B.** Full Name (Last, First, Middle Initial)  
MR JOSEPH P HUGHES

Mailing Address 512 VALCOUR RD

City State Zip Code  
BALTIMORE MD 21228-3248

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

Name of Employer Occupation  
BALTIMORE GAS & ELECTRIC CO. RETIREED

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 275.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 5 / 2 3 / 2 0 0 7

Transaction ID: 20449463

Amount of Each Receipt this Period  
75.00

**C.** Full Name (Last, First, Middle Initial)  
MR RICHARD CLAYTON

Mailing Address 350 THATCHER ST

City State Zip Code  
EAST BRIDGEWATER MA 02333-1034

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

Name of Employer Occupation  
R.C. TRUCK SALES OWNER / SELF EMPLOYED

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 5 / 2 4 / 2 0 0 7

Transaction ID: 20449529

Amount of Each Receipt this Period  
100.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	205.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:		PAGE 22 / 160	
	(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"/> 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 PIERCE

Mailing Address 4175 DON BONITO ST

City State Zip Code  
LAS VEGAS NV 89121-6401

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

Name of Employer Occupation  
COMMINS ROCKY MOUNTAIN, LLC PARTS SPECIALIST

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 205.00

Date of Receipt  
M M / D D / Y Y Y Y  
05 / 24 / 2007

Transaction ID: 20449859

Amount of Each Receipt this Period  
30.00

**B.** Full Name (Last, First, Middle Initial)  
MR PATRICK J WILLIAMS

Mailing Address 2619 5TH AVE APT 301

City State Zip Code  
SEATTLE WA 98121-1501

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

Name of Employer Occupation  
REPROGRAPHICS NORTHWEST COPY MACHINE OPERATOR

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 480.00

Date of Receipt  
M M / D D / Y Y Y Y  
05 / 18 / 2007

Transaction ID: 20449911

Amount of Each Receipt this Period  
20.00

**C.** Full Name (Last, First, Middle Initial)  
MR RODGER C SCOTT

Mailing Address 20405 SE 344TH ST

City State Zip Code  
AUBURN WA 98092-1592

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

Name of Employer Occupation  
SELF GENERAL CONTRACTOR

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

Date of Receipt  
M M / D D / Y Y Y Y  
05 / 21 / 2007

Transaction ID: 20449981

Amount of Each Receipt this Period  
300.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>350.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 23 / 160  
(check only one)

<input checked="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)  
REEDE J J WILLSON

Mailing Address PO BOX 2337

City State Zip Code  
CAMARILLO CA 93011-2337

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

Name of Employer Occupation  
SELF EMPLOYED CONSTRUCTION

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

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 5 / 2 1 / 2 0 0 7

Transaction ID: 20450056

Amount of Each Receipt this Period  
100.00

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

Mailing Address 1116 W CHAUTAUQUA ST

City State Zip Code  
CARBONDALE IL 62901-2453

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

Name of Employer Occupation  
CITY OF CARBONDALE, IL POLICE OFFICER - RETIRED

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

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 5 / 1 6 / 2 0 0 7

Transaction ID: 20450074

Amount of Each Receipt this Period  
200.00

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

Mailing Address 9730 MEADOW LN

City State Zip Code  
DENHAM SPRINGS LA 70706-0358

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

Name of Employer Occupation  
GLOBAL DATA SYSTEMS STORAGE NETWORK CONSULT

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

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 5 / 3 0 / 2 0 0 7

Transaction ID: 20450182

Amount of Each Receipt this Period  
30.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 330.00

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 24 / 160

(check only one)

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

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

<b>A.</b> Full Name (Last, First, Middle Initial) MR RICHARD WALL Mailing Address 2702 FOREST OAKS BLVD City HOUSTON State TX Zip Code 77017-7120 FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt <table border="1"> <tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr> <tr><td>0</td><td>5</td><td>/</td><td>0</td><td>2</td><td>/</td><td>2</td><td>0</td><td>0</td><td>7</td></tr> </table> <b>Transaction ID:</b> 20450186 Amount of Each Receipt this Period <table border="1"> <tr><td>5000.00</td></tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	5	/	0	2	/	2	0	0	7	5000.00
M	M	/	D	D	/	Y	Y	Y	Y														
0	5	/	0	2	/	2	0	0	7														
5000.00																							
Name of Employer UNIVERSITY OF HOUSTON Occupation COMPUTER PROGRAMMER Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ <table border="1"> <tr><td>5000.00</td></tr> </table>		5000.00																					
5000.00																							

<b>B.</b> Full Name (Last, First, Middle Initial) MR ROBERT BETTISWORTH Mailing Address PO BOX 80288 City FAIRBANKS State AK Zip Code 99708-0288 FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt <table border="1"> <tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr> <tr><td>0</td><td>5</td><td>/</td><td>0</td><td>7</td><td>/</td><td>2</td><td>0</td><td>0</td><td>7</td></tr> </table> <b>Transaction ID:</b> 20450204 Amount of Each Receipt this Period <table border="1"> <tr><td>100.00</td></tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	5	/	0	7	/	2	0	0	7	100.00
M	M	/	D	D	/	Y	Y	Y	Y														
0	5	/	0	7	/	2	0	0	7														
100.00																							
Name of Employer Occupation Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ <table border="1"> <tr><td>320.00</td></tr> </table>		320.00																					
320.00																							

<b>C.</b> Full Name (Last, First, Middle Initial) MR RICHARD A JOHNSON Mailing Address 49 LAKE RDG City LUMBERTON State MS Zip Code 39455-8390 FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt <table border="1"> <tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr> <tr><td>0</td><td>5</td><td>/</td><td>2</td><td>3</td><td>/</td><td>2</td><td>0</td><td>0</td><td>7</td></tr> </table> <b>Transaction ID:</b> 20450227 Amount of Each Receipt this Period <table border="1"> <tr><td>100.00</td></tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	5	/	2	3	/	2	0	0	7	100.00
M	M	/	D	D	/	Y	Y	Y	Y														
0	5	/	2	3	/	2	0	0	7														
100.00																							
Name of Employer Occupation RETIRED - PHYSICIAN Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ <table border="1"> <tr><td>250.00</td></tr> </table>		250.00																					
250.00																							

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

**5200.00**

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 25 / 160
	(check only one)	
<input checked="" 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 type="checkbox"/> 16	<input type="checkbox"/> 17

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

Full Name (Last, First, Middle Initial) <b>A. MR GEORGE ANDERSON</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 9 / 2 0 0 7	
Mailing Address 11412 MISSISSIPPI DR N		<b>Transaction ID: 20450269</b>	
City State Zip Code CHAMPLIN MN 55316-3508	Amount of Each Receipt this Period 1000.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Occupation CROWN HOLDINGS INC ENGINEER			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1000.00	

Full Name (Last, First, Middle Initial) <b>B. MR DOUGLAS MARKHOUSE</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 1 / 2 0 0 7	
Mailing Address 167 BROADWAY		<b>Transaction ID: 20450310</b>	
City State Zip Code HASTINGS ON HUDSON NY 10706-2904	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Occupation OCTAGON COMMUNICATION CORP. PRESIDENT			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 250.00	

Full Name (Last, First, Middle Initial) <b>C. MR VICTOR DIESCHER, JR</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 4 / 2 0 0 7	
Mailing Address 251 GOFF RD		<b>Transaction ID: 20450403</b>	
City State Zip Code LIVINGSTON MANOR NY 12758-5728	Amount of Each Receipt this Period 50.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Occupation SELF EMPLOYED CONTRACTOR			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 250.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	1150.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 26 / 160
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

Full Name (Last, First, Middle Initial) <b>A. MR ROBERT J SMITH, III</b>		Date of Receipt M M / D D / Y Y Y Y Y 05 / 08 / 2007	
Mailing Address RR 1 BOX 208A		Transaction ID: 20450442	
City PRINCETON	State IN	Zip Code 47670-9734	Amount of Each Receipt this Period 250.00
FEC ID number of contributing federal political committee. C			
Name of Employer HIGHWAY MACHINE COMPANY, INC	Occupation OWNER		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00		

Full Name (Last, First, Middle Initial) <b>B. MR ALLAN M ROSS</b>		Date of Receipt M M / D D / Y Y Y Y Y 05 / 16 / 2007	
Mailing Address 3320 CAMEO CT		Transaction ID: 20450447	
City GREEN BAY	State WI	Zip Code 54301-1546	Amount of Each Receipt this Period 30.00
FEC ID number of contributing federal political committee. C			
Name of Employer	Occupation RETIRED ATTORNEY		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 230.00		

Full Name (Last, First, Middle Initial) <b>C. MR HUBERT E TWIGG, JR</b>		Date of Receipt M M / D D / Y Y Y Y Y 05 / 21 / 2007	
Mailing Address 339 LOCUST ST		Transaction ID: 20450661	
City STEELTON	State PA	Zip Code 17113-2335	Amount of Each Receipt this Period 40.00
FEC ID number of contributing federal political committee. C			
Name of Employer INTERNATIONAL STEEL GROUP	Occupation MACHINIST		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 210.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	320.00
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: <span style="float: right;">PAGE 27 / 160</span> (check only one) <input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)  
National Rifle Association of America Political Victory Fund

<b>A.</b> Full Name (Last, First, Middle Initial) MR JAY B ASHWORTH Mailing Address PO BOX 237 City State Zip Code AMERICAN FORK UT 84003-0237 FEC ID number of contributing federal political committee. <b>C</b>	Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 5 / 2 0 0 7 <b>Transaction ID:</b> 20450756 Amount of Each Receipt this Period 30.00
Name of Employer BLUEHOST.COM / HOSTMONSTER.COM Occupation FRAUD/VERIFICATION DIRECTOR Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 360.00

<b>B.</b> Full Name (Last, First, Middle Initial) MR JERRY H AIKEN Mailing Address 12692 FREMONT ST City State Zip Code YUCAIPA CA 92399-4941 FEC ID number of contributing federal political committee. <b>C</b>	Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 8 / 2 0 0 7 <b>Transaction ID:</b> 20450990 Amount of Each Receipt this Period 50.00
Name of Employer Occupation RETIRED Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00

<b>C.</b> Full Name (Last, First, Middle Initial) MR J WITTROCK Mailing Address 530 2ND ST NW City State Zip Code HARTLEY IA 51346-1028 FEC ID number of contributing federal political committee. <b>C</b>	Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 1 / 2 0 0 7 <b>Transaction ID:</b> 20451004 Amount of Each Receipt this Period 50.00
Name of Employer RETIRED Occupation TEACHER / FARMER Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	130.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	0.00

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

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

FOR LINE NUMBER: PAGE 28 / 160  
(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 CHRISTOPH D PEPE

Mailing Address PO BOX 133

City State Zip Code  
PROSPECT NY 13435-0133

FEC ID number of contributing federal political committee. C

Name of Employer Occupation  
MILLENNIUM ANTENNA CORP ELECTRICAL ENGINEER

Receipt For: Aggregate Year-to-Date ▼  
 Primary    General  
 Other (specify) ▼ 205.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 5 / 1 8 / 2 0 0 7

**Transaction ID:** 20451034

Amount of Each Receipt this Period  
75.00

**B.** Full Name (Last, First, Middle Initial)  
MR CHRISTOPH D PEPE

Mailing Address PO BOX 133

City State Zip Code  
PROSPECT NY 13435-0133

FEC ID number of contributing federal political committee. C

Name of Employer Occupation  
MILLENNIUM ANTENNA CORP ELECTRICAL ENGINEER

Receipt For: Aggregate Year-to-Date ▼  
 Primary    General  
 Other (specify) ▼ 235.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 5 / 1 8 / 2 0 0 7

**Transaction ID:** 20451035

Amount of Each Receipt this Period  
30.00

**C.** Full Name (Last, First, Middle Initial)  
MR RICHARD C NELSON

Mailing Address 9636 ARBY DR

City State Zip Code  
BEVERLY HILLS CA 90210-1202

FEC ID number of contributing federal political committee. C

Name of Employer Occupation  
RETIRED

Receipt For: Aggregate Year-to-Date ▼  
 Primary    General  
 Other (specify) ▼ 220.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 5 / 2 1 / 2 0 0 7

**Transaction ID:** 20451078

Amount of Each Receipt this Period  
30.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<span style="border: 1px solid black; padding: 2px;">135.00</span>
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER:	PAGE 29 / 160
(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 F BREault

Mailing Address 308 KALAMAZOO ST

City	State	Zip Code
SOUTH HAVEN	MI	49090-1308

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

Name of Employer	Occupation
	RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
220.00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	5	/	2	9	/	2	0	0	7

Transaction ID: 20451247

Amount of Each Receipt this Period  
30.00

**B.** Full Name (Last, First, Middle Initial)  
MR JOHN R R BARBER

Mailing Address 405 5TH ST

City	State	Zip Code
MANHATTAN BEACH	CA	90266-5713

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

Name of Employer	Occupation
J R BARBER & ASSOC INC	CONSULTANT

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
255.00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	5	/	1	8	/	2	0	0	7

Transaction ID: 20451298

Amount of Each Receipt this Period  
30.00

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

Mailing Address PO BOX 2381

City	State	Zip Code
BUCKLEY	WA	98321-2381

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
0	5	/	1	7	/	2	0	0	7

Transaction ID: 20451364

Amount of Each Receipt this Period  
100.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	160.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: <span style="float:right">PAGE 30 / 160</span>
	(check only one)
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
<input type="checkbox"/> 13	<input type="checkbox"/> 14
<input type="checkbox"/> 15	<input type="checkbox"/> 12
<input type="checkbox"/> 16	<input type="checkbox"/> 17

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

Full Name (Last, First, Middle Initial) <b>A. MR JOSEPH COSCHIGNANO</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 7 / 2 0 0 7
Mailing Address 5 BAYVIEW AVE		<b>Transaction ID: 20451397</b>
City State Zip Code BAYVILLE NY 11709-3131	Amount of Each Receipt this Period 30.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer TOWN OF OYSTER BAY, DPW	Occupation EQUIPMENT SUPERVISOR I	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 210.00	

Full Name (Last, First, Middle Initial) <b>B. MR JERRY L GOOD</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 7 / 2 0 0 7
Mailing Address 434 SHIRKTOWN RD		<b>Transaction ID: 20451491</b>
City State Zip Code NARVON PA 17555-9708	Amount of Each Receipt this Period 30.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer TYSON FOODS INC	Occupation TRUCKER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 210.00	

Full Name (Last, First, Middle Initial) <b>C. MR STANLEY N BRAITHWAITE</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 9 / 2 0 0 7
Mailing Address 838 SAINT ANN DR		<b>Transaction ID: 20451552</b>
City State Zip Code SALINAS CA 93901-1316	Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer COUNTY OF MONTEREY CALIF	Occupation GOVT EMPLOYEE	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	160.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	0.00

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 31 / 160

(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 F BREault

Mailing Address 308 KALAMAZOO ST

City State Zip Code  
SOUTH HAVEN MI 49090-1308

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  
05 / 29 / 2007

Transaction ID: 20451578

Amount of Each Receipt this Period  
30.00

**B.** Full Name (Last, First, Middle Initial)  
MR EDWIN A SEIPP

Mailing Address 49 TUSCALOOSA AVE

City State Zip Code  
ATHERTON CA 94027-4014

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

Name of Employer Occupation  
RETIREd

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 800.00

Date of Receipt  
M M / D D / Y Y Y Y  
05 / 04 / 2007

Transaction ID: 20451650

Amount of Each Receipt this Period  
500.00

**C.** Full Name (Last, First, Middle Initial)  
MR EARL H CLARK

Mailing Address PO BOX 1221

City State Zip Code  
RATON NM 87740-1221

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

Name of Employer Occupation  
RETIREd

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

Date of Receipt  
M M / D D / Y Y Y Y  
05 / 17 / 2007

Transaction ID: 20451721

Amount of Each Receipt this Period  
50.00

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

580.00

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: <input type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 (check only one) <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	PAGE 32 / 160
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

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

<b>A.</b> Full Name (Last, First, Middle Initial) MR NICHOLAS J J BOVE Mailing Address 6100 MAIN ST City State Zip Code TRUMBULL CT 06611-2438 FEC ID number of contributing federal political committee. <input style="width: 100px;" type="text" value="C"/> Name of Employer Occupation DIV OF CRIMINAL JUSTICE ASST. STATES ATT Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px; text-align: right;">300.00</div>	Date of Receipt <table style="width: 100%; border-collapse: collapse;"> <tr> <td style="border: 1px solid black; padding: 2px;">M M /</td> <td style="border: 1px solid black; padding: 2px;">D D /</td> <td style="border: 1px solid black; padding: 2px;">Y Y Y Y</td> </tr> <tr> <td style="border: 1px solid black; padding: 2px;">0 5 /</td> <td style="border: 1px solid black; padding: 2px;">0 7 /</td> <td style="border: 1px solid black; padding: 2px;">2 0 0 7</td> </tr> </table> Transaction ID: 20451863 Amount of Each Receipt this Period <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px; text-align: right;">100.00</div>	M M /	D D /	Y Y Y Y	0 5 /	0 7 /	2 0 0 7
M M /	D D /	Y Y Y Y					
0 5 /	0 7 /	2 0 0 7					

<b>B.</b> Full Name (Last, First, Middle Initial) MR HARRY H HAEUSSLER Mailing Address 1094 HIGHLANDS CIR City State Zip Code LOS ALTOS CA 94024-7014 FEC ID number of contributing federal political committee. <input style="width: 100px;" type="text" value="C"/> Name of Employer Occupation RETIRED Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px; text-align: right;">240.00</div>	Date of Receipt <table style="width: 100%; border-collapse: collapse;"> <tr> <td style="border: 1px solid black; padding: 2px;">M M /</td> <td style="border: 1px solid black; padding: 2px;">D D /</td> <td style="border: 1px solid black; padding: 2px;">Y Y Y Y</td> </tr> <tr> <td style="border: 1px solid black; padding: 2px;">0 5 /</td> <td style="border: 1px solid black; padding: 2px;">0 1 /</td> <td style="border: 1px solid black; padding: 2px;">2 0 0 7</td> </tr> </table> Transaction ID: 20451922 Amount of Each Receipt this Period <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px; text-align: right;">100.00</div>	M M /	D D /	Y Y Y Y	0 5 /	0 1 /	2 0 0 7
M M /	D D /	Y Y Y Y					
0 5 /	0 1 /	2 0 0 7					

<b>C.</b> Full Name (Last, First, Middle Initial) MR HARVEY R R HAYNES Mailing Address PO BOX 1662 City State Zip Code HEREFORD AZ 85615-1662 FEC ID number of contributing federal political committee. <input style="width: 100px;" type="text" value="C"/> Name of Employer Occupation U.S. ARMY RETIRED Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px; text-align: right;">280.00</div>	Date of Receipt <table style="width: 100%; border-collapse: collapse;"> <tr> <td style="border: 1px solid black; padding: 2px;">M M /</td> <td style="border: 1px solid black; padding: 2px;">D D /</td> <td style="border: 1px solid black; padding: 2px;">Y Y Y Y</td> </tr> <tr> <td style="border: 1px solid black; padding: 2px;">0 5 /</td> <td style="border: 1px solid black; padding: 2px;">2 9 /</td> <td style="border: 1px solid black; padding: 2px;">2 0 0 7</td> </tr> </table> Transaction ID: 20451934 Amount of Each Receipt this Period <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px; text-align: right;">50.00</div>	M M /	D D /	Y Y Y Y	0 5 /	2 9 /	2 0 0 7
M M /	D D /	Y Y Y Y					
0 5 /	2 9 /	2 0 0 7					

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	<div style="border: 1px solid black; padding: 5px; display: inline-block; width: 150px; text-align: right;"><b>250.00</b></div>
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	<div style="border: 1px solid black; padding: 5px; display: inline-block; width: 150px;"></div>

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

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

FOR LINE NUMBER: PAGE 33 / 160

(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 MARVIN M BRYAN

Mailing Address 2560 E FAIRFIELD ST

City State Zip Code  
MESA AZ 85213-5305

FEC ID number of contributing federal political committee. C

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
230.00

Date of Receipt  
05 / 21 / 2007

**Transaction ID:** 20451959

Amount of Each Receipt this Period  
30.00

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

Mailing Address 8520 HANS ENGEL WAY

City State Zip Code  
FAIR OAKS CA 95628-6209

FEC ID number of contributing federal political committee. C

Name of Employer Occupation  
RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
260.00

Date of Receipt  
05 / 21 / 2007

**Transaction ID:** 20452002

Amount of Each Receipt this Period  
30.00

**C.** Full Name (Last, First, Middle Initial)  
MR ROBERT E POLLARD

Mailing Address 11150 S 1501 RD

City State Zip Code  
STOCKTON MO 65785-9164

FEC ID number of contributing federal political committee. C

Name of Employer Occupation  
UNITED AIR LINES AIRLINE PILOT

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
215.00

Date of Receipt  
05 / 21 / 2007

**Transaction ID:** 20452027

Amount of Each Receipt this Period  
50.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<span style="border: 1px solid black; padding: 2px;">110.00</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) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 34 / 160		
	<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

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

Full Name (Last, First, Middle Initial) <b>A.</b> MR MICHAEL GREGORY		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 0 1 / 2 0 0 7	
Mailing Address 2920 E 18TH ST		<b>Transaction ID:</b> 20452054	
City State Zip Code SIOUX FALLS SD 57103-3450	Amount of Each Receipt this Period 25.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer MENARDS	Occupation ELECTRICAL MANAGER		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 205.00		

Full Name (Last, First, Middle Initial) <b>B.</b> MR MICHAEL GREGORY		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 7 / 2 0 0 7	
Mailing Address 2920 E 18TH ST		<b>Transaction ID:</b> 20452057	
City State Zip Code SIOUX FALLS SD 57103-3450	Amount of Each Receipt this Period 30.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer MENARDS	Occupation ELECTRICAL MANAGER		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 235.00		

Full Name (Last, First, Middle Initial) <b>C.</b> RAEMAN AKINS		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 0 4 / 2 0 0 7	
Mailing Address 9371 BUR OAK PL		<b>Transaction ID:</b> 20452161	
City State Zip Code SALINAS CA 93907-1101	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer MONTEREY PENINSULA AIRPORT DIS	Occupation POLICE		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	155.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 35 / 160

(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 NICHOLAS J J BOVE

Mailing Address 6100 MAIN ST

City State Zip Code  
TRUMBULL CT 06611-2438

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

Name of Employer Occupation  
DIV OF CRIMINAL JUSTICE ASST. STATES ATT

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

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 5 / 2 1 / 2 0 0 7

Transaction ID: 20452167

Amount of Each Receipt this Period  
50.00

**B.** Full Name (Last, First, Middle Initial)  
MR HENRY L WELLS

Mailing Address 6018 MADRA AVE

City State Zip Code  
SAN DIEGO CA 92120-3944

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

Name of Employer Occupation  
RETIRED

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

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 5 / 2 2 / 2 0 0 7

Transaction ID: 20452308

Amount of Each Receipt this Period  
20.00

**C.** Full Name (Last, First, Middle Initial)  
LEE C GILSON

Mailing Address PO BOX 586

City State Zip Code  
SHERIDAN WY 82801-0586

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

Name of Employer Occupation  
MEMORIAL HOSPITAL OF SHERIDAN REGISTERED NURSE

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 220.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 5 / 2 9 / 2 0 0 7

Transaction ID: 20452312

Amount of Each Receipt this Period  
20.00

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

90.00

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 36 / 160
	(check only one)	
<input checked="" 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 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 N SIMS

Mailing Address 106 RUTH CV

City State Zip Code  
WHITE HALL AR 71602-2555

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

Name of Employer Occupation  
US ARMY EQUIPMENT SPECIALIST (EOD)

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
05 / 08 / 2007

**Transaction ID:** 20452327

Amount of Each Receipt this Period  
50.00

**B.** Full Name (Last, First, Middle Initial)  
MR LYLE W INGOLD

Mailing Address PO BOX 1378

City State Zip Code  
DUBOIS WY 82513-1378

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

Name of Employer Occupation  
CALIFORNIA DEPT OF FISH & GAME RETIRED

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt  
05 / 21 / 2007

**Transaction ID:** 20452368

Amount of Each Receipt this Period  
30.00

**C.** Full Name (Last, First, Middle Initial)  
GERRY O LANGLOIS

Mailing Address PO BOX 4386

City State Zip Code  
PALM DESERT CA 92261-4386

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

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

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 600.00

Date of Receipt  
05 / 29 / 2007

**Transaction ID:** 20452375

Amount of Each Receipt this Period  
100.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>180.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (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	PAGE 37 / 160
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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 ▼ 500.00

Date of Receipt  
05 / 01 / 2007

Transaction ID: 20452378

Amount of Each Receipt this Period  
100.00

**B.** Full Name (Last, First, Middle Initial)  
MR JOHN F ZIMMERMAN

Mailing Address 3350 VALLEY RD

City MARYSVILLE State PA Zip Code 17053-9518

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 ▼ 230.00

Date of Receipt  
05 / 18 / 2007

Transaction ID: 20452407

Amount of Each Receipt this Period  
30.00

**C.** Full Name (Last, First, Middle Initial)  
MR LUCIUS E E FORBES

Mailing Address 6302 W WALNUT ST

City YAKIMA State WA Zip Code 98908-3535

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

Name of Employer SELF EMPLOYED Occupation PSYCHOLOGIST

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 215.00

Date of Receipt  
05 / 24 / 2007

Transaction ID: 20452414

Amount of Each Receipt this Period  
30.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	160.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 38 / 160
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

<b>A.</b> Full Name (Last, First, Middle Initial) MR DAVID HOFFMAN		Date of Receipt <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>5</td><td></td><td>1</td><td>8</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	0	5		1	8		2	0	0	7
M	M	/	D	D	/	Y	Y	Y	Y														
0	5		1	8		2	0	0	7														
Mailing Address 1689 WILLOWBROOK LN		<b>Transaction ID:</b> 20452443																					
City SIMI VALLEY	State CA	Zip Code 93065-3344	Amount of Each Receipt this Period <table border="1"> <tr> <td>100.00</td> </tr> </table>	100.00																			
100.00																							
FEC ID number of contributing federal political committee. <b>C</b>																							
Name of Employer <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation RETIRED	Aggregate Year-to-Date ▼ <table border="1"> <tr> <td>250.00</td> </tr> </table>		250.00																			
250.00																							

<b>B.</b> Full Name (Last, First, Middle Initial) MR WILLIAM J J CRITCHFIELD		Date of Receipt <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>5</td><td></td><td>2</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	0	5		2	1		2	0	0	7
M	M	/	D	D	/	Y	Y	Y	Y														
0	5		2	1		2	0	0	7														
Mailing Address 21914 EVALYN AVE		<b>Transaction ID:</b> 20452486																					
City TORRANCE	State CA	Zip Code 90503-6953	Amount of Each Receipt this Period <table border="1"> <tr> <td>100.00</td> </tr> </table>	100.00																			
100.00																							
FEC ID number of contributing federal political committee. <b>C</b>																							
Name of Employer US, DOT FAA	Occupation LEAD AIRPORT/SAFETY	Aggregate Year-to-Date ▼ <table border="1"> <tr> <td>300.00</td> </tr> </table>		300.00																			
300.00																							
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																							

<b>C.</b> Full Name (Last, First, Middle Initial) MR RAYMOND MATTHEWS		Date of Receipt <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>5</td><td></td><td>2</td><td>2</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	0	5		2	2		2	0	0	7
M	M	/	D	D	/	Y	Y	Y	Y														
0	5		2	2		2	0	0	7														
Mailing Address 2700 SEVEN MILE WAY SE		<b>Transaction ID:</b> 20452501																					
City ALBANY	State OR	Zip Code 97322-7113	Amount of Each Receipt this Period <table border="1"> <tr> <td>50.00</td> </tr> </table>	50.00																			
50.00																							
FEC ID number of contributing federal political committee. <b>C</b>																							
Name of Employer TELEDYNE WAH CHANG ALBANY	Occupation TECHNICIAN	Aggregate Year-to-Date ▼ <table border="1"> <tr> <td>220.00</td> </tr> </table>		220.00																			
220.00																							
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																							

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<table border="1"> <tr> <td>250.00</td> </tr> </table>	250.00
250.00		
<b>TOTAL</b> This Period (last page this line number only) .....	<table border="1"> <tr> <td> </td> </tr> </table>	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 39 / 160
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	<input type="checkbox"/> 12
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

<b>A.</b> Full Name (Last, First, Middle Initial) MR ROBERT W HILL, JR Mailing Address 7706 MARVIN HILL RD City SPRINGWATER State NY Zip Code 14560-9722 FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 7 / 2 0 0 7 <b>Transaction ID: 20452563</b> Amount of Each Receipt this Period 50.00
Name of Employer GRAVER TECHNOLOGIES Occupation METAL FABRICATOR Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 225.00		

<b>B.</b> Full Name (Last, First, Middle Initial) MR JOSEPH M JAMES Mailing Address 2622 MIMOSA PL City WILMINGTON State NC Zip Code 28403-4056 FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 1 / 2 0 0 7 <b>Transaction ID: 20452564</b> Amount of Each Receipt this Period 30.00
Name of Employer Occupation RETIRED Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 230.00		

<b>C.</b> Full Name (Last, First, Middle Initial) LESLIE C ROBERTSON Mailing Address RR 2 BOX 8A City TOWER HILL State IL Zip Code 62571-9668 FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 9 / 2 0 0 7 <b>Transaction ID: 20452578</b> Amount of Each Receipt this Period 30.00
Name of Employer Occupation RETIRED Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 210.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>110.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 40 / 160

(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 GUILLARD

Mailing Address 282 RIVER RD

City State Zip Code  
BOOTHBAY ME 04537-4434

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

Name of Employer  
BIGELOW LAB FOR OCEAN SCI-ENCES  
Occupation  
OCEANOGRAPHER

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
190.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
05 / 29 / 2007

Transaction ID: 20452778

Amount of Each Receipt this Period  
40.00

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

Mailing Address 282 RIVER RD

City State Zip Code  
BOOTHBAY ME 04537-4434

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

Name of Employer  
BIGELOW LAB FOR OCEAN SCI-ENCES  
Occupation  
OCEANOGRAPHER

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
220.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
05 / 29 / 2007

Transaction ID: 20452779

Amount of Each Receipt this Period  
30.00

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

Mailing Address PO BOX 6847

City State Zip Code  
GREENVILLE SC 29606-6847

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

Name of Employer  
SELF EMPLOYED  
Occupation  
REAL ESTATE/INVESTME

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
05 / 03 / 2007

Transaction ID: 20452841

Amount of Each Receipt this Period  
50.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	120.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 41 / 160
	(check only one)	
<input checked="" 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 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)  
RAEMAN AKINS

Mailing Address 9371 BUR OAK PL

City State Zip Code  
SALINAS CA 93907-1101

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

Name of Employer Occupation  
MONTEREY PENINSULA AIRPORT DIS POLICE

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 5 / 2 2 / 2 0 0 7

Transaction ID: 20453035

Amount of Each Receipt this Period  
50.00

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

Mailing Address 2917 KENTUCKY AVE N

City State Zip Code  
MINNEAPOLIS MN 55427-2906

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

Name of Employer Occupation  
EATON CORP OFFICE CLERK

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 5 / 0 1 / 2 0 0 7

Transaction ID: 20453089

Amount of Each Receipt this Period  
100.00

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

Mailing Address 1102 15TH ST

City State Zip Code  
CLOQUET MN 55720-2661

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

Name of Employer Occupation  
US ARMY & STATE OF MINNES-OTA RETIRED

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 270.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 5 / 1 7 / 2 0 0 7

Transaction ID: 20453103

Amount of Each Receipt this Period  
30.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>180.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 42 / 160
	(check only one)	
<input checked="" 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 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 G TRUBISZ

Mailing Address 34 OLYMPIA ST

City PORT JEFFERSON STA State NY Zip Code 11776-1414

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

Name of Employer MIDDLE ISLAND SD 12 Occupation TEACHER

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
05 / 08 / 2007

Transaction ID: 20453246

Amount of Each Receipt this Period  
500.00

**B.** Full Name (Last, First, Middle Initial)  
MR RAYMOND D HAMILL

Mailing Address 5 HEATHER WAY

City NEWTOWN SQUARE State PA Zip Code 19073-3964

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 Y  
05 / 17 / 2007

Transaction ID: 20453285

Amount of Each Receipt this Period  
100.00

**C.** Full Name (Last, First, Middle Initial)  
MR DENNIS W KOHLOFF

Mailing Address 3430 126TH AVE NE

City BELLEVUE State WA Zip Code 98005-1342

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

Name of Employer WINDSOR PREMIER HOMES Occupation BUILDER

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
05 / 11 / 2007

Transaction ID: 20453291

Amount of Each Receipt this Period  
50.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	650.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 43 / 160
	(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 SHIVERS

Mailing Address PO BOX 962020

City State Zip Code  
FORT WORTH TX 76162-2020

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

Name of Employer Occupation  
SOUTHWEST BANK CEO - BANKER

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
1100.00

Date of Receipt  
MM / DD / YYYY  
05 / 03 / 2007

**Transaction ID:** 20453485

Amount of Each Receipt this Period  
100.00

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

Mailing Address 8179 S GATE AVE

City State Zip Code  
SOUTH GATE CA 90280-2228

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 ▼  
210.00

Date of Receipt  
MM / DD / YYYY  
05 / 22 / 2007

**Transaction ID:** 20453496

Amount of Each Receipt this Period  
50.00

**C.** Full Name (Last, First, Middle Initial)  
MR VERNON R R WIDERQUIST

Mailing Address 418 PEBBLEBROOK DR

City State Zip Code  
SEABROOK TX 77586-6013

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

Name of Employer Occupation  
TRW INC RETIRED

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
440.00

Date of Receipt  
MM / DD / YYYY  
05 / 22 / 2007

**Transaction ID:** 20453612

Amount of Each Receipt this Period  
30.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	180.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 44 / 160
	<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

Full Name (Last, First, Middle Initial) <b>A. MR MARVIN E E STOKELY</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 4 / 2 0 0 7
Mailing Address 455 POINTE VISTA DR		<b>Transaction ID: 20453701</b>
City State Zip Code ELIZABETH CITY NC 27909-7784	Amount of Each Receipt this Period 300.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Occupation RETIRED	Aggregate Year-to-Date ▼ 390.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>B. MR RICHARD E E JONES</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 9 / 2 0 0 7
Mailing Address PO BOX 427		<b>Transaction ID: 20453720</b>
City State Zip Code SILSBEE TX 77656-0427	Amount of Each Receipt this Period 30.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Occupation JONES ABBEY CARPET FLOORING DEALER	Aggregate Year-to-Date ▼ 230.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>C. MS MARCIA P LANE</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 9 / 2 0 0 7
Mailing Address 1449 W LINDSEY FERRY RD		<b>Transaction ID: 20453741</b>
City State Zip Code COLUMBUS MS 39701-9629	Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Occupation INVESTOR	Aggregate Year-to-Date ▼ 400.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	430.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

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

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

FOR LINE NUMBER: PAGE 45 / 160  
(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 A A A MARTINELLI

Mailing Address 3100 ADDISON CT

City State Zip Code  
BENSALEM PA 19020-1810

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

Name of Employer Occupation  
US NAVY ELECTRONICS

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

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 5 / 0 2 / 2 0 0 7

**Transaction ID:** 20453850

Amount of Each Receipt this Period  
200.00

**B.** Full Name (Last, First, Middle Initial)  
MR LARRY F DUGAN

Mailing Address 1106 DOVER ST

City State Zip Code  
CENTRALIA IL 62801-5064

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

Name of Employer Occupation  
BURLINGTON NORTHERN SANTA FE R TRUCK DRIVER

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

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 5 / 0 1 / 2 0 0 7

**Transaction ID:** 20453854

Amount of Each Receipt this Period  
100.00

**C.** Full Name (Last, First, Middle Initial)  
MR ROBERT A A QUIST

Mailing Address 9567 MEADOW LN

City State Zip Code  
JUNEAU AK 99801-9376

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

Name of Employer Occupation  
CITY BOROUGH OF JUNEAU CONTRACTS OFFICER

Receipt For: Aggregate Year-to-Date ▼  
 Primary    General  
 Other (specify) ▼ 275.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 5 / 0 8 / 2 0 0 7

**Transaction ID:** 20453895

Amount of Each Receipt this Period  
50.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 350.00

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

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

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

FOR LINE NUMBER: PAGE 46 / 160

(check only one)

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

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

<b>A.</b> Full Name (Last, First, Middle Initial) MR RICHARD M DERSHAM		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 2 / 2 0 0 7
Mailing Address 1420 CHEYENNE DR		<b>Transaction ID:</b> 20453932
City State Zip Code RICHARDSON TX 75080-3921	Amount of Each Receipt this Period 30.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer LEHMAN BROTHERS	Occupation SALESMAN	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 330.00	

<b>B.</b> Full Name (Last, First, Middle Initial) MR MATTHIAS E BACHMAN		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 4 / 2 0 0 7
Mailing Address PO BOX 493		<b>Transaction ID:</b> 20453944
City State Zip Code MIDLAND TX 79702-0493	Amount of Each Receipt this Period 30.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer SELF EMPLOYED	Occupation GEOLOGIST	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 330.00	

<b>C.</b> Full Name (Last, First, Middle Initial) MR JOSEPH P BENSON, JR		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 5 / 2 0 0 7
Mailing Address 527 TARA DR		<b>Transaction ID:</b> 20453990
City State Zip Code SAN ANTONIO TX 78216-3753	Amount of Each Receipt this Period 30.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer	Occupation RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 230.00	

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

90.00

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

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

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

FOR LINE NUMBER: PAGE 47 / 160

(check only one)

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

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

<b>A.</b> Full Name (Last, First, Middle Initial) MR BURKE JOHNSON		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 2 1 / 2 0 0 7	
Mailing Address PO BOX 563		<b>Transaction ID:</b> 20454061	
City CROWHEART	State WY	Zip Code 82512-0563	Amount of Each Receipt this Period 100.00
FEC ID number of contributing federal political committee. C			
Name of Employer SELF	Occupation RANCHER		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

<b>B.</b> Full Name (Last, First, Middle Initial) JAMES J PATE, PhD		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 2 1 / 2 0 0 7	
Mailing Address 10513 E NAVAJO PL		<b>Transaction ID:</b> 20454081	
City SUN LAKES	State AZ	Zip Code 85248-9203	Amount of Each Receipt this Period 75.00
FEC ID number of contributing federal political committee. C			
Name of Employer US ARMY	Occupation RETIRED		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 225.00		

<b>C.</b> Full Name (Last, First, Middle Initial) MR VANCE W PHILLIPS		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 2 2 / 2 0 0 7	
Mailing Address 7501 E THOMPSON PEAK PKWY UNIT		<b>Transaction ID:</b> 20454181	
City SCOTTSDALE	State AZ	Zip Code 85255-4544	Amount of Each Receipt this Period 100.00
FEC ID number of contributing federal political committee. C			
Name of Employer	Occupation RETIRED		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

**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)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 48 / 160

(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

<p><b>A.</b> Full Name (Last, First, Middle Initial) MR JAMES C FRITH</p> <p>Mailing Address 3201 BENNINGHOFEN AVE</p> <p>City State Zip Code HAMILTON OH 45015-1807</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer Occupation FORD MOTOR CO M/T</p> <p>Receipt For: Aggregate Year-to-Date ▼  <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼ 300.00</p>		<p>Date of Receipt  <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>5</td><td>/</td><td>0</td><td>1</td><td>/</td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table> <p><b>Transaction ID:</b> 20454225</p> <p>Amount of Each Receipt this Period 100.00</p> </p>	M	M	/	D	D	/	Y	Y	Y	Y	0	5	/	0	1	/	2	0	0	7
M	M	/	D	D	/	Y	Y	Y	Y													
0	5	/	0	1	/	2	0	0	7													

<p><b>B.</b> Full Name (Last, First, Middle Initial) MR C F LA BONTE, SR</p> <p>Mailing Address 1003 NORWOOD CT</p> <p>City State Zip Code SMYRNA TN 37167-5976</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer Occupation RETIRED RETIRED</p> <p>Receipt For: Aggregate Year-to-Date ▼  <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼ 600.00</p>		<p>Date of Receipt  <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>5</td><td>/</td><td>2</td><td>5</td><td>/</td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table> <p><b>Transaction ID:</b> 20454381</p> <p>Amount of Each Receipt this Period 100.00</p> </p>	M	M	/	D	D	/	Y	Y	Y	Y	0	5	/	2	5	/	2	0	0	7
M	M	/	D	D	/	Y	Y	Y	Y													
0	5	/	2	5	/	2	0	0	7													

<p><b>C.</b> Full Name (Last, First, Middle Initial) MR KYLE W W COX</p> <p>Mailing Address 4698 TEALTOWN RD</p> <p>City State Zip Code MILFORD OH 45150-9730</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer Occupation RETIRED RETIRED</p> <p>Receipt For: Aggregate Year-to-Date ▼  <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼ 210.00</p>		<p>Date of Receipt  <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>5</td><td>/</td><td>1</td><td>5</td><td>/</td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table> <p><b>Transaction ID:</b> 20454449</p> <p>Amount of Each Receipt this Period 30.00</p> </p>	M	M	/	D	D	/	Y	Y	Y	Y	0	5	/	1	5	/	2	0	0	7
M	M	/	D	D	/	Y	Y	Y	Y													
0	5	/	1	5	/	2	0	0	7													

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

**230.00**

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 49 / 160
	(check only one)	
<input checked="" 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 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 GEORGE DOMENICI

Mailing Address PO BOX 9493

City ALBUQUERQUE State NM Zip Code 87119-9493

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  
0 5 / 2 5 / 2 0 0 7

**Transaction ID:** 20454472

Amount of Each Receipt this Period  
50.00

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

Mailing Address 4189 W 1250 S

City KENTLAND State IN Zip Code 47951-8577

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

Name of Employer Occupation

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 5 / 3 0 / 2 0 0 7

**Transaction ID:** 20454511

Amount of Each Receipt this Period  
40.00

**C.** Full Name (Last, First, Middle Initial)  
MR J D GRAHAM

Mailing Address 85 HATHAWAY ROAD

City GOSHEN State VT Zip Code 05733-8436

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  
0 5 / 1 6 / 2 0 0 7

**Transaction ID:** 20454671

Amount of Each Receipt this Period  
75.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>165.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 50 / 160

(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)  
REVERE SAMPSON

Mailing Address 19 GALENA PL

City State Zip Code  
MOUND HOUSE NV 89706-7052

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 ▼  
280.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	5		0	4		2	0	0	7

Transaction ID: 20454676

Amount of Each Receipt this Period

50.00
-------

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
230.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	5		2	9		2	0	0	7

Transaction ID: 20454785

Amount of Each Receipt this Period

50.00
-------

**C.** Full Name (Last, First, Middle Initial)  
MR FRED S HOPSON

Mailing Address PO BOX 450254

City State Zip Code  
LAREDO TX 78041

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

Name of Employer SELF EMPLOYED Occupation BUY-SELL OIL & GAS PRODUCTION

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	5		0	1		2	0	0	7

Transaction ID: 20454795

Amount of Each Receipt this Period

100.00
--------

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

200.00

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 51 / 160
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

**A.** Full Name (Last, First, Middle Initial)  
MR HORTON S SPITZER

Mailing Address PO BOX 1307

City State Zip Code  
WILSON WY 83014-1307

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

Name of Employer SELF EMPLOYED Occupation EXECUTIVE

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
MM / DD / YYYY  
05 / 29 / 2007

Transaction ID: 20454914

Amount of Each Receipt this Period  
200.00

**B.** Full Name (Last, First, Middle Initial)  
MR IRA M STEIN

Mailing Address 3170 OAKWOOD CT

City State Zip Code  
YORKTOWN HEIGHTS NY 10598-2514

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

Name of Employer DISABLED Occupation DISABLED

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 450.00

Date of Receipt  
MM / DD / YYYY  
05 / 03 / 2007

Transaction ID: 20454933

Amount of Each Receipt this Period  
100.00

**C.** Full Name (Last, First, Middle Initial)  
MR RICHARD ARIEDA

Mailing Address 224 RESADA DR

City State Zip Code  
BREVARD NC 28712

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

Name of Employer NEW YORK STATE GOVERNMENT Occupation ENGINEER

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 222.12

Date of Receipt  
MM / DD / YYYY  
05 / 07 / 2007

Transaction ID: 20454971

Amount of Each Receipt this Period  
30.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>330.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

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

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

FOR LINE NUMBER: PAGE 52 / 160  
(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 STAN SIMPSON

Mailing Address 14765 RYAN ST

City State Zip Code  
SYLMAR CA 91342-3955

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

Name of Employer Occupation

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 5 / 2 3 / 2 0 0 7

**Transaction ID:** 20455136

Amount of Each Receipt this Period  
100.00

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

Mailing Address 224 RESADA DR

City State Zip Code  
BREVARD NC 28712

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

Name of Employer Occupation  
NEW YORK STATE GOVERNMENT ENGINEER

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 252.88

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 5 / 2 9 / 2 0 0 7

**Transaction ID:** 20455139

Amount of Each Receipt this Period  
30.76

**C.** Full Name (Last, First, Middle Initial)  
REVERE SAMPSON

Mailing Address 19 GALENA PL

City State Zip Code  
MOUND HOUSE NV 89706-7052

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 ▼ 310.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 5 / 2 1 / 2 0 0 7

**Transaction ID:** 20455187

Amount of Each Receipt this Period  
30.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **160.76**

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 53 / 160

(check only one)

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

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

**A.** Full Name (Last, First, Middle Initial)  
MR WILLIAM D THOMPSON

Mailing Address 126 OSTENBARKER ST

City State Zip Code  
MARYVILLE TN 37804-2424

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

Name of Employer Occupation  
US AIR FORCE RETIRED ELECTRICAL ENGINEER

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 210.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 5 / 1 8 / 2 0 0 7

**Transaction ID:** 20455214

Amount of Each Receipt this Period  
30.00

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

Mailing Address 29TH ST ON TH DELAWARE

City State Zip Code  
CAMDEN NJ 08105

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

Name of Employer Occupation  
EXPRESS MARINE, INC PRESIDENT

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

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 5 / 2 3 / 2 0 0 7

**Transaction ID:** 20455497

Amount of Each Receipt this Period  
100.00

**C.** Full Name (Last, First, Middle Initial)  
MR WAYNE CHOATE

Mailing Address PO BOX 1227

City State Zip Code  
MOUNTAIN VIEW AR 72560-1227

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

Name of Employer Occupation  
RETIRED

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

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 5 / 3 0 / 2 0 0 7

**Transaction ID:** 20455503

Amount of Each Receipt this Period  
50.00

**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)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 54 / 160  
 (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 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: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 250.00

Date of Receipt  
MM / DD / YYYY  
05 / 11 / 2007

**Transaction ID:** 20455535

Amount of Each Receipt this Period  
75.00

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

Mailing Address 745 S MERIDIAN RD

City State Zip Code  
MIDLAND MI 48640-7831

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

Name of Employer Occupation  
SELF EMPLOYED FARMER

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 570.00

Date of Receipt  
MM / DD / YYYY  
05 / 07 / 2007

**Transaction ID:** 20455566

Amount of Each Receipt this Period  
20.00

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

Mailing Address 1435 BELLEVUE AVE APT 306

City State Zip Code  
BURLINGAME CA 94010-3957

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

Name of Employer Occupation  
CITY OF SAN FRANCISCO RETIRED

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 325.00

Date of Receipt  
MM / DD / YYYY  
05 / 07 / 2007

**Transaction ID:** 20455626

Amount of Each Receipt this Period  
30.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 125.00

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 55 / 160

(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 B B VIENOT

Mailing Address 1435 BELLEVUE AVE APT 306

City State Zip Code  
BURLINGAME CA 94010-3957

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

Name of Employer Occupation  
CITY OF SAN FRANCISCO RETIRED

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 355.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 5 / 2 1 / 2 0 0 7

Transaction ID: 20455627

Amount of Each Receipt this Period  
30.00

**B.** Full Name (Last, First, Middle Initial)  
MR FREDERICK G WENNINGER

Mailing Address 1131 OAKWOOD MANOR DR

City State Zip Code  
HUBERTUS WI 53033-9505

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

Name of Employer Occupation  
RETIRED

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 800.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 5 / 2 5 / 2 0 0 7

Transaction ID: 20455681

Amount of Each Receipt this Period  
100.00

**C.** Full Name (Last, First, Middle Initial)  
MR WAYNE CHOATE

Mailing Address PO BOX 1227

City State Zip Code  
MOUNTAIN VIEW AR 72560-1227

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  
M M / D D / Y Y Y Y Y  
0 5 / 1 0 / 2 0 0 7

Transaction ID: 20455692

Amount of Each Receipt this Period  
100.00

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

230.00

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 56 / 160
	(check only one)	
<input checked="" 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 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) MURL W MARR Mailing Address PO BOX 98 City APACHE State OK Zip Code 73006-0098 FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>5</td><td></td><td>0</td><td>8</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table> Transaction ID: 20455704 Amount of Each Receipt this Period <table border="1"> <tr> <td colspan="2">100.00</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	5		0	8		2	0	0	7	100.00	
M	M	/	D	D	/	Y	Y	Y	Y															
0	5		0	8		2	0	0	7															
100.00																								
Name of Employer DOLESE BROTHERS CO. Occupation CLERK Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ <table border="1"> <tr> <td colspan="2">275.00</td> </tr> </table>		275.00																						
275.00																								

<b>B.</b> Full Name (Last, First, Middle Initial) MR ALVIN E SCHULTZ, JR Mailing Address N2707 6TH LN City HANCOCK State WI Zip Code 54943-7596 FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>5</td><td></td><td>1</td><td>4</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table> Transaction ID: 20455761 Amount of Each Receipt this Period <table border="1"> <tr> <td colspan="2">30.00</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	5		1	4		2	0	0	7	30.00	
M	M	/	D	D	/	Y	Y	Y	Y															
0	5		1	4		2	0	0	7															
30.00																								
Name of Employer Occupation RETIRED Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ <table border="1"> <tr> <td colspan="2">308.84</td> </tr> </table>		308.84																						
308.84																								

<b>C.</b> Full Name (Last, First, Middle Initial) MR ALVIN E SCHULTZ, JR Mailing Address N2707 6TH LN City HANCOCK State WI Zip Code 54943-7596 FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>5</td><td></td><td>1</td><td>0</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table> Transaction ID: 20455762 Amount of Each Receipt this Period <table border="1"> <tr> <td colspan="2">98.84</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	5		1	0		2	0	0	7	98.84	
M	M	/	D	D	/	Y	Y	Y	Y															
0	5		1	0		2	0	0	7															
98.84																								
Name of Employer Occupation RETIRED Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ <table border="1"> <tr> <td colspan="2">278.84</td> </tr> </table>		278.84																						
278.84																								

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	<b>228.84</b>
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 57 / 160
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

Full Name (Last, First, Middle Initial) <b>A. MR SEYMOUR R FOSTER</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 4 / 2 0 0 7
Mailing Address 3745 DARLINGTON RD N		Transaction ID: 20455770
City State Zip Code BLOOMFIELD MI 48301-2001	Amount of Each Receipt this Period 30.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Occupation RETIRED		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 360.00	

Full Name (Last, First, Middle Initial) <b>B. MR GEORGE A A REEVES</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 1 / 2 0 0 7
Mailing Address PO BOX 84		Transaction ID: 20455875
City State Zip Code WOLVERINE MI 49799-0084	Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Occupation STATE OF MICHIGAN FOREST TECHNICIAN		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 230.00	

Full Name (Last, First, Middle Initial) <b>C. MR LARRY HARRIS</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 3 / 2 0 0 7
Mailing Address 22 SANDY BEACH PARADISE		Transaction ID: 20455897
City State Zip Code LEMOYNE NE 69146-2508	Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Occupation RETIRED		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	230.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

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

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

FOR LINE NUMBER: PAGE 58 / 160

(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

Full Name (Last, First, Middle Initial) <b>A. MR ARTHUR H CHAFFEE</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 1 / 2 0 0 7
Mailing Address 2853 E 44TH PL N		Transaction ID: 20455930
City State Zip Code TULSA OK 74110-1314	Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer VISTCON, TULSA GLASS PLANT	Occupation ELECTRICIAN	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	

Full Name (Last, First, Middle Initial) <b>B. MR DAVID M SENN</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 0 / 2 0 0 7
Mailing Address 8101 WRENNS MILL RD		Transaction ID: 20455986
City State Zip Code SMITHFIELD VA 23430-3231	Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

Full Name (Last, First, Middle Initial) <b>C. MR SEYMOUR R FOSTER</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 7 / 2 0 0 7
Mailing Address 3745 DARLINGTON RD N		Transaction ID: 20456040
City State Zip Code BLOOMFIELD MI 48301-2001	Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer	Occupation RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 330.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	250.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	_____

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 59 / 160

(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 C VINGENT

Mailing Address PO BOX 7340

City State Zip Code  
AMARILLO TX 79114-7340

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

Name of Employer Occupation  
SELF EMPLOYED RANCHER

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 525.00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	5	/	2	1	/	2	0	0	7

**Transaction ID:** 20456079

Amount of Each Receipt this Period  

30.00
-------

**B.** Full Name (Last, First, Middle Initial)  
MR J W HILL

Mailing Address 27 STONYBROOK RD

City State Zip Code  
WEST CALDWELL NJ 07006-6927

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  

M	M	/	D	D	/	Y	Y	Y	Y
0	5	/	0	4	/	2	0	0	7

**Transaction ID:** 20456092

Amount of Each Receipt this Period  

100.00
--------

**C.** Full Name (Last, First, Middle Initial)  
MR ROBERT J J MESSERE

Mailing Address PO BOX 728

City State Zip Code  
NEW HOPE PA 18938-0728

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

Name of Employer Occupation  
NONE - RETIRED RETIRED

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 344.00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	5	/	2	1	/	2	0	0	7

**Transaction ID:** 20456168

Amount of Each Receipt this Period  

30.00
-------

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>160.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 60 / 160

(check only one)

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

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

<b>A.</b> Full Name (Last, First, Middle Initial) MR JOHN SEBER		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 2 3 / 2 0 0 7	
Mailing Address 632 BIRCH ST		<b>Transaction ID:</b> 20456226	
City State Zip Code JEANNETTE PA 15644-2807	Amount of Each Receipt this Period 45.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Occupation UN-EMPLOYED			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 235.00	

<b>B.</b> Full Name (Last, First, Middle Initial) MR ROBERT L ALTRATH		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 0 1 / 2 0 0 7	
Mailing Address 45 W FRANCIS ST		<b>Transaction ID:</b> 20456229	
City State Zip Code ISELIN NJ 08830-1152	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Occupation RETIRED			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 220.00	

<b>C.</b> Full Name (Last, First, Middle Initial) MR ROBERT GREER		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 7 / 2 0 0 7	
Mailing Address 4614 DENTON RD		<b>Transaction ID:</b> 20456243	
City State Zip Code CANTON MI 48188-2111	Amount of Each Receipt this Period 50.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Occupation RETIRED			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 275.00	

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

195.00

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 61 / 160

(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 W ENGGREN

Mailing Address 15 LAWRENCE AVENUE

City State Zip Code  
BAYVILLE NJ 08721-2013

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

Name of Employer Occupation  
LACEY TWP. D.P.W. EQUIPMENT OPERATOR

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 230.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
05 / 18 / 2007

Transaction ID: 20456273

Amount of Each Receipt this Period  
30.00

**B.** Full Name (Last, First, Middle Initial)  
MR DONALD R LEYH

Mailing Address 903 SHINHAM RD

City State Zip Code  
GREENCASTLE PA 17225-9723

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

Name of Employer Occupation  
RETIREED

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 210.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
05 / 17 / 2007

Transaction ID: 20456319

Amount of Each Receipt this Period  
30.00

**C.** Full Name (Last, First, Middle Initial)  
MR DONALD P REED

Mailing Address RR 1 BOX 61

City State Zip Code  
JAMES CREEK PA 16657-9516

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

Name of Employer Occupation  
PA DEPT OF CORRECTIONS FACILITY MAINT. MANAGER

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 620.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
05 / 17 / 2007

Transaction ID: 20456371

Amount of Each Receipt this Period  
100.00

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

160.00

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 62 / 160  
(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 DONALD P REED

Mailing Address RR 1 BOX 61

City State Zip Code  
**JAMES CREEK PA 16657-9516**

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

Name of Employer Occupation  
PA DEPT OF CORRECTIONS FACILITY MAINT. MANAGER

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **520.00**

Date of Receipt  
MM / DD / YYYY  
**05 / 14 / 2007**

**Transaction ID: 20456393**

Amount of Each Receipt this Period  
**120.00**

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

Mailing Address 501 SAINT LAURENT CT

City State Zip Code  
**SOUTHLAKE TX 76092-5874**

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

Name of Employer Occupation

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **2000.00**

Date of Receipt  
MM / DD / YYYY  
**05 / 01 / 2007**

**Transaction ID: 20456454**

Amount of Each Receipt this Period  
**1000.00**

**C.** Full Name (Last, First, Middle Initial)  
MR ROBERT J J MESSERE

Mailing Address PO BOX 728

City State Zip Code  
**NEW HOPE PA 18938-0728**

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

Name of Employer Occupation  
NONE - RETIRED RETIRED

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **314.00**

Date of Receipt  
MM / DD / YYYY  
**05 / 04 / 2007**

**Transaction ID: 20456537**

Amount of Each Receipt this Period  
**50.00**

**SUBTOTAL** of Receipts This Page (optional) ..... ► **1170.00**

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 63 / 160

(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 JOSHUA D HOUSEKNECHT

Mailing Address 13 MAPLE ST

City State Zip Code  
SCOTTSVILLE NY 14546-1222

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

Name of Employer  
CROSMVALEO ELECTRICAL SY-STEMS

Occupation  
MACHINE OPERATOR

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
240.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	5		2	1		2	0	0	7

Transaction ID: 20456650

Amount of Each Receipt this Period

30.00
-------

**B.** Full Name (Last, First, Middle Initial)  
MR RALPH ST JOHN

Mailing Address CO ST JOHN ENTERPRISES  
12736 NORTHERN BLVD

City State Zip Code  
FLUSHING NY 11368-1520

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

Name of Employer  
ST. JOHNS ENTERPRISES, IN-C.

Occupation  
OPERATING ENGINEER

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
390.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	5		2	1		2	0	0	7

Transaction ID: 20456676

Amount of Each Receipt this Period

50.00
-------

**C.** Full Name (Last, First, Middle Initial)  
MR JESS W W OREN, III

Mailing Address 958 LETORT RD

City State Zip Code  
WASHINGTON BORO PA 17582-9614

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

Name of Employer  
ARMSTRONG WORLD INDUSTRIES

Occupation  
ENGINEER

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
235.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	5		1	4		2	0	0	7

Transaction ID: 20456794

Amount of Each Receipt this Period

50.00
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**SUBTOTAL** of Receipts This Page (optional) ..... ►

130.00
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**TOTAL** This Period (last page this line number only) ..... ►

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# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 64 / 160
	<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 C PARKER, JR

Mailing Address PO BOX 357

City State Zip Code  
PATRICK SC 29584-0357

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

Name of Employer Occupation  
METAL WOOD & WATER INC PRESIDENT

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 230.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 5 / 0 3 / 2 0 0 7

**Transaction ID:** 20456845

Amount of Each Receipt this Period  
30.00

**B.** Full Name (Last, First, Middle Initial)  
MR DONALD F GILLESPIE

Mailing Address 1913 N 44TH PL

City State Zip Code  
PHOENIX AZ 85008-4101

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

Name of Employer Occupation

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 5 / 2 1 / 2 0 0 7

**Transaction ID:** 20456846

Amount of Each Receipt this Period  
500.00

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

Mailing Address PO BOX 217

City State Zip Code  
CENTER LOVELL ME 04016-0217

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

Name of Employer Occupation  
HARFORD CO PUBLIC SCHOOLS TEACHER

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 270.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 5 / 1 8 / 2 0 0 7

**Transaction ID:** 20456868

Amount of Each Receipt this Period  
50.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	580.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 65 / 160
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

**A.** Full Name (Last, First, Middle Initial)  
MR DAVID M M EVANS

Mailing Address PO BOX 217

City State Zip Code  
CENTER LOVELL ME 04016-0217

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

Name of Employer Occupation  
HARFORD CO PUBLIC SCHOOLS TEACHER

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 220.00

Date of Receipt  
05 / 01 / 2007

Transaction ID: 20456894

Amount of Each Receipt this Period  
50.00

**B.** Full Name (Last, First, Middle Initial)  
MR DAVID J MORGENSTERN

Mailing Address 100 SOUTH ALMAR DR

City State Zip Code  
WILTON MANORS FL 33334-1051

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

Name of Employer Occupation  
BUSSINESS OWNER

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 660.00

Date of Receipt  
05 / 03 / 2007

Transaction ID: 20456896

Amount of Each Receipt this Period  
60.00

**C.** Full Name (Last, First, Middle Initial)  
MR JAMES F VAN VALKENBURG

Mailing Address 535 GRADYVILLE RD # B125

City State Zip Code  
NEWTOWN SQUARE PA 19073-2815

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

Name of Employer Occupation  
RETIRED

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1800.00

Date of Receipt  
05 / 21 / 2007

Transaction ID: 20457127

Amount of Each Receipt this Period  
500.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	610.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: <span style="float: right;">PAGE 66 / 160</span> (check only one) <input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)  
National Rifle Association of America Political Victory Fund

<b>A.</b> Full Name (Last, First, Middle Initial) MR FORREST MINGES, JR Mailing Address 1002 BERRY HILL RD <hr/> City State Zip Code NEW BERN NC 28562-8351 <hr/> FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span> <hr/> Name of Employer Occupation SELF EMPLOYED PRIVATE INVESTOR <hr/> Receipt For: Aggregate Year-to-Date ▼ <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ <span style="border: 1px solid black; padding: 2px;">230.00</span>	Date of Receipt <table border="1" style="width: 100%;"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>5</td><td>/</td><td>1</td><td>0</td><td>/</td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table> Transaction ID: 20457162 <hr/> Amount of Each Receipt this Period <span style="border: 1px solid black; padding: 2px; display: block; text-align: right;">100.00</span>	M	M	/	D	D	/	Y	Y	Y	Y	0	5	/	1	0	/	2	0	0	7
M	M	/	D	D	/	Y	Y	Y	Y												
0	5	/	1	0	/	2	0	0	7												

<b>B.</b> Full Name (Last, First, Middle Initial) MR FORREST MINGES, JR Mailing Address 1002 BERRY HILL RD <hr/> City State Zip Code NEW BERN NC 28562-8351 <hr/> FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span> <hr/> Name of Employer Occupation SELF EMPLOYED PRIVATE INVESTOR <hr/> Receipt For: Aggregate Year-to-Date ▼ <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ <span style="border: 1px solid black; padding: 2px;">260.00</span>	Date of Receipt <table border="1" style="width: 100%;"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>5</td><td>/</td><td>1</td><td>7</td><td>/</td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table> Transaction ID: 20457163 <hr/> Amount of Each Receipt this Period <span style="border: 1px solid black; padding: 2px; display: block; text-align: right;">30.00</span>	M	M	/	D	D	/	Y	Y	Y	Y	0	5	/	1	7	/	2	0	0	7
M	M	/	D	D	/	Y	Y	Y	Y												
0	5	/	1	7	/	2	0	0	7												

<b>C.</b> Full Name (Last, First, Middle Initial) MR ED WALSH Mailing Address 1112 BELVEDERE RD <hr/> City State Zip Code GARNET VALLEY PA 19061-1523 <hr/> FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span> <hr/> Name of Employer Occupation RETIRED <hr/> Receipt For: Aggregate Year-to-Date ▼ <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ <span style="border: 1px solid black; padding: 2px;">300.00</span>	Date of Receipt <table border="1" style="width: 100%;"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>5</td><td>/</td><td>1</td><td>8</td><td>/</td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table> Transaction ID: 20457194 <hr/> Amount of Each Receipt this Period <span style="border: 1px solid black; padding: 2px; display: block; text-align: right;">100.00</span>	M	M	/	D	D	/	Y	Y	Y	Y	0	5	/	1	8	/	2	0	0	7
M	M	/	D	D	/	Y	Y	Y	Y												
0	5	/	1	8	/	2	0	0	7												

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	<span style="border: 1px solid black; padding: 2px; display: block;">230.00</span>
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

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

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

FOR LINE NUMBER: PAGE 67 / 160

(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)  
CDR ALLEN B HEADLEY

Mailing Address 4985 PRIETO DR

City State Zip Code  
PENSACOLA FL 32506-5365

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

Name of Employer Occupation  
RETIREED

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt

M M / D D / Y Y Y Y  
0 5 / 2 2 / 2 0 0 7

Transaction ID: 20457290

Amount of Each Receipt this Period

50.00

**B.** Full Name (Last, First, Middle Initial)  
L KIRK

Mailing Address 6 HUNTER DR

City State Zip Code  
BEL AIR MD 21014-3934

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

Name of Employer Occupation  
RETIREED

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 210.00

Date of Receipt

M M / D D / Y Y Y Y  
0 5 / 1 1 / 2 0 0 7

Transaction ID: 20457311

Amount of Each Receipt this Period

30.00

**C.** Full Name (Last, First, Middle Initial)  
MR TOMMY WORD

Mailing Address 4300 NW 23RD AVE  
SUITE 37

City State Zip Code  
GAINESVILLE FL 32606-6541

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

Name of Employer Occupation  
FLORIDA CITIZENS BANK BANKER

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 210.00

Date of Receipt

M M / D D / Y Y Y Y  
0 5 / 1 5 / 2 0 0 7

Transaction ID: 20457341

Amount of Each Receipt this Period

30.00

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

110.00

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 68 / 160  
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
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NAME OF COMMITTEE (In Full)  
National Rifle Association of America Political Victory Fund

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

Mailing Address 433 DOVER AVE

City State Zip Code  
LA GRANGE PARK IL 60526-1706

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

Name of Employer Occupation  
SELF ATTORNEY

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 550.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 5 / 2 1 / 2 0 0 7

**Transaction ID: 20457429**

Amount of Each Receipt this Period  
50.00

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

Mailing Address 20908 MANDRAKE DR

City State Zip Code  
PFLUGERVILLE TX 78660-7768

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

Name of Employer Occupation  
ELECTRO-MOTIVE DIV., G.M. ENGINE ASSEMBLY

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 500.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 5 / 2 9 / 2 0 0 7

**Transaction ID: 20457438**

Amount of Each Receipt this Period  
100.00

**C.** Full Name (Last, First, Middle Initial)  
MR ED JUTH

Mailing Address 1671 OAK RIDGE DR

City State Zip Code  
CORINTH TX 76210-3044

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

Name of Employer Occupation  
METRO FIRE INC MANAGER

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 200.39

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 5 / 2 2 / 2 0 0 7

**Transaction ID: 20457604**

Amount of Each Receipt this Period  
30.00

**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) or each category of the Detailed Summary Page	FOR LINE NUMBER: <input type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	PAGE 69 / 160
	(check only one)	
	<input checked="" type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

<b>A.</b> Full Name (Last, First, Middle Initial) MR ZANE JONES		Date of Receipt M M / D D / Y Y Y Y Y 05 / 08 / 2007	
Mailing Address 3320 THORNTON LN # N5		<b>Transaction ID:</b> 20457638	
City State Zip Code TEMPLE TX 76502-1763	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer ALBERTSONS, INC.	Occupation PHARMACIST		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00		

<b>B.</b> Full Name (Last, First, Middle Initial) MR CECIL D SULLIVAN		Date of Receipt M M / D D / Y Y Y Y Y 05 / 21 / 2007	
Mailing Address 2479 VICTORY CHURCH RD		<b>Transaction ID:</b> 20457751	
City State Zip Code BOWBON GA 30108	Amount of Each Receipt this Period 30.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer FEDERAL AVIATION ADMINIST-RATIO	Occupation RETIRED		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00		

<b>C.</b> Full Name (Last, First, Middle Initial) MR WILLIAM F BOWLES		Date of Receipt M M / D D / Y Y Y Y Y 05 / 29 / 2007	
Mailing Address 1910 N CARRIER PKWY		<b>Transaction ID:</b> 20457769	
City State Zip Code GRAND PRAIRIE TX 75050-1801	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer SELF EMPLOYED	Occupation ATTORNEY		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	230.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (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	PAGE 70 / 160
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NAME OF COMMITTEE (In Full)  
National Rifle Association of America Political Victory Fund

<b>A.</b> Full Name (Last, First, Middle Initial) MR RICHARD J RODGERS Mailing Address 540 DUPONT ST City PHILADELPHIA State PA Zip Code 19128-2612 FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 0 / 2 0 0 7 <b>Transaction ID: 20457897</b> Amount of Each Receipt this Period 50.00
Name of Employer SPS TECHNOLOGIES Occupation MACHINIST Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 315.00	

<b>B.</b> Full Name (Last, First, Middle Initial) MR STANLEY E SWENSON Mailing Address PO BOX 97 City LEE State IL Zip Code 60530-0097 FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 1 / 2 0 0 7 <b>Transaction ID: 20457910</b> Amount of Each Receipt this Period 50.00
Name of Employer AT&T COMMUNICATONS Occupation COMM TECH Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

<b>C.</b> Full Name (Last, First, Middle Initial) MR DEWITT C COLE Mailing Address 3660 VELMA DR City POWDER SPRINGS State GA Zip Code 30127-1353 FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 3 0 / 2 0 0 7 <b>Transaction ID: 20457944</b> Amount of Each Receipt this Period 50.00
Name of Employer NOT EMPLOYED Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>150.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 71 / 160
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	<input type="checkbox"/> 12
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

Full Name (Last, First, Middle Initial) <b>A. MR DAN MCLEAN</b>		Date of Receipt M M / D D / Y Y Y Y 05 / 14 / 2007
Mailing Address 1212 CLIFFSPRING CT		<b>Transaction ID: 20457948</b>
City State Zip Code WINSTON SALEM NC 27104-1224	Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Occupation	Aggregate Year-to-Date ▼ 250.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>B. MR CECIL D SULLIVAN</b>		Date of Receipt M M / D D / Y Y Y Y 05 / 18 / 2007
Mailing Address 2479 VICTORY CHURCH RD		<b>Transaction ID: 20457977</b>
City State Zip Code BOWBON GA 30108	Amount of Each Receipt this Period 30.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Occupation FEDERAL AVIATION ADMINIST-RATIO RETIRED	Aggregate Year-to-Date ▼ 220.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>C. MR LELAND F BRUBAKER</b>		Date of Receipt M M / D D / Y Y Y Y 05 / 04 / 2007
Mailing Address 4229 WESTLETON CT		<b>Transaction ID: 20458212</b>
City State Zip Code COLUMBUS OH 43221-4930	Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Occupation	Aggregate Year-to-Date ▼ 250.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	380.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 72 / 160
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

A. Full Name (Last, First, Middle Initial) MR STEVE ROBINSON		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 3 / 2 0 0 7
Mailing Address PO BOX 2336		Transaction ID: 20458260
City ROME	State GA	Zip Code 30164-2336
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 100.00	
Name of Employer RETIRED	Occupation RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

B. Full Name (Last, First, Middle Initial) R A ODOM		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 1 / 2 0 0 7
Mailing Address 1546 NEELYS BEND RD		Transaction ID: 20458328
City MADISON	State TN	Zip Code 37115-5610
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 500.00	
Name of Employer	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 700.00	

C. Full Name (Last, First, Middle Initial) MR EMMET C QUILL		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 5 / 2 0 0 7
Mailing Address 3609 PARKRIDGE DR		Transaction ID: 20458374
City RAPID CITY	State SD	Zip Code 57702-0503
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 50.00	
Name of Employer US AIR FORCE	Occupation RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 340.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	650.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

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

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

FOR LINE NUMBER: PAGE 73 / 160

(check only one)

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

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

<b>A.</b> Full Name (Last, First, Middle Initial) MR EUGENE T BLACKBURN		Date of Receipt M M / D D / Y Y Y Y Y 05 / 14 / 2007	
Mailing Address PO BOX 88		<b>Transaction ID:</b> 20458505	
City TAYLORSVILLE	State KY	Zip Code 40071-0088	Amount of Each Receipt this Period 200.00
FEC ID number of contributing federal political committee. C			
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Occupation Aggregate Year-to-Date ▼ 461.38	

<b>B.</b> Full Name (Last, First, Middle Initial) MR DELBERT T JOHNSTON, JR		Date of Receipt M M / D D / Y Y Y Y Y 05 / 21 / 2007	
Mailing Address 8027 E WILLIAMS DR		<b>Transaction ID:</b> 20458609	
City SCOTTSDALE	State AZ	Zip Code 85255-4910	Amount of Each Receipt this Period 50.00
FEC ID number of contributing federal political committee. C			
Name of Employer THE MARKETING PRO'S, INC. Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Occupation MANUFACTURERS AGENT Aggregate Year-to-Date ▼ 250.00	

<b>C.</b> Full Name (Last, First, Middle Initial) MR LLOYD E BRANE		Date of Receipt M M / D D / Y Y Y Y Y 05 / 08 / 2007	
Mailing Address 1706 E 300 N		<b>Transaction ID:</b> 20458897	
City HARTFORD CITY	State IN	Zip Code 47348-9067	Amount of Each Receipt this Period 50.00
FEC ID number of contributing federal political committee. C			
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Occupation RETIRED Aggregate Year-to-Date ▼ 230.00	

**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) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 74 / 160
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

**A.** Full Name (Last, First, Middle Initial)  
MR LLOYD E BRANE

Mailing Address 1706 E 300 N

City State Zip Code  
HARTFORD CITY IN 47348-9067

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

Name of Employer Occupation  
RETIREED

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
260.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 5 / 1 4 / 2 0 0 7

**Transaction ID:** 20458898

Amount of Each Receipt this Period  
30.00

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

Mailing Address 2727 E 86TH ST STE 230

City State Zip Code  
INDIANAPOLIS IN 46240-4350

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

Name of Employer Occupation  
HARRY GAUNT JEWELER

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 5 / 0 7 / 2 0 0 7

**Transaction ID:** 20458989

Amount of Each Receipt this Period  
100.00

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

Mailing Address 341 CROWN RD

City State Zip Code  
WEATHERFORD TX 76087-9065

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

Name of Employer Occupation  
RETIREED

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
235.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 5 / 2 2 / 2 0 0 7

**Transaction ID:** 20459153

Amount of Each Receipt this Period  
30.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>160.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: <span style="float: right;">PAGE 75 / 160</span> (check only one)								
	<table style="width: 100%; border-collapse: collapse;"> <tr> <td style="text-align: center;"><input checked="" type="checkbox"/> 11a</td> <td style="text-align: center;"><input type="checkbox"/> 11b</td> <td style="text-align: center;"><input type="checkbox"/> 11c</td> <td style="text-align: center;"><input type="checkbox"/> 12</td> </tr> <tr> <td style="text-align: center;"><input type="checkbox"/> 13</td> <td style="text-align: center;"><input type="checkbox"/> 14</td> <td style="text-align: center;"><input type="checkbox"/> 15</td> <td style="text-align: center;"><input type="checkbox"/> 16 <input type="checkbox"/> 17</td> </tr> </table>	<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
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12						
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17						

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

<b>A.</b> Full Name (Last, First, Middle Initial) MR GREG POTNICK Mailing Address 1508 FERNWOOD ST City State Zip Code WEST SACRAMENTO CA 95691-3665 FEC ID number of contributing federal political committee. <b>C</b>	Date of Receipt <table style="width: 100%; border-collapse: collapse;"> <tr> <td style="text-align: center;">M M / D D / Y Y Y Y</td> </tr> <tr> <td style="text-align: center;">0 5 / 2 9 / 2 0 0 7</td> </tr> </table> Transaction ID: 20459172 Amount of Each Receipt this Period <table style="width: 100%; border-collapse: collapse;"> <tr> <td style="text-align: right; padding-right: 20px;">50.00</td> </tr> </table>	M M / D D / Y Y Y Y	0 5 / 2 9 / 2 0 0 7	50.00
M M / D D / Y Y Y Y				
0 5 / 2 9 / 2 0 0 7				
50.00				
Name of Employer Occupation STATE OF CALIFORNIA PAROLEAGENT Receipt For: Aggregate Year-to-Date ▼ <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ <table style="width: 100%; border-collapse: collapse;"> <tr> <td style="text-align: right; padding-right: 20px;">400.00</td> </tr> </table>	400.00			
400.00				

<b>B.</b> Full Name (Last, First, Middle Initial) MR K C WALDO, JR Mailing Address PO BOX 6746 City State Zip Code CLEVELAND OH 44101-1746 FEC ID number of contributing federal political committee. <b>C</b>	Date of Receipt <table style="width: 100%; border-collapse: collapse;"> <tr> <td style="text-align: center;">M M / D D / Y Y Y Y</td> </tr> <tr> <td style="text-align: center;">0 5 / 2 1 / 2 0 0 7</td> </tr> </table> Transaction ID: 20459237 Amount of Each Receipt this Period <table style="width: 100%; border-collapse: collapse;"> <tr> <td style="text-align: right; padding-right: 20px;">75.00</td> </tr> </table>	M M / D D / Y Y Y Y	0 5 / 2 1 / 2 0 0 7	75.00
M M / D D / Y Y Y Y				
0 5 / 2 1 / 2 0 0 7				
75.00				
Name of Employer Occupation SHERWIN WILLIAMS CHEMIST Receipt For: Aggregate Year-to-Date ▼ <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ <table style="width: 100%; border-collapse: collapse;"> <tr> <td style="text-align: right; padding-right: 20px;">390.00</td> </tr> </table>	390.00			
390.00				

<b>C.</b> Full Name (Last, First, Middle Initial) MR ALAN VAN EES Mailing Address 435 E 79TH ST City State Zip Code NEW YORK NY 10021-1034 FEC ID number of contributing federal political committee. <b>C</b>	Date of Receipt <table style="width: 100%; border-collapse: collapse;"> <tr> <td style="text-align: center;">M M / D D / Y Y Y Y</td> </tr> <tr> <td style="text-align: center;">0 5 / 0 4 / 2 0 0 7</td> </tr> </table> Transaction ID: 20459271 Amount of Each Receipt this Period <table style="width: 100%; border-collapse: collapse;"> <tr> <td style="text-align: right; padding-right: 20px;">50.00</td> </tr> </table>	M M / D D / Y Y Y Y	0 5 / 0 4 / 2 0 0 7	50.00
M M / D D / Y Y Y Y				
0 5 / 0 4 / 2 0 0 7				
50.00				
Name of Employer Occupation NEW YORK STATE COURTS PEACE OFFICER Receipt For: Aggregate Year-to-Date ▼ <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ <table style="width: 100%; border-collapse: collapse;"> <tr> <td style="text-align: right; padding-right: 20px;">250.00</td> </tr> </table>	250.00			
250.00				

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	<table style="width: 100%; border-collapse: collapse;"> <tr> <td style="text-align: right; padding-right: 20px;">175.00</td> </tr> </table>	175.00
175.00		
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	<table style="width: 100%; border-collapse: collapse;"> <tr> <td style="text-align: right; padding-right: 20px;"> </td> </tr> </table>	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: <span style="border: 1px solid black; padding: 2px;">PAGE 76 / 160</span>
	(check only one)
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
<input type="checkbox"/> 13	<input type="checkbox"/> 14
<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15
	<input type="checkbox"/> 16
	<input type="checkbox"/> 17

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

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

<b>A.</b> Full Name (Last, First, Middle Initial) MR ALAN VAN EES Mailing Address 435 E 79TH ST City State Zip Code NEW YORK NY 10021-1034 FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span>	Date of Receipt <table border="1" style="width: 100%; text-align: center;"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>5</td><td></td><td>2</td><td>9</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table> Transaction ID: 20459272 Amount of Each Receipt this Period <div style="border: 1px solid black; padding: 5px; text-align: right;">50.00</div>	M	M	/	D	D	/	Y	Y	Y	Y	0	5		2	9		2	0	0	7
M	M	/	D	D	/	Y	Y	Y	Y												
0	5		2	9		2	0	0	7												
Name of Employer Occupation NEW YORK STATE COURTS PEACE OFFICER Receipt For: Aggregate Year-to-Date ▼ <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ <span style="border: 1px solid black; padding: 2px;">300.00</span>																					

<b>B.</b> Full Name (Last, First, Middle Initial) MR ARTHUR D WEEKS Mailing Address 11 CANOPUS HOLLOW RD City State Zip Code PUTNAM VALLEY NY 10579-1804 FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span>	Date of Receipt <table border="1" style="width: 100%; text-align: center;"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>5</td><td></td><td>1</td><td>7</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table> Transaction ID: 20459281 Amount of Each Receipt this Period <div style="border: 1px solid black; padding: 5px; text-align: right;">50.00</div>	M	M	/	D	D	/	Y	Y	Y	Y	0	5		1	7		2	0	0	7
M	M	/	D	D	/	Y	Y	Y	Y												
0	5		1	7		2	0	0	7												
Name of Employer Occupation ARTHUR WEEKS & SONS, INC. OWNER-RETIRED Receipt For: Aggregate Year-to-Date ▼ <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ <span style="border: 1px solid black; padding: 2px;">270.00</span>																					

<b>C.</b> Full Name (Last, First, Middle Initial) MR GLEN CHESSHIR Mailing Address 3941 CEDARBRUSH DR City State Zip Code DALLAS TX 75229-2704 FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span>	Date of Receipt <table border="1" style="width: 100%; text-align: center;"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>5</td><td></td><td>2</td><td>9</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table> Transaction ID: 20459365 Amount of Each Receipt this Period <div style="border: 1px solid black; padding: 5px; text-align: right;">30.00</div>	M	M	/	D	D	/	Y	Y	Y	Y	0	5		2	9		2	0	0	7
M	M	/	D	D	/	Y	Y	Y	Y												
0	5		2	9		2	0	0	7												
Name of Employer Occupation CHESSHIR STONE & ROCK SUP-PLY OWNER Receipt For: Aggregate Year-to-Date ▼ <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ <span style="border: 1px solid black; padding: 2px;">335.00</span>																					

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	<div style="border: 1px solid black; padding: 5px; text-align: right;">130.00</div>
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	<div style="border: 1px solid black; padding: 5px; text-align: right;"> </div>

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 77 / 160

(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 K C WALDO, JR

Mailing Address PO BOX 6746

City State Zip Code  
CLEVELAND OH 44101-1746

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

Name of Employer Occupation  
SHERWIN WILLIAMS CHEMIST

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 315.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	5		1	5		2	0	0	7

Transaction ID: 20459370

Amount of Each Receipt this Period

75.00

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

Mailing Address 734 MANOR DR

City State Zip Code  
RENO NV 89509-1943

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

Name of Employer Occupation  
NONE RETIRED

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	5		2	1		2	0	0	7

Transaction ID: 20459420

Amount of Each Receipt this Period

50.00

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

Mailing Address 734 MANOR DR

City State Zip Code  
RENO NV 89509-1943

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

Name of Employer Occupation  
NONE RETIRED

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 450.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	5		0	4		2	0	0	7

Transaction ID: 20459421

Amount of Each Receipt this Period

100.00

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

225.00

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 78 / 160
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

**A.** Full Name (Last, First, Middle Initial)  
MR DAVID M BAREFOOT

Mailing Address 4404 PALM GREENE RD

City State Zip Code  
WAXHAW NC 28173

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

Name of Employer Occupation  
BAREFOOT & CO., INC. RESIDENTIAL CONST SUPPLIER

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

Date of Receipt  
M M / D D / Y Y Y Y  
05 / 14 / 2007

Transaction ID: 20459433

Amount of Each Receipt this Period  
300.00

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

Mailing Address 1904 S ARMSTRONG ST

City State Zip Code  
KOKOMO IN 46902-2080

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

Name of Employer Occupation  
NONE RETIRED

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 210.00

Date of Receipt  
M M / D D / Y Y Y Y  
05 / 07 / 2007

Transaction ID: 20459564

Amount of Each Receipt this Period  
50.00

**C.** Full Name (Last, First, Middle Initial)  
MR PHILLIP SATTERTHWAITE

Mailing Address 1904 S ARMSTRONG ST

City State Zip Code  
KOKOMO IN 46902-2080

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

Name of Employer Occupation  
NONE RETIRED

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

Date of Receipt  
M M / D D / Y Y Y Y  
05 / 14 / 2007

Transaction ID: 20459565

Amount of Each Receipt this Period  
30.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>380.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: <input type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	PAGE 79 / 160
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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) MAZIE HECKER Mailing Address 8009 HIGHWAY 311 City State Zip Code SELLERSBURG IN 47172-1824 FEC ID number of contributing federal political committee. <b>C</b>	Date of Receipt <table border="1" style="width: 100%; text-align: center;"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>5</td><td></td><td>1</td><td>7</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table> Transaction ID: 20459602 Amount of Each Receipt this Period <table border="1" style="width: 100%; text-align: right;"> <tr> <td style="width: 80%;"></td> <td style="width: 20%;">30.00</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	5		1	7		2	0	0	7		30.00
M	M	/	D	D	/	Y	Y	Y	Y														
0	5		1	7		2	0	0	7														
	30.00																						
Name of Employer Occupation Name of Employer Occupation HOMEMAKER Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ <table border="1" style="width: 100%; text-align: right;"> <tr> <td style="width: 80%;"></td> <td style="width: 20%;">230.00</td> </tr> </table>		230.00																					
	230.00																						

<b>B.</b> Full Name (Last, First, Middle Initial) MR PETER LAVERDIERE Mailing Address 88 BLACK ISLAND RD City State Zip Code OXFORD ME 04270-4815 FEC ID number of contributing federal political committee. <b>C</b>	Date of Receipt <table border="1" style="width: 100%; text-align: center;"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>5</td><td></td><td>0</td><td>3</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table> Transaction ID: 20459701 Amount of Each Receipt this Period <table border="1" style="width: 100%; text-align: right;"> <tr> <td style="width: 80%;"></td> <td style="width: 20%;">100.00</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	5		0	3		2	0	0	7		100.00
M	M	/	D	D	/	Y	Y	Y	Y														
0	5		0	3		2	0	0	7														
	100.00																						
Name of Employer Occupation Name of Employer Occupation Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ <table border="1" style="width: 100%; text-align: right;"> <tr> <td style="width: 80%;"></td> <td style="width: 20%;">350.00</td> </tr> </table>		350.00																					
	350.00																						

<b>C.</b> Full Name (Last, First, Middle Initial) MR DAVID STORMENT Mailing Address 3530 REED RD City State Zip Code RED BUD IL 62278-3732 FEC ID number of contributing federal political committee. <b>C</b>	Date of Receipt <table border="1" style="width: 100%; text-align: center;"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>5</td><td></td><td>2</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table> Transaction ID: 20459706 Amount of Each Receipt this Period <table border="1" style="width: 100%; text-align: right;"> <tr> <td style="width: 80%;"></td> <td style="width: 20%;">50.00</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	5		2	1		2	0	0	7		50.00
M	M	/	D	D	/	Y	Y	Y	Y														
0	5		2	1		2	0	0	7														
	50.00																						
Name of Employer Occupation Name of Employer Occupation RETIRED Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ <table border="1" style="width: 100%; text-align: right;"> <tr> <td style="width: 80%;"></td> <td style="width: 20%;">215.00</td> </tr> </table>		215.00																					
	215.00																						

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	<table border="1" style="width: 100%; text-align: right;"> <tr> <td style="width: 80%;"></td> <td style="width: 20%;">180.00</td> </tr> </table>		180.00
	180.00		
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	<table border="1" style="width: 100%; text-align: right;"> <tr> <td style="width: 80%;"></td> <td style="width: 20%;"></td> </tr> </table>		

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 80 / 160  
(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 GARLAND KOLLE

Mailing Address 725 DIEBEL RD

City State Zip Code  
VICTORIA TX 77905-3104

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

Name of Employer Occupation  
RETIRE

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
230.00

Date of Receipt  
MM / DD / YYYY  
05 / 04 / 2007

**Transaction ID:** 20459808

Amount of Each Receipt this Period  
50.00

**B.** Full Name (Last, First, Middle Initial)  
MR MARTIN D KRAVARIK

Mailing Address 26 SOUTHFIELD RD

City State Zip Code  
EDISON NJ 08820-3140

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

Name of Employer Occupation  
CARDINAL HEALTH ENGINEER

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
170.00

Date of Receipt  
MM / DD / YYYY  
05 / 17 / 2007

**Transaction ID:** 20459843

Amount of Each Receipt this Period  
100.00

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

Mailing Address 26 SOUTHFIELD RD

City State Zip Code  
EDISON NJ 08820-3140

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

Name of Employer Occupation  
CARDINAL HEALTH ENGINEER

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
220.00

Date of Receipt  
MM / DD / YYYY  
05 / 17 / 2007

**Transaction ID:** 20459844

Amount of Each Receipt this Period  
50.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>200.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 81 / 160
	(check only one)	
<input checked="" 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 type="checkbox"/> 16	<input type="checkbox"/> 17

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

Full Name (Last, First, Middle Initial) <b>A. MR CHARLES W DROSKE</b>		Date of Receipt MM / DD / YYYY 05 / 21 / 2007
Mailing Address 629 WESTFORD ST		Transaction ID: 20459961
City HOUSTON	State TX	Zip Code 77022-4949
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 50.00
Name of Employer DOVER CORP	Occupation MACHINIST	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 280.00	

Full Name (Last, First, Middle Initial) <b>B. DR MICHAEL A CREMER</b>		Date of Receipt MM / DD / YYYY 05 / 14 / 2007
Mailing Address 1482 HOLLOW FORK CV		Transaction ID: 20459986
City GERMANTOWN	State TN	Zip Code 38138-1719
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 100.00
Name of Employer VA MEDICAL CENTER	Occupation PHYSICAN	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 525.00	

Full Name (Last, First, Middle Initial) <b>C. DR MICHAEL A CREMER</b>		Date of Receipt MM / DD / YYYY 05 / 23 / 2007
Mailing Address 1482 HOLLOW FORK CV		Transaction ID: 20459987
City GERMANTOWN	State TN	Zip Code 38138-1719
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 100.00
Name of Employer VA MEDICAL CENTER	Occupation PHYSICAN	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 625.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	250.00
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 82 / 160
	<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

<b>A.</b> Full Name (Last, First, Middle Initial) MR DEAN H HALL		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 8 / 2 0 0 7	
Mailing Address 644 NEWCASTLE DR # C		<b>Transaction ID:</b> 20460077	
City State Zip Code SCHERERVILLE IN 46375-2675	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer PRIMARY ENERGY, INC	Occupation EXECUTIVE		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00		

<b>B.</b> Full Name (Last, First, Middle Initial) MR ROBERT J ZULEEG		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 8 / 2 0 0 7	
Mailing Address 1455 LAKE BERGE RD		<b>Transaction ID:</b> 20460155	
City State Zip Code ORLANDO FL 32825-5706	Amount of Each Receipt this Period 50.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer	Occupation RETIRED		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 225.00		

<b>C.</b> Full Name (Last, First, Middle Initial) MR WILLIAM OLIVER		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 0 7 / 2 0 0 7	
Mailing Address 2330 BEACON DR		<b>Transaction ID:</b> 20460223	
City State Zip Code PORT CHARLOTTE FL 33952-5624	Amount of Each Receipt this Period 30.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer	Occupation RETIRED		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 260.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	180.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 83 / 160

(check only one)

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

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

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

Mailing Address 2330 BEACON DR

City State Zip Code  
PORT CHARLOTTE FL 33952-5624

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

Name of Employer Occupation  
RETIRE

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 290.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	5	/	1	6	/	2	0	0	7

Transaction ID: 20460224

Amount of Each Receipt this Period

30.00
-------

**B.** Full Name (Last, First, Middle Initial)  
MR MICHAEL TILLER, MD

Mailing Address 4515 GARRISON ST NW

City State Zip Code  
WASHINGTON DC 20016-4057

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

Name of Employer Occupation

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1050.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	5	/	0	7	/	2	0	0	7

Transaction ID: 20460245

Amount of Each Receipt this Period

1000.00
---------

**C.** Full Name (Last, First, Middle Initial)  
MR CRAIG J MANION

Mailing Address 5725 OAK LAKE TRL

City State Zip Code  
OVIEDO FL 32765-7366

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

Name of Employer Occupation  
JO MANION OFFICE MANAGER

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 365.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	5	/	1	8	/	2	0	0	7

Transaction ID: 20460262

Amount of Each Receipt this Period

30.00
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**SUBTOTAL** of Receipts This Page (optional) .....

1060.00
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**TOTAL** This Period (last page this line number only) .....

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# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 84 / 160
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14
<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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

<b>A.</b> Full Name (Last, First, Middle Initial) MR JOE M TURNER Mailing Address 3525 SANDYBROOK LN City NAPA State CA Zip Code 94558-5216 FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 4 / 2 0 0 7 <b>Transaction ID:</b> 20460345 Amount of Each Receipt this Period 100.00
Name of Employer JTCSC Occupation CONSULTANT Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 250.00

<b>B.</b> Full Name (Last, First, Middle Initial) G TOSTEVIN Mailing Address 12555 37TH AVE NE City SEATTLE State WA Zip Code 98125-4654 FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 9 / 2 0 0 7 <b>Transaction ID:</b> 20460398 Amount of Each Receipt this Period 30.00
Name of Employer SEATTLE CITY LIGHT Occupation RETIRED Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 290.00

<b>C.</b> Full Name (Last, First, Middle Initial) MR JACK MCNUTT Mailing Address 11327 HIGHWAY 270 City PINE BLUFF State AR Zip Code 71602-8858 FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 5 / 2 0 0 7 <b>Transaction ID:</b> 20460552 Amount of Each Receipt this Period 250.00
Name of Employer Occupation Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 250.00

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	380.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	_____

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 85 / 160  
(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 LEVI HUDZINSKI

Mailing Address 6929 PERRY RD

City State Zip Code  
BROCKWAY MI 48097-3913

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

Name of Employer Occupation  
SELF FARMER

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

Date of Receipt  
MM / DD / YYYY  
05 / 21 / 2007

**Transaction ID:** 20460553

Amount of Each Receipt this Period  
100.00

**B.** Full Name (Last, First, Middle Initial)  
MR CRAIG J MANION

Mailing Address 5725 OAK LAKE TRL

City State Zip Code  
OVIEDO FL 32765-7366

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

Name of Employer Occupation  
JO MANION OFFICE MANAGER

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 335.00

Date of Receipt  
MM / DD / YYYY  
05 / 04 / 2007

**Transaction ID:** 20460602

Amount of Each Receipt this Period  
75.00

**C.** Full Name (Last, First, Middle Initial)  
G TOSTEVIN

Mailing Address 12555 37TH AVE NE

City State Zip Code  
SEATTLE WA 98125-4654

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

Name of Employer Occupation  
SEATTLE CITY LIGHT RETIRED

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 260.00

Date of Receipt  
MM / DD / YYYY  
05 / 07 / 2007

**Transaction ID:** 20460627

Amount of Each Receipt this Period  
50.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 225.00

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

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

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

FOR LINE NUMBER: PAGE 86 / 160

(check only one)

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

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

<b>A.</b> Full Name (Last, First, Middle Initial) MR GEORGE LABBE Mailing Address PO BOX 961 City YERINGTON State NV Zip Code 89447-0961 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation RETIRED Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 400.00		Date of Receipt <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>5</td><td>/</td><td>2</td><td>1</td><td>/</td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table> Transaction ID: 20460634 Amount of Each Receipt this Period <table border="1"> <tr> <td colspan="2">200.00</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	5	/	2	1	/	2	0	0	7	200.00	
M	M	/	D	D	/	Y	Y	Y	Y															
0	5	/	2	1	/	2	0	0	7															
200.00																								
<b>B.</b> Full Name (Last, First, Middle Initial) MR THOMAS R CANNELL Mailing Address PO BOX 5322 City SALTON CITY State CA Zip Code 92275-5322 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation GENERAL MANAGER Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00		Date of Receipt <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>5</td><td>/</td><td>0</td><td>1</td><td>/</td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table> Transaction ID: 20460759 Amount of Each Receipt this Period <table border="1"> <tr> <td colspan="2">100.00</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	5	/	0	1	/	2	0	0	7	100.00	
M	M	/	D	D	/	Y	Y	Y	Y															
0	5	/	0	1	/	2	0	0	7															
100.00																								
<b>C.</b> Full Name (Last, First, Middle Initial) MR STANLEY J DECKER Mailing Address 501 WESTWOOD DR City WARNER ROBINS State GA Zip Code 31088-5860 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation RETIRED Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 210.00		Date of Receipt <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>5</td><td>/</td><td>0</td><td>4</td><td>/</td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table> Transaction ID: 20460775 Amount of Each Receipt this Period <table border="1"> <tr> <td colspan="2">50.00</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	5	/	0	4	/	2	0	0	7	50.00	
M	M	/	D	D	/	Y	Y	Y	Y															
0	5	/	0	4	/	2	0	0	7															
50.00																								

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

**350.00**

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

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

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

FOR LINE NUMBER: PAGE 87 / 160

(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

Full Name (Last, First, Middle Initial) <b>A. MARSHALL REGISTER</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 4 / 2 0 0 7	
Mailing Address 2843 NATURAL BRIDGE RD		<b>Transaction ID:</b> 20460790	
City State Zip Code TALLAHASSEE FL 32305-1820	Amount of Each Receipt this Period 20.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer INFORMATION REQUESTED Occupation NOT EMPLOYED			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 225.00	

Full Name (Last, First, Middle Initial) <b>B. MS KAREN BEISEL</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 4 / 2 0 0 7	
Mailing Address 523 NOTRE DAME AVE		<b>Transaction ID:</b> 20461014	
City State Zip Code CHATTANOOGA TN 37412-2957	Amount of Each Receipt this Period 30.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer USDA FOOD SAFETY INSPECTI-ON Occupation CONSUMER SAFETY INSPECTOR			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 430.00	

Full Name (Last, First, Middle Initial) <b>C. MARSHALL REGISTER</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 1 / 2 0 0 7	
Mailing Address 2843 NATURAL BRIDGE RD		<b>Transaction ID:</b> 20461032	
City State Zip Code TALLAHASSEE FL 32305-1820	Amount of Each Receipt this Period 30.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer INFORMATION REQUESTED Occupation NOT EMPLOYED			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 255.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	80.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 88 / 160

(check only one)

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

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

<b>A.</b> Full Name (Last, First, Middle Initial) MR FRED V SHARP		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 3 / 2 0 0 7	
Mailing Address 4524 NE FREMONT ST		<b>Transaction ID:</b> 20461173	
City PORTLAND	State OR	Zip Code 97213-1176	Amount of Each Receipt this Period 200.00
FEC ID number of contributing federal political committee. C			
Name of Employer PACIFIC AIR SWITCH	Occupation ASSEMBLER		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00		

<b>B.</b> Full Name (Last, First, Middle Initial) MR JACK D ROBERTS		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 3 / 2 0 0 7	
Mailing Address 2920 SUNDANCE DR		<b>Transaction ID:</b> 20461186	
City ELKO	State NV	Zip Code 89801-4730	Amount of Each Receipt this Period 250.00
FEC ID number of contributing federal political committee. C			
Name of Employer NONE	Occupation INFORMATION REQUESTED		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

<b>C.</b> Full Name (Last, First, Middle Initial) MR STEVEN A MEDVIGY		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 7 / 2 0 0 7	
Mailing Address 55 LA VISTA WAY		<b>Transaction ID:</b> 20461397	
City PASO ROBLES	State CA	Zip Code 93446-7652	Amount of Each Receipt this Period 225.00
FEC ID number of contributing federal political committee. C			
Name of Employer CIVIL SERVICE DEPT OF DEF-ENSE	Occupation RETIRED		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 225.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	675.00
<b>TOTAL</b> This Period (last page this line number only) .....	

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

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

FOR LINE NUMBER: PAGE 89 / 160

(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

Full Name (Last, First, Middle Initial) <b>A. MR MATTHEW REYNOLDS</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 7 / 2 0 0 7	
Mailing Address 5421 SHERO RD		<b>Transaction ID: 20461484</b>	
City <b>HAMBURG</b>	State <b>NY</b>	Zip Code <b>14075-7055</b>	Amount of Each Receipt this Period 100.00
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Aggregate Year-to-Date ▼ 300.00		

Full Name (Last, First, Middle Initial) <b>B. MR REX HALL</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 4 / 2 0 0 7	
Mailing Address 4047 SACRAMENTO AVE		<b>Transaction ID: 20461588</b>	
City <b>SANTA ROSA</b>	State <b>CA</b>	Zip Code <b>95405-7772</b>	Amount of Each Receipt this Period 40.00
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer KUSBER ENTERPRISES Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation RETIRED Aggregate Year-to-Date ▼ 369.50		

Full Name (Last, First, Middle Initial) <b>C. MR GEORGE F SHIPMAN</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 7 / 2 0 0 7	
Mailing Address PO BOX 91		<b>Transaction ID: 20461594</b>	
City <b>ALBRIGHTSVILLE</b>	State <b>PA</b>	Zip Code <b>18210-0091</b>	Amount of Each Receipt this Period 30.00
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer MOBIL OIL CORP. RESEARCH DEPT Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation RETIRED CHEMIST Aggregate Year-to-Date ▼ 255.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	<b>170.00</b>
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

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

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

FOR LINE NUMBER: PAGE 90 / 160

(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 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: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 525.00

Date of Receipt

M M / D D / Y Y Y Y  
0 5 / 1 4 / 2 0 0 7

Transaction ID: 20461643

Amount of Each Receipt this Period

100.00

**B.** 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: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 625.00

Date of Receipt

M M / D D / Y Y Y Y  
0 5 / 2 1 / 2 0 0 7

Transaction ID: 20461644

Amount of Each Receipt this Period

100.00

**C.** Full Name (Last, First, Middle Initial)  
MR RUSSELL R ZIELESCH

Mailing Address 37852 THAMES DR

City State Zip Code  
FARMINGTON HILLS MI 48331-1721

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

Name of Employer Occupation  
SELF EMPLOYED CPA

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

Date of Receipt

M M / D D / Y Y Y Y  
0 5 / 1 7 / 2 0 0 7

Transaction ID: 20461678

Amount of Each Receipt this Period

100.00

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

300.00

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 91 / 160
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	<input type="checkbox"/> 12
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

**A.** Full Name (Last, First, Middle Initial)  
ARLY RICHAU

Mailing Address 8858 E PALM RIDGE DR

City State Zip Code  
SCOTTSDALE AZ 85260-7093

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

Name of Employer Occupation  
SELF EMPLOYED ATTORNEY

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 450.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 5 / 1 8 / 2 0 0 7

Transaction ID: 20461716

Amount of Each Receipt this Period  
75.00

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

Mailing Address 515 OAKLAND PARK AVE

City State Zip Code  
COLUMBUS OH 43214-4139

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

Name of Employer Occupation  
OHIO STATE HIGHWAY PATROL ACAD JANITOR

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 210.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 5 / 1 8 / 2 0 0 7

Transaction ID: 20461720

Amount of Each Receipt this Period  
30.00

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

Mailing Address 827 SIERRA DR

City State Zip Code  
MESQUITE TX 75149-5248

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

Name of Employer Occupation  
DISABLED - RETIRED

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

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 5 / 0 8 / 2 0 0 7

Transaction ID: 20462042

Amount of Each Receipt this Period  
125.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	230.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 92 / 160
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

<b>A.</b> Full Name (Last, First, Middle Initial) MR M PRICE Mailing Address 827 SIERRA DR City MESQUITE State TX Zip Code 75149-5248 FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt <table border="1"> <tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr> <tr><td>0</td><td>5</td><td></td><td>2</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td></tr> </table> Transaction ID: 20462043 Amount of Each Receipt this Period <table border="1"> <tr><td colspan="8"></td><td>30.00</td></tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	5		2	1		2	0	0	7									30.00
M	M	/	D	D	/	Y	Y	Y	Y																						
0	5		2	1		2	0	0	7																						
								30.00																							
Name of Employer Occupation Disabled - Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ <table border="1"> <tr><td colspan="8"></td><td>255.00</td></tr> </table>										255.00																					
								255.00																							

<b>B.</b> Full Name (Last, First, Middle Initial) ARLY RICHAU Mailing Address 8858 E PALM RIDGE DR City SCOTTSDALE State AZ Zip Code 85260-7093 FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt <table border="1"> <tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr> <tr><td>0</td><td>5</td><td></td><td>0</td><td>7</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td></tr> </table> Transaction ID: 20462114 Amount of Each Receipt this Period <table border="1"> <tr><td colspan="8"></td><td>75.00</td></tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	5		0	7		2	0	0	7									75.00
M	M	/	D	D	/	Y	Y	Y	Y																						
0	5		0	7		2	0	0	7																						
								75.00																							
Name of Employer Occupation Self Employed Attorney Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ <table border="1"> <tr><td colspan="8"></td><td>375.00</td></tr> </table>										375.00																					
								375.00																							

<b>C.</b> Full Name (Last, First, Middle Initial) MR T E TABER Mailing Address 13517 THOMPSON RD City EDMOND State OK Zip Code 73013-7452 FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt <table border="1"> <tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr> <tr><td>0</td><td>5</td><td></td><td>1</td><td>4</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td></tr> </table> Transaction ID: 20462126 Amount of Each Receipt this Period <table border="1"> <tr><td colspan="8"></td><td>50.00</td></tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	5		1	4		2	0	0	7									50.00
M	M	/	D	D	/	Y	Y	Y	Y																						
0	5		1	4		2	0	0	7																						
								50.00																							
Name of Employer Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ <table border="1"> <tr><td colspan="8"></td><td>300.00</td></tr> </table>										300.00																					
								300.00																							

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	<table border="1"> <tr><td colspan="8"></td><td>155.00</td></tr> </table>									155.00
								155.00		
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	<table border="1"> <tr><td colspan="8"></td><td></td></tr> </table>									

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 93 / 160  
(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 T E TABER

Mailing Address 13517 THOMPSON RD

City State Zip Code  
EDMOND OK 73013-7452

FEC ID number of contributing federal political committee. C

Name of Employer Occupation  
RETIREED

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 330.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 5 / 2 9 / 2 0 0 7

**Transaction ID:** 20462127

Amount of Each Receipt this Period  
30.00

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

Mailing Address 24 A ALICE ST

City State Zip Code  
ARCADIA CA 91006-6819

FEC ID number of contributing federal political committee. C

Name of Employer Occupation  
KRUSE & SON, INC. MECHANIC

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 260.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 5 / 2 9 / 2 0 0 7

**Transaction ID:** 20462150

Amount of Each Receipt this Period  
30.00

**C.** Full Name (Last, First, Middle Initial)  
MR BEAU FAURIA

Mailing Address 24 A ALICE ST

City State Zip Code  
ARCADIA CA 91006-6819

FEC ID number of contributing federal political committee. C

Name of Employer Occupation  
KRUSE & SON, INC. MECHANIC

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 230.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 5 / 0 7 / 2 0 0 7

**Transaction ID:** 20462155

Amount of Each Receipt this Period  
150.00

**SUBTOTAL** of Receipts This Page (optional) ..... 210.00

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: <span style="float: right;">PAGE 94 / 160</span> (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

<p><b>A.</b> Full Name (Last, First, Middle Initial) MR DOMINIC J TISCORNIA</p> <p>Mailing Address 50 DICHIERA CT</p> <p>City State Zip Code SAN FRANCISCO CA 94112-4105</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 SELF EMPLOYED REAL ESTATE RENTALS</p> <p>Receipt For: Aggregate Year-to-Date ▼  <input type="checkbox"/> Primary   <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼ <span style="border: 1px solid black; padding: 2px;">250.00</span></p>	<p>Date of Receipt  <table border="1" style="width: 100%; text-align: center;"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>5</td><td></td><td>2</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table> </p> <p><b>Transaction ID:</b> 20462397</p> <p>Amount of Each Receipt this Period  <span style="border: 1px solid black; padding: 2px; display: block; text-align: right;">50.00</span></p>	M	M	/	D	D	/	Y	Y	Y	Y	0	5		2	1		2	0	0	7
M	M	/	D	D	/	Y	Y	Y	Y												
0	5		2	1		2	0	0	7												

<p><b>B.</b> Full Name (Last, First, Middle Initial) MR RONALD G MALMQUIST</p> <p>Mailing Address 1701 SEWARD WAY</p> <p>City State Zip Code STOCKTON CA 95207-2459</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 M&amp;M HEATING &amp; AIR COMPANY CONTRACTOR</p> <p>Receipt For: Aggregate Year-to-Date ▼  <input type="checkbox"/> Primary   <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼ <span style="border: 1px solid black; padding: 2px;">250.00</span></p>	<p>Date of Receipt  <table border="1" style="width: 100%; text-align: center;"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>5</td><td></td><td>2</td><td>9</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table> </p> <p><b>Transaction ID:</b> 20462447</p> <p>Amount of Each Receipt this Period  <span style="border: 1px solid black; padding: 2px; display: block; text-align: right;">250.00</span></p>	M	M	/	D	D	/	Y	Y	Y	Y	0	5		2	9		2	0	0	7
M	M	/	D	D	/	Y	Y	Y	Y												
0	5		2	9		2	0	0	7												

<p><b>C.</b> Full Name (Last, First, Middle Initial) DAVID E ADANTE</p> <p>Mailing Address 8414 OXFORD CHASE CIR NW</p> <p>City State Zip Code MASSILLON OH 44646-7871</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 THE DAVEY TREE EXPERT COMPANY EXECUTIVE VICE PRESIDENT &amp; CFO</p> <p>Receipt For: Aggregate Year-to-Date ▼  <input type="checkbox"/> Primary   <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼ <span style="border: 1px solid black; padding: 2px;">250.00</span></p>	<p>Date of Receipt  <table border="1" style="width: 100%; text-align: center;"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>5</td><td></td><td>1</td><td>0</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table> </p> <p><b>Transaction ID:</b> 20462471</p> <p>Amount of Each Receipt this Period  <span style="border: 1px solid black; padding: 2px; display: block; text-align: right;">100.00</span></p>	M	M	/	D	D	/	Y	Y	Y	Y	0	5		1	0		2	0	0	7
M	M	/	D	D	/	Y	Y	Y	Y												
0	5		1	0		2	0	0	7												

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<span style="border: 1px solid black; padding: 2px;">400.00</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)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 95 / 160

(check only one)

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

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

<b>A.</b> Full Name (Last, First, Middle Initial) MR GARY P DEEVERS		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 8 / 2 0 0 7	
Mailing Address 215 REEVES AVE		<b>Transaction ID:</b> 20462480	
City State Zip Code FAIRMONT WV 26554-4267	Amount of Each Receipt this Period 30.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Aggregate Year-to-Date ▼ 230.00		

<b>B.</b> Full Name (Last, First, Middle Initial) MR BRENT R TROYER		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 7 / 2 0 0 7	
Mailing Address 7505 SANDY POINT RD		<b>Transaction ID:</b> 20462529	
City State Zip Code LIMA OH 45807-9722	Amount of Each Receipt this Period 50.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Aggregate Year-to-Date ▼ 265.00		

<b>C.</b> Full Name (Last, First, Middle Initial) MR BRENT R TROYER		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 1 / 2 0 0 7	
Mailing Address 7505 SANDY POINT RD		<b>Transaction ID:</b> 20462530	
City State Zip Code LIMA OH 45807-9722	Amount of Each Receipt this Period 75.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Aggregate Year-to-Date ▼ 215.00		

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

155.00

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:		PAGE 96 / 160					
	(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

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

**A.** Full Name (Last, First, Middle Initial)  
TERRANCE A SLATE

Mailing Address 319 BLOSSOMWOOD DR

City State Zip Code  
LEAGUE CITY TX 77573-6205

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

Name of Employer Occupation  
LYONDELL CHEMICAL COMPANY CHEMICAL PLANT OPERATOR

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 230.00

Date of Receipt  
MM / DD / YYYY  
05 / 29 / 2007

**Transaction ID:** 20462746

Amount of Each Receipt this Period  
30.00

**B.** Full Name (Last, First, Middle Initial)  
J A FORD

Mailing Address 4200 EAGLE RIDGE DR

City State Zip Code  
ARLINGTON TX 76016-4614

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

Name of Employer Occupation

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 210.00

Date of Receipt  
MM / DD / YYYY  
05 / 23 / 2007

**Transaction ID:** 20462760

Amount of Each Receipt this Period  
100.00

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

Mailing Address 121 EMERALD DR

City State Zip Code  
HAMPSHIRE TN 38461-5130

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  
MM / DD / YYYY  
05 / 14 / 2007

**Transaction ID:** 20462818

Amount of Each Receipt this Period  
50.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	180.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 97 / 160
	<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)  
WILLIAM B COOK

Mailing Address 823 HOUGH AVENUE

City State Zip Code  
ADKINS TX 78101-9465

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

Name of Employer Occupation  
LENDER PROTECTIVE SERVICES SECURITY OFFICER

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 260.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 5 / 2 1 / 2 0 0 7

Transaction ID: 20462869

Amount of Each Receipt this Period  
30.00

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

Mailing Address 12146 US HIGHWAY 158

City State Zip Code  
CONWAY NC 27820-9599

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

Name of Employer Occupation  
RETIRED

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 230.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 5 / 1 7 / 2 0 0 7

Transaction ID: 20462877

Amount of Each Receipt this Period  
30.00

**C.** Full Name (Last, First, Middle Initial)  
DAVID E KONECNIK

Mailing Address 116 LANDMARK APARTMENTS W

City State Zip Code  
NEWTON NJ 07860-1107

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

Name of Employer Occupation  
CENTURY TUBE CORP. MAINTENANCE SUPERVISOR

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 205.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 5 / 2 1 / 2 0 0 7

Transaction ID: 20463224

Amount of Each Receipt this Period  
30.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	90.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 98 / 160
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

**A.** Full Name (Last, First, Middle Initial)  
MR ROBERT BURKE

Mailing Address 25 FELLSCREST RD

City ESSEX FELLS State NJ Zip Code 07021-1808

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

Name of Employer THUMANN INC. Occupation EXECUTIVE

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 950.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 0 5 / 1 4 / 2 0 0 7

Transaction ID: 20463322

Amount of Each Receipt this Period  
 200.00

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

Mailing Address 25 FELLSCREST RD

City ESSEX FELLS State NJ Zip Code 07021-1808

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

Name of Employer THUMANN INC. Occupation EXECUTIVE

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 750.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 0 5 / 0 4 / 2 0 0 7

Transaction ID: 20463325

Amount of Each Receipt this Period  
 200.00

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

Mailing Address 20804 S DENNIS AVE

City LATON State CA Zip Code 93242-9630

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

Name of Employer LATON COMMUNITY SERVICES DIST Occupation WASTEWATER TREATMENT TECH

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 330.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 0 5 / 2 2 / 2 0 0 7

Transaction ID: 20463415

Amount of Each Receipt this Period  
 30.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	430.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 99 / 160
	(check only one)	
<input checked="" 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 type="checkbox"/> 16
		<input type="checkbox"/> 17

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

**A.** Full Name (Last, First, Middle Initial)  
MR WILLIAM G WARNER

Mailing Address 167 WALNUT ST

City State Zip Code  
WESTON MO 64098-1327

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

Name of Employer Occupation  
TRANS WORLD AIRWAYS RETIRED

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 5 / 2 1 / 2 0 0 7

**Transaction ID:** 20463522

Amount of Each Receipt this Period  
30.00

**B.** Full Name (Last, First, Middle Initial)  
MR JAMES A RUMBLEY

Mailing Address 909 MOCKINGBIRD LN

City State Zip Code  
ECLECTIC AL 36024-6351

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

Name of Employer Occupation  
U.S.A.F ENGINEER

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 5 / 0 2 / 2 0 0 7

**Transaction ID:** 20463637

Amount of Each Receipt this Period  
20.00

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

Mailing Address 909 MOCKINGBIRD LN

City State Zip Code  
ECLECTIC AL 36024-6351

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

Name of Employer Occupation  
U.S.A.F ENGINEER

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 5 / 2 1 / 2 0 0 7

**Transaction ID:** 20463638

Amount of Each Receipt this Period  
30.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	80.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 100 / 160
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	<input type="checkbox"/> 12
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

**A.** Full Name (Last, First, Middle Initial)  
MR MICHAEL E DENALL

Mailing Address 86 NW BRIDLE RIDGE BLVD

City State Zip Code  
BREMERTON WA 98311-9103

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

Name of Employer Occupation  
RETIRED RETIRED

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

Date of Receipt  
M M / D D / Y Y Y Y Y  
05 / 21 / 2007

**Transaction ID:** 20463651

Amount of Each Receipt this Period  
30.00

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

Mailing Address 280 ROYCE LN

City State Zip Code  
ONEIDA TN 37841-6491

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

Name of Employer Occupation  
CAMPOS FOOD COMPANY SUPPLIES COORDINATOR

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 1100.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
05 / 21 / 2007

**Transaction ID:** 20463724

Amount of Each Receipt this Period  
100.00

**C.** Full Name (Last, First, Middle Initial)  
MR STEVE MASSEY

Mailing Address 280 ROYCE LN

City State Zip Code  
ONEIDA TN 37841-6491

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

Name of Employer Occupation  
CAMPOS FOOD COMPANY SUPPLIES COORDINATOR

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
05 / 15 / 2007

**Transaction ID:** 20463725

Amount of Each Receipt this Period  
200.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>330.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 101 / 160
	<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

Full Name (Last, First, Middle Initial) <b>A. MR GARY L MCGARVEY, SR</b>		Date of Receipt M M / D D / Y Y Y Y 05 / 15 / 2007	
Mailing Address 626 N COUNTY LINE RD		<b>Transaction ID: 20464063</b>	
City State Zip Code JACKSON NJ 08527-4433	Amount of Each Receipt this Period 20.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Occupation RETIRED	Aggregate Year-to-Date ▼ 1040.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) <b>B. MR BARRON GERHARD</b>		Date of Receipt M M / D D / Y Y Y Y 05 / 17 / 2007	
Mailing Address 149 W SHORE DR		<b>Transaction ID: 20464184</b>	
City State Zip Code HAMBURG PA 19526-8520	Amount of Each Receipt this Period 30.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Occupation DIESEL SERVICE INC MACHINIST	Aggregate Year-to-Date ▼ 355.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) <b>C. MR DANIEL LADURINI</b>		Date of Receipt M M / D D / Y Y Y Y 05 / 17 / 2007	
Mailing Address 1710 RIDGE RD		<b>Transaction ID: 20464265</b>	
City State Zip Code HIGHLAND PARK IL 60035-2139	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Occupation	Aggregate Year-to-Date ▼ 250.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	150.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 102 / 160
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

**A.** Full Name (Last, First, Middle Initial)  
WADE A CROCKETT

Mailing Address 1040 HAROLD CT

City FALLON State NV Zip Code 89406-3626

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

Name of Employer UTAH NATIONAL GUARD Occupation SOLDIER

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 5 / 2 1 / 2 0 0 7

Transaction ID: 20464276

Amount of Each Receipt this Period  
 500.00

**B.** Full Name (Last, First, Middle Initial)  
MR DAVID M WAUGH

Mailing Address PO BOX 213

City TAYLORSVILLE State NC Zip Code 28681-0213

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 230.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 0 5 / 2 9 / 2 0 0 7

Transaction ID: 20464282

Amount of Each Receipt this Period  
 30.00

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

Mailing Address PO BOX 62

City HURRICANE State UT Zip Code 84737-0062

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

Name of Employer U.S. OFFICE FO PERSONNEL MGT Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 0 5 / 0 8 / 2 0 0 7

Transaction ID: 20464416

Amount of Each Receipt this Period  
 50.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	580.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 103 / 160
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	<input type="checkbox"/> 12
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

**A.** Full Name (Last, First, Middle Initial)  
MR ROBERT ENGELSTAD

Mailing Address PO BOX 62

City HURRICANE State UT Zip Code 84737-0062

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

Name of Employer U.S. OFFICE FO PERSONNEL MGT Occupation RETIRED

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
MM / DD / YYYY  
05 / 04 / 2007

Transaction ID: 20464417

Amount of Each Receipt this Period  
100.00

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

Mailing Address PO BOX 62

City HURRICANE State UT Zip Code 84737-0062

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

Name of Employer U.S. OFFICE FO PERSONNEL MGT Occupation RETIRED

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 385.00

Date of Receipt  
MM / DD / YYYY  
05 / 21 / 2007

Transaction ID: 20464418

Amount of Each Receipt this Period  
35.00

**C.** Full Name (Last, First, Middle Initial)  
RICHARD LEE WURDACK

Mailing Address 10360 CARNATION DUVALL RD NE

City CARNATION State WA Zip Code 98014-9502

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 ▼ 300.00

Date of Receipt  
MM / DD / YYYY  
05 / 25 / 2007

Transaction ID: 20464521

Amount of Each Receipt this Period  
50.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	185.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 104 / 160
	<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

Full Name (Last, First, Middle Initial) <b>A. MR NELSON LAFRANCIS</b>		Date of Receipt M M / D D / Y Y Y Y 05 / 16 / 2007	
Mailing Address 1871 WOODLAND DR		<b>Transaction ID: 20464563</b>	
City State Zip Code FAIRFIELD IA 52556-9021	Amount of Each Receipt this Period 30.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer SELF EMPLOYED	Occupation WELDER		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 227.44		

Full Name (Last, First, Middle Initial) <b>B. MR KENNETH M HANSON</b>		Date of Receipt M M / D D / Y Y Y Y 05 / 22 / 2007	
Mailing Address 14622 CHARLOMA DR		<b>Transaction ID: 20464807</b>	
City State Zip Code TUSTIN CA 92780-6223	Amount of Each Receipt this Period 30.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer MIKE HANSON CONSTRUCTION	Occupation GENERAL CONTRACTOR		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 230.00		

Full Name (Last, First, Middle Initial) <b>C. ADOLFO A GUZMAN</b>		Date of Receipt M M / D D / Y Y Y Y 05 / 03 / 2007	
Mailing Address 12135 ACADEMY RD UNIT 20		<b>Transaction ID: 20465088</b>	
City State Zip Code PHILADELPHIA PA 19154-2941	Amount of Each Receipt this Period 50.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer CARDINAL HEALTH	Occupation PACKER		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 330.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	110.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 105 / 160
	<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

Full Name (Last, First, Middle Initial) <b>A. MR MICHAEL SMITH</b>		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 3 1 / 2 0 0 7	
Mailing Address 75 ROCKLAND TRL		<b>Transaction ID: 20465138</b>	
City State Zip Code SHARPSBURG GA 30277-2122	Amount of Each Receipt this Period 50.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer SELF EMPLOYED	Occupation CONSULTANT		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00		

Full Name (Last, First, Middle Initial) <b>B. MR BILLY YOUNG</b>		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 0 / 2 0 0 7	
Mailing Address PO BOX 2298		<b>Transaction ID: 20465146</b>	
City State Zip Code WILLIAMSON WV 25661-2298	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer YOUNG BROTHER'S ELECTRIC SHOP	Occupation OWNER		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

Full Name (Last, First, Middle Initial) <b>C. MR JAMES HUBBARD</b>		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 0 7 / 2 0 0 7	
Mailing Address 5055 S DALE MABRY HWY APT 1432		<b>Transaction ID: 20465346</b>	
City State Zip Code TAMPA FL 33611-3568	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer US AIR FORCE	Occupation AIRCRAFT MECHANIC		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	250.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 106 / 160
	<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 JAMES BEACH

Mailing Address 7281 SWEDETOWN RD

City State Zip Code  
THEODORE AL 36582-6173

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

Name of Employer Occupation  
DON GARRIS PLANT MANAGER

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

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 5 / 2 9 / 2 0 0 7

**Transaction ID:** 20465438

Amount of Each Receipt this Period  
50.00

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

Mailing Address 6388 E OAK ST APT 8

City State Zip Code  
SCOTTSDALE AZ 85257-1144

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

Name of Employer Occupation  
UNEMPLOYED DISABLED

Receipt For: Aggregate Year-to-Date ▼  
 Primary    General  
 Other (specify) ▼ 330.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 5 / 2 1 / 2 0 0 7

**Transaction ID:** 20465747

Amount of Each Receipt this Period  
50.00

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

Mailing Address 311 S OLEANDER ST

City State Zip Code  
PECOS TX 79772-2907

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

Name of Employer Occupation  
PATTERSON - UTI ENERGY, INC TOOLPUSHER

Receipt For: Aggregate Year-to-Date ▼  
 Primary    General  
 Other (specify) ▼ 290.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 5 / 2 4 / 2 0 0 7

**Transaction ID:** 20465762

Amount of Each Receipt this Period  
50.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	150.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

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

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

FOR LINE NUMBER: PAGE 107 / 160  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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

**A.** Full Name (Last, First, Middle Initial)  
MR DENNIS L MCLEAN

Mailing Address 4520 STATE HIGHWAY 136

City State Zip Code  
AMARILLO TX 79108-7617

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

Name of Employer Occupation  
MCLEANS CP INSTALLATION GM

Receipt For: Aggregate Year-to-Date ▼  
 Primary    General  
 Other (specify) ▼ 325.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 5 / 2 9 / 2 0 0 7

**Transaction ID:** 20465938

Amount of Each Receipt this Period  
50.00

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

Mailing Address 32 WEST LAKE ST

City State Zip Code  
TUPPER LAKE NY 12986-1600

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

Name of Employer Occupation  
SUNMOUNT D.D.S.O. PHYSICIAN

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

Date of Receipt  
M M / D D / Y Y Y Y  
0 5 / 1 8 / 2 0 0 7

**Transaction ID:** 20466004

Amount of Each Receipt this Period  
50.00

**C.** Full Name (Last, First, Middle Initial)  
DR CURTIS K TANABE, D.D.S.

Mailing Address 2422 S 23RD ST

City State Zip Code  
GRAND FORKS ND 58201-6433

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

Name of Employer Occupation  
SELF EMPLOYED DENTIST

Receipt For: Aggregate Year-to-Date ▼  
 Primary    General  
 Other (specify) ▼ 500.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 5 / 0 8 / 2 0 0 7

**Transaction ID:** 20466127

Amount of Each Receipt this Period  
500.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **600.00**

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 108 / 160
	<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

Full Name (Last, First, Middle Initial) <b>A. MR THOMAS C KAISER</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 6 / 2 0 0 7	
Mailing Address 13402 STATE HIGHWAY M123		<b>Transaction ID: 20466154</b>	
City State Zip Code NEWBERRY MI 49868-7617	Amount of Each Receipt this Period 50.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Occupation RETIRED	Aggregate Year-to-Date ▼ 425.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) <b>B. MR MIKE R VLACH</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 4 / 2 0 0 7	
Mailing Address 8442 STORY RIDGE WAY		<b>Transaction ID: 20466209</b>	
City State Zip Code ANTELOPE CA 95843-5248	Amount of Each Receipt this Period 500.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Occupation CIVIL ENGINEER	Aggregate Year-to-Date ▼ 500.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) <b>C. MR C A WHITMORE</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 3 / 2 0 0 7	
Mailing Address 225 CANAL PARK DR APT 11		<b>Transaction ID: 20466251</b>	
City State Zip Code SALISBURY MD 21804-7265	Amount of Each Receipt this Period 200.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Occupation RETIRED	Aggregate Year-to-Date ▼ 500.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	750.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 109 / 160
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	<input type="checkbox"/> 12
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

<b>A.</b> Full Name (Last, First, Middle Initial) MR GREGORY W DETWILER		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 7 / 2 0 0 7
Mailing Address RR 2 BOX 70		<b>Transaction ID:</b> 20466348
City WILLIAMSBURG	State PA	Zip Code 16693-9626
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer SELF EMPLOYED	Occupation FREELANCE WRITER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 235.00	

<b>B.</b> Full Name (Last, First, Middle Initial) MR ROBERT LUECK		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 8 / 2 0 0 7
Mailing Address 19312 S TUTHILL RD		<b>Transaction ID:</b> 20466352
City BUCKEYE	State AZ	Zip Code 85326-4721
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer SONORA DESERT DAIRIES	Occupation OWNER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

<b>C.</b> Full Name (Last, First, Middle Initial) MR BERT KISNER		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 1 / 2 0 0 7
Mailing Address 618 LYNNWOOD DR		<b>Transaction ID:</b> 20466391
City BOALSBURG	State PA	Zip Code 16827-1307
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 50.00
Name of Employer	Occupation RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	650.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	(Empty box)

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 110 / 160
	<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

Full Name (Last, First, Middle Initial) <b>A. MR RANDY BRIDGE</b>		Date of Receipt MM / DD / YYYY 05 / 21 / 2007
Mailing Address 7541 JAYSEEL ST		<b>Transaction ID: 20466512</b>
City	State	Zip Code
TUJUNGA	CA	91042-1619
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 30.00
Name of Employer DTI ASSOCIATES	Occupation TRANSPORTATION ENGINEER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 230.00	

Full Name (Last, First, Middle Initial) <b>B. MR THOMAS S POPE</b>		Date of Receipt MM / DD / YYYY 05 / 08 / 2007
Mailing Address 1226 GOODWIN AVE		<b>Transaction ID: 20466558</b>
City	State	Zip Code
CHARLOTTE	NC	28205-6241
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 100.00
Name of Employer RETIRED	Occupation RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 450.00	

Full Name (Last, First, Middle Initial) <b>C. MR THOMAS S POPE</b>		Date of Receipt MM / DD / YYYY 05 / 21 / 2007
Mailing Address 1226 GOODWIN AVE		<b>Transaction ID: 20466559</b>
City	State	Zip Code
CHARLOTTE	NC	28205-6241
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 30.00
Name of Employer RETIRED	Occupation RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 480.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	160.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 111 / 160
	<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 G BUSCHAUER

Mailing Address 408 N PHILLIPS AVE

City State Zip Code  
WEST COVINA CA 91791-1439

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

Name of Employer Occupation  
CERRITOS COLLEGE COLLEGE PHYSICS TEACHER

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

Date of Receipt  
05 / 03 / 2007

Transaction ID: 20466706

Amount of Each Receipt this Period  
200.00

**B.** Full Name (Last, First, Middle Initial)  
DELL D DODDS

Mailing Address PO BOX 937

City State Zip Code  
SANDIA PARK NM 87047-0937

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

Name of Employer Occupation  
RETIRED

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 230.00

Date of Receipt  
05 / 08 / 2007

Transaction ID: 20466709

Amount of Each Receipt this Period  
50.00

**C.** Full Name (Last, First, Middle Initial)  
MR RON VERTREES

Mailing Address 3227 W SOUTH BUTTE RD

City State Zip Code  
QUEEN CREEK AZ 85242-3067

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

Name of Employer Occupation  
VERTREES PRINTING PRINTER

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 230.00

Date of Receipt  
05 / 21 / 2007

Transaction ID: 20466827

Amount of Each Receipt this Period  
30.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	280.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 112 / 160
	(check only one)	
<input checked="" 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 type="checkbox"/> 16	<input type="checkbox"/> 17

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

Full Name (Last, First, Middle Initial) <b>A. MR T A LUPTON</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 1 / 2 0 0 7	
Mailing Address 2 UNION SQ		<b>Transaction ID: 20466912</b>	
City CHATTANOOGA	State TN	Amount of Each Receipt this Period 100.00	
Zip Code 37402-2522		Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00	
Name of Employer RETIRED	Occupation RETIRED	Amount of Each Receipt this Period 100.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	Amount of Each Receipt this Period 100.00	

Full Name (Last, First, Middle Initial) <b>B. MR JOHN HAGGERTY</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 4 / 2 0 0 7	
Mailing Address 1 BAILEY ST # 2		<b>Transaction ID: 20466965</b>	
City EVERETT	State MA	Amount of Each Receipt this Period 50.00	
Zip Code 02149-4401		Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 50.00	
Name of Employer QUARTZITE PROCESSING	Occupation MACHINIST	Amount of Each Receipt this Period 50.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	Amount of Each Receipt this Period 50.00	

Full Name (Last, First, Middle Initial) <b>C. MR JOHN HAGGERTY</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 8 / 2 0 0 7	
Mailing Address 1 BAILEY ST # 2		<b>Transaction ID: 20466966</b>	
City EVERETT	State MA	Amount of Each Receipt this Period 50.00	
Zip Code 02149-4401		Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 50.00	
Name of Employer QUARTZITE PROCESSING	Occupation MACHINIST	Amount of Each Receipt this Period 50.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	Amount of Each Receipt this Period 50.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	200.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	200.00

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 113 / 160  
(check only one)

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

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

**A.** Full Name (Last, First, Middle Initial)  
MR HARVEY H REINHOLZ

Mailing Address 795 OAK KNOLL DR

City State Zip Code  
ASHLAND OR 97520-1446

FEC ID number of contributing federal political committee. C

Name of Employer OR DEPT TRANS Occupation

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 205.00

Date of Receipt  
M M / D D / Y Y Y Y  
05 / 24 / 2007

**Transaction ID:** 20466994

Amount of Each Receipt this Period  
20.00

**B.** Full Name (Last, First, Middle Initial)  
MR DAN R R ALDERSON

Mailing Address 3809 E MONTGOMERY AVE

City State Zip Code  
SPOKANE WA 99217-7268

FEC ID number of contributing federal political committee. C

Name of Employer UN-EMPLOYED Occupation ELECTRONICS TECH

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 450.00

Date of Receipt  
M M / D D / Y Y Y Y  
05 / 21 / 2007

**Transaction ID:** 20467040

Amount of Each Receipt this Period  
100.00

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

Mailing Address PO BOX 127

City State Zip Code  
SOUTH CARVER MA 02366-0127

FEC ID number of contributing federal political committee. C

Name of Employer SELF EMPLOYED Occupation FARMER

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
M M / D D / Y Y Y Y  
05 / 29 / 2007

**Transaction ID:** 20467149

Amount of Each Receipt this Period  
100.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<span style="border: 1px solid black; padding: 5px;"><b>220.00</b></span>
<b>TOTAL</b> This Period (last page this line number only) .....	<span style="border: 1px solid black; padding: 5px;"> </span>

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 114 / 160
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

**A.** Full Name (Last, First, Middle Initial)  
R F DOVE

Mailing Address 1805 SE MAIN ST

City ROSWELL State NM Zip Code 88203-5919

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 ▼ 350.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 0 5 / 2 1 / 2 0 0 7

**Transaction ID:** 20467281

Amount of Each Receipt this Period  
 50.00

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

Mailing Address 7271 PINE RD

City LEXINGTON State MI Zip Code 48450-8678

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

Name of Employer JOHN MILLER ELECT Occupation ELECTRICIAN

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 5 / 0 7 / 2 0 0 7

**Transaction ID:** 20467423

Amount of Each Receipt this Period  
 100.00

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

Mailing Address 2822 BROOKVIEW BLVD

City PARMA State OH Zip Code 44134-1349

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

Name of Employer GREATER CLEVELAND REGIONAL TRA Occupation BUS DRIVER

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 5 / 0 1 / 2 0 0 7

**Transaction ID:** 20467518

Amount of Each Receipt this Period  
 200.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	350.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 115 / 160
	(check only one)	
<input checked="" 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 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 VAL R GOLDTHWAITE

Mailing Address 619 RANKIN RD

City State Zip Code  
BRIELLE NJ 08730-1745

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

Name of Employer Occupation  
METEM CORPORATION CHAIRMAN

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
M M / D D / Y Y Y Y  
05 / 30 / 2007

**Transaction ID:** 20467535

Amount of Each Receipt this Period  
5000.00

**B.** Full Name (Last, First, Middle Initial)  
T HABECKER

Mailing Address 111 SE 98TH AVE

City State Zip Code  
VANCOUVER WA 98664-3913

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

Name of Employer Occupation  
RETIRED

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
700.00

Date of Receipt  
M M / D D / Y Y Y Y  
05 / 29 / 2007

**Transaction ID:** 20467702

Amount of Each Receipt this Period  
200.00

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

Mailing Address 1925 N FLAGLER DR

City State Zip Code  
WEST PALM BEACH FL 33407-6114

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

Name of Employer Occupation  
SELF INVESTOR

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
M M / D D / Y Y Y Y  
05 / 15 / 2007

**Transaction ID:** 20467772

Amount of Each Receipt this Period  
500.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	5700.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 116 / 160
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

**A.** Full Name (Last, First, Middle Initial)  
MR GREG W ZETTLE

Mailing Address 1060 S M 33

City WEST BRANCH State MI Zip Code 48661-9767

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

Name of Employer SELF EMPLOYED Occupation DRYWALL

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 230.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 0 5 / 1 1 / 2 0 0 7

**Transaction ID:** 20467831

Amount of Each Receipt this Period  
 100.00

**B.** Full Name (Last, First, Middle Initial)  
MR DANNY A SHARR

Mailing Address 28506 BORGONA

City MISSION VIEJO State CA Zip Code 92692-1641

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 ▼ 220.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 0 5 / 2 9 / 2 0 0 7

**Transaction ID:** 20467870

Amount of Each Receipt this Period  
 30.00

**C.** Full Name (Last, First, Middle Initial)  
MR RICHARD L L HUNT

Mailing Address 10634 BREEDSHILL DR

City CINCINNATI State OH Zip Code 45231-1708

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

Name of Employer GENERAL ELECTRIC CO Occupation ENGINEER

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 800.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 0 5 / 1 5 / 2 0 0 7

**Transaction ID:** 20467892

Amount of Each Receipt this Period  
 100.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	230.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 117 / 160
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	<input type="checkbox"/> 12
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

Full Name (Last, First, Middle Initial) <b>A. MR RICHARD L L HUNT</b>		Date of Receipt M M / D D / Y Y Y Y 05 / 07 / 2007	
Mailing Address 10634 BREEDSHILL DR		<b>Transaction ID: 20467893</b>	
City State Zip Code CINCINNATI OH 45231-1708	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer GENERAL ELECTRIC CO	Occupation ENGINEER		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 700.00		

Full Name (Last, First, Middle Initial) <b>B. MR GARY L ALLISON</b>		Date of Receipt M M / D D / Y Y Y Y 05 / 21 / 2007	
Mailing Address 20219 KENTUCKY TRCE		<b>Transaction ID: 20467935</b>	
City State Zip Code HOCKLEY TX 77447-8784	Amount of Each Receipt this Period 30.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer RALPH WILSON PLASTICS	Occupation SALES		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 210.00		

Full Name (Last, First, Middle Initial) <b>C. MR BERNARD BLACK</b>		Date of Receipt M M / D D / Y Y Y Y 05 / 17 / 2007	
Mailing Address 6125 TAYLOR RD		<b>Transaction ID: 20468111</b>	
City State Zip Code GAHANNA OH 43230-3213	Amount of Each Receipt this Period 50.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer	Occupation		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	180.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 118 / 160
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

Full Name (Last, First, Middle Initial) <b>A. MR HJALMAR NORMAN</b>		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 0 2 / 2 0 0 7	
Mailing Address 5682 JAN WAY		<b>Transaction ID: 20468496</b>	
City <b>BIRMINGHAM</b>	State <b>AL</b>	Zip Code <b>35215-4072</b>	Amount of Each Receipt this Period 50.00
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Receipt For:	Occupation <b>RETIRED</b>	Aggregate Year-to-Date ▼ 250.00	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) <b>B. MR WILLIAM HUTCHINS</b>		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 5 / 2 0 0 7	
Mailing Address 253 REBER RD		<b>Transaction ID: 20468556</b>	
City <b>WILLSBORO</b>	State <b>NY</b>	Zip Code <b>12996-4405</b>	Amount of Each Receipt this Period 50.00
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Receipt For:	Occupation <b>QUARRY OPERATOR</b>	Aggregate Year-to-Date ▼ 250.00	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) <b>C. MR WILLIAM HUTCHINS</b>		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 8 / 2 0 0 7	
Mailing Address 253 REBER RD		<b>Transaction ID: 20468557</b>	
City <b>WILLSBORO</b>	State <b>NY</b>	Zip Code <b>12996-4405</b>	Amount of Each Receipt this Period 50.00
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Receipt For:	Occupation <b>QUARRY OPERATOR</b>	Aggregate Year-to-Date ▼ 300.00	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	150.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 119 / 160
	(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

Full Name (Last, First, Middle Initial) <b>A. MR RONALD GORHAM</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 4 / 2 0 0 7	
Mailing Address 35 COUNTY ROUTE 70		<b>Transaction ID: 20468637</b>	
City STILLWATER	State NY	Zip Code 12170-2101	Amount of Each Receipt this Period 30.00
FEC ID number of contributing federal political committee. C			
Name of Employer TECHNICAL BUILDING SERVICES	Occupation HVAC TECHNICIAN		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 245.00		

Full Name (Last, First, Middle Initial) <b>B. MR RONALD GORHAM</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 1 / 2 0 0 7	
Mailing Address 35 COUNTY ROUTE 70		<b>Transaction ID: 20468703</b>	
City STILLWATER	State NY	Zip Code 12170-2101	Amount of Each Receipt this Period 30.00
FEC ID number of contributing federal political committee. C			
Name of Employer TECHNICAL BUILDING SERVICES	Occupation HVAC TECHNICIAN		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 275.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	60.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	40884.60

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 120 / 160

<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

Full Name (Last, First, Middle Initial)

**A.** American Express Company

Mailing Address P.O. Box 53852

City Phoenix State AZ Zip Code 85072

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: 20446025

Date of Disbursement

05 / 31 / 2007

Amount of Each Disbursement this Period

204.23

Credit Card Fees

Full Name (Last, First, Middle Initial)

**B.** PM Consulting Corporation

Mailing Address c/o Books By Michele  
618 Venice Blvd.

City Venice State CA Zip Code 90291

Purpose of Disbursement  
NRA-PVF Fundraising Consulting Fee

Candidate Name

003  
Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: 20253464

Date of Disbursement

05 / 29 / 2007

Amount of Each Disbursement this Period

7035.77

NRA-PVF Fundraising Consulting Fee

Full Name (Last, First, Middle Initial)

**C.** Elizabeth Williams

Mailing Address 410 First Street, SE 2nd Floor

City Washington State DC Zip Code 20003

Purpose of Disbursement  
Travel Expense

Candidate Name

002  
Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: 20000464

Date of Disbursement

05 / 08 / 2007

Amount of Each Disbursement this Period

1817.50

Travel Expense

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

9057.50

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

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

PAGE 121 / 160

<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

Full Name (Last, First, Middle Initial)

**A. Wachovia - Account Analysis**

Mailing Address P.O. Box 2080

City Jacksonville State FL Zip Code 32231

Purpose of Disbursement  
Account Analysis Fee  
Candidate Name

001  
Category/  
Type

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

Transaction ID: 20446011

Date of Disbursement

05 / 09 / 2007

Amount of Each Disbursement this Period

999.16

Account Analysis Fee

Full Name (Last, First, Middle Initial)

**B. Wachovia - Account Analysis**

Mailing Address P.O. Box 2080

City Jacksonville State FL Zip Code 32231

Purpose of Disbursement  
Account Analysis Fee  
Candidate Name

001  
Category/  
Type

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

Transaction ID: 20446013

Date of Disbursement

05 / 09 / 2007

Amount of Each Disbursement this Period

1.98

Account Analysis Fee

Full Name (Last, First, Middle Initial)

**C. Wachovia - Account Analysis**

Mailing Address P.O. Box 2080

City Jacksonville State FL Zip Code 32231

Purpose of Disbursement  
Account Analysis Fee  
Candidate Name

001  
Category/  
Type

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

Transaction ID: 20446016

Date of Disbursement

05 / 09 / 2007

Amount of Each Disbursement this Period

13.00

Account Analysis Fee

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

1014.14

**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

Full Name (Last, First, Middle Initial) <b>A. Image Direct, LLC</b>		<b>Transaction ID:</b> 19984754 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 5 / 0 2 / 2 0 0 7
Mailing Address 4600 Wedgewood Blvd, Unit N		Amount of Each Disbursement this Period 67399.18
City Frederick State MD Zip Code 21703	NRA-PVF Fundraising Postage	
Purpose of Disbursement NRA-PVF Fundraising Postage		Category/Type 003
Candidate Name		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:

Full Name (Last, First, Middle Initial) <b>B. Image Direct, LLC</b>		<b>Transaction ID:</b> 20198793 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 5 / 2 4 / 2 0 0 7
Mailing Address 4600 Wedgewood Blvd, Unit N		Amount of Each Disbursement this Period 56436.47
City Frederick State MD Zip Code 21703	NRA-PVF Fundraising Printing & Mailing	
Purpose of Disbursement NRA-PVF Fundraising Printing & Mailing		Category/Type 003
Candidate Name		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:

Full Name (Last, First, Middle Initial) <b>C. Bank of the West</b>		<b>Transaction ID:</b> 20446012 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 5 / 3 1 / 2 0 0 7
Mailing Address 224 Box Butte Avenue		Amount of Each Disbursement this Period 12.00
City Alliance State NE Zip Code 69301	Account Analysis Fee	
Purpose of Disbursement Account Analysis Fee		Category/Type 001
Candidate Name		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	123847.65
<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)

PAGE 123 / 160

<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

Full Name (Last, First, Middle Initial)

**A.** PAYMENTECH, INC.

Mailing Address 4 NORTHEASTERN BLVD

City SALEM State NH Zip Code 03079

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: 20446021

Date of Disbursement

05 / 31 / 2007

Amount of Each Disbursement this Period

1733.69

Credit Card Fees

Full Name (Last, First, Middle Initial)

**B.** New Media Communications Inc.

Mailing Address 3046 Brecksville Road

City Richfield State OH Zip Code 44286

Purpose of Disbursement  
Website Hosting / Services Fee

Candidate Name

001  
Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: 19994801

Date of Disbursement

05 / 07 / 2007

Amount of Each Disbursement this Period

986.40

Website Hosting / Services  
Fee

Full Name (Last, First, Middle Initial)

**C.** Wachovia Bank

Mailing Address 10501 Main Street

City Fairfax State VA Zip Code 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: 20446017

Date of Disbursement

05 / 01 / 2007

Amount of Each Disbursement this Period

19.68

Credit Card Fees

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

2739.77

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

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

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

FOR LINE NUMBER: (check only one)

PAGE 124 / 160

<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

Full Name (Last, First, Middle Initial)

**A. Wachovia Bank**

Mailing Address 10501 Main Street

City Fairfax State VA Zip Code 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: 20446019

Date of Disbursement

05 / 02 / 2007

Amount of Each Disbursement this Period

109.83

Credit Card Fees

Full Name (Last, First, Middle Initial)

**B. Communications Corporation of America**

Mailing Address 13195 Freedom Way

City Boston State VA Zip Code 22713

Purpose of Disbursement  
NRA-PVF Fundraising Postage

Candidate Name

003  
Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: 20108647

Date of Disbursement

05 / 15 / 2007

Amount of Each Disbursement this Period

71606.80

NRA-PVF Fundraising Postage

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

71716.63

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

208375.69

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

PAGE 125 / 160

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

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

<p><b>A. Stevens For Senate Committee</b></p> <p>Full Name (Last, First, Middle Initial) Stevens For Senate Committee</p> <p>Mailing Address PO Box 100879</p> <p>City Anchorage State AK Zip Code 99510</p> <p>Purpose of Disbursement <span style="border: 1px solid black; padding: 2px;">011</span> Category/Type</p> <p>Candidate Name Sen. Ted Stevens</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: AK District: 1</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		<p><b>Transaction ID: 20002927</b></p> <p>Date of Disbursement  <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>5</td><td>/</td><td>0</td><td>8</td><td>/</td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table> </p> <p>Amount of Each Disbursement this Period  <table border="1"> <tr> <td>2500.00</td> </tr> </table> </p>	M	M	/	D	D	/	Y	Y	Y	Y	0	5	/	0	8	/	2	0	0	7	2500.00
M	M	/	D	D	/	Y	Y	Y	Y														
0	5	/	0	8	/	2	0	0	7														
2500.00																							

<p><b>B. Committee To Re-Elect Artur Davis To Congress, The</b></p> <p>Full Name (Last, First, Middle Initial) Committee To Re-Elect Artur Davis To Congress, The</p> <p>Mailing Address PO Box 1845</p> <p>City Birmingham State AL Zip Code 35201</p> <p>Purpose of Disbursement <span style="border: 1px solid black; padding: 2px;">011</span> Category/Type</p> <p>Candidate Name Rep. Artur Davis</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: AL District: 7</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		<p><b>Transaction ID: 20002926</b></p> <p>Date of Disbursement  <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>5</td><td>/</td><td>0</td><td>8</td><td>/</td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table> </p> <p>Amount of Each Disbursement this Period  <table border="1"> <tr> <td>1000.00</td> </tr> </table> </p>	M	M	/	D	D	/	Y	Y	Y	Y	0	5	/	0	8	/	2	0	0	7	1000.00
M	M	/	D	D	/	Y	Y	Y	Y														
0	5	/	0	8	/	2	0	0	7														
1000.00																							

<p><b>C. Mike Ross For Congress Committee</b></p> <p>Full Name (Last, First, Middle Initial) Mike Ross For Congress Committee</p> <p>Mailing Address PO Box 360</p> <p>City Prescott State AR Zip Code 71857</p> <p>Purpose of Disbursement <span style="border: 1px solid black; padding: 2px;">011</span> Category/Type</p> <p>Candidate Name Rep. Michael A. Ross</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: AR District: 4</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		<p><b>Transaction ID: 20002928</b></p> <p>Date of Disbursement  <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>5</td><td>/</td><td>0</td><td>8</td><td>/</td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table> </p> <p>Amount of Each Disbursement this Period  <table border="1"> <tr> <td>2500.00</td> </tr> </table> </p>	M	M	/	D	D	/	Y	Y	Y	Y	0	5	/	0	8	/	2	0	0	7	2500.00
M	M	/	D	D	/	Y	Y	Y	Y														
0	5	/	0	8	/	2	0	0	7														
2500.00																							

<p><b>SUBTOTAL</b> of Disbursements This Page (optional) .....</p>	<p style="text-align: right;"><b>6000.00</b></p>
<p><b>TOTAL</b> This Period (last page this line number only) .....</p>	

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

PAGE 126 / 160

<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

Full Name (Last, First, Middle Initial) <b>A. NRA Institute for Legislative Action</b>		<b>Transaction ID:</b> 19994805 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 5 / 0 7 / 2 0 0 7
Mailing Address 11250 Waples Mill Road		Amount of Each Disbursement this Period 250.00  In Kind - NRA Logo Items
City State Zip Code Fairfax VA 22030	Purpose of Disbursement In Kind - NRA Logo Items Category/Type 011	
Candidate Name Rep. Wally Herger	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: CA District: 2		

Full Name (Last, First, Middle Initial) <b>B. Prolist Inc.</b>		<b>Transaction ID:</b> 19994807 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 5 / 0 7 / 2 0 0 7
Mailing Address 8341 Beechcraft Avenue		Amount of Each Disbursement this Period 95.00  In Kind - Packing & Shipping Fees
City State Zip Code Gaithersburg MD 20879-1509	Purpose of Disbursement In Kind - Packing & Shipping Fees Category/Type 011	
Candidate Name Rep. Wally Herger	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: CA District: 2		

Full Name (Last, First, Middle Initial) <b>C. Ken Calvert For Congress</b>		<b>Transaction ID:</b> 20002930 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 5 / 0 8 / 2 0 0 7
Mailing Address PO Box 20123		Amount of Each Disbursement this Period 1000.00
City State Zip Code Riverside CA 92516	Purpose of Disbursement Category/Type 011	
Candidate Name Rep. Ken Calvert	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: CA District: 44		

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	1345.00
<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 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

Full Name (Last, First, Middle Initial) <b>A. Wally Herger For Congress Committee</b>		<b>Transaction ID:</b> 20002929 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 5 / 0 8 / 2 0 0 7
Mailing Address P.O. Box 1500		Amount of Each Disbursement this Period 1000.00
City Chico State CA Zip Code 95927	011 Category/Type	
Purpose of Disbursement		
Candidate Name Rep. Wally Herger		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CA District: 2	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. Republican National Committee</b>		<b>Transaction ID:</b> 20008538 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 5 / 0 9 / 2 0 0 7
Mailing Address 310 First St., S.E		Amount of Each Disbursement this Period 15000.00
City Washington State DC Zip Code 20003	011 Category/Type	
Purpose of Disbursement		
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) ▼	

Full Name (Last, First, Middle Initial) <b>C. Searchlight Leadership Fund</b>		<b>Transaction ID:</b> 20108796 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 5 / 1 5 / 2 0 0 7
Mailing Address 607 14th Street, NW Suite 800		Amount of Each Disbursement this Period 2000.00
City Washington State DC Zip Code 20005	011 Category/Type	
Purpose of Disbursement		
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) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	18000.00
<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)

PAGE 128 / 160

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

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

<p><b>A. Friends Of Ginny Brown-Waite</b></p> <p>Full Name (Last, First, Middle Initial) Friends Of Ginny Brown-Waite</p> <p>Mailing Address P.O. Box 865</p> <p>City Brooksville State FL Zip Code 34605</p> <p>Purpose of Disbursement <input type="checkbox"/> 011 Category/Type</p> <p>Candidate Name Rep. Virginia Brown-Waite</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: 5</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		<p><b>Transaction ID: 20002931</b></p> <p>Date of Disbursement 05 / 08 / 2007</p> <p>Amount of Each Disbursement this Period 1000.00</p>
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<p><b>B. Boyd For Congress</b></p> <p>Full Name (Last, First, Middle Initial) Boyd For Congress</p> <p>Mailing Address P.O. Box 15703</p> <p>City Tallahassee State FL Zip Code 32317</p> <p>Purpose of Disbursement <input type="checkbox"/> 011 Category/Type</p> <p>Candidate Name Rep. Allen Boyd</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: 2</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		<p><b>Transaction ID: 20108592</b></p> <p>Date of Disbursement 05 / 15 / 2007</p> <p>Amount of Each Disbursement this Period 2450.00</p>
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<p><b>C. Freedom and Democracy Fund</b></p> <p>Full Name (Last, First, Middle Initial) Freedom and Democracy Fund</p> <p>Mailing Address 610 South Boulevard</p> <p>City Tampa State FL Zip Code 33606</p> <p>Purpose of Disbursement <input type="checkbox"/> 011 Category/Type</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		<p><b>Transaction ID: 20108276</b></p> <p>Date of Disbursement 05 / 15 / 2007</p> <p>Amount of Each Disbursement this Period 2000.00</p>
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<p><b>SUBTOTAL</b> of Disbursements This Page (optional) .....</p>	<p><b>5450.00</b></p>
<p><b>TOTAL</b> This Period (last page this line number only) .....</p>	

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

PAGE 129 / 160

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

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

<p><b>A. Friends Of Jack Kingston</b></p> <p>Full Name (Last, First, Middle Initial) Friends Of Jack Kingston</p> <p>Mailing Address PO Box 2133</p> <p>City Savannah State GA Zip Code 31402</p> <p>Purpose of Disbursement <input type="checkbox"/> 011 Category/Type</p> <p>Candidate Name Rep. Jack Kingston</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: GA District: 1</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		<p><b>Transaction ID: 20002932</b></p> <p>Date of Disbursement 05 / 08 / 2007</p> <p>Amount of Each Disbursement this Period 1000.00</p>
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<p><b>B. Price For Congress</b></p> <p>Full Name (Last, First, Middle Initial) Price For Congress</p> <p>Mailing Address P.O. Box 425</p> <p>City Roswell State GA Zip Code 30077</p> <p>Purpose of Disbursement <input type="checkbox"/> 011 Category/Type</p> <p>Candidate Name Mr. Thomas Price</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: GA District: 6</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		<p><b>Transaction ID: 20002933</b></p> <p>Date of Disbursement 05 / 08 / 2007</p> <p>Amount of Each Disbursement this Period 1000.00</p>
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<p><b>C. Boswell For Congress</b></p> <p>Full Name (Last, First, Middle Initial) Boswell For Congress</p> <p>Mailing Address PO Box 6220</p> <p>City Des Moines State IA Zip Code 50309</p> <p>Purpose of Disbursement <input type="checkbox"/> 011 Category/Type</p> <p>Candidate Name Rep. Leonard L. Boswell</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IA District: 3</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		<p><b>Transaction ID: 20002935</b></p> <p>Date of Disbursement 05 / 08 / 2007</p> <p>Amount of Each Disbursement this Period 1000.00</p>
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<p><b>SUBTOTAL</b> of Disbursements This Page (optional) .....</p>	<p><b>3000.00</b></p>
<p><b>TOTAL</b> This Period (last page this line number only) .....</p>	<p>.....</p>

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 130 / 160

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

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

<p><b>A. Volunteers For Shimkus</b></p> <p>Full Name (Last, First, Middle Initial) Volunteers For Shimkus</p> <p>Mailing Address PO Box 5458</p> <p>City Springfield State IL Zip Code 62705</p> <p>Purpose of Disbursement <input type="checkbox"/> 011 Category/Type</p> <p>Candidate Name Rep. John M. Shimkus</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 19</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		<p><b>Transaction ID: 20002934</b></p> <p>Date of Disbursement 05 / 08 / 2007</p> <p>Amount of Each Disbursement this Period 1000.00</p>
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<p><b>B. Moran For Kansas</b></p> <p>Full Name (Last, First, Middle Initial) Moran For Kansas</p> <p>Mailing Address P.O. Box 1151</p> <p>City Hays State KS Zip Code 67601</p> <p>Purpose of Disbursement <input type="checkbox"/> 011 Category/Type</p> <p>Candidate Name Rep. Jerry Moran</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: KS District: 1</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		<p><b>Transaction ID: 20002937</b></p> <p>Date of Disbursement 05 / 08 / 2007</p> <p>Amount of Each Disbursement this Period 1000.00</p>
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<p><b>C. Pat Roberts For Senate</b></p> <p>Full Name (Last, First, Middle Initial) Pat Roberts For Senate</p> <p>Mailing Address PO Box 433</p> <p>City Great Bend State KS Zip Code 67530</p> <p>Purpose of Disbursement <input type="checkbox"/> 011 Category/Type</p> <p>Candidate Name Sen. Pat Roberts</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: KS District: 2</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		<p><b>Transaction ID: 20002936</b></p> <p>Date of Disbursement 05 / 08 / 2007</p> <p>Amount of Each Disbursement this Period 2000.00</p>
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<p><b>SUBTOTAL</b> of Disbursements This Page (optional) .....</p>	<p><b>4000.00</b></p>
<p><b>TOTAL</b> This Period (last page this line number only) .....</p>	<p>.....</p>

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 131 / 160

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

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NAME OF COMMITTEE (In Full)

National Rifle Association of America Political Victory Fund

<p><b>A.</b> Full Name (Last, First, Middle Initial) Ben Chandler For Congress</p> <p>Mailing Address P. O. Box 12678</p> <p>City Lexington State KY Zip Code 40508</p> <p>Purpose of Disbursement <input type="checkbox"/> 011 Category/Type</p> <p>Candidate Name Ben Chandler</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: KY District: 6</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		<p><b>Transaction ID:</b> 20002939 <b>Date of Disbursement:</b> 05 / 08 / 2007</p> <p>Amount of Each Disbursement this Period 1000.00</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Geoff Davis For Congress</p> <p>Mailing Address 3161 Dixie Highway Suite F</p> <p>City Erlanger State KY Zip Code 41018</p> <p>Purpose of Disbursement <input type="checkbox"/> 011 Category/Type</p> <p>Candidate Name Mr. Geoffrey Davis</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: KY District: 4</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		<p><b>Transaction ID:</b> 20002938 <b>Date of Disbursement:</b> 05 / 08 / 2007</p> <p>Amount of Each Disbursement this Period 1000.00</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Charles Boustany Jr MD For Congress Inc</p> <p>Mailing Address PO Box 80126</p> <p>City Lafayette State LA Zip Code 70598</p> <p>Purpose of Disbursement <input type="checkbox"/> 011 Category/Type</p> <p>Candidate Name Mr. Charles Boustany</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: LA District: 7</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		<p><b>Transaction ID:</b> 20002940 <b>Date of Disbursement:</b> 05 / 08 / 2007</p> <p>Amount of Each Disbursement this Period 500.00</p>

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

2500.00

**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 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

Full Name (Last, First, Middle Initial)

**A.** Peterson For Congress

Mailing Address 26192 Floyd Lake Point Road

City State Zip Code  
Detroit Lakes MN 56501

Purpose of Disbursement

011  
Category/  
Type

Candidate Name  
Rep. Collin C. Peterson

Office Sought:  House  
 Senate  
 President

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

State: MN District: 7

Transaction ID: 20002942

Date of Disbursement

05 / 08 / 2007

Amount of Each Disbursement this Period

2500.00

Full Name (Last, First, Middle Initial)

**B.** Coleman For Senate 08

Mailing Address 7300 Hudson Blvd Suite 270a

City State Zip Code  
St Paul MN 55128

Purpose of Disbursement

011  
Category/  
Type

Candidate Name  
Sen. Norm Coleman

Office Sought:  House  
 Senate  
 President

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

State: MN District: 1

Transaction ID: 20002941

Date of Disbursement

05 / 08 / 2007

Amount of Each Disbursement this Period

2500.00

Full Name (Last, First, Middle Initial)

**C.** Todd Akin For Congress

Mailing Address PO Box 31222

City State Zip Code  
St Louis MO 63131

Purpose of Disbursement

011  
Category/  
Type

Candidate Name  
Rep. Todd Akin

Office Sought:  House  
 Senate  
 President

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

State: MO District: 2

Transaction ID: 20002944

Date of Disbursement

05 / 08 / 2007

Amount of Each Disbursement this Period

1000.00

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

6000.00

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

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

PAGE 133 / 160

<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

Full Name (Last, First, Middle Initial) <b>A. Citizens For Cochran</b>		<b>Transaction ID: 20002943</b> Date of Disbursement M M / D D / Y Y Y Y 0 5 / 0 8 / 2 0 0 7	
Mailing Address PO Box 7183		Amount of Each Disbursement this Period 2500.00	
City State Zip Code Tupelo MS 38802	011 Category/ Type		
Purpose of Disbursement			
Candidate Name Sen. Thad Cochran			
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: MS District: 1	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>B. Lee Terry For Congress</b>		<b>Transaction ID: 20002945</b> Date of Disbursement M M / D D / Y Y Y Y 0 5 / 0 8 / 2 0 0 7	
Mailing Address P.O. Box 540098		Amount of Each Disbursement this Period 1000.00	
City State Zip Code Omaha NE 68154	011 Category/ Type		
Purpose of Disbursement			
Candidate Name Rep. Lee Terry			
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NE District: 2	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>C. Adrian Smith For Congress</b>		<b>Transaction ID: 20002946</b> Date of Disbursement M M / D D / Y Y Y Y 0 5 / 0 8 / 2 0 0 7	
Mailing Address 3321 Avenue I Suite 6 Suite 6		Amount of Each Disbursement this Period 1000.00	
City State Zip Code Scottsbluff NE 69361	011 Category/ Type		
Purpose of Disbursement			
Candidate Name Adrian Smith			
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NE District: 3	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	4500.00
<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)

PAGE 134 / 160

<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

Full Name (Last, First, Middle Initial) <b>A. Garrett For Congress</b>		Transaction ID: 20002947 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 0 8 / 2 0 0 7	
Mailing Address PO Box 905		Amount of Each Disbursement this Period 1000.00	
City Newton State NJ Zip Code 07860	Purpose of Disbursement 011 Category/Type		
Candidate Name E Scott Garrett			
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NJ District: 5	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>B. Heather Wilson For Congress</b>		Transaction ID: 20002948 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 0 8 / 2 0 0 7	
Mailing Address P.O. Box 14070		Amount of Each Disbursement this Period 1000.00	
City Albuquerque State NM Zip Code 87191	Purpose of Disbursement 011 Category/Type		
Candidate Name Rep. Heather A. Wilson			
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NM District: 1	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>C. Friends Of John Boehner</b>		Transaction ID: 20002950 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 0 8 / 2 0 0 7	
Mailing Address 7908-12 Cincinnati Dayton Road		Amount of Each Disbursement this Period 2000.00	
City West Chester State OH Zip Code 45069	Purpose of Disbursement 011 Category/Type		
Candidate Name Rep. John A. Boehner			
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: OH District: 8	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	4000.00
<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)

PAGE 135 / 160

<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

Full Name (Last, First, Middle Initial) <b>A. Steve Chabot For Congress</b>		<b>Transaction ID: 20002949</b> Date of Disbursement M M / D D / Y Y Y Y 0 5 / 0 8 / 2 0 0 7	
Mailing Address 3339 Harrison Ave.		Amount of Each Disbursement this Period 1000.00	
City Cincinnati State OH Zip Code 45211	Purpose of Disbursement Candidate Name Rep. Steve Chabot Category/Type 011		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: OH District: 1	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>B. NRA Institute for Legislative Action</b>		<b>Transaction ID: 20008524</b> Date of Disbursement M M / D D / Y Y Y Y 0 5 / 0 8 / 2 0 0 7	
Mailing Address 11250 Waples Mill Road		Amount of Each Disbursement this Period 150.00	
City Fairfax State VA Zip Code 22030	Purpose of Disbursement In Kind - Reception Room Rental Candidate Name Rep. Steve Chabot Category/Type 011		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: OH District: 1	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	In Kind - Reception Room Rental	

Full Name (Last, First, Middle Initial) <b>C. Ohio Republican Party - Federal Account</b>		<b>Transaction ID: 20167332</b> Date of Disbursement M M / D D / Y Y Y Y 0 5 / 2 3 / 2 0 0 7	
Mailing Address 211 S. 5th Street		Amount of Each Disbursement this Period 2000.00	
City Columbus State OH Zip Code 43215	Purpose of Disbursement Recount Account Candidate Name Category/Type 011		
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) ▼	Recount Account	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	3150.00
<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)

PAGE 136 / 160

<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.** Friends Of Jim Inhofe Committee

Full Name (Last, First, Middle Initial)

Mailing Address PO Box 13300

City Oklahoma City State OK Zip Code 73113

Purpose of Disbursement

011  
Category/  
Type

Candidate Name  
Sen. James M. Inhofe

Office Sought:  House  Senate  President  
Disbursement For: 2008  Primary  General  Other (specify) ▼  
State: OK District: 1

Transaction ID: 20002951

Date of Disbursement

05 / 08 / 2007

Amount of Each Disbursement this Period

1000.00

**B.** Friends Of John Peterson

Full Name (Last, First, Middle Initial)

Mailing Address 114 W. State Street  
PO Box 295

City Pleasantville State PA Zip Code 16341

Purpose of Disbursement

011  
Category/  
Type

Candidate Name  
Rep. John E. Peterson

Office Sought:  House  Senate  President  
Disbursement For: 2008  Primary  General  Other (specify) ▼  
State: PA District: 5

Transaction ID: 20003103

Date of Disbursement

05 / 08 / 2007

Amount of Each Disbursement this Period

1000.00

**C.** Friends Of Joe Pitts

Full Name (Last, First, Middle Initial)

Mailing Address PO Box 775

City Unionville State PA Zip Code 19375

Purpose of Disbursement

011  
Category/  
Type

Candidate Name  
Rep. Joseph R. Pitts

Office Sought:  House  Senate  President  
Disbursement For: 2008  Primary  General  Other (specify) ▼  
State: PA District: 16

Transaction ID: 20003542

Date of Disbursement

05 / 08 / 2007

Amount of Each Disbursement this Period

1000.00

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

3000.00

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

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 137 / 160

<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

Full Name (Last, First, Middle Initial) <b>A. Jim Gerlach For Congress Committee</b>		<b>Transaction ID: 20003393</b> Date of Disbursement M M / D D / Y Y Y Y 0 5 / 0 8 / 2 0 0 7	
Mailing Address PO Box 87		Amount of Each Disbursement this Period 1000.00	
City Uwchland State PA Zip Code 19480	Purpose of Disbursement 011 Category/ Type	Candidate Name Mr. Jim Gerlach	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 6	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>B. Henry E. Brown Jr. For Congress</b>		<b>Transaction ID: 20003543</b> Date of Disbursement M M / D D / Y Y Y Y 0 5 / 0 8 / 2 0 0 7	
Mailing Address P. O. Box 61886		Amount of Each Disbursement this Period 1000.00	
City North Charleston State SC Zip Code 29419	Purpose of Disbursement 011 Category/ Type	Candidate Name Rep. Henry E. Brown, Jr.	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: SC District: 1	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>C. Joe Wilson For Congress Committee</b>		<b>Transaction ID: 20003544</b> Date of Disbursement M M / D D / Y Y Y Y 0 5 / 0 8 / 2 0 0 7	
Mailing Address Post Office Box 2145		Amount of Each Disbursement this Period 1000.00	
City West Columbia State SC Zip Code 29171	Purpose of Disbursement 011 Category/ Type	Candidate Name Joe Wilson	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: SC District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	3000.00
<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)

PAGE 138 / 160

<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

Full Name (Last, First, Middle Initial) <b>A. Duncan For Congress</b>		<b>Transaction ID:</b> 20003546 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 5 / 0 8 / 2 0 0 7
Mailing Address PO Box 2646		Amount of Each Disbursement this Period 1000.00
City Knoxville	State TN	
Zip Code 37901		
Purpose of Disbursement		
Candidate Name Rep. John J. Duncan, Jr.		011 Category/ Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: TN District: 2		

Full Name (Last, First, Middle Initial) <b>B. Friends Of Zach Wamp</b>		<b>Transaction ID:</b> 20003547 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 5 / 0 8 / 2 0 0 7
Mailing Address P.O. Box 24804 651 E. Fourth St. Suite 200		Amount of Each Disbursement this Period 2000.00
City Chattanooga	State TN	
Zip Code 37422		
Purpose of Disbursement		
Candidate Name Rep. Zach Wamp		011 Category/ Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: TN District: 3		

Full Name (Last, First, Middle Initial) <b>C. David Davis Victory Fund</b>		<b>Transaction ID:</b> 20003545 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 5 / 0 8 / 2 0 0 7
Mailing Address 2016 Northwood Drive		Amount of Each Disbursement this Period 1000.00
City Johnson City	State TN	
Zip Code 37601		
Purpose of Disbursement		
Candidate Name Mr. David Davis		011 Category/ Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: TN District: 1		

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	4000.00
<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 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

Full Name (Last, First, Middle Initial) <b>A. Texans For Senator John Cornyn Inc</b>		<b>Transaction ID: 20003548</b> Date of Disbursement M M / D D / Y Y Y Y 0 5 / 0 8 / 2 0 0 7
Mailing Address 6850 Austin Centre Blvd Suite 180		Amount of Each Disbursement this Period 3000.00
City Austin State TX Zip Code 78731		
Purpose of Disbursement	011 Category/ Type	
Candidate Name Mr. John Cornyn		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: TX District: 2	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. Friends Of Jeb Hensarling</b>		<b>Transaction ID: 20003549</b> Date of Disbursement M M / D D / Y Y Y Y 0 5 / 0 8 / 2 0 0 7
Mailing Address PO Box 820504		Amount of Each Disbursement this Period 1000.00
City Dallas State TX Zip Code 75382		
Purpose of Disbursement	011 Category/ Type	
Candidate Name Rep. Jeb Hensarling		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: TX District: 5	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. Bob Goodlatte For Congress Committee</b>		<b>Transaction ID: 20003550</b> Date of Disbursement M M / D D / Y Y Y Y 0 5 / 0 8 / 2 0 0 7
Mailing Address P.O. Box 292		Amount of Each Disbursement this Period 2000.00
City Roanoke State VA Zip Code 24002		
Purpose of Disbursement	011 Category/ Type	
Candidate Name Rep. Robert W. Goodlatte		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: VA District: 6	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	6000.00
<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)

PAGE 140 / 160

<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

Full Name (Last, First, Middle Initial) <b>A. New Republican Majority Fund</b>		<b>Transaction ID:</b> 20008530 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 5 / 0 9 / 2 0 0 7
Mailing Address 201 N. Union Street, Suite 530		Amount of Each Disbursement this Period 2450.00
City Alexandria State VA Zip Code 22314		
Purpose of Disbursement	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) ▼	

Full Name (Last, First, Middle Initial) <b>B. The Blue Dog PAC</b>		<b>Transaction ID:</b> 20108800 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 5 / 1 5 / 2 0 0 7
Mailing Address 6849 Old Dominion Drive, Suite 22		Amount of Each Disbursement this Period 2450.00
City McLean State VA Zip Code 22101		
Purpose of Disbursement	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) ▼	

Full Name (Last, First, Middle Initial) <b>C. ERIC PAC</b>		<b>Transaction ID:</b> 20108579 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 5 / 1 5 / 2 0 0 7
Mailing Address Every Republican Is Crucial PAC 25 East Main Street, Suite 200		Amount of Each Disbursement this Period 1500.00
City Richmond State VA Zip Code 23219		
Purpose of Disbursement	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) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	6400.00
<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)

PAGE 141 / 160

<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

Full Name (Last, First, Middle Initial)

**A.** Alan Mollohan For Congress Committee

Mailing Address P. O. Box 1343

City Fairmont State WV Zip Code 26555

Purpose of Disbursement

Candidate Name  
Rep. Alan B. Mollohan

Office Sought:  House  
 Senate  
 President

State: WV District: 1

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

011  
Category/  
Type

Transaction ID: 20003551

Date of Disbursement

05 / 08 / 2007

Amount of Each Disbursement this Period

1000.00

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

1000.00

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

81345.00

**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)

PAGE 142 / 160

<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

Full Name (Last, First, Middle Initial) <b>A. Republican Governors Association</b>		<b>Transaction ID:</b> 20016445 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 5 / 0 9 / 2 0 0 7
Mailing Address 1747 Pennsylvania Ave., NW Suite		Amount of Each Disbursement this Period 25000.00
City Washington State DC Zip Code 20006	011 Category/ Type	
Purpose of Disbursement Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		

Full Name (Last, First, Middle Initial) <b>B. Citizens for Bonini</b>		<b>Transaction ID:</b> 20008543 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 5 / 0 9 / 2 0 0 7
Mailing Address 276 Banning Road		Amount of Each Disbursement this Period 125.00
City Camden-Wyoming State DE Zip Code 19934	011 Category/ Type	
Purpose of Disbursement Colin Bonini, STATE SENATE DE Candidate Name Colin Bonini		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: DE District: 16		

Colin Bonini, STATE SENATE DE

Full Name (Last, First, Middle Initial) <b>C. Committee to Elect Bruce Ennis</b>		<b>Transaction ID:</b> 20008545 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 5 / 0 9 / 2 0 0 7
Mailing Address 522 Smyrna/Clayton Blvd.		Amount of Each Disbursement this Period 100.00
City Smyrna State DE Zip Code 19977	011 Category/ Type	
Purpose of Disbursement BRUCE C. ENNIS, STATE HOUSE 28th DE Candidate Name BRUCE C. ENNIS		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: DE District: 28		

BRUCE C. ENNIS, STATE HOUSE 28th DE

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	25225.00
<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)

PAGE 143 / 160

<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

Full Name (Last, First, Middle Initial) <b>A. Friends of Vince Lofink</b>		<b>Transaction ID:</b> 20008544 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 5 / 0 9 / 2 0 0 7	
Mailing Address 103 Veronica Lane		Amount of Each Disbursement this Period 150.00	
City Bear State DE Zip Code 19701	Vincent Lofink, STATE HOUSE 27th DE		
Purpose of Disbursement Vincent Lofink, STATE HOUSE 27th DE			011 Category/ Type
Candidate Name Vincent Lofink			Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: DE District: 27

Full Name (Last, First, Middle Initial) <b>B. Committee to Elect Michael Mulrooney</b>		<b>Transaction ID:</b> 20008547 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 5 / 0 9 / 2 0 0 7	
Mailing Address 32 Saratoga Drive		Amount of Each Disbursement this Period 75.00	
City New Castle State DE Zip Code 19720	Michael Mulrooney, STATE HOUSE 17th DE		
Purpose of Disbursement Michael Mulrooney, STATE HOUSE 17th DE			011 Category/ Type
Candidate Name Michael Mulrooney			Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: DE District: 17

Full Name (Last, First, Middle Initial) <b>C. Friends for John Still</b>		<b>Transaction ID:</b> 20008546 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 5 / 0 9 / 2 0 0 7	
Mailing Address P.O. Box 311		Amount of Each Disbursement this Period 200.00	
City Dover State DE Zip Code 19903	John Still, STATE SENATE DE		
Purpose of Disbursement John Still, STATE SENATE DE			011 Category/ Type
Candidate Name John Still			Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: DE District: 17

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	425.00
<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)

PAGE 144 / 160

<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

Full Name (Last, First, Middle Initial)

**A.** Friends of Nancy H. Wagner

Mailing Address 283 Troon Road

City Dover State DE Zip Code 19904

Purpose of Disbursement  
Nancy Wagner, STATE HOUSE 31st DE

Candidate Name  
Nancy H. Wagner

011  
Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

State: DE District: 31

Transaction ID: 20008552

Date of Disbursement

05 / 09 / 2007

Amount of Each Disbursement this Period

150.00

Nancy Wagner, STATE HOUSE  
31st DE

Full Name (Last, First, Middle Initial)

**B.** Friends of Valerie Longhurst

Mailing Address 11 Winchester Court

City Bear State DE Zip Code 19701

Purpose of Disbursement  
Valerie Longhurst, STATE HOUSE 15th DE

Candidate Name  
DE Rep. Valerie Longhurst

011  
Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

State: DE District: 15

Transaction ID: 20008549

Date of Disbursement

05 / 09 / 2007

Amount of Each Disbursement this Period

75.00

Valerie Longhurst, STATE  
HOUSE 15th DE

Full Name (Last, First, Middle Initial)

**C.** Prolist Inc.

Mailing Address 8341 Beechcraft Avenue

City Gaithersburg State MD Zip Code 20879-1509

Purpose of Disbursement  
Independent Expenditure - Postcards

Candidate Name  
Anthony Suarez

011  
Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2007  
 Primary  General  
 Other (specify) ▼

State: FL District: 49  
2007 FL Special Elec

Transaction ID: 20103848

Date of Disbursement

05 / 08 / 2007

Amount of Each Disbursement this Period

1004.66

Independent Expenditure -  
Postcards

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

1229.66

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

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

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

FOR LINE NUMBER: (check only one)

PAGE 145 / 160

<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

Full Name (Last, First, Middle Initial) <b>A. Edmonds Associates, Inc.</b>		Transaction ID: 20248857 Date of Disbursement 05 / 23 / 2007	
Mailing Address 8221 Old Courthouse Road, Suite 2		Amount of Each Disbursement this Period 34949.00	
City Vienna State VA Zip Code 22182	Purpose of Disbursement Independent Expenditure - Radio Ads	011 Category/Type	
Candidate Name Dennis Baxley	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2007 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ 2007 FL Special Elec		
State: FL District: 3	Independent Expenditure - Radio Ads		

Full Name (Last, First, Middle Initial) <b>B. Edmonds Associates, Inc.</b>		Transaction ID: 20275787 Date of Disbursement 05 / 31 / 2007	
Mailing Address 8221 Old Courthouse Road, Suite 2		Amount of Each Disbursement this Period 10105.00	
City Vienna State VA Zip Code 22182	Purpose of Disbursement Independent Expenditure - Radio Ads	011 Category/Type	
Candidate Name Dennis Baxley	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2007 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ 2007 FL Special Elec		
State: FL District: 3	Independent Expenditure - Radio Ads		

Full Name (Last, First, Middle Initial) <b>C. Master Print, Inc.</b>		Transaction ID: 20281836 Date of Disbursement 05 / 31 / 2007	
Mailing Address P.O. Box 1467		Amount of Each Disbursement this Period 1568.08	
City Newington State VA Zip Code 22122	Purpose of Disbursement Independent Expenditure - Printing	011 Category/Type	
Candidate Name Dennis Baxley	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2007 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ 2007 FL Special Elec		
State: FL District: 3	Independent Expenditure - Printing		

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	46622.08
<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)

PAGE 146 / 160

<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. Prolist Inc.</b></p> <p>Full Name (Last, First, Middle Initial)</p> <p>Mailing Address 8341 Beechcraft Avenue</p> <p>City Gaithersburg State MD Zip Code 20879-1509</p> <p>Purpose of Disbursement Independent Expenditure - Postcards</p> <p>Candidate Name Dennis Baxley</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: 3</p>		<p>Transaction ID: 20281841</p> <p>Date of Disbursement 05 / 31 / 2007</p> <p>Amount of Each Disbursement this Period 6158.49</p> <p>011 Category/ Type</p> <p>Independent Expenditure - Postcards</p> <p>Disbursement For: 2007 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ 2007 FL Special Elec</p>
--	--	---

<p><b>B. Johnson for Senate</b></p> <p>Full Name (Last, First, Middle Initial)</p> <p>Mailing Address 128 Baymeadow Point</p> <p>City Savannah State GA Zip Code 31405</p> <p>Purpose of Disbursement Void - Johnson for Senate</p> <p>Candidate Name ERIC JOHNSON</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: GA District: 1</p>		<p>Transaction ID: 19993631</p> <p>Date of Disbursement 05 / 07 / 2007</p> <p>Amount of Each Disbursement this Period -1000.00</p> <p>011 Category/ Type</p> <p>Void - Johnson for Senate</p> <p>Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ 2006 GA General Elec</p>
---	--	--

<p><b>C. Johnson for Senate</b></p> <p>Full Name (Last, First, Middle Initial)</p> <p>Mailing Address 128 Baymeadow Point</p> <p>City Savannah State GA Zip Code 31405</p> <p>Purpose of Disbursement ERIC JOHNSON, STATE SENATE GA</p> <p>Candidate Name ERIC JOHNSON</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: GA District: 1</p>		<p>Transaction ID: 19993645</p> <p>Date of Disbursement 05 / 07 / 2007</p> <p>Amount of Each Disbursement this Period 1000.00</p> <p>011 Category/ Type</p> <p>ERIC JOHNSON, STATE SENATE GA</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>
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<p><b>SUBTOTAL</b> of Disbursements This Page (optional) .....</p>	<p>6158.49</p>
<p><b>TOTAL</b> This Period (last page this line number only) .....</p>	<p></p>

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

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

FOR LINE NUMBER: (check only one)

PAGE 147 / 160

<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) David Shafer Senate Committee</p> <p>Mailing Address P.O. Box 880</p> <p>City Duluth State GA Zip Code 30096</p> <p>Purpose of Disbursement DAVID SHAFER, STATE SENATE GA</p> <p>Candidate Name DAVID SHAFER</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: GA District: 48</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		<p><b>Transaction ID:</b> 20008557 <b>Date of Disbursement:</b> 05 / 09 / 2007</p> <p>Amount of Each Disbursement this Period 500.00</p> <p>011 Category/ Type</p> <p>DAVID SHAFER, STATE SENATE GA</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Wiles for Senate</p> <p>Mailing Address 800 Kennesaw Avenue, Suite 400</p> <p>City Marietta State GA Zip Code 30060</p> <p>Purpose of Disbursement John Wiles, STATE SENATE GA</p> <p>Candidate Name GA Sen. John Wiles</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: GA District: 37</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		<p><b>Transaction ID:</b> 20008561 <b>Date of Disbursement:</b> 05 / 09 / 2007</p> <p>Amount of Each Disbursement this Period 500.00</p> <p>011 Category/ Type</p> <p>John Wiles, STATE SENATE GA</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Committee to Elect Greg Goggans</p> <p>Mailing Address 1300 Hampton Road</p> <p>City Douglas State GA Zip Code 31533</p> <p>Purpose of Disbursement Greg Goggans, STATE SENATE GA</p> <p>Candidate Name GA Sen. Greg Goggans</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: GA District: 7</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		<p><b>Transaction ID:</b> 20008553 <b>Date of Disbursement:</b> 05 / 09 / 2007</p> <p>Amount of Each Disbursement this Period 500.00</p> <p>011 Category/ Type</p> <p>Greg Goggans, STATE SENATE GA</p>

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

1500.00

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

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

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

FOR LINE NUMBER: (check only one)

PAGE 148 / 160

<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

Full Name (Last, First, Middle Initial) <b>A. Friends for Chip Rogers</b>		<b>Transaction ID: 20008559</b> Date of Disbursement 05 / 09 / 2007
Mailing Address P.O. Box 813		Amount of Each Disbursement this Period 1000.00
City Woodstock State GA Zip Code 30188	Purpose of Disbursement Chip Rogers, STATE SENATE GA Candidate Name GA Sen. Chip Rogers Category/Type 011	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: GA District: 21	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Chip Rogers, STATE SENATE GA

Full Name (Last, First, Middle Initial) <b>B. Jeff Mullis for Re-Election</b>		<b>Transaction ID: 20008554</b> Date of Disbursement 05 / 09 / 2007
Mailing Address 212 English Avenue		Amount of Each Disbursement this Period 1000.00
City Chickamauga State GA Zip Code 30707	Purpose of Disbursement Jeff Mullis, STATE SENATE GA Candidate Name GA Sen. Jeff Mullis Category/Type 011	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: GA District: 53	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Jeff Mullis, STATE SENATE GA

Full Name (Last, First, Middle Initial) <b>C. Senator Smith Re-Election Campaign</b>		<b>Transaction ID: 20008560</b> Date of Disbursement 05 / 09 / 2007
Mailing Address P.O. Box 1953		Amount of Each Disbursement this Period 1000.00
City Rome State GA Zip Code 30162	Purpose of Disbursement Preston Smith, STATE SENATE GA Candidate Name GA Sen. Preston Smith Category/Type 011	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: GA District: 52	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Preston Smith, STATE SENA- TE GA

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	3000.00
<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)

PAGE 149 / 160

<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

Full Name (Last, First, Middle Initial) <b>A. J.B. Powell for Re-Election</b>		Transaction ID: 20008563 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 0 9 / 2 0 0 7	
Mailing Address 128 Baymeadow Point		Amount of Each Disbursement this Period 500.00	
City Blythe State GA Zip Code 30805	Purpose of Disbursement J.B. Powell, STATE SENATE GA Candidate Name GA Sen. J.B. Powell Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: GA District: 23	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type 011 J.B. Powell, STATE SENATE GA

Full Name (Last, First, Middle Initial) <b>B. Prolist Inc.</b>		Transaction ID: 20001846 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 0 8 / 2 0 0 7	
Mailing Address 8341 Beechcraft Avenue		Amount of Each Disbursement this Period 314.91	
City Gaithersburg State MD Zip Code 20879-1509	Purpose of Disbursement Member Mailing Candidate Name	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type 001 Member Mailing

Full Name (Last, First, Middle Initial) <b>C. Prolist Inc.</b>		Transaction ID: 20281842 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 3 1 / 2 0 0 7	
Mailing Address 8341 Beechcraft Avenue		Amount of Each Disbursement this Period 2874.22	
City Gaithersburg State MD Zip Code 20879-1509	Purpose of Disbursement Member Mailing - Print & Mail Candidate Name	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type 001 Member Mailing - Print & Mail

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	3689.13
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	(Empty box)

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 150 / 160

<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. JDC Genesee Fund</b></p> <p>Full Name (Last, First, Middle Initial) JDC Genesee Fund</p> <p>Mailing Address 12405 Jenning Road</p> <p>City Linden State MI Zip Code 48451</p> <p>Purpose of Disbursement</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p>		<p><b>Transaction ID: 20008565</b></p> <p>Date of Disbursement 05 / 09 / 2007</p> <p>Amount of Each Disbursement this Period 1000.00</p> <p>011 Category/ Type</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>
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<p><b>B. Barbour for Governor</b></p> <p>Full Name (Last, First, Middle Initial) Barbour for Governor</p> <p>Mailing Address P.O. Box 1499</p> <p>City Yazoo City State MS Zip Code 39194</p> <p>Purpose of Disbursement Haley Barbour, GOVERNOR MS</p> <p>Candidate Name Haley Barbour</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MS District:</p>		<p><b>Transaction ID: 20008539</b></p> <p>Date of Disbursement 05 / 09 / 2007</p> <p>Amount of Each Disbursement this Period 1000.00</p> <p>011 Category/ Type</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ 2007 MS Primary Elec</p> <p>Haley Barbour, GOVERNOR MS</p>
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<p><b>C. ND House &amp; Senate Republican Caucuses</b></p> <p>Full Name (Last, First, Middle Initial) ND House &amp; Senate Republican Caucuses</p> <p>Mailing Address P.O. Box 1917</p> <p>City Bismarck State ND Zip Code 58502</p> <p>Purpose of Disbursement</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p>		<p><b>Transaction ID: 20008567</b></p> <p>Date of Disbursement 05 / 09 / 2007</p> <p>Amount of Each Disbursement this Period 500.00</p> <p>011 Category/ Type</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>
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<p><b>SUBTOTAL</b> of Disbursements This Page (optional) .....</p>	<p><b>2500.00</b></p>
<p><b>TOTAL</b> This Period (last page this line number only) .....</p>	

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

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

FOR LINE NUMBER: (check only one)

PAGE 151 / 160

<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

Full Name (Last, First, Middle Initial)

**A.** Friends of Assemblywoman Alison Littell McHose

Mailing Address 49 Church Street

City Franklin State NJ Zip Code 07416

Purpose of Disbursement  
Alison McHose, STATE HOUSE 24th NJ

Candidate Name  
NJ Asm. Alison McHose

011  
Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2007  
 Primary  General  
 Other (specify) ▼

State: NJ District: 24

Transaction ID: 20269054

Date of Disbursement

05 / 30 / 2007

Amount of Each Disbursement this Period

1500.00

Alison McHose, STATE HOUSE  
24th NJ

Full Name (Last, First, Middle Initial)

**B.** Guy Gregg for Senate

Mailing Address P.O. Box 282

City Chester State NJ Zip Code 07930

Purpose of Disbursement  
Guy Gregg, STATE SENATE NJ

Candidate Name  
Guy Gregg

011  
Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2007  
 Primary  General  
 Other (specify) ▼

State: NJ District: 24

Transaction ID: 20269045

Date of Disbursement

05 / 30 / 2007

Amount of Each Disbursement this Period

1500.00

Guy Gregg, STATE SENATE  
NJ

Full Name (Last, First, Middle Initial)

**C.** Batchelder for Representative Committee

Mailing Address 105 W. Liberty Street

City Medina State OH Zip Code 44256

Purpose of Disbursement  
BILL BATCHELDER, STATE HOUSE 69th OH

Candidate Name  
BILL BATCHELDER

011  
Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

State: OH District: 69

Transaction ID: 20008613

Date of Disbursement

05 / 09 / 2007

Amount of Each Disbursement this Period

250.00

BILL BATCHELDER, STATE HO-  
USE 69th OH

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

3250.00

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

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

PAGE 152 / 160

<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. Husted for Ohio</b> Full Name (Last, First, Middle Initial) Mailing Address 148 Sherbrooke Drive City Kettering State OH Zip Code 45429 Purpose of Disbursement JOHN HUSTED, STATE HOUSE 37th OH Candidate Name JOHN HUSTED Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: OH District: 37 Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<b>Transaction ID:</b> 20008599 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 5 / 0 9 / 2 0 0 7 Amount of Each Disbursement this Period 500.00 JOHN HUSTED, STATE HOUSE 37th OH
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<b>B. Oelslager for Ohio Committee</b> Full Name (Last, First, Middle Initial) Mailing Address 1585 Yorkshire Trace, SE City North Canton State OH Zip Code 44709 Purpose of Disbursement SCOTT OELSLAGER, STATE HOUSE 51st OH Candidate Name SCOTT OELSLAGER Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: OH District: 51 Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<b>Transaction ID:</b> 20008598 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 5 / 0 9 / 2 0 0 7 Amount of Each Disbursement this Period 250.00 SCOTT OELSLAGER, STATE HO- USE 51st OH
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<b>C. Committee to Elect Lynn Wachtmann</b> Full Name (Last, First, Middle Initial) Mailing Address 550 Euclid Street City Napoleon State OH Zip Code 43545 Purpose of Disbursement Lynn Wachtmann, STATE SENATE OH Candidate Name Lynn Wachtmann Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: OH District: 1 Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<b>Transaction ID:</b> 20008574 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 5 / 0 9 / 2 0 0 7 Amount of Each Disbursement this Period 250.00 Lynn Wachtmann, STATE SEN- ATE OH
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<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	1000.00
<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)

PAGE 153 / 160

<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

Full Name (Last, First, Middle Initial) <b>A. Committee for Larry Flowers</b>		Transaction ID: 20008612 Date of Disbursement 05 / 09 / 2007
Mailing Address 216 Washington Street		Amount of Each Disbursement this Period 150.00
City Canal Winchester State OH Zip Code 43130	Purpose of Disbursement Larry Flowers, STATE HOUSE 19th OH Candidate Name OH Rep. Larry Flowers Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: OH District: 19	
Category/Type 011		
Larry Flowers, STATE HOUSE 19th OH		

Full Name (Last, First, Middle Initial) <b>B. Committee to Elect Cliff Hite</b>		Transaction ID: 20008605 Date of Disbursement 05 / 09 / 2007
Mailing Address 1425 Brook Lawn		Amount of Each Disbursement this Period 250.00
City Findlay State OH Zip Code 45840	Purpose of Disbursement Cliff Hite, STATE HOUSE 76th OH Candidate Name OH Rep. Cliff Hite Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: OH District: 76	
Category/Type 011		
Cliff Hite, STATE HOUSE 76th OH		

Full Name (Last, First, Middle Initial) <b>C. Robbins for Senate Committee</b>		Transaction ID: 20010326 Date of Disbursement 05 / 09 / 2007
Mailing Address 353 Greenville Road		Amount of Each Disbursement this Period 200.00
City Greenville State PA Zip Code 16125	Purpose of Disbursement Bob Robbins, STATE SENATE PA Candidate Name Bob Robbins Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: PA District: 50	
Category/Type 011		
Bob Robbins, STATE SENATE PA		

<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)

PAGE 154 / 160

<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

Full Name (Last, First, Middle Initial)

**A.** PA House Republican Campaign Committee

Mailing Address P.O. Box 11787

City Harrisburg State PA Zip Code 17108

Purpose of Disbursement

Candidate Name

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

**Transaction ID:** 20008618

Date of Disbursement

05 / 09 / 2007

Amount of Each Disbursement this Period

350.00

011  
Category/  
Type

**B.** Committee to Elect Scott Hutchinson

Mailing Address 430 Franklin Church Road

City Dillsburg State PA Zip Code 17019

Purpose of Disbursement  
Scott Hutchinson, STATE HOUSE 64th PA

Candidate Name  
Representative Scott Hutchinson

Office Sought:  House  Senate  President  
 Disbursement For: 2008  Primary  General  Other (specify) ▼  
 State: PA District: 64

**Transaction ID:** 20008649

Date of Disbursement

05 / 09 / 2007

Amount of Each Disbursement this Period

250.00

011  
Category/  
Type

Scott Hutchinson, STATE HOUSE 64th PA

**C.** Friends of Ron Marsico

Mailing Address 4320 Crestview Road

City Harrisburg State PA Zip Code 17112

Purpose of Disbursement  
Ronald Marsico, STATE HOUSE 105th PA

Candidate Name  
Representative Ronald Marsico

Office Sought:  House  Senate  President  
 Disbursement For: 2008  Primary  General  Other (specify) ▼  
 State: PA District: 10

**Transaction ID:** 20010313

Date of Disbursement

05 / 09 / 2007

Amount of Each Disbursement this Period

300.00

011  
Category/  
Type

Ronald Marsico, STATE HOUSE 105th PA

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

900.00

**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

Full Name (Last, First, Middle Initial) <b>A. Armstrong for Delegate</b>		Transaction ID: 20012745 Date of Disbursement 05 / 09 / 2007
Mailing Address P.O. Box 1431		Amount of Each Disbursement this Period 1000.00
City Martingsville	State VA Zip Code 24114	
Purpose of Disbursement WARD ARMSTRONG, STATE HOUSE 10th VA		
Candidate Name WARD ARMSTRONG		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2007 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	WARD ARMSTRONG, STATE HOUSE 10th VA
State: VA District: 10		

Full Name (Last, First, Middle Initial) <b>B. Friends of Tommy Norment</b>		Transaction ID: 20010337 Date of Disbursement 05 / 09 / 2007
Mailing Address P.O. Box 1697		Amount of Each Disbursement this Period 1200.00
City Williamsburg	State VA Zip Code 23187	
Purpose of Disbursement THOMAS NORMENT, STATE SENATE VA		
Candidate Name THOMAS NORMENT		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2007 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	THOMAS NORMENT, STATE SENATE VA
State: VA District: 3		

Full Name (Last, First, Middle Initial) <b>C. Reynolds for Senate</b>		Transaction ID: 20011200 Date of Disbursement 05 / 09 / 2007
Mailing Address P.O. Box 404		Amount of Each Disbursement this Period 1000.00
City Martinsville	State VA Zip Code 24114-0404	
Purpose of Disbursement ROSCOE REYNOLDS, STATE SENATE VA		
Candidate Name ROSCOE REYNOLDS		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2007 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	ROSCOE REYNOLDS, STATE SENATE VA
State: VA District: 20		

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	3200.00
<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)

PAGE 156 / 160

<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

Full Name (Last, First, Middle Initial) <b>A. Berverly Sherwood for Delegate</b>		Transaction ID: 20013062 Date of Disbursement 05 / 09 / 2007
Mailing Address P.O. Box 2014		Amount of Each Disbursement this Period 250.00  BEVERLY SHERWOOD, STATE HOUSE 29th VA
City Winchester State VA Zip Code 22604	Purpose of Disbursement BEVERLY SHERWOOD, STATE HOUSE 29th VA	
Candidate Name BEVERLY SHERWOOD	Category/Type 011	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: VA District: 29	Disbursement For: 2007 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. Jay O'Brien for Senate Committee</b>		Transaction ID: 20010945 Date of Disbursement 05 / 09 / 2007
Mailing Address P.O. Box 5		Amount of Each Disbursement this Period 500.00  James O'Brien, STATE SENATE VA
City Clifton State VA Zip Code 20124	Purpose of Disbursement James O'Brien, STATE SENATE VA	
Candidate Name James O'Brien	Category/Type 011	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: VA District: 39	Disbursement For: 2007 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. Friends of Senator Edd Houck</b>		Transaction ID: 20010668 Date of Disbursement 05 / 09 / 2007
Mailing Address P.O. Box 7		Amount of Each Disbursement this Period 250.00  R. Edd Houck, STATE SENATE VA
City Spotsylvania State VA Zip Code 22553	Purpose of Disbursement R. Edd Houck, STATE SENATE VA	
Candidate Name Senator R. Edd Houck	Category/Type 011	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: VA District: 17	Disbursement For: 2007 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	1000.00
<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)

PAGE 157 / 160

<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

Full Name (Last, First, Middle Initial)

**A.** Virginia House Republican Campaign Committee

Mailing Address P.O. Box 1841

City Richmond State VA Zip Code 23218-1841

Purpose of Disbursement

Candidate Name

Office Sought:  House  Senate  President

State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Transaction ID: 20010329

Date of Disbursement

05 / 09 / 2007

Amount of Each Disbursement this Period

2000.00

011  
Category/  
Type

**B.** Building a Better Virginia

Mailing Address P.O. Box 8205

City Richmond State VA Zip Code 23226

Purpose of Disbursement

Candidate Name

Office Sought:  House  Senate  President

State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Transaction ID: 20010334

Date of Disbursement

05 / 09 / 2007

Amount of Each Disbursement this Period

2500.00

011  
Category/  
Type

**C.** Joannou Campaign

Full Name (Last, First, Middle Initial)

Mailing Address 4508 Winston Road

City Portsmouth State VA Zip Code 23704

Purpose of Disbursement  
Void - Joannou Campaign

Candidate Name  
JOHNNY JOANNOU

Office Sought:  House  Senate  President

State: VA District: 79

Disbursement For: 2007  Primary  General  Other (specify) ▼

Transaction ID: 20167336

Date of Disbursement

05 / 23 / 2007

Amount of Each Disbursement this Period

-250.00

011  
Category/  
Type

Void - Joannou Campaign

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

4250.00

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

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 158 / 160

<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. Joannou Campaign</b></p> <p>Full Name (Last, First, Middle Initial) Joannou Campaign</p> <p>Mailing Address 4508 Winston Road</p> <p>City Portsmouth State VA Zip Code 23704</p> <p>Purpose of Disbursement JOHNNY JOANNOU, STATE HOUSE 79th VA</p> <p>Candidate Name JOHNNY JOANNOU</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: VA District: 79</p> <p>Disbursement For: 2007 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		<p><b>Transaction ID:</b> 20167337</p> <p>Date of Disbursement 05 / 23 / 2007</p> <p>Amount of Each Disbursement this Period 250.00</p> <p>JOHNNY JOANNOU, STATE HOUSE 79th VA</p>
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<p><b>B. Master Print, Inc.</b></p> <p>Full Name (Last, First, Middle Initial) Master Print, Inc.</p> <p>Mailing Address P.O. Box 1467</p> <p>City Newington State VA Zip Code 22122</p> <p>Purpose of Disbursement Member Mailing - Printing</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		<p><b>Transaction ID:</b> 20281839</p> <p>Date of Disbursement 05 / 31 / 2007</p> <p>Amount of Each Disbursement this Period 687.32</p> <p>Member Mailing - Printing</p>
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<p><b>C. Republican Party of Wisconsin</b></p> <p>Full Name (Last, First, Middle Initial) Republican Party of Wisconsin</p> <p>Mailing Address 148 E. Johnson Street</p> <p>City Madison State WI Zip Code 53703</p> <p>Purpose of Disbursement Non-Federal Account</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		<p><b>Transaction ID:</b> 19984909</p> <p>Date of Disbursement 05 / 02 / 2007</p> <p>Amount of Each Disbursement this Period 1000.00</p> <p>Non-Federal Account</p>
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<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>1937.32</b>
<b>TOTAL</b> This Period (last page this line number only) .....	<b>106486.68</b>

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

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

(Use separate schedule(s) for each numbered line)	PAGE 159 / 160
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

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

<b>A.</b> Full Name (Last, First, Middle Initial) of Debtor or Creditor Edmonds Associates	Nature of Debt (Purpose): Production Cost for Media Buys - Federal
Mailing Address 8221 Old Courthouse Road, Suite 2	
City State ZIP Code Vienna VA 22182	

Outstanding Balance Beginning This Period	<b>Transaction ID: 21237449</b>	
35196.57		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
0.00	0.00	35196.57

1) <b>SUBTOTALS</b> This Period This Page (optional).....	35196.57
2) <b>TOTALS</b> This Period (last page this line number only).....	35196.57
3) <b>TOTALS OUTSTANDING LOANS</b> from Schedule C (last page only).....	
4) <b>ADD 2)</b> and 3) and carry forward to appropriate line of Summary Page (last page only)	

Image# 27990505013

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

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

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